



Improvement

Executive Director of Nursing Office
Ruth May

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Nurse Directors
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Dear Colleagues

RE: Developing workforce support and safeguards for the provider sector

The current workforce challenges in the NHS are a shared concern between NHS Improvement (NHS I), NHS England (NHS E), Health Education England (HEE) and providers in all sectors. We recognise that as senior leaders the issues of supply, retention, planning, agency/locum controls and operational day-to-day staffing issues are ones that you are all focused on. This letter outlines the areas where collaborative programmes are in place to support you with the above challenges and also highlights next steps.

Safe, sustainable and productive staffing

A range of support offers to providers have been initiated including the refresh of the [NQB safe staffing guidance](#) in July 2016. Aligned to *Leading change: Adding Value* – commitment 9, this safe staffing improvement resource provides an updated set of expectations for care staffing, to help NHS provider boards to work with commissioning colleagues to then make local decisions that will support the delivery of high quality care for patients and communities within the available staffing resource. This improvement resource:

- sets out the key principles and tools provider boards should use to measure and improve their use of staffing resources to ensure safe, sustainable and productive service, including introducing the care hours per patient day (CHPPD) metric
- identifies three updated NQB expectations that form a ‘triangulated’ approach (‘Right Staff, Right Skills, Right Place and Time’) to staffing decisions
- offers guidance for local providers and others to use other measures of quality, alongside CHPPD, to understand how staff capacity may affect the quality of care.

Alongside this we have published a range of best practice case studies for providers that align with the NQB guidance. They can be accessed here on the [NHS Improvement website](#).

Eight sector, specific improvement resources have been developed by system leaders supported by academic teams. These improvement resources are currently being released for engagement. [Adult Inpatient](#) and [Learning Disability](#) were open for engagement in December and January and now closed. Currently [Mental Health](#) and [Community–District Nursing](#) are out for engagement. Maternity, Children and Young people, Emergency Care, and Neonates will be out for engagement during May and June. Your feedback and contribution to these improvement resources are critical. Access to the feedback form is via the website or you can directly email the team on nhsi.safestaffing@nhs.net.

Developing workforce safeguards

During the engagement process for the improvement resources, we have been discussing with the provider sector the delivery plan and operationalisation of NQB guidance. The feedback has highlighted the requirement for some detailed implementation tools and workforce safeguards to ensure quality outcomes for patients. This work will be drawn together in a final set of tools for the sector in the summer. We have asked Helen Blanchard (Director of Nursing at Royal United Hospitals Bath NHS FT) and Suzanne Banks (Director of Nursing at Sherwood Forest NHS FT) to lead this work. A developing staffing safeguards workshop has been arranged in Birmingham on the 28th April from 10am to 11.30am. This work will focus on three main areas; Regulation and support approaches, delivering workforce solutions safely and operational and quality outcomes. If you wish to participate please contact Shirley Littlewood on shirley.littlewood@nhs.net

Safe Staffing Improvement team

We have also implemented a 'Safe Staffing improvement team'; led by senior clinical staff to support the implementation of evidence based tools and approaches for organisations that require support including NQB guidance. This team is providing onsite support to providers in all Single Oversight Framework segments on areas such as governance process, assurance, KPI development, acuity tools and rostering best practice. If you would like to access this service, please contact our Clinical workforce lead Anne Casey via (anncasey@nhs.net).

Operational support for new roles

Workforce development, role redesign and new roles are critical solutions to some aspects of the workforce challenge. This is an area highlighted in the recent publication on next steps for the Five Year Forward view. NHSI is working collaboratively with NHSE and HEE to develop a series of support programs to deliver this. This includes new roles such as physicians' associates, advanced clinical practice and nursing associates that are being directly supported in providers. Specifically with Advanced Clinical Practice, alongside HEE, NHSI has created an agreed multi-professional definition and framework to support deployment in the system. NHSI and HEE have started to work with providers to identify best practice

and also impact areas or the expansion of these roles. The CNO, NHSI, NHSE and HEE are working with other organisations to make sure all current workforce developments are well understood and all new initiatives. e.g. Nurse First and Image of nursing launched and sponsored by the Chief Nursing Officer are well coordinated, communicated and implemented coherently and at pace.

In addition, we have a support programme and guidance on the development of new support roles outside apprenticeships and nurse associate pilot in segments 3 and 4. With nursing associates, we are working with HEE providing direct support to providers in the pilot sites and are conducting regular visits to assess progress and provide information and guidance. Should you need support in new roles, please contact Paul Reeves (Senior Nurse Advisor) on paul.reeves@nhs.net.

We would like to conclude by thanking you and your teams for your continued focus and hard work in delivering improved outcomes and performance for patients. The winter weather may have left us, but the pressures remain. The workforce challenges are ones that we recognise are daily challenges but it is important we focus on the solutions and support the system can provide through peer best practice and guidance to ensure good outcomes.

If you have any questions arising from this letter, do not hesitate to contact me.

Kind regards,



Ruth May
Executive Director of Nursing
& Deputy Chief Nursing Officer