

July 2016

Setting-specific safe staffing improvement resources – update

NHS Improvement is leading the national programme to develop improvement resources that will help NHS providers make safe and sustainable staffing decisions in specific care settings.

After the Chief Nursing Office (CNO) for England and the NHS National Director for Patient Safety wrote to stakeholders in August 2015, we set up national workstreams to develop safe staffing improvement resources for:

- mental health
- learning disability
- community
- maternity
- acute inpatients
- children's services
- urgent and emergency care.

We commissioned a chair and set up working groups comprising professional experts, system stakeholders and academics, as well as professional organisations such as the Royal College of Nursing, Royal College of Midwives, the Queen's Nursing Institute, allied health professionals' organisations, the Royal Colleges and trade unions.

The programme's principles include:

- identifying and reviewing the best available evidence on safe, sustainable staffing
- taking a multidisciplinary approach
- focusing on outcomes
- completing an economic impact assessment on any proposed staffing improvement resources
- developing staffing resources with the appropriate experts/focus groups and other key stakeholders, including patients and carers.

Since the beginning of this year, each chair has undertaken a scoping exercise and begun a review of the available literature (where it exists) to identify the evidence base that will inform the resources we develop.

Below is a summary of each workstream's progress with contact details for more information.

NHS Improvement will provide regular bulletins in coming months to update you on the development of the setting-specific resources and our plans for engaging stakeholders in each specialty.

Care Setting	Chair
<p>Inpatient wards for adult acute hospitals</p>	<p>Professor Hilary Chapman, Chief Nurse, Sheffield Teaching Hospitals NHS Foundation Trust</p>
<p><i>Summary Update</i> <i>Who to contact</i></p>	<p>The programme of work for inpatient wards in adult acute hospitals includes:</p> <ol style="list-style-type: none"> 1. reviewing existing evidence – Professor Peter Griffiths, Chair of Health Services Research, University of Southampton, has reviewed the NICE evidence assessment to inform the group’s work 2. identifying existing tools and guidelines on safe staffing levels for acute adult inpatient care including registered nurse staff and care staff, with consideration given to impact of staff in supporting roles, eg specialist nurses, pharmacists, AHPs 3. designing output based on (1) and (2) with regard to the expectations in the refreshed National Quality Board (NQB) guidance 4. consulting and adjusting 5. analysing and assessing economic impact 6. finalising and publishing. <p>The group will take account of the evidence reviews and nurse staffing guideline for adult inpatient wards developed by NICE. It will also review how the new ‘care hours per patient day’ (CHPPD) metric can be used as a measure, among others.</p> <p>The group has broad representation from a range of organisations. Many members of the group will engage through their professional and local networks, we have not formally commenced this engagement, as work is at an early stage.</p> <p>The group is keen to receive good practice case studies, particularly relating to multiprofessional staffing models. The professional leads and contacts for the group are pauline.milne2@nhs.net and anncasey@nhs.net</p>

Urgent and emergency care

Pauline Philip, CEO, Luton and Dunstable University Hospital NHS Foundation Trust

Summary Update Who to contact

The Urgent and Emergency Care Group is developing staffing improvement resources aligned to the refreshed NQB guidance and taking account of:

- the existing evidence base, including the NICE review of nurse staffing in accident and emergency departments
- the role of nurses in relation to other members of the multiprofessional team in urgent and emergency care
- staffing tools for urgent and emergency care settings and the development of criteria for users to apply in selecting a tool
- criteria to support the use of professional judgement
- how organisations understand the workforce needs in urgent and emergency care; for example, the use of tools (how criteria aid selection), context (patient acuity and dependency, activity patterns, geography of department), recruitment to establishment (including skill mix) and outcomes (linked to the national urgent and emergency care review)
- sharing good practice.

The work is relevant to and supports the implementation of the urgent and emergency care review.

The group has met on three occasions and is due to meet again at the end of July.

Although there is wide representation on the urgent and emergency care staffing working group, we are considering wider stakeholder engagement opportunities. Details of these will be made available through future bulletins.

The professional lead and contact for the group is pauline.milne2@nhs.net

Maternity services

Professor Mark Radford, Chief Nurse, University Hospitals Coventry and Warwickshire NHS Trust

Summary Update Who to contact

The maternity workstream will build on NICE's safe staffing guidance for midwifery published in 2015. The NICE midwifery staffing guideline will remain in place, and our work will be to expand the scope beyond midwifery and be multidisciplinary in focus (midwives, obstetricians, anaesthetists, maternity support workers, doulas). The programme of work will also link directly to the national maternity review. It will bring the evidence together in a single resource to support practice.

We will examine all evidence to support safe and effective staffing of maternity care, including the important NICE midwifery evidence assessment. The recent NHS review of maternity services (Better Births) showed there are opportunities for staffing to improve outcomes.

The scope of the group's work includes a review of current guidance and regulation to cover all aspects of the care of women and their families during pregnancy. We have also identified sub-workstreams to look at support for chief nursing officers and chief medical officers in NHS organisations implementing the principles.

We have engaged with experts by experience through a number of charities and patient representative groups. Doula UK and NCT are core members of the group, and have provided advice and support.

We have developed an engagement plan to test principles with experts by experience, staff in service and representative bodies.

For further information please contact the workstream professional lead Birte Harlev-Lam: b.harlev-lam@nhs.net

Mental health

Ray Walker, Executive Director of Nursing, Merseycare NHS Foundation Trust

*Summary Update
Who to contact*

The group has identified key stages of work in developing mental health setting-specific improvement resources. The scope covers adult and children's mental health settings, as well as inpatient and community services. It will refer to the multidisciplinary team.

Key stages of work:

- 1) Engaging with key stakeholder groups (including RCN, Care Quality Commission, service users, AHPs, doctors, psychology, clinical networks, finance, HR, chief executive networks, academics, commissioners, nurse directors and leads forum, CNO black and minority ethnic representatives).
- 2) Reviewing available evidence, publications and resources, including previous work done in this area. We have commissioned a literature review, which will refer to inpatient and community settings across the lifespan and include the multidisciplinary workforce.
- 3) Analysing the evidence and reviewing data. We expect to recommend further research/evidence-building to develop an improvement resource. This will acknowledge the current context for mental health services and build on work done to date.
- 4) We will consult stakeholders and carry out an impact assessment in the autumn.

The workstream will share progress at professional events in coming months.

We are keen to hear from organisations that have case studies to share.

For more information please contact the workstream professional lead:

Lindsey@origindevelopmentsolutions.co.uk

<p>Learning disability services</p>	<p>Professor Oliver Shanley, Director of Quality and Safety and Deputy Chief Executive Officer, Hertfordshire Partnership University NHS Foundation Trust Alison Bussey, Director of Nursing/Chief Operating Officer, South Staffordshire and Shropshire Healthcare NHS Foundation Trust</p>
<p><i>Summary Update</i> <i>Who to contact</i></p>	<p>The learning disability services workstream is engaging widely across professional groups to co-create an improvement resource for NHS commissioned services. The steering group has representatives from NHS and private provider organisations, the Royal College of Psychiatry, Royal College Nursing, academia, AHPs, Finance Directors Forum, Health Education England, Nurse Consultant Group, psychology and a CNO BME member.</p> <p>The improvement resource will focus on inpatient and community learning disability service settings, but aims to provide advice and links to further resources for all care settings. We aim to outline useful key principles that are evidence-based (where evidence exists) and organisational processes that best enable effective service user outcomes through sustainable and safe staffing.</p> <p>The resource will build on previous work. It will include setting-specific content to support the updated NQB guidance. It will provide setting-specific detail to enable informed staffing decisions that ensure the right staff with the right skills, are in the right place at the right time.</p> <p>The steering group has commissioned a literature review to summarise the best evidence available on safe staffing levels for multidisciplinary learning disability teams. This is due by the end August 2016 and will inform the improvement resource.</p> <p>We anticipate recommending to NHS Improvement that further research be undertaken.</p> <p>We will take note of the policy context and refer explicitly to the work on transforming care. We will refer to outcomes as a measure of success and a key part of the triangulation of data to inform decisions on workforce.</p> <p>We will co-create the resource with service users and carers. To do this we plan to undertake with them a 'confirm and challenge' exercise on our work.</p> <p>The Mental Health and Learning Disability Nurse Director and Leads Forum will be an important group for</p>

ongoing engagement.

We aim to provide information and an update for the learning disability professional senate in September 2016.

We will look to consult with stakeholder groups in October and undertake an impact assessment during this time.

We are keen to hear from organisations with case studies to share.

For further information please contact workstream professional lead:

Lindsey@origindevelopmentsolutions.co.uk

Community (district nursing services)

Dr Crystal Oldman, Chief Executive Officer, The Queen's Nursing Institute, London

*Summary Update
Who to contact*

The working group has met on three occasions since February 2016.

Representatives include nursing directors, clinical commissioners, academics and patients. Work includes:

- an evidence review to update the NICE work published in 2015
- a meeting in May of the QNI's Community Nursing Executive Network (CNEN), comprising 45 members (out of 81 in the network) who are directors of nursing/chief nurses of relevant provider services; they discussed the resource that would support safe caseloads in the district nursing service
- a meeting with the Association of District Nurse Educators (ADNE) in June 2016 to explore teaching and research on safe caseloads
- a meeting with the operational leads of the district nursing service at the National District Nurse Network (NDNN) in early July to examine their needs in supporting the deployment of staff in district nursing teams
- in July the working group is bringing together the main suppliers of software tools that support demand/capacity/rostering/workforce planning/EPR in the community to share the information gathered from CNEN, NDNN and ADNE
- other meetings the chair has held with individuals.

The aim of engaging with suppliers is to agree the requirements of the software tools (based on the evidence gathered) that would constitute 'best practice' and explore the potential to 'kitemark' the tools that meet the strategic and operational needs of the district nursing service providers, commissioners and NHS Digital.

For further information please contact the workstream chair, Dr Crystal Oldman:

Crystal.Oldman@qni.org.uk or the professional lead, Jane Robinson: jane.robinson34@nhs.net

Children's services	Michelle McLoughlin, Chief Nurse, Birmingham Children's Hospital
<p><i>Summary Update</i> <i>Who to contact</i></p>	<p>We will develop specialist guidance to cover the age ranges from 0 to 18 years (up to 25 years for learning disability); it will include evidence for children with learning disabilities. All the setting-specific workstreams will include in scope care for children and young people in other settings, eg mental health, and urgent and emergency care.</p> <p>We have agreed that neonatal staffing will be part of the children's workstream rather than maternity, and a subgroup will develop the guidance for neonatal staffing with reference to existing British Association of Perinatal Medicine standards.</p> <p>We have held a focus group workshop with members of the Association of Chief Children's Nurses to review current practice and begin to discuss the scope of future guidance; we have also engaged with a student nurse group and a young person group as part of an existing project.</p> <p>We will shortly begin work with directors of nursing who are responsible for children and young people's services to further develop the scope of the guidance and success criteria, and to begin to identify and share good practice.</p> <p>For further information please contact the work stream professional lead, Birte Harlev-Lam b.harlev-lam@nhs.net.</p>