Healthcare Improvement Scotland

# Healthcare Staffing Programme

## Interim Reporting from SafeCare Guidance for Boards

March 2026

NHS SCOTLAND

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# Background

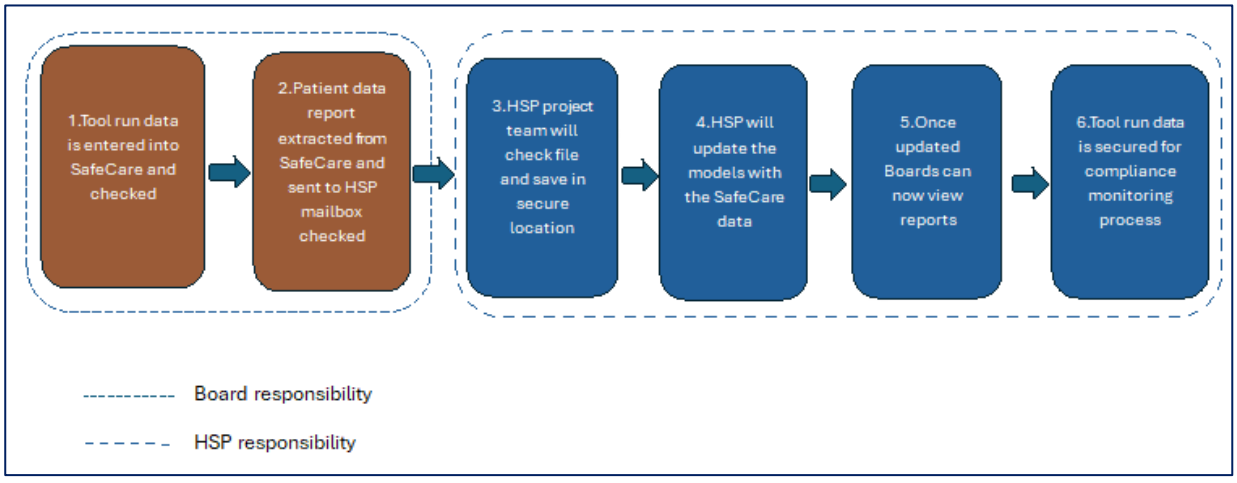
The suite of Staffing Level Tools (SLT) are evidenced based tools to support staff to apply the Common Staffing Method as laid out in the Health and Care (Staffing) (Scotland) Act 2019 (HCSA). They were developed to provide a recommended whole time equivalent (rWTE) value for a ward or area based on the acuity of the patients.

These tools have been hosted on the Scottish Standard Time System (SSTS) until October 2025 when the development of the new Mental Health and Learning Disability (MHLD) Inpatient Nurse SLT went live on SafeCare, a module within the National eRostering solution. This was followed in April 2026 by the Neonatal SLT, the Emergency Care Provision (ECP) SLT, and the Maternity Services SLT.

At the time of writing, the SEER data lake was not available to report from and so an interim reporting solution was required to enable staff to report on their rWTE outputs.

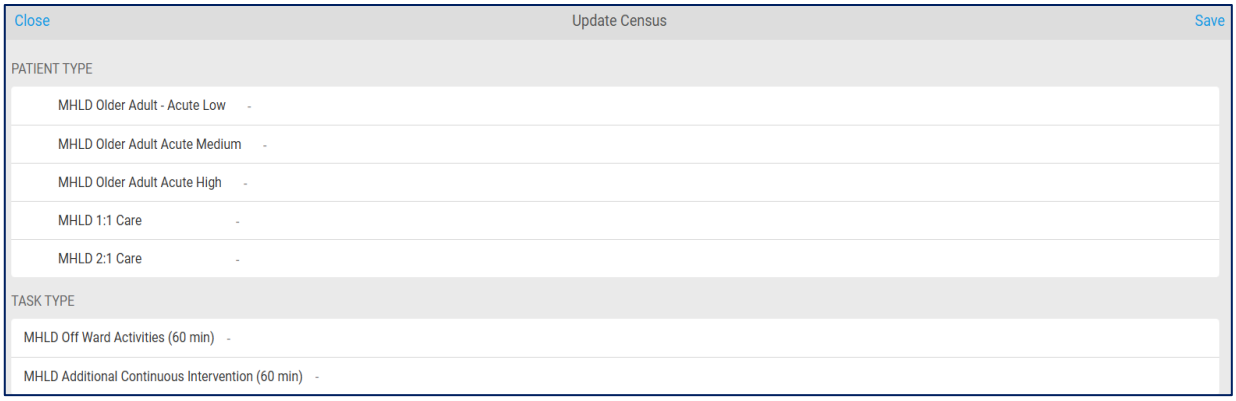
# Process

The process for delivering an interim reporting solution is described in the diagram below. Boards have the responsibility to provide accurate data from SafeCare in the form of the Patient Data report. The Healthcare Staffing Programme (HSP) will process this report and return a rWTE to the user in a timely manner. This is described further below.



1. Tool run data is entered into SafeCare and checked by the boards

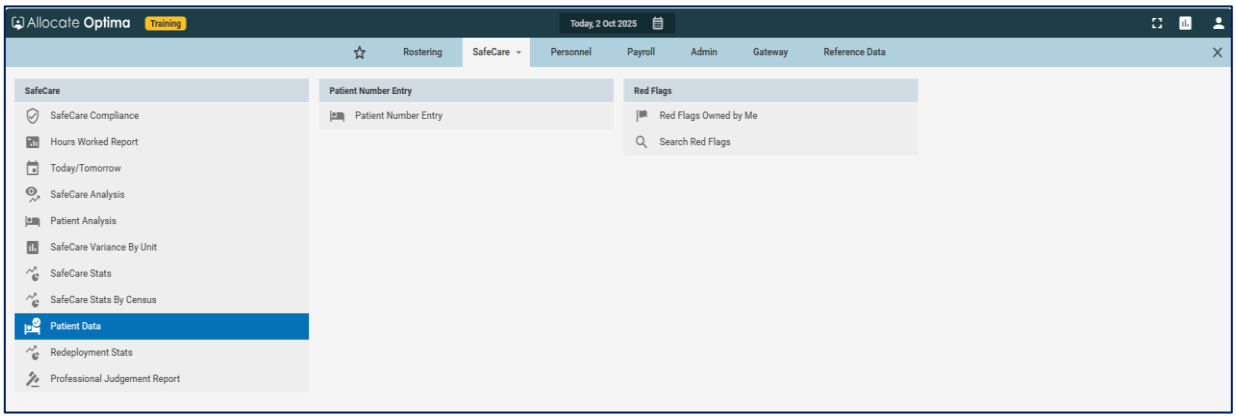
Ward areas should enter their data as per the associated tool run guidance shared from HIS when the specialty specific tool was implemented in SafeCare.



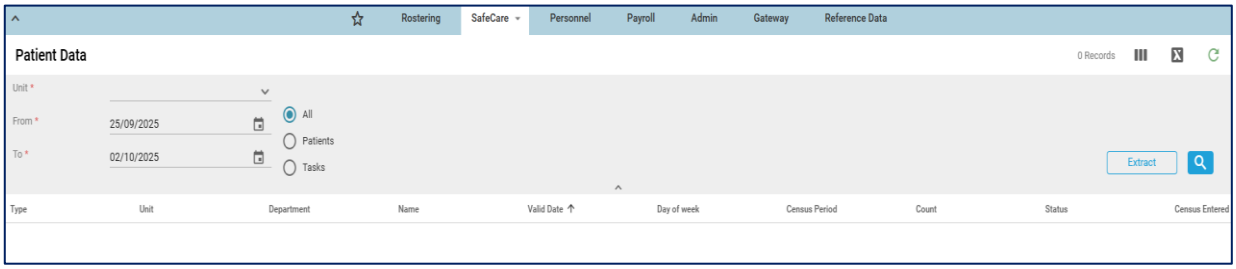

Data should be entered every day for a 2 week period. It is recommended that all data entered has been checked for accuracy.

2. Board runs the Patient Data report, exports it and sends it to HSP mailbox

The Patient Data report is available in Optima as shown below.

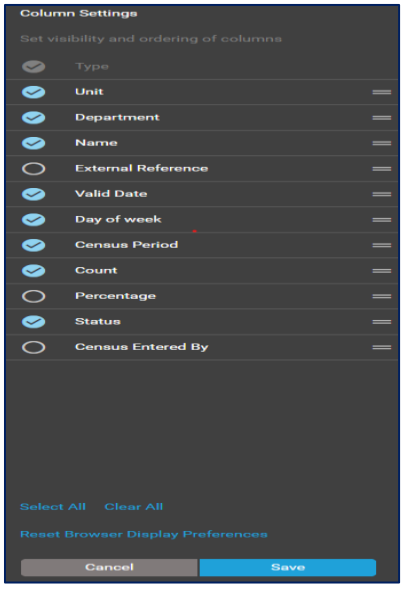



Enter the 2-week period of the tool run in the section shown below.



To ensure successful report generation the following mandatory columns must be included in the Patient Data report:

- Type
- Unit
- Department
- Name
- Valid Date
- Day of week
- Census Period
- Count
- Status




When the report has been run successfully, it should be exported into Excel and named as the Ward/Unit name e.g. if the ward area that has ran the Staffing Level Tool is Ward 3A, the file should be named Ward 3A.xlsx. This file should then be emailed to the HSP mailbox his.hsp@nhs.scot

3. HSP check the file and save it in a secure location ensuring naming conventions are adhered to

HSP will check that the file has been attached to the email from Boards and save the file in the appropriate folder on the shared drive. The naming of the folder and Excel file is critical to ensure that the model runs correctly without errors.

- **Folder Name**: Represents the **Board** e.g., NHS Greater Glasgow and Clyde.
- **Excel File Name**: Represents the **Ward/Unit** being analyzed e.g., Ward 3A.

The final dashboard report will be displayed in the Power BI App.

4. HSP will update the data models in the Power BI dashboard

Every Wednesday, the model will be refreshed to ensure the pipeline structure includes the mandatory fields and aggregates and transforms the data ready for analysis. A recommended Whole Time Equivalent is generated, along with summary tables and graphs in the Power BI Desktop.

5. Data files are processed and published to the Power BI dashboards

HSP will check the model for completion and publish to live in Power BI by the Friday of the same week. This will allow for variation in the volume of reports requiring to be processed.

Any data files which contain errors or are otherwise unable to be processed will be returned to the user with an explanation of the issue.

6. Tool run data is secured for compliance monitoring process

On publication of the Power BI dashboard, the data model is made available to inform HSP's Monitoring Board Compliance duty under legislation. This is saved securely using user-based access functionality.

# Access

Access will be given to Workforce Leads in the first instance with the option to nominate further staff members for access.

HSP are working on an automated process for access and will communicate this further when established. The process is described below.

1. Power BI App Launch & Access Control

**App Launch Method:** The Power BI app will be access through a secured link.
If a user is already signed in to their NHS outlook or any Microsoft 365 service in their browser, they will be automatically authenticated and taken straight to the app.

If they are not already signed in, they will be prompted to log in using their Entra ID credentials (their NHS email address and password).
This ensures that only authorised users within the NHS domain can access the dashboards.

**User Access:** Access to the dashboard will be controlled by the designated workforce or clinical lead.

An MS form will be used to submit access request; the form will collect the following information:

- Name,
- Email address,
- Health Board,
- SafeCare Ward or Unit Name they would like to access.

Once submitted, the request will be reviewed by the appropriate lead.

- If rejected, an automated email will be sent to inform the requester,
- If approved, access will be granted for the specified Ward/Unit requested.

Workforce or clinical leads will have visibility of the entire Board-level service. Team leads will only see the rosters they are responsible for.

# Key considerations

- Data entered into SafeCare should be checked before running and submitting the Patient Data report,
- The Patient Data report should be verified for correct data fields,
- File names should follow the correct naming convention,
- Where the data submission is unable to be processed, this will be fed back to the user with an explanation of the issue,
- Data will be kept secure, governed by user access protocols.

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