

Mental Health and Learning Disability (MHLD) Staffing Level Tool

User Guide

January 2024

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Contents

1.	Introduction	4
2.	Logging in	5
2.1	Accessing the tools	5
2.2	Changing Working Location.....	6
3.	Creating/Editing Entries in Tool	9
3.1	Opening the tool.....	9
3.2	Entering Data.....	10
3.3	Adding Data to the “Patient Specific” tab	12
3.6	Adding data to the “Group work” tab	14
4.	Summary Display Screen	15
5.	Business Objects (BOXI) Reporting	16
	Appendix A	17
	Background.....	17
	Appendix B	18
	Data Capture Sheet	18
	Appendix C - Frequently Asked Questions and Answers	20
	Appendix D- Trouble shooting	22

1. Introduction

The Mental Health and Learning Disabilities (MHLD) staffing level tool is set up to enable Nursing staff to record information to review workload and to calculate a recommended Whole Time Equivalent (rWTE). The tool uses the information entered by the practitioner to measure this workload, based on the intensity of work and time taken. It then collates this information into a report that can be used by the practitioner and managers to plan the allocation of resources to effectively meet the service or health board's priorities and to identify any risks that may exist in the service. The national recommendation is that this tool is run at least once per year. However, the tool can be run as frequently as Boards wish, to gather useful data over time. Background information on staffing level tools can be found in [Appendix A](#)

It is important to remember the report is only one element of the **Common Staffing Method** mandated by the Health and Care (Staffing) (Scotland) Act 2019 ([Appendix A](#)). The report should be considered in conjunction with:

- Funded establishment
- The findings from the Professional Judgement Tool¹
- Quality indicators and local context

To aid accurate data collection during the tool run, a data capture template has been created, please see [Appendix B](#).

This document will provide detailed information, from how to log in, to how to finalise and submit data. It will not provide information about the methodologies used to develop the tool or how best to use the reports obtained from the tool. That information can be accessed via the learning resources available on the HSP (programme previously known as NMWWPP) webpages: [HSP](#)

2. Logging in

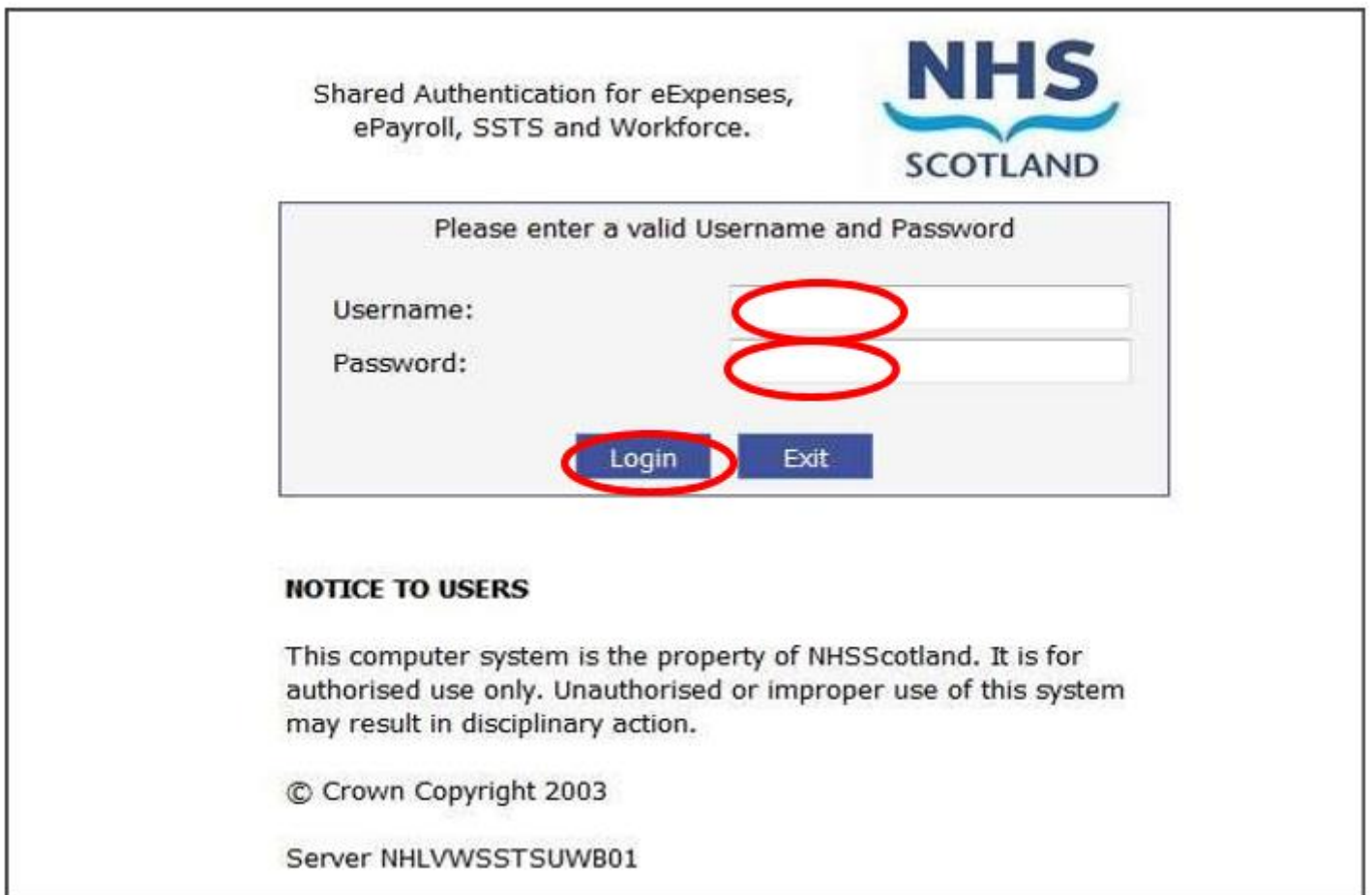
2.1 Accessing the tools

To gain access to the staffing level tool you will require access to the local SSTS platform. Please speak to your Workforce Lead and/or line manager about local processes to obtain this. Some staff may already have a SSTS access but will require additional permissions to access the staffing level tools.




SSTS and the staffing level tools can only be accessed on a board approved computer or portable network.

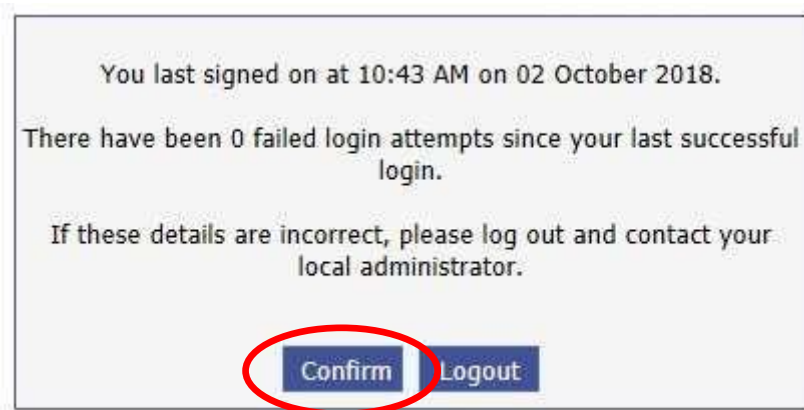
Enter your username and password as they were provided to you and select 'Login'.



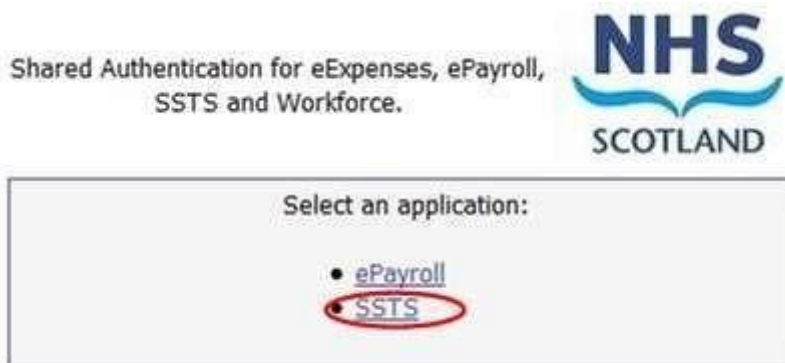
The screenshot shows a login interface for NHS Scotland. At the top left, it says "Shared Authentication for eExpenses, ePayroll, SSTS and Workforce." To the right is the NHS Scotland logo. Below this is a grey box with the instruction "Please enter a valid Username and Password". There are two input fields: "Username:" and "Password:". The "Login" button is circled in red. Below the login fields is a "NOTICE TO USERS" section with a warning about unauthorized use, copyright information for 2003, and a server ID "NHLVWSSTSUWB01".

 Passwords are case sensitive, and you will be prompted to change your password the first time you log in.

Click “Confirm” to proceed:



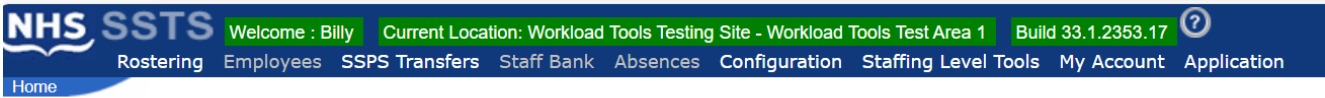
Then select SSTS:



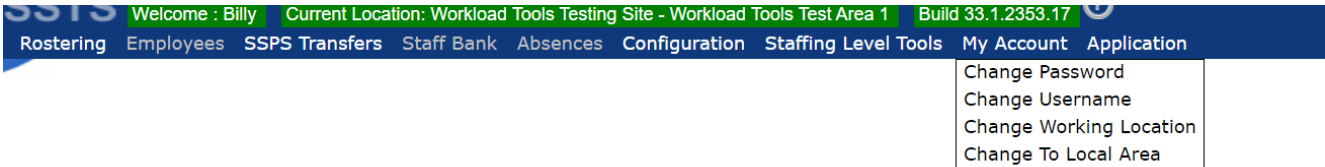
2.2 Changing Working Location

Once you have logged in you will be presented with the following screen:

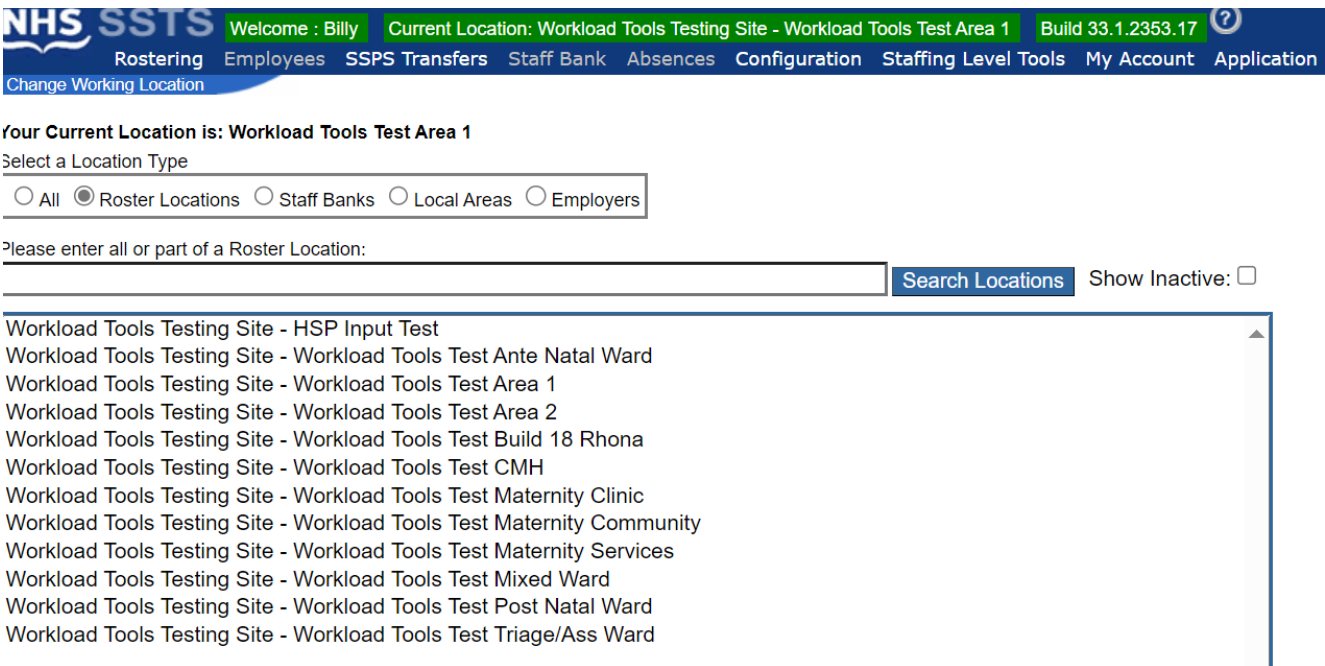
MHLD Staffing Level Tool - User Guide



Check the Current Location at the top of the screen. It is unlikely that you will need to change Working Location. However, if Working Location is incorrect, and you have the appropriate permissions, select 'My Account' and then 'Change Working Location':



A screen will then appear containing the ward and clinical areas you have access to:



The ward/area can be searched for by roster location, staff bank, local area or employer.

To choose a ward/area of interest, select it from the available list and then click 'Select':



The below screen will then appear, select "OK" to proceed.

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The screenshot shows the NHS SSTS application interface. At the top, the navigation bar includes the NHS SSTS logo, a welcome message for 'Billy', the current location 'Workload Tools Testing Site - Workload Tools Test Area 1', and the build number '33.1.2353.17'. Below the navigation bar, there are several menu items: 'Rostering', 'Employees', 'SSPS Transfers', 'Staff Bank', 'Absences', 'Configuration', 'Staffing Level Tools', 'My Account', and 'Application'. A 'Change Working Location' button is visible in the top left corner.

Below the navigation bar, the text reads: 'Your Current Location is: Workload Tools Test Area 1'. Underneath, there is a section for 'Select a Location Type' with radio buttons for 'All', 'Roster Locations', 'Staff Banks', 'Local Areas', and 'Employers'. The 'Roster Locations' option is selected.

Below this, there is a text input field for 'Please enter all or part of a Roster Location:' with a 'Search Locations' button and a 'Show Inactive' checkbox.

A dropdown menu is open, showing a list of location options. The selected option is 'Workload Tools Testing Site - Workload Tools Test Area 2'. A dialog box titled 'Change Working Location' is overlaid on the right side of the screen, displaying the message: 'Location Changed to Workload Tools Testing Site - Workload Tools Test Area 2' with an 'OK' button.

The location will then update on the toolbar.

The screenshot shows the NHS SSTS application interface with the location updated. The navigation bar now displays 'Current Location: Workload Tools Testing Site - Workload Tools Test Area 2'. The 'Staffing Level Tools' menu item is circled in red.

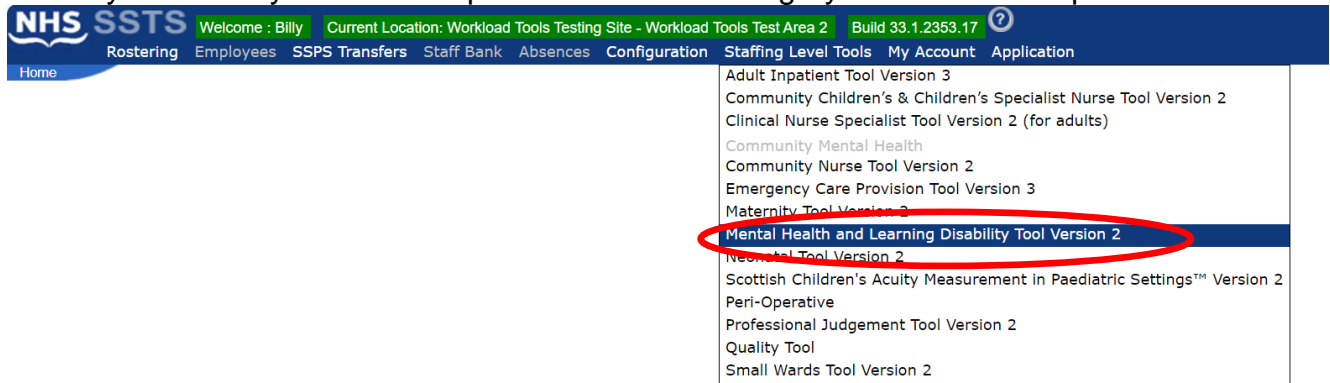
If you do not have the appropriate permissions, please reach out to your local WFL or SSTS team.

3. Creating/Editing Entries in Tool

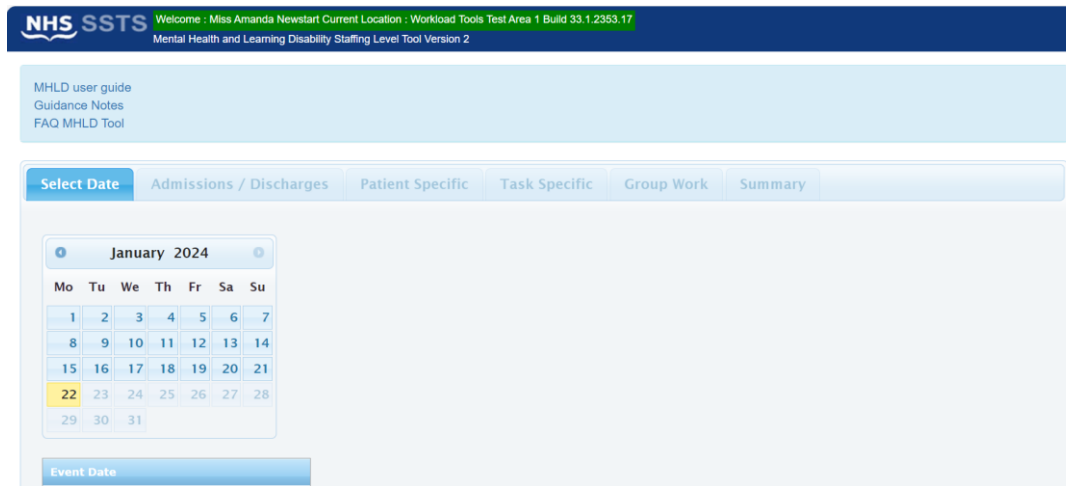
3.1 Opening the tool

To open the MHLD Staffing level tool select 'Staffing Level Tools and then 'Mental Health'.

NB: any tools that you do not require access to will be greyed out in the drop down list.

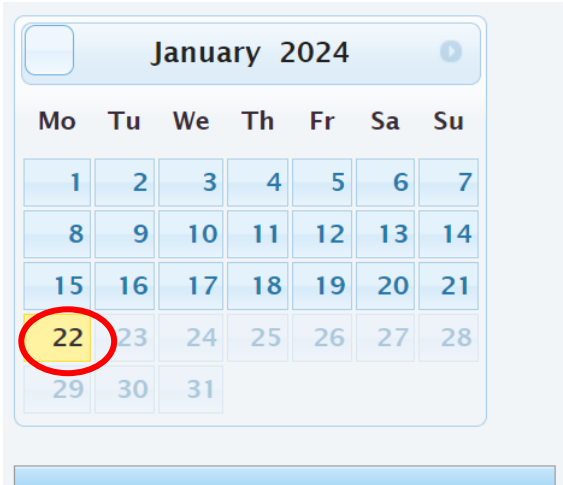


A screen like the one below will then appear:

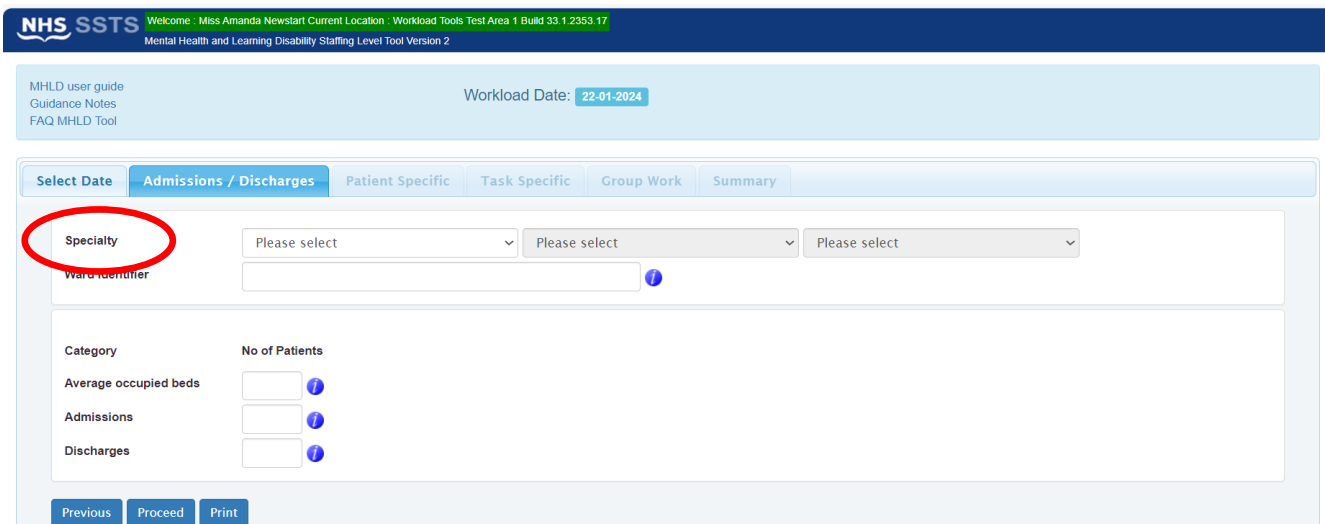


3.2 Entering Data

To add data, simply select the relevant date:



Then this screen will appear:



This screen will have all the details as contained within the SSTS system (your SSTS manager will have helped to set this up).

The user should click on Specialty and select from the drop-down menu the type of specialty which best describes the ward.

The User should continue to select as directed within the Specialty boxes:

MHLD Staffing Level Tool - User Guide


NHS SSTS Welcome : Mr Billy Murphy Current Location : Workload Tools Test Area 2 Build 33.1.2353.17
Mental Health and Learning Disability Staffing Level Tool Version 2




FAQ MHLD Tool

Select Date | **Admissions / Discharges** | Patient Specific | Task Specific | Group Work

Specialty: General Psychiatry | ICU

Ward Identifier: Please select

Ward Identifier: Ward 2 

Category	No of Patients
Average occupied beds	8 
Admissions	2 
Discharges	1 

Previous | Proceed | Print



Please use the blue information icons to provide further information and guidance.

The User should then complete the Ward Identifier with the name of the ward as it appears on the SSTS roster location.

Average Occupied beds (this should be less than or equal to the number of beds held in roster configuration): the user must enter the average number of occupied beds based on the previous financial year.

Admission process: the user must enter the average number of admissions per week over last financial year.

Discharge process: the user must enter the average number of discharges per week over the last financial year.

The system will allow figures to be entered to one decimal point.

By clicking on the blue “info” links you will get a popup window showing the guidance for the Admission and Discharge tab.

Once details have been added the user should click on the “Proceed” button move to the Patient Specific tab.

3.3 Adding Data to the “Patient Specific” tab


Enter data against each task which applies to the number of patients in your ward. The total entered cannot be greater than the number of ward beds.

MHLD user guide
Guidance Notes
FAQ MHLD Tool

Select Date | Admissions / Discharges | **Patient Specific** | Task Specific | Group Work | Summary

Category	No of Patients
Behavioural observations	<input type="text"/>
Enhanced Observation (1:1) up to two days	<input type="text"/>
Enhanced Observation (1:1) between three and four days	<input type="text"/>
Enhanced Observation (1:1) 5 or more days	<input type="text"/>
Enhanced Observation (2:1) up to two days	<input type="text"/>
Enhanced Observation (2:1) between three and four days	<input type="text"/>
Enhanced Observation (2:1) 5 or more days	<input type="text"/>
Functional analytic Interview	<input type="text"/>
Multi-sensory stimulation	<input type="text"/>
Carer support	<input type="text"/>
One to one sessions - additional	<input type="text"/>
One to one sessions - daily	<input type="text"/>
One to one sessions - 3 times per week	<input type="text"/>
Reality orientation	<input type="text"/>
Aseptic dressing	<input type="text"/>
Blood BM test	<input type="text"/>
Catheter emptying	<input type="text"/>
Continence care - level 1	<input type="text"/>
Continence care - level 2	<input type="text"/>
Continence care - level 3	<input type="text"/>
Nutrition & Hydration (assistance required)	<input type="text"/>
Nutrition & Hydration (continuous assistance required)	<input type="text"/>
Perform search of patient	<input type="text"/>
Personal search of patients room/care environment	<input type="text"/>
Personal hygiene - Level 1	<input type="text"/>
Personal hygiene - Level 2	<input type="text"/>
Personal hygiene - Level 3	<input type="text"/>
Personal hygiene - Level 4	<input type="text"/>
Physical observations, daily - TPR & BP	<input type="text"/>
Physical observations, twice daily - TPR & BP	<input type="text"/>
Pressure area care - Level 1	<input type="text"/>
Pressure area care - Level 2	<input type="text"/>
Venepuncture	<input type="text"/>

Previous | Proceed | Print

 the number of patients entered must be less than or equal to the number of beds. The sum of these answers needs to be less than or equal to the number of beds.

Once details have been added, the user should click on the “Proceed” button and move to the Task Specific tab.







3.5 Adding data to the “Task Specific” tab.


Enter data against each task which applies to patients in your ward. The total entered is the number of times this task occurs in a typical week. The tool routinely refers to a typical week – tasks which occur infrequently should be excluded from the tool as these are not typical.

NHS SSTS
Welcome : Mr Billy Murphy Current Location : Workload Tools Test Area 2 Build 33.1.2353.17
Mental Health and Learning Disability Staffing Level Tool Version 2

[MHLD user guide](#)
[Guidance Notes](#)
[FAQ MHLD Tool](#)

Workload Date: 03-01-2024

Category	Typical no of Times per Week
1:1 escorted time off ward less than 15 minutes	<input type="text"/> 
1:1 escorted time off ward greater than 15 minutes	<input type="text"/> 
2:1 escorted time off ward less than 15 minutes	<input type="text"/> 
2:1 escorted time off ward greater than 15 minutes	<input type="text"/> 
De-escalation - no physical intervention	<input type="text"/> 
De-escalation - physical intervention	<input type="text"/> 
Multi-disciplinary care plan review	<input type="text"/> 
Post incident review - rapid tranquilisation/physical intervention	<input type="text"/> 

 Please use the blue information icons to provide further information and guidance.

Once details have been added the user should click on the “Proceed” button and move to the Group work tab.

3.6 Adding data to the “Group work” tab

The screenshot shows the NHS SSTS interface for the Mental Health and Learning Disability Staffing Level Tool. The user is logged in as Mr Billy Murphy. The 'Group Work' tab is active. The form is titled 'Number of sessions per week' and contains the following fields:

Number of staff in attendance	Socialisation	Therapeutic
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Total sessions	<input type="text"/>	<input type="text"/>

At the bottom of the form are three buttons: 'Previous', 'Save & Proceed to completion', and 'Print'.

Enter data against each type of group work session which occurs in your ward.

The totals entered are the number of sessions in each category which occur in a typical week with differing staff numbers in attendance.

Only enter data against categories which are relevant to your patient or client group.



Please use the blue information icons to provide further information and guidance.

4. Summary Display Screen

Within the summary tab, you will be presented with the Whole Time Equivalent (WTE) figure that the tool has calculated the ward requires for the workload entered.

NHS SSTS Welcome : Mr Billy Murphy Current Location : Workload Tools Test Area 2 Build 33.1.2353.17
Mental Health and Learning Disability Staffing Level Tool Version 2

MHLD user guide
Guidance Notes
FAQ MHL D Tool

Workload Date: 09-01-2024

Select Date Admissions / Discharges Patient Specific Task Specific Group Work Summary

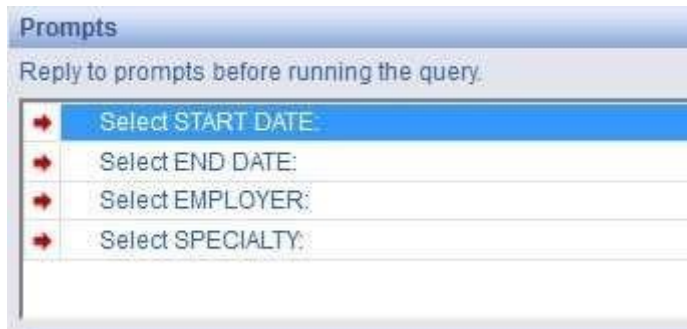
	Total
Total WTE required	28.68

Previous Print

5. Business Objects (BOXI) Reporting

After Mental Health & Learning Disabilities staffing level tool and corresponding Professional Judgement data entry into SSTS is complete, please use one of the Mental Health & Learning Disabilities standard reports developed in Business Objects (BOXI) to view and extract information for a selected period of time.

These reports were created by the national team and have a series of built-in prompts to generate customised outputs locally, for example:



Access to BOXI reports requires a login and password. Local processes for BOXI access can vary. Typically, BOXI access can be granted by your local SSTS Manager, line manager or Workforce Lead. Access is requested using the same access permission request form as the one for SSTS access. Please seek your Line Manager's permission and authorisation before contacting your local SSTS Manager.



Please seek your line managers permission and authorisation before contacting your local SSTS manager.

Appendix A

Background

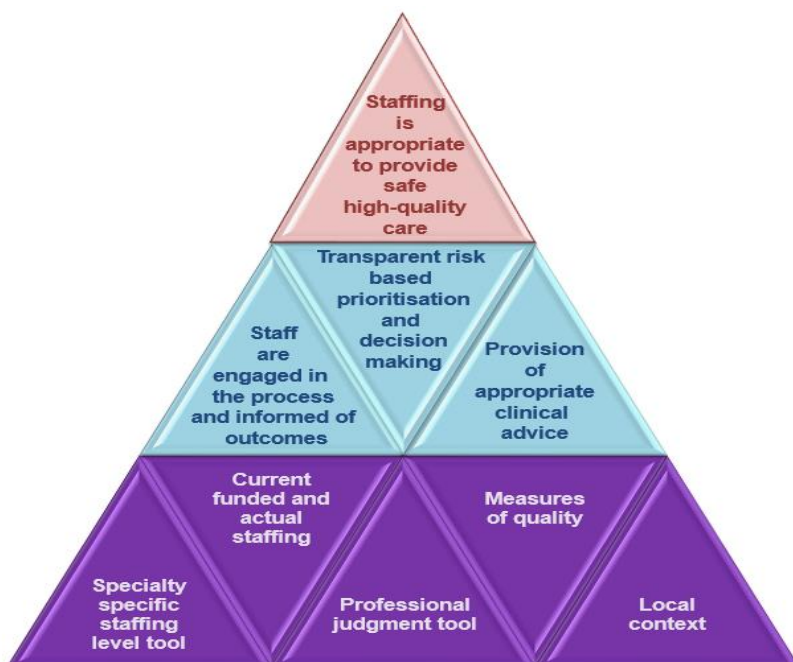
Nursing & Midwifery staffing level tools are an essential part of the Health and Care (Staffing) (Scotland) Act 2019 aimed at ensuring health & social care staffing is at the level required to deliver safe, quality focused care to people using the services. The tools are designed to give staff the platform on which to record information about the actual work they do. This is to collate the activities in a manner that supports decisions about staffing, resource allocation and service design as part of a triangulated process of planning.

To find out more about this, please refer to the HSP website and learning resources:

http://www.healthcareimprovementscotland.org/our_work/patient_safety/healthcare_staffing_programme.aspx

The political commitment in Scotland is that, through application of a common staffing method (Figure 1) health services will be staffed to the level required to provide safe, high-quality care. To ensure this, each NHS Scotland Board and the services therein, are responsible for having effective planning processes, informed by the activities captured through the mandated use of staffing level tools. The MHLD tool is one of national staffing level tools available for this purpose.

Figure 1 – The common staffing method



Appendix B

Data Capture Sheet



HEALTHCARE STAFFING PROGRAMME: MENTAL HEALTH DATA CAPTURE TEMPLATE

Template guide to allow staff to capture information prior to entering into MHL D Tool within SST S. This can be used to allow staff to focus on information required to populate tool to reflect workload. Please use in conjunction with user guidance

Admissions / Discharges	
Average Occupied beds.....	Insert average number of occupied beds over last financial year.
Admissions.....	Insert the average number of admissions per week over last financial year.
Discharges.....	Insert the average number of discharges per week over last financial year.

Patient Specific	Capture Number of patients
Behavioural observations	
Enhanced Observation (1:1) up to 2 days	
Enhanced Observation (1:1) between 3 and 4 days	
Enhanced Observation (1:1) 5 or more days	
Enhanced Observation (2:1) up to 2 days	
Enhanced Observation (2:1) between 3 and 4 days	
Enhanced Observation (2:1) 5 or more days	
Functional analysis interview	
Multi-sensory stimulation	
Carer support	
One to one sessions – additional	
One to one sessions – daily	
One to one sessions – 3 times per week	
Reality orientation	
Aseptic dressing	
Blood BM test	
Catheter bag emptying	
Continence care – level 1	
Continence care – level 2	
Continence care – level 3	
Nutrition and Hydration – (assistance required)	
Nutrition and Hydration – (continuous assistance required)	
Perform search of patient	

MHLD Staffing Level Tool - User Guide



HEALTHCARE STAFFING PROGRAMME: MENTAL HEALTH DATA CAPTURE TEMPLATE

Perform search of patient's room/care environment	
Personal hygiene – Level 1	
Personal hygiene – Level 2	
Personal hygiene – Level 3	
Personal hygiene – Level 4	
Physical observations, daily – TPR & BP	
Physical observations, twice daily – TPR & BP	
Pressure area care – Level 1	
Pressure area care – Level 2	
Venepuncture	

Task Specific	Typical number of times this happens per week
1:1 escorted time off ward less than 15 mins	
1:1 escorted time off ward greater than 15 mins	
2:1 escorted time off ward less than 15 mins	
2:1 escorted time off ward greater than 15 mins	
De-escalation – no physical intervention	
De-escalation – physical intervention	
Multi-disciplinary care plan review	
Post incident review – rapid tranquilisation/physical intervention	
PRN medication(as required)	
Structured exercise & conversation session	
Provide enhanced, specialist support for palliative patients	
Attend tribunal/court/other hospital or department	

Data Capture Template: Mental Health V4.0



HEALTHCARE STAFFING PROGRAMME: MENTAL HEALTH DATA CAPTURE TEMPLATE

Group Work – Number of Sessions Per Week		
Number of Staff in attendance	Socialisation	Therapeutic
1		
2		
3		

Appendix C - Frequently Asked Questions and Answers

Mental Health and Learning Disabilities Staffing Level Tool	
Frequently Asked Questions and Answers	
Q1	What do I need to do before I start using the tool?
	<p>You need to make sure you are familiar with the staffing level tool.</p> <p>Training and support will be provided via your local Workforce Lead. Please make sure you understand all the information provided, the responsibilities and expectations for you and your team.</p> <p>Please also refer to the Quality Assurance Checklist:</p>
Q2	Why am I being asked to use two tools?
	<p>You are being asked to use the Professional Judgement Tool (PJ) along with the staffing level tool. This forms part of the Common Staffing Method approach mentioned above. Staffing level tool provides WTE information on staffing needs that is considered alongside other local information, such as the PJ WTE staffing outcomes, which is based on your judgement of needs for the workload at that time, before decisions on staffing can be made.</p>
Q3	Some mental health inpatient wards are less than 16 beds. Should the MHLD tool be used rather than the Small Wards Tool?
	<p>Yes, the MHLD Staffing level Tool should be used. The MHLD tool has been developed to measure workload in mental health and learning disabilities settings regardless of numbers of patients. The Small Wards tool was not developed for use within MHLD services.</p>
Q4	Does the tool consider mandatory training requirements?
	<p>A national Predicted Absence Allowance of 22.5% is included in the MHLD Tool. 2% of this total is for study leave.</p>
Q5	How does the tool capture all aspects and complexity of my work?
	<p>The tool was developed by Mental Health clinicians, across Scotland who have agreed that the tool represents what they do.</p>
Q6	Can this tool be used in a Community Mental Health setting?

MHLD Staffing Level Tool - User Guide

	The MHLD tool is intended for use in in-patient Mental Health and Learning Disabilities areas. Current ongoing developments to this tool recognise the need for a Community Mental Health staffing level tool. It is anticipated that in future developments this workload would be an integral part of the tool.
Q7	Do the specialty drop down fields affect the recommended WTE?
	The specialties in this tool do not affect the rWTE. The calculators within this tool are driven by time task measures i.e. how many times does task A occur over X time period to give a recommended WTE.
Q8	How often should the information be entered onto SSTS?
	The data is entered retrospectively to reflect workload of a typical week and does not have to be entered on the date the data is gathered. You can enter all the data as weekly records at the end of each week of the tool run. Best practice is to transfer the data from the paper templates to the staffing level tool as soon as possible.
Q9	Does the configured bed number in SSTS for the MH tool have any impact on the calculator e.g. if an area had the wrong bed configuration would this affect the output of the tool run report?
	<p>The configured bed number does not have an effect on the calculator. However, the bed configuration needs to be correct as the patient specific workload cannot exceed the numbers of beds.</p> <p>The Business Objects (BOXI) report does take account of the configured bed number: if this number is incorrect, the number of beds and Occupancy (%) columns in the report will be incorrect. If the bed configurations are incorrect, please discuss with your local workforce teams and/or SSTS manager to review this.</p>
Q10	Who do I contact if I require help and support with this tool
	Please contact your local workforce lead in the first instance should you require support with any aspect of the tool or tool run.

Appendix D- Trouble shooting

Mental Health & Learning Disabilities Staffing Level Tool Troubleshooting guide	
1. SSTS	
Q1	I am getting an error message when trying to login to SSTS. What should I do?
	<p>SSTS and the staffing level tools can only be accessed on a Board approved computer network or portable network.</p> <p>If you are experiencing login problems when using a board approved network, contact your local SSTS team for advice.</p>
Q2	What should I do if I lose my login details?
	Contact your local SSTS Team.
Q3	The workload tool I need to access is greyed out. What do I do?
	<p>Double check that you are trying to access the correct tool.</p> <p>Contact your local SSTS manager to change your permissions if you are unable to access the correct tool.</p>
Q4	The working location shown is incorrect – how do I change this?
	See Section 2.1
Q5	My service area/ working location isn't shown on the list. What do I do?
	Contact your local SSTS manager to ensure that you have the right permissions to access the tool for your specialty.
Q6	My specialty isn't shown on the drop-down list. What do I do?
	Contact your local SSTS manager to ensure that you have the right permissions to access the tool for your specialty.
Q7	What happens if the internet goes down whilst during data entry to SSTS?
	You will have to re-enter any unsaved data once you are able to access SSTS again
Q8	What happens if I enter the wrong information by mistake e.g. wrong dates or patient activity?
	<p>You will be able to amend any unsaved data while still logged into SSTS</p> <p>If you have Editor permissions, you should be able to amend the entry even after it has been saved using the edit function</p>

Q9	Why won't SSTS let me save the data I have entered and move on to the summary screen?
	<p>Double check the data you have entered.</p> <p>This may be because you have tried to put a date in that is in the future. It may also be that you have entered patient numbers that exceed the bed numbers set on SSTS for your roster location.</p>
2. The Staffing Level Tool	
Q1	How do I find out the average bed occupancy?
	From the previous year's financial information (available from the SSTS manager)
Q2	I can't download the paper data capture template. What do I do?
	<ol style="list-style-type: none"> 1. You can try using a different web browser to download the template. 2. You can print Appendix B from this document. 3. You can speak to the local IT team as permissions may be needed for accessing and downloading documents. 4. Speak to your workforce lead and they should be able to assist in providing paper copies of the template.
Q3	There are data capture sheets missing for some of the shifts – what should I do?
	<p>Double check with the teams working on the shifts where data is missing, as they may still have the data capture sheets.</p> <p>You should enter the data you do have onto SSTS, and this will pull through to the BOXI report. Gaps will show in the charts for any dates you do not have any data for.</p>
Q4	The SCN is off sick. Who takes responsibility for the data collection and SSTS entry now?
	<p>The Nurse in charge of the shift should always make sure the data is collected for their shift. The completed data capture templates should be filed securely in the agreed location for quality checking and SSTS upload. SSTS entry can be done after the tool run is complete.</p> <p>The workforce lead will be able to provide support with completing the tool run</p>
Q5	The rWTE is much higher/ lower than our actual/FE. What should I do?
	This may simply be a reflection of your workload. However, it is worth quality assuring the data, in particular, that you have captured all of the workload and have logged it in the MHL D tool rather than reflecting in Professional Judgement comments.

MHLD Staffing Level Tool - User Guide

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We are happy to consider requests for other languages or formats.

Please contact our Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net

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0131 623 4300 0141 225 6999

www.healthcareimprovementscotland.org