



## **Delivering Care E-update**

**Issue 1**

**May/June 2018**

### **Message from the Chair**

Welcome to the first issue of the Delivering Care e-update. The purpose of this e-update to keep everyone informed of the progress and developments of each phase. The first issue gives an introduction to the project and an overview of each phase and the key achievements so far.

I would like to this opportunity to thank everyone involved across health and social care for their work to date.

Regards,

Mary Hinds,

Director of Nursing, Public Health Agency

## **What is Delivering Care?**

'Delivering Care' is a policy framework, commissioned by the Chief Nursing Officer, Department of Health as the policy lead in Northern Ireland. The aim of the policy framework is to support the provision of high quality care which is safe and effective in hospital and community settings through the development of a series of phases to determine staff ranges for the Nursing and Midwifery workforce in a range of major specialities.

Work was initiated in 2012, with Phase 1 launched in 2014. Currently, there are 7 Phases underway.

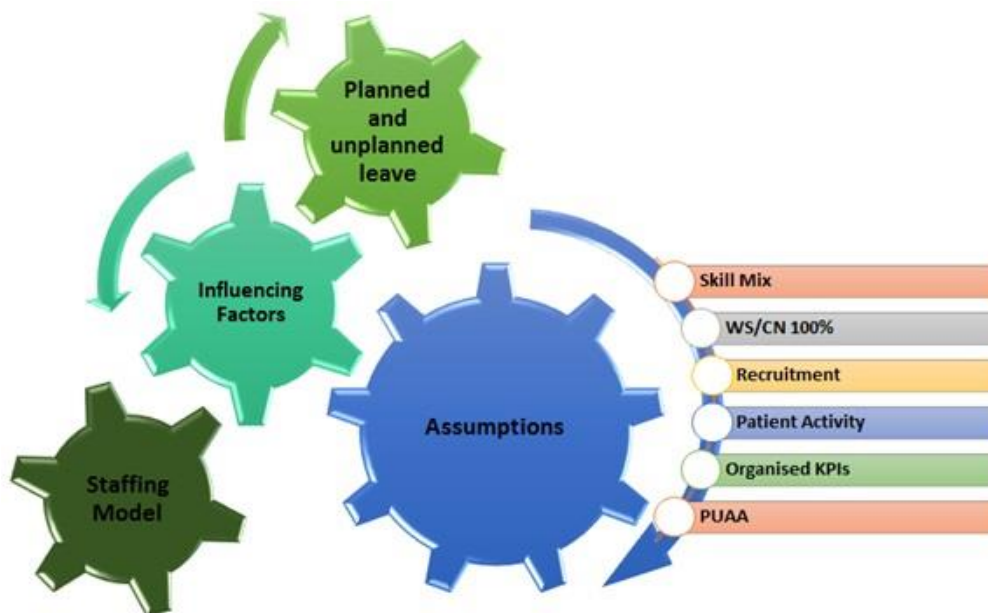
Delivering Care is a collaborative regional project led by the Public Health Agency which engages a range of stakeholders in developing, proposing, testing, implementing and monitoring nurse and midwifery staffing levels in Northern Ireland.



## How do we do it?



## What are the Key Components?



## What have we done so far?

### Progress Update

<u>Workforce Phase</u>	<u>Staffing Model</u>	<u>Status</u>
Phase 1: Acute Medical & Surgical Wards	Staffing range	Funding for this phase has been secured and is in the process of phased implementation across designated wards in all HSCTs
Phase 1A: Elective Care Treatment Care Environments	Recommended range for 24/7 wards including day and short stay wards	Guidelines currently being scoped in HSC Trusts 2018
Phase 2: Type 1 Emergency Departments	Nurse to annual attendance ratio	Recommendations endorsed by CNO. 1st phase of implementation due in 2018.
Phase 3: District Nursing	Population based model	1st phase of implementation due in 2018 dependent on resources
Phase 4: Health Visiting	Population based model – Caseload weighting	1st phase of implementation due in 2018.
Phase 5: Mental Health	Acute – Nurse/Bed Ratio Community – Caseload and population based model	Phase 5A completed for acute inpatient mental health facilities. A number of workshops have been facilitated by the PHA and the expert reference group. The proposed recommendations around the staffing ranges for the category of inpatient environments have been shared for endorsement with the CNO.  Phase 5b community staffing model to be progressed mid-2018
Phase 6: Neonatal Nursing	Based on level of activity	Final proposals underway

Phase 7: Primary Care Nursing	Population based model from the GPN Framework 2016	Finalised and with the CNO for endorsement 2018
Phase 8	Independent Sector Nursing Homes	Due to be initiated in June 2018.

## **What have we achieved?**

The approach is based on best evidence and promotes a quadruple aim methodology with a focus on a population based workforce model. The 'Triple Aim' was developed in 2008 to guide the redesign of healthcare systems with an emphasis on population health, patient experience of care and reducing costs. In recognising that the backbone of any effective healthcare system is an engaged and productive workforce, a 4th aim was added - improving the quality and experience of providing care.

This 4th aim holds particular importance within the delivering care process. Nurses are often central to the teams of health and social care professionals charged with delivering health and service improvements. Effective workforce planning is vital, not only in ensuring the availability of sufficient numbers of skilled staff within primary care but also in providing structures and support so that each member of the nursing workforce can realise the sense of accomplishment and success that results from meaningful work.

### Whole System Focus

- HSC corporate priority
- Partnerships & engagement
- Regional Consistency
- Public Health population approach
- Person centred approach



### Collective Leadership

- Influencing training and supply requirements
- Success of grant awards 'Burdett' for retention and recruitment
- Prioritising resources allocation
- Robust governance
- Commissioning priorities
- Regional initiative across HSCTs

### Quality Improvement

- Leading and measuring improvement
- Improvement, knowledge and skills on workforce planning
- Working in systems
- Using co-production methods
- Nurturing change

For further information on Delivering Care, please contact Siobhan McIntyre, Assistant Director of Nursing, Public Health  
Agency: [siobhan.mcintyre@hscni.net](mailto:siobhan.mcintyre@hscni.net)

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