Appendix 2

Workforce Safeguards Gap Analysis and Action Plan

NHS The Shrewsbury and Telford Hospital NHS Trust		eloping Workforce Safeguards Gap analysis action plan				
	Executive Sponsors	Hayley Flavell – Director of Nursing				
	Responsible Officers	Tracie Black – Lead Nurse for workforce				
	Corporate Nursing Review	30.06.2022				
	Report signed by (Executive	Hayley Flavell – Director of Nursing				

Developing Workforce Safeguards Action Plan

Recommendation	Site	Compliance	Actions required	Deadl	Status	Lead	Update 06 04 23
Recommendations 1 & 2 1. Trusts must formally ensure NQB's 2016 guidance is embedded in their safer staffing governance. 2. Trusts must ensure the 3 components are used in their safer staffing processes (evidence based tools, professional judgement and patient outcomes).	Trust	**Partially compliant**	Review SOP to confirm process and annual calendar for training, data collection and inter-rater reliability checks being organised for completeness in regards to the bi-annual staffing process.	31.07.2022	Delivered	Tracie Black, Lead Nurse for Workforce	
			Training on acuity and dependency for all band 7 Ward Managers and 2 other seniors for each ward area.	30.06.2022	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			Ensure yearly renewal of safer Nursing Care Tool licence	31/10/2021	Delivered	Tracie Black, Lead Nurse for Workforce	
			Training programme for SCNT and inter-rater reliability competency assessments. Champions to be identified from each division to support roll out of training. Training records to be added to LMS	31/12/2022	Delivered	Stephanie Young, Lead Nurse for Workforce	Action split, training and competency assessmnts completed to ensure staff able to complete SCNT audits. This action can be closed. Action to be added to action plan as separate item which will explore possibility of Training and Competence assessmnet being added to LMS.
			Develop guidance on best practice for deployment of staff	31/05/2023	Not yet started	Stephanie Young, Lead Nurse for Workforce	Critical Care guidance developed in draft.
			Safer staffing policy to be updated with plans for non ward areas establishment reviews	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present to Worforce Steering Group 6 April 2023
			Development of SOP for escalation processes for safe staffing including response for red flag events	31/05/2023	Not yet started	Stephanie Young, Lead Nurse for Workforce	
			Review of SOP for SCNT process and ratification at Workforce Steering Group	31/12/2022	Delivered	Stephanie Young, Lead Nurse for Workforce	review completed, feedback to workforce meeting following NHS review of actions required.
			Updates to SOP for SCNT process	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present to Worforce Steering Group 6 April 2023
			Explore possibility of Training and competence assessment records being added to LMS	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Meeting with Sam1 Anson, LMS can support training record maintainance. Proposal required for presentation to Education Committee on why centrally maintain medical records required and identification of responsible person for
			New Action LMS proposal required at next Education Governance Group	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	
			Review governance process regards monthly reporting of safe staffing.	31/01/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	
			Develop safe staffing paper to include non ward areas in monthly safe staffing paper and ensure relevant data available in relation to area of review.	30/06/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Example papers collated. Meeting with Deputy Director of Nursing to be arranged in April 2023 to agree format for paper.

			Action	Date	Status	Owner	Notes
Recommendations 3, 4 & 5 Trusts will be required to confirm their staffing governance processes are safe and sustainable, based on national assessment on the annual governance statement.	Trust	**Partially Complaint**	Director of Governance and Communications to add statement to future annual governance statement	31/01/2022	Delivered	Anna Mianec, Director of Governance and Communications	
			Biannual staffing reviews will have a statement from the Medical Director and Director of Nursing regarding assurances in relation to safer staffing.	31/07/2021	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			Review governance process regards monthly reporting of safe staffing.	31/01/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	
			Develop safe staffing paper to include non ward areas in monthly safe staffing paper and ensure relevant data available in relation to area of review.	30/06/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Example papers collated. Meeting with Deputy Director of Nursing to be arranged in April 2023 to agree format for paper.
			Additional training with senior staff on acuity and dependency.	31/03/2022	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			A further full biannual staffing review to take place in June and July 2021.	31/07/2021	Delivered	Hayley Flavell, Director of Nursing	
			A nursing 5 year workforce plan to be fully completed and agreed.	31.07.2022	Delivered ongoing monitoring	Caroline McIntyre, Head of Workforce Transformation	
			A full organisational wide process for vacancy oversight from Ward level upwards	31.07.2022	Delivered and ongoing monitoring	Caroline McIntyre, Head of Workforce Transformation	
			Development of a local Safer Staffing Policy which includes establishment setting and will note the requirement to have QIAs for all changes to staffing establishments - signed off by the Director of Nursing.	01.07.2022	Delivered	Tracie Black, Lead Nurse for Workforce	
			Matrons to receive an inter-rater reliability assessment as part of their induction	30/03/2022	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	Training commenced - List of matrons qualified on the SNCT Training X drive. Training to continue for matrons that have not received training
			Review monthly staffing paper once dashboard on Gather system to ensure greater triangulation and explicit reference to Care Hours Per Patient Day (CHPPD)	30/11/2021	Delivered	Tracie Black, Lead Nurse for Workforce	Details now on Gather.

Recommendation 6						
Recommendation 6 As part of the safe staffing review, the Director of Nursing and Medical Director must confirm in a statement that to their Board that they are satisfied with the outcome of any assessment that staffing is safe, effective and sustainable.	Trust	**Partially complaint**	Commence an inaugural Safer Nursing Care Tool assessment on the Emergency Departments once the new tool is released and licence obtained.	31/03/2022	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			SOP development to ensure correct application of SCNT and training in place.	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present
			SOP development to ensure correct application of SCNT and training in place and expectations of establishment review meetings (including attendance)	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present to Workforce Steering Group 6 April 2023
			Develop safe staffing policy to ensure there is clear governance procedures in place for new templates or template reviews outside of bi-annual establishment reviews.	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present to Workforce Steering Group 6 April 2023
			Develop roster policy including key KPI's	31/12/2022	In progress	Steve Minyeko, People Systems Manager	Policy in draft – meeting planned with workforce 6.1.23 to review
			Review process for submission of model hospital data	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	No update from Model ohospiital but query raised by KR following contact by LNW
			Develop programme plan for review of maternity ward establishments, non ward establishments, and nursing groups.	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Meeting with Adam Winstanley 02.02.2023 to discuss plans for establishment review for despartments completing SCNT and those that follow other process.
			Corporate review of CNS job plans	31/10/2023	Not yet started	Stephanie Young, Lead Nurse for Workforce	
			Implementation of SCNT in ED and Paediatrics	31/01/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Paediatric Team training done 5.1.23 and champion identifed. Ed Trainingn completed. SCNT census completed in both departments Jan 2023.
			Non-medical workforce plan development and linked to strategy	30/04/2023	In progress	Simon Balderstone, Transformational Lead for Workforce	Nursing Strategy developed in draft

Recommendation 7 Trust must have an effective workforce plan that is updated annually and signed off by the Chief Executive and executive leaders. The Board should discuss the workforce plan in a public meeting.	Trust	**Partially Compliant ↔**	Require a full Workforce Plan for the next 5 years to be agreed by the Executive Team which is able to identify the future domestic and international pipelines annually over the 5 years.	31/07/2022	Delivered and ongoing monitoring	Caroline McIntyre, Head of Workforce Transformation & HTP Team	
			Workforce plan will be presented at a Public Board.	31/07/2022	Delivered and ongoing monitoring	Caroline McIntyre, Head of Workforce Transformation & HTP Team	
			Full plan to be agreed and signed by Chief Executive once ready.	31/06/2022	Delivered and ongoing monitoring	Caroline McIntyre, Head of Workforce Transformation & HTP Team	
			Non-medical workforce plan development and linked to strategy	30/04/2023	In progress	Simon Balderstone, Transformational Lead for Workforce	Nursing Strategy developed in draft
Recommendation 8 The Trust must ensure their organisation has an agreed local quality dashboard that cross-checks comparative data on staffing and skill mix with other efficiency and quality metrics such as the Model Hospital dashboard. Trusts should report on this to their board every month.	Trust	**Partially compliant**	Triangulation and CHPPD in monthly staffing report that goes to the monthly Nursing and AHP meeting, where a AAA report feeds into the Quality Safety Assurance Committee that then feeds to the board.	30/11/2021	Delivered	Tracie Black, Lead Nurse for Workforce	Quality dashboard and monthly meetings in place. Further metrics being added to include Workforce. Quality metrics and Model Hospital is discussed within the monthly staffing paper. Report seen at the monthly Nursing and AHP meeting and is AAA reported which feeds to QSAC then Board.
			Review process for submission of model hospital data	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	No update from Model hospital but query raised by KR following contact by LNW
			Review governance process regards monthly reporting of safe staffing.	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Action split as review of governance completed. Options of inclusion in monthly paper (non ward areas) added as new action in section relating to recomendations 1&2. Unify data now published on Trust Webside. Staffing paper presented to QOC on a monthly basis.
Recommendation 9 An assessment of re-setting of the nursing establishment and skill mix (based on acuity and dependency data and using evidence-based toolkit where available) must be reported to the board by ward or service area twice a year, in accordance with NQB guidance and NHS improvement resources. This must also be linked to professional judgement and outcome.	Trust	**Partially compliant**	Completion of SOP as stipulated in actions from recommendations 1& 2.	01.07.2022	Delivered	Tracie Black, Lead Nurse for Workforce	Reports completed however unable to change budgeted establishments as last 2 data sets collected during the Coronavirus pandemic. August 2022 –Approved at Exceptional Workforce meeting
			Biannual staffing to continue.	31/01/2022	Delivered and ongoing monitoring	Hayley Flavell, Director of Nursing	Completed since January 2020. Due to many ward changes a template review was undertaken on 32 inpatient areas. An investment of over 5 million pounds has been recommended and agreed by the board.
			Safer staffing policy to be updated with all actions required in relation to responsibilities for safe staffing	31/03/2023	Delivered	Stephanie Young, Lead Nurse for Workforce	Present to Nursing Workforce Steering Group 6 April 2022
Recommendation 10 There must be no local manipulation of the identified nursing resource from the evidence-based figures embedded in the evidence-based tool used, except in the context of a rigorous independent research study, as this may adversely affect the recommended establishment figures derived from the use of the tool.	Trust	**Fully Compliant ↔**	Deputy Chief Nurse for People and Professional Standards is the Safer staffing lead for the Trust and oversees the full use of the Safer Nursing Care Tool ensuring no manipulation of the multipliers.	31/07/2021	Delivered and ongoing monitoring	Hayley Flavell, Director of Nursing	
Recommendation 11 & 12 As stated in CQC's well-led framework guidance (2018) and NQB's guidance any service changes, including skill mix changes, must have a full quality impact assessment (QIA) review.	Trust	**Fully compliant**	Development of a safer staffing policy which will include the agreed QIA process as previously mention in actions form recommendation number 6.	01.07.2022	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	

Recommendation			Action	Date	Status	Lead	Comments
Recommendation 13 Given day-to-day operational challenges, we expect trusts to carry out business-as-usual dynamic staffing risk assessments including formal escalation processes. Any risk to safety, quality, finance, performance and staff experience must be clearly described in these risk assessments.	Trust	**Partially compliant**	Monthly report to Deputy Chief Nurse for oversight of any red flag events linked to staffing which needs to be added to the monthly staffing report.	31/07/2021	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			Review of Agency approval process.	31/10/2021	Delivered	Tracie Black, Lead Nurse for Workforce	
			Further training and utilisation of the Safecare module for all inpatient ward areas to support professional judgement, risk assessments and escalation.	31/12/2021	Delivered and ongoing monitoring	Tracie Black, Lead Nurse for Workforce	
			Review option for turn on of 'Red Flag with safecare	31/12/2022	Delivered	Stephanie Young, Lead Nurse for Workforce	Discussed with Workforce team. Safecare can be utilised to capture red flag. Plan required to make live on system and clear esclation process required for recording and evaluation red flags.
			Safecare Turn on (including use fo red flags) and SOP to support completion	31/07/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Meeting had with workforce tea. LNW will develop JD as potential for monies to support a temporary Band 7 role for 18 months that will support operational use of safecare/training and red flag reporting
			Embed use of Safecare in Daily Staffing Meeting to support decision making	31/07/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Planning meeting with Improvement team being arrange by LC
			Review Datix reporting in relation to Staffing issues and enhance categorisation of events to clearly identify red flags	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Discussions with Neonates/Paeditrics and Critical to include staffing v dependnecy and agency use. Further discussed with ED required to agree plans for report for ED standards for nursing workforce regards agency use.
			Develop on line training programme and competency assessment for acuity scoring and use of deployment tool	30/09/2023	not yet started	Stephanie Young, Lead Nurse for Workforce	
Recommendation 14 Should risks associated with staffing continue or increase and mitigations prove insufficient, trusts must escalate the issue (and where appropriate, implement business continuity plans) to the board to maintain safety and care quality. Actions may include part or full closure of a service or reduced provision: for example, wards, beds and teams, realignment, or a return to the original skill mix.	Trust	**Partillay compliant**	Phased staffing plan and associated risk assessment in place for inpatient wards in relation to Covid-19 but due a review in preparation for Winter 2021.	30/12/2021	Delivered	Tracie Black, Lead Nurse for Workforce	
			Need set escalation plan for raising staffing concerns which should be added to the safer Staffing policy.	31.05.2022	Delivered and ongoing monitoring	Simon Balderstone	
			Review Datix reporting in relation to Staffing issues and enhance categorisation of events to clearly identify red flags	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	Discussions held with Neonates/Paeditrics and Critical Care to include staffing v dependnecy and agency use. Further discussions with ED required to agree plans for report for ED standards for nursing workforce regards agency use.
			Development of SOP for escalation processes for safe staffing including response for red flag events	31/05/2023	In progress	Stephanie Young, Lead Nurse for Workforce	In draft