Maintaining Safe and Effective Staffing Learning System

A National learning system will be developed to provide a platform and opportunity for:

- Shared learning on what arrangements, systems and processes are supporting the maintenance of safe staffing and the health, wellbeing and safety of patients and staff and the provision of safe high-quality health care
- Building knowledge and informing the scaling up of new service and workforce models that optimise service and workforce capacity whilst maintaining the safety and quality of health care

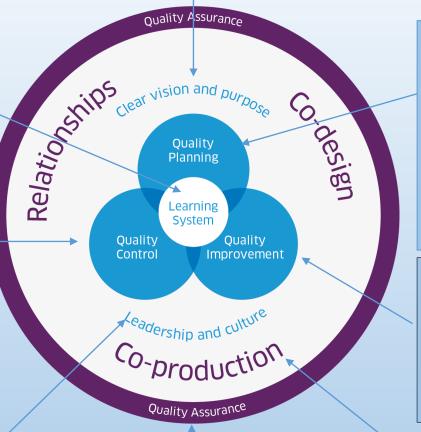
Quality Control:

- Use data to inform and respond to service and workforce changes and monitor impact
- Arrangements are in place for the assessment of real-time staffing, including the identification, mitigation and escalation of risk to the health, wellbeing and safety of patients and staff e.g. Huddles, Covid real-time staffing resources; Safe-Care
- Procedures are in place to inform real-time staffing decisions and the mitigation
 of any risks, so far as possible, with a requirement to seek and have regard to
 appropriate clinical and professional advice
- A range of quality data is tracked over time e.g. EIC measures/CAIR and used to monitor the provision of safe and high-quality health care
- Systems are in place to inform the prioritisation and monitoring of the safe delivery of patient care in circumstances when safe staffing levels have not been achieved
- Effective systems and processes in place for clinical supervision and the delegation of duties, in line with registrants professional bodies

Clear Vision and Purpose:

'Appropriate Staffing' will ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in such numbers as are appropriate for:

- · the health, wellbeing and safety of patients and staff and
- the provision of safe and high-quality health care





Quality Planning:

- The application of the common staffing method should be utilised to inform
 appropriate workforce establishments, skill mix and staffing levels, including in
 circumstances where capacity is being 'surged' or repurposed
- The knowledge, skills and experience of the workforce is as important as the number of staff for the provision of safe and high-quality health care and needs to inform workforce planning, including in circumstances where capacity is being 'surged' or repurposed
- Staff should receive adequate training on workforce planning and the assessment of real-time staffing and risk, including the local operational arrangements and escalation process
- Individuals should receive adequate time and resources to implement arrangements for real-time staffing assessment, mitigation and escalation
- Clinical and professional advice should be sought to inform workforce planning decisions
- Themes/trends and risks identified from quality control should inform quality planning

Quality Improvement

- Improvement methodology is used to test and rapidly scale up and spread new service and workforce models that: maximise service capacity; maximise the available workforce capacity and capability; minimise disruption to service provision; and ultimately improve the safety and quality of health care.
- Use rapid improvement methodologies to ensure changes to quality data and service delivery are anticipated and appropriately accomplished in an environment of rapid change and workforce challenge
- Utilise I-Hub resources and improvement packages to identify and test improvement ideas e.g. SPSP Essentials of safe Care
- Create local and national learning systems to evaluate, share and spread learning

Leadership and Culture

'Responding to rapidity of change requires flexible, compassionate support and leadership'

 Promote a culture of visible, credible and Inclusive Leadership and management support to enable rapid decision making

A Positive Culture enables the delivery of high quality person centred care and staff wellbeing'

- Promote a culture which enables rapid decision making and necessary risk taking, where staff feel psychologically safe to raise concerns and ask questions
- Recognise personal and professional burden on staff and provide opportunities for staff to receive access to psychological support and other wellbeing support
- Promote open and transparent communication through the involvement of staff at all levels in staffing decisions.

Quality Assurance:

The provision of 'Appropriate Staffing' and the arrangements for the assessment of real-time staffing, including the identification, mitigation and escalation of risk will be incorporated within Boards internal Assurance Systems and the Healthcare Improvement Scotland's Adapted Inspection Process.

This will provide the necessary assurance and public confidence that the provision of safe and high-quality health care is being maintained during service re-mobilisation and whilst services remain under continued system and workforce pressures.

Co-Design/Co-Production/Relationships:

In an environment that is rapidly changing in response to service re-mobilisation and system pressure promote:

- Systems thinking to connect across organisational silos plan, coordinate and communicate pathways of care across the acute and Primary Care interfaces
- Service Users, patients, carers and staff are central to service design actively seek feedback and change ideas to inform service improvement and risk mitigation
- Ensure timely, open and honest communication with staff, patients and the wider service providers including external stakeholders
- The importance of communication, relationships and support for staff, in particular those impacted by service change and workforce shortages is key

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