QA+I
QUALITY ASSESSMENT & IMPROVEMENT

SPECIALIST PALLIATIVE CARE
May 2014

WORKBOOK
6

Workforce
Supporting services to deliver quality healthcare

Effective Care and Support

Safe Care and Support

Person Centred Care and Support

Better Health and Wellbeing

Leadership, Governance and Management

Use of Information

Workforce

Use of Resources

CULTURE OF QUALITY AND SAFETY

Service User

Introduction

Welcome to the **Workforce** Quality Assessment and Improvement Workbook. This workbook will support assessment teams in preparing for assessment against Theme 6 of the National Standards for Safer Better Healthcare.

There are **11 Standards and 12 Essential Elements** of Quality under Theme 6. The Essential Elements are specific, tangible translations of the National Standards. They represent those key aspects of quality you would expect to see within a service that is delivering safe, sustainable, high quality care. There are four Levels of Quality for each Essential Element. These Levels build on each other and allow services to objectively assess the Level of Quality and maturity that most accurately reflects their service. The contents within each Level are guiding prompts as to what a service should be achieving for that Level and are not specific criteria that must be in place. Progress through these ascending Levels of Quality assumes that the main aspects of quality within the previous Level have been achieved before you move to the next Level.

Given that the National Standards for Safer Better Healthcare are relatively new to the healthcare system, it is recognised that implementing these standards may be challenging and require significant effort by services. Therefore a guiding principle of the assessment is to create a process of continuous quality improvement progressing towards full implementation. In some cases services may not have progressed as far along their quality journey compared to other services. This may result in services determining that for some Essential Elements and Standards they have not yet achieved 'Emerging Improvement', the first Level of Quality. In this instance services should not select a Level of Quality for these Essential Elements; instead they should consider outlining in the Additional Information section the necessary actions they need to implement to achieve 'Emerging Improvement' and higher Levels of Quality.

Levels of Quality	**Emerging Improvement (EI)**	There is progress with a strong recognition of the need to further develop and improve existing governing structures and processes.
	Continuous Improvement(CI)	There is significant progress in the development, implementation and monitoring of improved quality systems.
	Sustained Improvement(SI)	Well established quality systems are evaluated, consistently achieve quality outcomes and support sustainable good practice.
	Excellence (E)	The service is an innovative leader in consistently delivering good service user experience and excellent quality care.

A list of examples of evidence is provided to support you in verifying your selected Level of Quality for each Essential Element. This list is intended as a guide and services can include additional evidence that better supports their selected level.

Similarly services may wish to consider the following bullets to guide them in providing additional information to support their assessment.

- Structures and processes in place and how they have been evaluated.
- Strategies and plans developed and implemented.
- Risks identified and improvement actions taken.
- Challenges to progressing to higher levels of quality.
- Outcomes achieved and examples of good practice.

The key output of this assessment is the development of improvement actions which will support your service in implementing the National Standards for Person Centred Care and Support and improving the quality of your service.

An overview of the steps within the assessment process for the National Standards for Safer Better Healthcare is illustrated in Figure 1.

Figure 1 Overview of Assessment Process
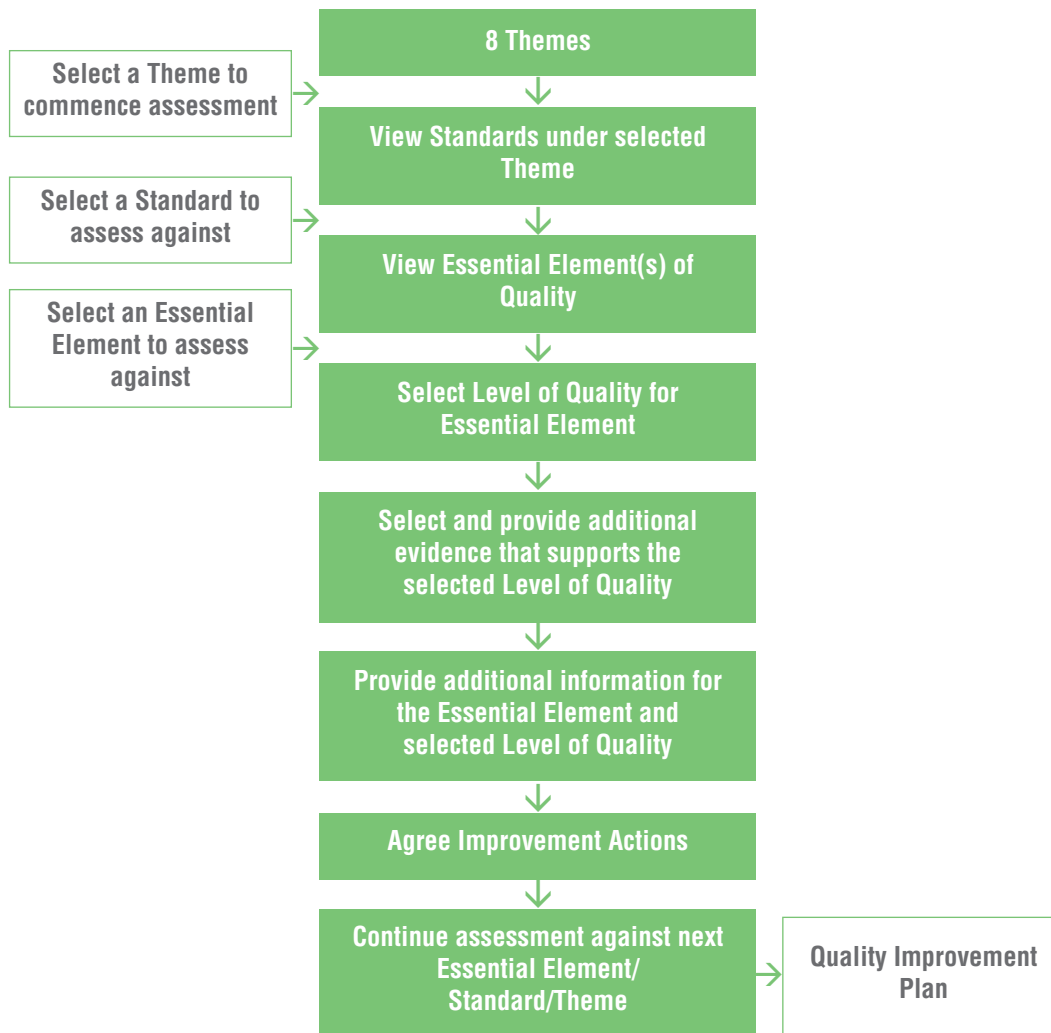
6. WORKFORCE

STANDARD	ESSENTIAL ELEMENTS	WHAT A SERVICE USER CAN EXPECT OR EXPERIENCE WHEN A SPECIALIST PALLIATIVE CARE SERVICE IS MEETING THIS STANDARD.
STANDARD 6.1 Service providers plan, organise, manage and enable their workforce to achieve the service objectives for high quality, safe and reliable healthcare.	(A) Maximise Staff Resources (B) Utilisation of Volunteer Resources	The service you are attending plans and manages its staff and volunteer resources to ensure there are staff and volunteers with the necessary skills and competencies to deliver safe quality care to you.
STANDARD 6.2 Service providers recruit people with the required competencies to provide high quality, safe and reliable healthcare.	Effective Staff Recruitment	Your service ensures that it recruits people with the necessary qualifications, skills, abilities and experience to provide safe care.
STANDARD 6.3 Service providers ensure their workforce has the competencies required to deliver high quality, safe and reliable healthcare.	Maintaining Competent Staff	Staff caring for you will regularly receive the necessary education, development and training to keep their skills and knowledge up-to-date.
STANDARD 6.4 Service providers support their workforce in delivering high quality, safe and reliable healthcare.	(A) Support Systems for Staff (B) Support Systems for Volunteers	The service you are attending listens to the views and the feedback of staff and volunteers and supports them in making your care safer and better.

STANDARD 6.1

Service providers plan, organise and manage their workforce to achieve the service objectives for high quality, safe and reliable healthcare

Essential Element (A): Maximising Staff Resources

Staff are effectively enabled to meet the service current and projected future needs.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• There are structures and processes to support the management and engagement of staff. • Management and engagement of staff takes account of deployment and the short-term needs of the service. • Organisation and deployment of staff support service delivery within the services Employment Control Framework. • Employment legislation and any changes are communicated to staff.	☐
Continuous Improvement (CI)	• Systematic review of staff resources ensures alignment to the quality and safety objectives of the service. • Human resource management policies and practices are implemented and reviewed to maximise staff retention, replacement, succession planning and deployment. • Staff management takes account of skill mix, competencies and deficits in staffing and reflects relevant legislation and government policy. • Staffing deficits are safety risk assessed and linked to the service's risk management process. • Performance measures are reviewed and reported to governing committees with reciprocal feedback to staff.	☐
Sustained Improvement (SI)	• Workforce planning is integrated into service and financial planning. • Evaluation of workforce plan informs contingency plans and future developments. • Planning for changes in resources and workload support the continued safe delivery of services and support staff in adapting to change. • Performance measures are consistently achieved and reported. • Workforce planning takes account of staff capability, capacity and skill-mix to meet long term needs of the service.	☐
Excellence (E)	• Benchmarking with other specialist palliative care service providers informs improvements and learning. • Innovative approaches to maximising staff resources are implemented and shared nationally.	☐

Evidence to verify selected level of quality

Examples

- Development and evaluation of workforce plan.
- Workforce plan aligned to service plan objectives.
- Workforce reports submitted to governing committees.
- Assessment of patient risk and safety are in place and acted upon.
- Future needs assessments are incorporated into workforce plan.
- Testing of workforce models.
- Implementation of contingency plans.
- Implementation of improvement plans based on benchmarking.
- Implementation of succession planning.

Add your own evidence

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STANDARD 6.1

Service providers plan, organise and manage their workforce to achieve the service objectives for high quality, safe and reliable healthcare

Essential Element (B): Utilisation of Volunteer Resources

Volunteers are effectively enabled to meet the service current and projected future needs.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• There are structures and processes to support the engagement, education, training and management of volunteers.	☐
Continuous Improvement (CI)	• Volunteer management takes account of skill mix and competencies and reflects relevant legislation and government policy.	☐
Sustained Improvement (SI)	• Planning for changes in resources and workload supports the continued safe delivery of services, and support staff and volunteers in adapting to change.	☐
Excellence (E)	• Benchmarking with other specialist palliative care service providers informs improvements and learning. • Innovative approaches to maximising volunteer resources are implemented and shared nationally.	☐

Evidence to verify selected level of quality

Examples

- Service incorporates relevant legislation and government policies to support safe engagement, utilisation and management of volunteers.
- Staff and volunteers have access to education on legislation regarding utilisation of volunteer services.
- Management structures and planning include integration of volunteer workforce.
- Future needs assessments are incorporated into workforce plan.
- Education supports are available to volunteers to support change.
- Implementation of succession planning.

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STANDARD 6.2

Service providers recruit people with the required competencies to provide high quality, safe and reliable healthcare

Essential Element: Effective Staff Recruitment

There are effective evidence based arrangements to support staff recruitment.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• Service has policies, procedures and guidelines based on Irish and European legislation. • Changes in legislation are reflected in all relevant documentation. • Staff involved in recruitment and selection receive relevant education, development and training. • Documented service agreements with external recruitment agencies. • Service has publicly available information on recruitment and selection procedures.	☐
Continuous Improvement (CI)	• Human Resource Management policies are regularly reviewed and changes are communicated to staff. • Review of service agreements with external recruitment agencies to assure roles and responsibilities are being met and agreed measures are being achieved. • Assurance checks are undertaken to confirm that all appointees have appropriate qualifications, relevant statutory registration, Garda vetting and are medically fit for the role. • Review of feedback that is sought from candidates and line managers informs improvements.	☐
Sustained Improvement (SI)	• Evaluation of systems to ensure appropriateness and effectiveness of recruitment and selection processes.	☐
Excellence (E)	• Service explores innovative methods of recruitment and selection to secure a high quality candidate pool.	☐

Evidence to verify selected level of quality

Examples

- Governing arrangements that support recruitment and selection.
- Implementation of human resource policies and guidelines.
- Assurance checks to verify staff qualifications, statutory registration, health and Garda vetting.
- Feedback sought from candidates and line managers.
- Attendance at staff education, development and training.
- Pre and post interview candidate information packs.
- Innovative approaches to recruitment.

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STANDARD 6.3

Service providers ensure their workforce has the competencies required to deliver high quality, safe and reliable healthcare

Essential Element: Maintaining Competent Staff

SPC service providers have arrangements to support staff in maintaining and developing their competencies.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• Structures and processes support staff induction, performance management, maintenance, awareness of the Palliative Care Competence Framework. • Induction programme includes the quality and safety objectives of the service and focuses on all new staff (including temporary and locum staff). • Probation periods are effectively managed and expectations clearly established early in employment. • Performance management systems are utilised in managing staff. • A system to retain and access education/development/training records is in place.	☐
Continuous Improvement (CI)	• Education, development and training plans are based on professional development needs analyses. • Education, development and training programmes are aligned to identified quality, safety and risk management objectives and include enhancing communication skills. • Analysis of incidents and report recommendations informs education, development and training programmes. • Staff are supported in maintaining competences required for professional registration. • The service supervises and reviews the provision of care to ensure that staff work within their competences and scope of practice. • Review of arrangements that support annual verification of professional registration.	☐
Sustained Improvement (SI)	• Induction programmes, education, development and training plans are evaluated and outcome measures are reported and actioned. • Participants' feedback forms part of these evaluations. • The organisation seeks service user and family voice in monitoring quality and safety in staff performance. • Performance management systems are fully operational and inform the overall education, development and training and needs assessment and succession management.	☐
Excellence (E)	• The service reviews national and international competence development programmes to inform improvements.	☐

Evidence to verify selected level of quality

Examples

- Education, development and training needs analysis report.
- Education, development and training plan with short, medium and long term goals.
- Access to literature, library and databases.
- Completion of competence assessment frameworks taking consideration of the Palliative Care Competence Framework.
- Regular review of professional development plans.
- Evaluation of induction, education, development and training programmes.
- Report of attendance at mandatory education, development, training and induction programme.
- Arrangements to support professional supervision, mentoring and coaching.
- Implementation of innovative approaches to facilitating staff education, development and training e.g. e-learning.

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STANDARD 6.4

Service providers support their workforce in delivering high quality, safe and reliable healthcare

Essential Element (A): Support Systems for Staff

Service has arrangements to support staff in delivering quality and effective healthcare.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• Governing arrangements support clarity on roles, responsibilities and lines of accountability for all staff. • Arrangements support the management of staff performance including underperformance. • Arrangements exist to address identified clinical concerns at local level initially with onward reporting to professional and regulatory bodies as appropriate. • Arrangements support staff engagement, consultation and responding to staff feedback. • Policy supports staff in making protected disclosures. • The work environment is risk assessed in line with legislation and policies.	☐
Continuous Improvement (CI)	• Arrangements for engaging with and gathering feedback from staff are reviewed, improvement plans implemented and there is reciprocal feedback on outcomes. • The findings from risk assessments inform improvement plans which are implemented. • Education and support is provided to staff working in areas identified as potential risk environments. • Staff safety incidents are analysed, trended and inform improvements. • Human resource systems to manage performance are fully utilised.	☐
Sustained Improvement (SI)	• Evaluation of performance management system with implementation of improvement actions. • Methods of engagement with staff are evaluated and improvement plans developed. • Evaluation of the staff health and safety programme is undertaken. • Service provides an occupational health service and employee assistance programmes for staff.	☐
Excellence (E)	• The service reviews national and international incidents relating to staff welfare and incorporates learning into local improvement plans.	☐

Evidence to verify selected level of quality

Examples

- Formal performance management arrangements.
- Evidence of performance being reviewed and monitored.
- Performance improvement plan is linked to education, development and training.
- Access to occupational health services.
- Risk assessments of the work environment and implementation of improvement plans.
- Evaluation of staff health and safety programme.
- Analysis and trending of incidents.
- Evaluation of arrangements for staff engagement.

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STANDARD 6.4

Service providers support their workforce in delivering high quality, safe and reliable healthcare

Essential Element (B): Support Systems for Volunteers

Services have support systems and structures for volunteers.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• Governing arrangements support clarity on roles, responsibilities and lines of accountability for volunteers. • Arrangements exist to address identified concerns at local level initially with onward reporting to professional and regulatory bodies as appropriate. • Arrangements support volunteer engagement, consultation and responding to volunteer feedback. • Policy supports volunteers in making protected disclosures. • The work environment is risk assessed in line with legislation and policies.	☐
Continuous Improvement (CI)	• Arrangements for engaging with and gathering feedback from volunteers, are reviewed, improvement plans implemented and there is reciprocal feedback on outcomes. • The findings from risk assessments inform improvement plans which are implemented. • Education and support is provided to volunteers working in areas identified as potential risk environments. • Safety incidents are analysed, trended and inform improvements.	☐
Sustained Improvement (SI)	• Methods of engagement with volunteers are evaluated and improvement plans developed.	☐
Excellence (E)	• The service reviews national and international incidents relating to volunteer welfare and incorporates learning into local improvement plans.	☐

Evidence to verify selected level of quality

Examples

- Policies, procedures, protocols and guidelines relating to roles, support, and accountability and reporting structures of volunteers.
- Protected disclosure policy and structure for staff.
- Protected disclosure policy and structure in place for volunteers.
- Education/ development and training programmes in place for volunteers.
- Effective volunteer welfare support structures are in place, regularly monitored and include feedback from volunteers and staff.
- There is a safety and risk management policy relating to volunteer service.

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Improvement Actions for Theme 6: Workforce

Standard	Essential Element	Improvement Action	Responsible Team Member	Due Date