

Safe Staffing Advisory Committee

Friday 17th October 2014

Safe Staffing for Nursing in A&E Departments

Council Chambers, 3rd Floor, Broadway House, Tothill Street, London, SW1H 9NQ

FINAL Minutes

Attendees	Safe Staffing Advisory Committee members: Standing members: Miles Scott (Chair), Sally Napper, Tanis Hand, Simon Hairsnape, Julia Scott, Annette Schreiner, Georgina Dwight, Pauline Milne, Bob Osborne, Jean Gaffin and Chris Bojke
	Topic specialist Rebecca Hoskins, Aiden Slowie, James Bird and Gerry Bennison (Lay)
	NICE Team Gillian Leng (pm only), Mark Baker, Lorraine Taylor, Anna Brett, Abitha Senthinathan, Jasdeep Hayre and Jennifer Heaton
	Apologies Elaine Inglesby-Burke, Elizabeth Rix, Philomena Corrigan, Genc Rumani, Mark Mansfield, John Appleby, Hugh McIntyre and Mike Clancy
Observers	NICE Team Jane Lynn, Chris Bird, Shaun Rowark and Ahmed Rashid
	Contractors: Gareth Harper and David Morton – Optimity Matrix– PM only

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17 October 2014

	Actions
1. Welcome and plans for the meeting	
The Chair welcomed the Safe Staffing Advisory Committee (SSAC) to the first meeting of the 'Safe Staffing for Nursing in A&E Departments' guideline topic. The Chair welcomed the topic specialists, Rebecca Hoskins, James Bird, Gerry Benison and Aiden Slowie, to their first meeting. The Chair invited members of the Committee, the NICE team and the NICE observers to introduce themselves.	
The Chair informed the Committee that apologies had been received as listed above. The Chair outlined the general housekeeping for the venue. The Chair welcomed the members of the public observing the meeting and explained the meeting arrangements in relation to public observers.	
Declarations of interest The Chair explained that verbal declarations of interest are a standing item on every agenda and that they are recorded in the minutes as a matter of public record. The Chair asked members of the Committee and NICE team participating in the meeting to verbally declare any interests specific to the topic under consideration at the meeting today. No conflicts of interest were declared.	
Objectives for the meeting The Chair gave an overview of the agenda for the meeting, along with a summary of the specific areas that will be discussed during the course of the meeting. A brief overview of the roles and responsibilities of the Committee was also provided.	
2. Policy Context	
The Chair welcomed Jonathan Benger from NHS England who gave a presentation on the current policy context of staffing in A&E departments.	
The presentation covered the current national review of urgent and emergency care, and potential future changes in relation to emergency care delivery, highlighting any aspects of relevance to emergency department nursing.	
Jonathan described the need for change due to the lack of standardisation and consistency across services, repeated and low value contact with services and demand and cost increases across the board.	
He responded to questions from the Committee and explained that there is a great need to create a consistent and effective system, close to home.	



The committee sought clarification from the NICE team as to if the guideline should consider the proposed changes to urgent care when developing the recommendations. Lorraine Taylor clarified that the Committee need to take into account the existing service models at the time of production. Gillian Leng further added that NICE regular reviews and updates it guidelines and any changes will be picked up during this process.

Jonathan Benger agreed to provide further details on the proposals to the NICE team.

ACTION: Anna Brett to contact Jonathan Benger to request further information.

NICE

Lunch

3. Current practice and staffing issues in A&E

The Chair welcomed James Bird who gave a presentation on the current practice and staffing issues in A&E departments.

James discussed the current methods of calculating nurse staffing which are mainly based on experienced best guesses based on knowledge of largely predictable attendance patterns across times of the day and days of the week. He talked about the attendance patterns which can be extrapolated on a weekly, monthly and yearly basis. He discussed the BEST staffing tool which has been developed by the Royal College of Nursing and the drawbacks of this tool.

James talked about the design of the wards and the hospital and discussed how this can have an effect on staffing numbers and nurse availability, i.e. loss of nursing time when a patient has to be moved to another ward which is far from the A&E department. He also talked about 'exit block' and how this can have a detrimental effect on the capacity of an A&E department.

James responded to points of clarification and questions from the Committee. Lorraine Taylor sought clarification on whether the figures and overview presented were representative of all hospitals with a high flow of patients and asked if the figures resonate with other hospitals in the country. James commented that exit block occurs for different reasons across the country but problems with patient flow are the same.

The Committee also discussed the skill mix of nurses and how band 6 & 7 A&E nurses have specific skills and the use of bank and agency staff on A&E wards.



4. A&E setting: Guideline scope

The Chair welcomed Anna Brett who gave a presentation on the scope of the guideline. She outlined the process of developing and finalising the scope and what the guideline will cover. Her points included:

- The scope title is 'A&E department' rather than emergency department as it is consistent with the referral wording, is still used in national guidance and is readily understood by patients
- The guideline will cover registered nurse and healthcare assistant staffing requirements, including registered nurses with specialist skills (such as registered mental health and registered children's nurses) who are members of the A&E nursing staff establishment
- The various setting the guideline will cover:
 - All nursing care provided to adults and children in all secondary care type 1 A&E departments in hospitals.
 - Includes all departments that are a consultant-led 24-hour service with full resuscitation facilities and designated accommodation for the reception of A&E patients
- The guideline will focus on the factors and processes required to determine nurse staffing requirements to ensure safe care.
- The guideline will not recommend what staffing roles are effective, cost-effective or optimal, to deliver a service. Rather the guideline will consider how local variation in service design and staffing arrangements are taken into account when determining nurse staffing requirements.

Anna provided points of clarification and answered questions from the Committee. The Committee discussed the role of the Advanced Nurse Practitioner/Emergency Nurse Practitioner and how their roles differ across the country.

5. A&E setting: Evidence

Anna Brett gave a presentation on the guideline and systematic evidence review processes.

She explained that the Committee will be provided with evidence to discuss at the next committee meeting and will need to consider whether the evidence enables recommendations to be made, and that the Committee can decide to make recommendations based on knowledge and experience. Anna also described the concepts of red flag events and indicators to the Committee and outlined how they can be included in the guideline. The group discussed red flags events in relation to taking nurses off other wards and dissipating risk by moving patients to several wards when capacity is reached.



Anna provided points of clarification and answered questions from the Committee. The Committee commented on the likely methodological limitations, associated with the data. The NICE team agreed to ensure the evidence review team take this into account as part of the data quality assessment processes.

The Chair introduced Gareth Harper and David Morton from Optimity Matrix who gave a presentation on their proposed economic analysis plan. They discussed their process and how they plan to produce the economic model.

They explained that they can use system dynamics modelling to explore the trade-offs between health outcomes, process outcomes and costs at different levels of staffing numbers and different staff mix arrangements. They told the Committee that potential sources of data will include:

- The evidence review (undertaken by University of Southampton) for clinical and process outcomes associated with staffing
- Health and Social Care Information Centre for activity/flow data in A&F
- NHS workforce statistics for nursing numbers in A&E
- UK Nursing Database
- National Patient Safety Agency
- NHS Employers
- Royal College of Nursing

Garth and David provided points of clarification and answered questions from the Committee. The Committee asked if factors such as skill mix, education, experience, temporary/permanent staffing would be explored. Garth explained that they will be looking at a range of factors and added that only NHS workforce data is available which has its limitations. The Committee discussed the link between health and social care and how they can be measured in terms of outcomes.

ACTIONS:

 NICE team to clarify information needs for economic model and whether feasible to use a social care perspective for the analysis with Optimity Matrix

NICE

 NICE team to discuss methodological limitations of the data with Southampton team.

NICE

6. Next Steps

Lorraine Taylor gave a presentation on the next steps in the guideline development process and outlined actions around the following dates:



- 13th November meeting
 - Considering x 1 evidence review
 - Drafting recommendation & guideline content
- 4th December meeting
 - Considering economic analysis & modelling report
 - Reviewing & preparing draft guideline prior to consultation
- 16th to 21st December opportunity to review and comment on the draft quideline
- Guideline consultation 13th January to 9th February 2015

Lorraine also explained the toolkit endorsement process and the various outputs produced to support the implementation of the guideline. She requested volunteers from the Committee to assist with various implementation products.

ACTION: NICE team to send an expression of interest email for volunteers to assist with NICE products.

NICE

Jane Lynn gave a presentation on the process for developing a Resource Impact Commentary to support the implementation of the safe staffing guidelines. She explained the differences between the economic analysis and resource impact commentary.

The committee sought clarification on whether cost to both health and social care were factored in to the resource impact commentary.

Chris Bird gave a presentation on NICE Shared Learning Examples. He explained what shared learning examples are and how they can be used to support the implementation of the guideline. He also explained the process and criteria for submitting a shared learning example. He talked about the Shared Learning Award.

ACTION: NICE team to circulate information relating to the shared learning examples programme to the Committee

NICE

7. Summary of the day and AOB

The Chair summarised the day's meeting, reminded the group of the date and time of the next meeting and thanked the Committee for their contribution.

The meeting closed at 16:00

Date and time of next meeting



The next SSAC meeting will be on **13 November 2014** - Council Chambers, 3rd Floor, Broadway House, Tothill Street, London, SW1H 9NQ