

Nursing operational productivity – case studies

Implementing an enhanced care assessment tool to support workforce deployment



In 2018 The Royal Liverpool and Broadgreen University Hospitals NHS Trust developed an assessment tool to understand its patients' enhanced care needs. This makes staff rostering more efficient and ensures the right staff are in the right place at the right time, cutting down on avoidable additional duties and providing efficient, high quality patient care.

What was the problem?

The trust was using a higher than average number of additional duties to care for patients with enhanced care needs and had no formal process for recording these patients' clinical needs. This meant that temporary staffing was being booked without assurance of clinical need.

Only 22% of rosters were being approved six weeks ahead and changes to them were common until two weeks before they started. Unavailability was not actively tracked or used for equitable deployment, particularly to enhanced care.

What was the solution?

The trust developed an assessment tool for clinically assessing patients' individual needs: for example, whether they need one-to-one care or can be cared for by existing on-duty ward staff. The tool was tested on wards with many patients requiring enhanced care to ensure it was fit for purpose and easy for staff to use, before being implemented across all wards. Senior nurses and matrons provided training to ensure consistency in how it was used and that the resulting enhanced care provision matched patient needs.

E-rostering meetings were made more rigorous by introducing a senior nurse-led 'check, challenge and coach' panel for temporary staffing. E-rostering metrics and key performance indicators for each clinical area were introduced to review flexible working arrangements and scrutinise unavailability, including for annual leave.

The trust refined its approval process for additional shifts and its governance structure to ensure control of temporary staffing costs by making lines of responsibility and escalation clearer.

A record of the type of additional duty required to meet enhanced care patients' needs was included in the booking process on the e-rostering system. Workforce deployment decisions in team meetings were based on real-time recording by staff of the type and location of patients requiring enhanced care.

The trust implemented an initiative called 'The Royal Way' to ensure all ward and non ward-based nurses have up-to-date enhanced care clinical skills and competencies.

What were the results?

- Nursing expenditure fell from £9.2 million in April 2018 to £8.8 million in September 2018 with reduced additional duties and temporary staffing.
- 80% of rosters are approved six weeks in advance.
- Agency spend fell from 7.5% to 2.7% of the pay bill, and bank spend increased from 2.0% to 2.5%, demonstrating better use of bank staff to fill shifts.
- One whole-time equivalent (WTE) has been saved per ward and the nursing vacancy rate reduced with the reprofiling of hours. Staff have moved onto long day shift patterns following consultation and engagement.

Variance in staff unavailability and establishment headroom have been addressed and as a result sickness rates and mandatory training have improved.

The improvements in rostering and deployment were essential to planning and meeting enhanced care needs. Patients' enhanced care needs are now clinically assessed across all specialties using a standardised assessment tool. A patient's progress is tracked with their regular reassessment and this is used to support future establishment setting and effective use of temporary staffing. For example, on reassessment a patient may be found no longer to require one-to-one care and instead is deemed appropriate for 1:4 cohort enhanced care delivery.

What were the learning points?

- Adequate governance processes are vital for all elements of enhanced care provision and delivery to ensure effectiveness and clinically adequate, justifiable and planned care.
- Professional clinical judgement remains a key part of taking decisions about deploying the nursing workforce.

Next steps

The trust is considering creating a team of 5.5 WTE permanent staff to provide enhanced care.

Want to know more?

Contact the Nursing Operational Productivity team:
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