

Health and Care (Staffing) (Scotland) Act 2019 Annual Board Report

**Quarters 1, 2 and 3
2024-2025**

Introduction

This paper provides a summary of NHS Golden Jubilee's progress against the duties of the Health and Care (Staffing) (Scotland) legislation in line with requirements for local reporting.

The Health and Care (Staffing) (Scotland) Act came into effect on 1 April 2024. The Act is applicable to all clinical professional groups, and places specific duties on Health Boards, care service providers, Healthcare Improvement Scotland (HIS), the Care Inspectorate and Scottish Ministers.

Since this commenced, Health Boards must now comply with several reporting requirements, which are detailed below.

1. High-Cost Agency Use – Boards must submit quarterly reports to Scottish Government; containing:
 - Details of the number of occasions agency workers costing 150% or more than the cost of a substantive equivalent were required.
 - Percentage cost of such (above normal pay rate).
 - Rationale for use. This detail is required for every shift and must be signed off by both Executive Nurse and Medical Directors.
2. The Executive Nurse and Medical Directors are required to report to the Board governance groups on a quarterly basis to detail the level of compliance against the legislation for the range of clinical professional groups for which they have executive responsibility, and the progress in improving compliance. This paper is the third of these reports.
3. Health Boards must submit annual reports to Scottish Ministers at the end of each fiscal year to detail compliance with the Act, high-cost agency use and any identified severe and recurrent risks. The first report is due to return to Scottish government on 23 April 2025. Scottish Ministers must then report on legislative compliance and offer recommendations to the Scottish Parliament.

Local reporting

Through the NHS Golden Jubilee Health Care Staffing Programme Board, a local method and schedule for reporting has been agreed.

Assurance reports are provided from clinical leads to the Healthcare Staffing Programme Lead Nurse, and these are combined to develop the Board wide quarterly report.

These reports will cover all relevant health duties within the Act for each profession, providing assurance on the Board's progress and achievement of compliance with the Act. This report provides a summary of the Board's current position (end of Q3) against the legislative duties.

Current position against the required duties

As described, the legislative duties are applicable to all clinical professions, and these are listed within the legislation. A summary position against each duty is provided through the following sections and a summary of level of assurance reported against each duty is included in Appendix 1.

There are 13 clinical professional groups identified within NHS Golden Jubilee to which the legislation is applicable. 12 reports were received.

It is noted that the assurance status presented in this report is based on the 12 reports received.

12IA – Duty to ensure appropriate staffing



The NHS Golden Jubilee position with this duty is substantial (100%). This overarching duty ensures that effective processes are in place to ensure the right workforce is on hand to support the delivery of safe, effective, high-quality, patient care.

Workforce planning in NHS Golden Jubilee takes place at professional, multi-disciplinary and operational level. There is a Workforce Planning Strategy in place for the Board.

Where a gap is identified, clinical managers can highlight this at the site wide safety huddle. Associated mitigation and solutions are identified.

Our status with this duty has not changed since Q2.

12IB – Duty to ensure appropriate staffing: agency workers



The second quarterly agency return has identified agency usage in NHS Golden Jubilee for staff costing over 150%. This continues to be within Medicine and Healthcare Sciences (perfusion).

For Healthcare science (perfusion), this remains low volume and incurred additional travel and subsistence expenses due to the highly specialised nature of these roles and lack of availability of local agency staff to fill operational gaps.

Medical Locums have been essential to ensure optimal clinical activity, but in low volume.

Each profession has a process in place to ensure governance around use of agency, and to support efficient reporting.

12IC – Duty to have real-time staffing assessment in place



The NHS Golden Jubilee position with this duty remains as reasonable (100%). The application of e-rostering will support compliance with the legislative requirement of this duty. There is a plan in place for continued roll out of eRoster.

Safe Care®* has yet to be adopted, and until there is wider use of eRoster across NHS Golden Jubilee, we will continue with interim processes.

Colleagues are utilising local processes (including Medirota®)** and local escalation tools (the decision support escalation tool). As part of the reporting system colleagues are asked to describe and document current process.

12ID – Duty to have risk escalation processes in place



The NHS Golden Jubilee position with this duty is reasonable (92%). There are structures and processes in place to support compliance, ensuring real time risks are escalated appropriately.

These also continue as locally developed escalation protocols for teams. The internally developed decision support escalation tool facilitates this process and provides a means of recording the same information.

The site wide safety huddle' is open to all clinical professions to attend. Whilst nursing department leaders use the huddle to ensure safe allocation of workload, this is an opportunity for clinical professions to share or escalate any staffing concerns that may impact on the day.

12IE – Duty to have arrangements to address severe and recurrent risks



The NHS Golden Jubilee position with this duty is reasonable (92%). The various governance structures and assurance processes in place across the organisation support compliance. Professional leadership structures are also in place across NHS Golden Jubilee to help to support compliance.

Regular Confirm and Challenge Meetings are held by Executive Director of Operations and divisional teams to review and address ongoing risks to the planned and actual clinical activity. This may include reviewing risks identified and associated mitigations. These meetings are attended by lead clinicians from the triumvirate, performance team and other executive directors including Medical and Nurse Directors. These meetings are held monthly and minutes are recorded.

12IF – Seek clinical advice on staffing



The NHS Golden Jubilee position for this duty is reasonable (67%), however, this has decreased since the Q2 report. A slightly higher return of information has contributed to this percentage drop. We continue to support teams to review the systems and processes that they have in place in order that they meet this requirement.

12IH – Duty to ensure adequate time given to clinical leaders



The NHS Golden Jubilee position for this duty is limited (50%). This has increased marginally since the Q2 report, and was escalated through divisional operational teams. However, additional discussions with clinical leads self-reporting of this have taken place but it still remains our lowest duty compliance.

There continue to be challenges with allocating time for all clinical leaders. Clinical leaders are now monitoring this more closely, which provides an opportunity for review and improvement.

12II – Duty to ensure appropriate staffing: training of staff



The NHS Golden Jubilee position for this is reasonable (92%). Structures and processes are in place to support compliance, including use of TURAS for personal development reviews, clinical education calendar, Learning and Organisational Development (L&OD) training calendar and monthly Clinical Medical Education (CME) days.

There are a range of staff development opportunities, that can be accessed through the Board wide further education training fund.

Training compliance data is shared locally through staff governance group.



12IJ – Duty to follow common staffing method



The NHS Golden Jubilee position for this duty is substantial (100%). This continues only to be the Nursing profession. NHS Golden Jubilee has a schedule of staffing level tool runs (twice per year in May and November) to facilitate the application of the appropriate nationally mandated staffing level tools. The safe staffing tools took place from 4-18 November 2024.

A reporting template was developed and used to collate workforce data and quality of care metrics together for reporting through nursing workforce group in January 25.

12IM – Reporting on staffing



As described above, NHS Golden Jubilee is aware of the reporting requirements and has developed a template for each profession to provide the detail for the NHS Golden Jubilee Health and Care Staffing Programme Board. Clinical leads are required to complete the template as per the timetable agreed at the Programme Board.



*Safe Care® provides live visibility of staffing levels and by matching patient acuity.

**Medirota® is used to plan, operate and report on mixed role activity in a range of clinical services.

Appendix 1

NHS Golden Jubilee reported level of assurance with each duty

There are 13 clinical professions at NHS Golden Jubilee that the Health and Care (Staffing) (Scotland) Act 2019 is relevant to.


Duty	Topic	Compliance % (Q1)	Compliance % (Q 2)	Compliance % (Q3)	Assurance level
12IA	Ensure appropriate staffing	100	100	100	substantial
12IC	Real time staffing in place	100	100	100	substantial
12ID	Risk escalation process in place	88	100	92	reasonable
12IE	Arrangements to address severe and recurrent risks	77	82	92	reasonable
12IF	Seek clinical advice on staffing	83	72	67	reasonable
12IH	Adequate time given to clinical leaders	50	45	50	reasonable
12II	Appropriate training of staff	100	100	92	reasonable
12IJ	Follow common staffing method (nursing only)	100	100	100	substantial





NHS Golden Jubilee

Beardmore Street, Clydebank, Glasgow, G81 4HX

 **0141 951 5000**

 **enquiries@gjnh.scot.nhs.uk**

 **nhsgoldenjubilee.co.uk**



Report Authors:
Eleanor Lang, Associate Nurse Director
Brenda Wilson, Safe Staffing Nurse Lead

Executive Lead:
Anne Marie Cavanagh, Executive Nurse Director