Appendix 1

Review of Inpatient Nursing Establishment, Capacity and Capability Review
Learning Disability Group

March 2016

Review September 2016

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Review of Nursing Staffing Capacity, Capability and Establishment Update – Learning Disability

1. Introduction

The purpose of this paper is to provide a 6 month update staffing paper in relation to the staffing review undertaken within Learning disabilities inpatient units. The paper also provides update on the new forensic step-down male and female units on the Hallam Street Hospital Site (The Pines & The Larches).

2. Background

The Learning Disabilities Division continues to face a number of challenges in respect of the delivery of assessment and treatment and forensic inpatient beds across the four boroughs of the Black Country, including:

- Occupancy variances and income for bed day costs with the prospect of spot purchasing in the future means that the staffing ratio and numbers per shift and per patient needs to be safe, viable and consistent in the future. This will ensure sustainability. A current review of bed day costs is being undertaken to ensure we meet our contribution
- Culture and practice of units need to be continually challenged to ensure financial sustainability and management accountability against establishments and reduction in bank and agency use.
- The group now need to work on a stepped model of care to ensure establishments and safe staffing numbers reflect occupancy levels and efficient use of staff resources.
- HCSW skill mix review has been completed and change management finalised
- The imminent closure of one of inpatient unit may allow for staff redeployment into current vacancies and more efficient use of the beds we have. This will also be influenced sustainability processes and nation transforming care programme.
- The Pines female unit (formerly Newton House) will commence in May 2016

3. Safe staffing levels

In order to ensure that staffing levels meet the clinical requirements of each unit and are consistent across units, consultation has taken place with all unit managers in
In order to develop a staffing model and skill mix that meets the needs of the service, this consultation has looked at the following aspects of staffing:

- What is clinically required for each unit (based on Unit Managers review of clinical need on each unit)
- Benchmarking all units to ascertain patient to staff ratios
- What are the safe staffing levels for each unit

Current establishments were then reviewed against the safe staffing levels to ascertain how the current budgeted establishments compared to the revised modelling and staffing levels.

The agreed safe staffing levels for each unit were therefore agreed as follows:

<table>
<thead>
<tr>
<th>Unit</th>
<th>Early</th>
<th>Late</th>
<th>Night</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gerry Simon Clinic</td>
<td>8</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>The Larches</td>
<td>6</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Penrose*</td>
<td>6</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Daisy Bank*</td>
<td>5</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Pond Lane*</td>
<td>3</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Ridge Hill</td>
<td>7</td>
<td>7</td>
<td>5</td>
</tr>
</tbody>
</table>

*Penrose, Daisy Bank, Pond Lane and currently operate a long day shift pattern

The safe staffing levels are broken down by registered nursing staff and HCSW as follows:

<table>
<thead>
<tr>
<th>Unit</th>
<th>Early</th>
<th>Late</th>
<th>Night</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gerry Simon Clinic</td>
<td>3 Registered Nurse 5 HCSW</td>
<td>3 Registered Nurse 5 HCSW</td>
<td>2 Registered Nurse 4 HCSW</td>
</tr>
<tr>
<td>Penrose</td>
<td>2 Registered Nurse 4 HCSW</td>
<td></td>
<td>2 Registered Nurses 2 HCSW **</td>
</tr>
<tr>
<td>Daisy Bank</td>
<td>2 Registered Nurse 3 HCSW</td>
<td></td>
<td>2 Registered Nurses 1 HCSW **</td>
</tr>
<tr>
<td>Pond Lane</td>
<td>2 Registered Nurse 1 HCSW **</td>
<td></td>
<td>2 Registered Nurses**</td>
</tr>
</tbody>
</table>
*Each unit also has a full-time Band 7
** As of 22/04/2016 these units have been instructed to work on a minimum of 2 registered nurses per shift which in effect increases the establishment requirements. A further establishment review will now be required to achieve these levels as well as cost analysis to identify financial impact. It is also noted that this will have an impact on the bank and rostering team due to new shift vacancies being requested.

The agreed staffing levels have been used to develop a new workforce establishment for each service and this continues to be reflected in budget setting.

Due to the significant increase in the number of Band 2 staff across the group has been actively recruiting. An external recruitment process has taken place an appointed 19 wte band 2 staff. A further recruitment process is underway to fill all the remaining posts following the skill mix review. At the time of writing we have completed the organisational management of change to address over and under-establishments within the band 3 workforce. During this process we have experienced a high level of retirement's which has resulted in a further band 3 vacancies which are currently out to advert.

The postponement of The Pines opening to May 2016 has resulted in the ability to absorb all staff that were scheduled to work on there to the Larches filling all the vacancies as far as possible. This currently means that The Pines does not incur any direct costs as a result of the delay

4 Shift Patterns

Existing shift patterns are scheduled for review which is also linked to the CIP plans however this will not change at this time until the group has reviewed whether this is in fact required

5 Sickness levels

The LD Division has made significant progress against the trusts sickness absence target although it is noted to need further work.

The latest reported data for December 2016 provides a sickness absence rate across the division of 6.8%. The group continues to show improvements in this area and generally the trend is positive from a figure .8.2% in June 2015. Sickness Absence meetings are held with Human Resources where all long term sickness cases are reviewed to ensure actions and decisions are appropriate and timely.

6 Conclusion

The review of safe staffing on each unit is scrutinised on a daily basis and reported monthly through Divisional and wider Trust governance processes.