



## PRINCIPLES FOR HEALTH AND CARE STAFFING

Staffing for health and care services is to be arranged while:

- providing safe and high-quality services
- ensuring the best health and care outcomes for people
- ensuring the wellbeing of staff
- being open with staff and people about decisions on staffing
- allocating staff efficiently
- promoting multi-disciplinary services as appropriate
- taking account of the views of people and staff
- respecting the dignity and rights of people
- taking account of peoples' needs, abilities, characteristics and circumstances
- improving standards and outcomes for people

### Management of risk

When making staffing decisions within your care service, the staffing levels, the impact of vacancies and staff skills mix are risk assessed, using current information on people's needs, wishes and circumstances. Contingency plans are available and used when staffing levels negatively impact on the outcomes and wellbeing of people and staff. Risk assessments and contingency plans include the risk of reduced staffing levels on health and safety procedures and restricting choice for people. Lone working risk assessments highlight support available for staff working in isolation.

Consider individual risk assessment and personal plans that people have in place to help them enable and manage identified risks. This will include risks to the health and wellbeing of staff, staff resources and deployment to support people and minimise the occurrence of adverse events. For example, the service should ensure they have sufficient staff to follow any pre-agreed arrangements, policies or procedures relating to health and safety.

### Staff feedback

Staff are enabled to share meaningful feedback on staffing in the service, suggest ideas and areas for improvement. Staff feedback is gathered in a range of ways, for example suggestion boxes, individual and group meetings, focus and peer groups and supervision meetings. Staff are enabled to discuss staffing levels and skill mix. Consideration is given to how staff feedback is responded to and whether this is an area that could be improved upon. Quantitative and qualitative data from staff feedback is gathered, shared and processes and outcomes improved as a result.

Measures are in place to support staff wellbeing. This could include wellbeing champions, wellbeing resources, wellbeing assessments and access to external supports. There is access to techniques to help staff express themselves if required, such as appreciative inquiry tools or emotional touchpoints. Consideration is given to all people working within the service including relief and agency workers and volunteers.

### Professional input

Collaboration and partnership working with professionals from various disciplines within social care and health is in place to support the skill mix within your service and enhance positive outcomes for people. This could include dementia champions, commissioning teams, community nursing teams, GPs and Allied Health Professionals, for example occupational therapists, speech and language therapists, physiotherapists.

Services gain support through professional input to enhance the skills and knowledge of staff and to support good outcomes for people. Feedback from visiting professionals on the staffing levels and outcomes for people within your care service is considered to support safe and effective decisions on staffing.

### Guidance and research

The service keeps up to date with guidance on staffing from professional bodies such as Scottish Social Services Council (SSSC), Nursing and Midwifery Council (NMC), Allied Health Professionals Council (AHPC), including the relevant codes of conduct for staff. Staff are aware of guidance and research from organisations such as the Care Inspectorate, the Mental Welfare Commission, NHS Education Scotland, Scottish Care and the local health and social care partnership or one of the many other organisations whose work is relevant to staffing in social care. Guidance is easily accessible.

Your service may wish to take part in research about staffing along with, for example, a university or other organisation. Consider how the outcomes of your self-assessment work might guide you when thinking about what guidance or research you may need to be aware of.

### Staffing levels and vacancies

Staffing levels and vacancies are monitored to ensure there are the right people with the right skills in the right place at the right time. When considering staffing levels and vacancies within your care service information is gathered from a variety of sources. This includes information that can be counted, for example from duty rotas, assessments of people's desired outcomes and internal and external reporting systems about staffing, and information that can be felt or described (for example from observation, conversation, interviews and focus groups with people experiencing care, their nominated family member or carer and staff). This information is freely available to the care service community, except for confidential and personal information.

Recruitment records show that the service works to best practice guidance on safer recruitment, paying close attention to values, equality and human rights. Induction training and processes prepare new staff well for working with people, including agency staff. Volunteers are seen as a valuable addition to the workforce.

Staff know that their wellbeing is important to the service and this helps to encourage staff retention. Staff from different cultures are welcomed and feel included. Staff knowledge and skills are celebrated, and they are encouraged to develop further within their role or to prepare for a new role. Shift times are as flexible as they can be to encourage recruitment and retention but, they consider people's needs and wishes.

Staffing levels include a mix of staff roles, experience, mentors and keyworkers and are designed to meet people's needs and wishes. If staff say there are not enough staff this is explored. Systems and processes are designed to make the workload as easy as possible, for example the service considers how easy it is for staff to find something, communicate with someone or follow daily routines.

### Assessment of quality and standards

When assessing quality and standards in your service, your organisation's existing quality assurance processes, action plans and self-assessments highlight areas for improvement. A range of internal and external professional quality assurance processes are considered within your service's improvement plan. Involving different staff, people experiencing care and their nominated family member or carer will enrich the information you receive.

Daily management observation of staff practice is routine, and any actions required are carried out in a culture of learning and development using a supportive approach. New ideas are initially tested on a small scale and show sustained improvement before they are implemented on a larger scale.

### Relative and carer views

Relatives, friends and carers of people experiencing care have accessible and easy to understand information about the care service. Information introducing the service, such as a welcome pack, includes the aims and objectives of the service and information about how staffing is organised. Meaningful involvement in the life of the person experiencing care is supported through a sense of being equal partners in care and in a welcoming and inclusive environment. There is an awareness of volunteering opportunities for those visiting the home and in the local community, which is supported through a volunteer policy.

Staff are confident in building positive interactions and relationships with visitors such as relatives, friends and carers of people experiencing care. Effective communication between staff and visitors provide opportunities for discussion about what matters to the visitor, the staff involved and how best to improve outcomes for people experiencing care.

The views of relatives and carers are obtained in a range of ways and valued. This could include the use of surveys, meetings, focus groups, formal care reviews and informal conversation. Where available, relatives and carers have digital access to information relevant to them. Comments, complaints and compliments are captured and responded to. There is confidence that good conversations with the staff can resolve concerns. There is an understanding about how to use a formal complaints procedure, should this be required.

Feedback from relatives and carers feedback is gathered and shared, and processes and outcomes improved as a result.

### Environment and local context

The local environment, geographical area and location are considered when making decisions on staffing. Where the service is located and the importance of how that can impact upon staffing is planned for. For example, competing with other sectors for recruits, the travel infrastructure and staff working together who are related. If the service has staff with multiple occupations, consideration is given to how this can be supported. The service considers if geographical deployment of staff may work well, as could a recruitment 'pool.' This may depend upon the locality of the service.

Specific considerations for staffing the physical environment could include building layout, accessibility, enabling access to outdoor space, staff being able to see people and people being able to move around. When making decisions on staffing, the specific needs of the community using the service are included, for example are people using the service for short term stays with a reablement focus?

Community connections enhance the life of those working and living in the service with visitors, relatives, carers and people experiencing care involved in community activities. Those involved can provide feedback and there is an awareness of volunteering opportunities for those visiting the home and those in the local community which is supported through a volunteer policy.

Local considerations such as access to professionals and commissioning processes are known with the impact upon the staff skill mix or deployment planned for.

### People's needs and views

People's views and preferences are actively sought when planning and delivering care and support, with the needs and wishes of people experiencing care understood and valued. Importance is placed on staff skills and experience to help build successful relationships with people experiencing care. Promotion of the health and social care standards is embedded in practice with people experiencing care and their relatives are aware of the framework. The views of people experiencing care on staffing arrangements is obtained in a range of ways and valued. This could include the use of observation, surveys, meetings, focus groups, formal care reviews and informal conversation. There are opportunities to share positive experiences about the staff who provide care and support whilst feeling that a concern around staffing can be raised if necessary. Key working arrangements enhance the relationships and experiences of both the individual worker and the person experiencing care.

People are supported to be involved in their personal outcome planning and care reviews in a way that is meaningful to them. Communication tools are available and used to support involvement.

Staffing arrangements are adjusted to meet individual's needs. Regular staff and management are known to people experiencing care and there are processes in place to support new and relief staff to know about people's needs.

## Staffing level tool

Staffing level tools will be designed to provide numerical information based on people's needs. The tool will also provide information based on the professional judgement of staff. This information can be numerical or based on conversations and observations. This may include an assessment of people's needs and wishes to assess the level of staffing required at a particular time.

Quality assurance systems are in place to monitor the quality of staffing and dependency assessments and the outcomes for people. A person-centred way the staffing level tool shows the right skill mix of staff to support and care for people in a service-centred way.

Staff schedules demonstrate that staff skills and experience to ensure the choices and needs of people are met.

## Workload assessment based on peoples needs

People experiencing care or their representatives are actively involved in planning their care and support. Peoples physical, psychological, cultural, social, emotional, and spiritual needs are assessed a minimum of four weekly. This information is used to inform the person's care and support hours.

Effective communication methods with people experiencing care, their relatives, and staff alongside observations are used to inform staffing.

Quality assurance policies and procedures monitor and evaluate staffing. This enables a service to deliver high quality, safe and compassionate care that meets the needs, rights and choices of people experiencing care at a time that suits them.

## Professional judgement

Professional judgement is applied across all sections in the staffing method. It is not used in isolation but alongside other evidence, such as quality outcome measures and standards. Services who find that quality assurance processes do not represent an accurate picture of people's care needs and wishes would provide further evidence to support their professional judgement. Staff state what they believe would be the right amount of people, with the right skills, in the right place at the right time, based on their observations, conversations, surveys and focus groups. Services consider how they support staff who make decisions about staffing to develop so that staff are confident, competent and supported when applying professional judgement.

## Links to further guidance

- [Allied Health Professions Council \(AHPC\)](#)
- [Care Inspectorate's Safe Staffing Programme](#)
- [Guidance for providers on the assessment of staffing](#)
- [Guide for providers on personal planning - adults](#)
- [Health and Care \(Staffing\) \(Scotland\) Act 2019 \(legislation.gov.uk\)](#)
- [Health and Social Care Standards: my support, my life](#)
- [My Home Life Scotland](#)
- [NHS Education Scotland \(NES\)](#)
- [Quality framework for care homes for adults and older people](#)
- [Safer Recruitment through better recruitment](#)
- [Scottish Care](#)
- [Scottish Government Wellbeing Hub](#)
- [Scottish Human Rights Commission](#)
- [Self-evaluation guidance and worked and blank templates](#)
- [Talking Mats](#)
- [The Mental Welfare Commission for Scotland \(MWC\)](#)
- [The Nursing and Midwifery Council \(NMC\)](#)
- [The Scottish Social Services Council \(SSSC\)](#)
- [The National Care and Support Work Improvement Scotland \(Requirements for Care Services\) Regulations 2011/210, Regulation 4, Welfare of Users](#)