Public Trust Board – 21.12.21

Key Actions: NHS Winter 2021 preparedness: Nursing and midwifery safer staffing 12 November 2021

Purpose of the report

The purpose of the report is to provide an overview of the Trust self-assessment against Key Actions: NHS Winter 2021 preparedness: Nursing and Midwifery safer staffing 2021 assurance framework.

Background

The Winter 2021 guidance focuses on preparedness, decision making and escalation processes to support safer nursing and midwifery staffing as the winter period approaches, building on the previous guidance issued in relation to COVID-19 workforce models and the fundamental principles for the nursing and midwifery workforce as set out in the National Quality Board (NQB) Safe Sustainable and Productive staffing guidance.

In responding to Covid-19, staffing surge and escalation plans, decisions regarding skill mix and nurse ratios were taken in conjunction with a review of patient acuity and dependency, professional judgement, and the environment of care. Proposals for redeployment and surge/escalation plans were connected to the wider system, with papers and quality impact assessments submitted to the Trust Clinical Reference Group, then Incident Control Centre for robust governance and assurance.

Trust self- assessments against NHS Key actions; Management and Assurance of Nurse Staffing during current wave of Covid-19 pressures and Mental Health and Learning Disabilities Safe Staffing Board Assurance framework was presented to the Quality Assurance Committee as part of the Director of Nursing report in March 2021. To note; no gaps were identified following self-assessment and review.

Analysis of the issue

The Key Actions NHS Winter 2021 preparedness Nursing and midwifery safer staffing Board Assurance Framework (BAF) version 1 (appendix 1) has been self-assessed against the BAF Key Lines of Enquiry (KLoEs) and identified four areas that require further action to strengthen assurance.

The action plan will be reported and monitored through the Trust Strategic Workforce Committee and summary updates included in the 6 monthly safe and effective staffing review updates to Trust Board.

A summary table is included below, and full action plan included as appendix 2 for assurance:

KLOE	Action to improve assurance	Status
1. Quality impact assessments are undertaken where there are changes in estate or ward function or staff roles (including base staffing levels)	EQIA's are held centrally, and a draft policy informs clear process for review and sign off	**On track** Draft policy in progress and process in review
2. Agency staff receive a local induction to the area and patients that they will be supporting	Review of local induction checklist and circulation of document	**On track**
3. The trust has clear and effective mechanisms for reporting staffing concerns or where the patient needs are outside of an individual's scope of practice.	To develop a Trust wide escalation process and ensure that staff are aware how to report staffing concerns	**On Track** Policy in draft including an escalation process/flow chart and listening events held to inform change
4. Due to staffing pressures, the trust considers novel mechanisms outside of incident reporting for capturing potential physical or psychological harm caused by staffing pressures	The trust to increase the number of staff trained as Professional Nurse Advocates in recognition of the burn out, mental health problems and widespread stress experienced by staff	**On Track** Applications received and progressed for next cohort

Each directorate has a surge plan that sets out how they will manage staff and services in the event of a surge in Covid-19. These plans are under continuous review to ensure they are fit for purpose in the current scenario.

Staffing escalation plans have been reviewed and LPT have delivered four Surge Preparedness Exercises, each in preparation for seasonal change or forecasted escalation in Covid-19 or any other seasonal virus such as Flu. The redeployment process established in the first wave is shared through the ICC and reviewed at the gold and silver meetings. Surge plans incorporate a phased increase in bed capacity rather than the opening of surge wards as undertaken in Phase One of Covid-19. This is on review and reflection of the limited available skilled workforce for redeployment.

Services have undertaken and reviewed quality impact assessments (QIAs) and review/ update where changes are made. The implementation of a policy will support a clear process for services to follow. Further work to agree, holding QIA's centrally in the Trust to facilitate regular review, update and sign off by Director of Nursing/Medical Director.

Proposal

It is proposed that the Winter Preparedness BAF action plan is monitored through the Strategic Workforce group, progress against the action included in the six-monthly updates to Trust Board.

Decision required

The Trust Board is asked to confirm a level of assurance considering the report and actions to ensure robust assurance.

Appendix 1: Winter 2021 preparedness Nursing and midwifery safer staffing BAF version 1

Appendix 2: Winter preparedness BAF self-assessment – GAP analysis and action plan

Governance table

For Board and Board Committees:	Public Trust Board 21st December 2021
Paper sponsored by:	Anne Scott, Executive Director of Nursing, AHPs and Quality
Paper authored by:	Louise Evans, Interim Assistant Director of Nursing & Quality
Date submitted:	10.12.21
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	Strategic Executive Board- Highlight report
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	N/A
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	One off
STEP up to GREAT strategic alignment*:	High **S**tandards	√
	Transformation	√
	Environments	
	Patient Involvement	
	Well **G**overned	
	Single Patient **R**ecord	
	Equality, Leadership, Culture	√
	Access to Services	√
	Trustwide Quality Improvement	
Organisational Risk Register considerations:	List risk number and title of risk	
Is the decision required consistent with LPT's risk appetite:	Yes
False and misleading information (FOMI) considerations:	None identified
Positive confirmation that the content does not risk the safety of patients or the public	Yes
Equality considerations:	Considered