

Discussion Document to Support Further Engagement on Safe Staffing in Health and Social Care

Analysis of Responses

May 2018

Discussion document to support further engagement on safe staffing in health and social care – Analysis of responses

Introduction

This document is intended to provide an overview of the responses to the latest consultation exercises on proposed legislation on safe and effective staffing, presenting the quantitative data and highlighting the themes that emerged from the qualitative responses.

The consultation was held over a four week period, closing on 20 February 2018. Alongside the consultation, three regional events were held in Glasgow, Edinburgh and Aberdeen.

Background

The 'Safe Staffing' Bill will deliver on the Scottish Government's commitment to enshrine in law the principles of safe staffing in the NHS, starting with the nursing and midwifery workforce planning tools. A Nation With Ambition: The Government's Programme for Scotland 2017-18¹ indicated that the Bill would ensure that nationally agreed, evidence-based workload and workforce planning tools are applied in nursing and midwifery settings, and ensure that key principles relating to professional judgement, local context and quality measures underpin workload and workforce planning.

The Scottish Government ran an initial consultation on 'Safe and Effective Staffing in Health and Social Care' on 11 April 2017² along with a number of consultation events held across Scotland. An independent analysis of this initial consultation was published on 11 December 2017³ along with the responses themselves⁴ (where permission had been granted). In brief, over 80% of the respondents agreed that:

- A statutory requirement to apply evidence based workload and workforce planning methodology and tools will help support consistent application;
- The requirements should apply to organisations providing health and/or social care services;
- Consideration should be given to extending the requirements to apply a similar approach to other settings and/or staff groups in the future.

Responses to the initial consultation highlighted that a focus on achieving better outcomes for service users should be at the heart of the legislation; that workload and workforce planning tools are only one of the components required to achieve

¹ A Nation with Ambition: The Government's Programme for Scotland 2017-18 (<http://www.gov.scot/Resource/0052/00524214.pdf>)

² Health and Social Care: safe and effective staffing consultation (<https://beta.gov.scot/publications/safe-effective-staffing-health-social-care/>)

³ Consultation on proposed safe staffing laws for nursing and midwifery: independent analysis of responses (<https://beta.gov.scot/publications/safe-effective-staffing-health-social-care-consultation-proposals-enshrine-safe/>)

⁴ Safe and Effective Staffing in Health and Social Care: Published Responses (https://consult.gov.scot/nursing-and-midwifery/safe-and-effective-staffing-in-health-care-setting/consultation/published_select_respondent)

high quality care and improved outcomes; and suggested setting out further guiding principles on safe and effective staffing in the Bill.

There was a divergence in responses over whether legislation should span social care, given existing statutory frameworks for these settings. In particular, some Health and Social Care Partnerships (3 of the 5 who responded to the consultation) and some public bodies did not support the inclusion of social care.

Respondents emphasised the importance of ensuring that legislation reflects the context of health and social care integration, while also highlighting the specific context, requirements and current assurance framework in social care.

Respondents also identified the risk of resources being drawn from one service to another if a whole-systems approach is not taken; while the need to extend beyond nursing and midwifery to the wider multi-disciplinary or multi-agency team was a frequently raised theme. These views and comments informed the continued development of the policy underpinning the Bill, and the refreshed legislative proposals were set out in a discussion document published on 22 January 2018⁵.

This further consultation exercise was held over a four week period, closing on 20 February 2018, along with 3 consultation events held in Edinburgh, Glasgow and Aberdeen. We recognised that some stakeholders may not have been aware of the proposal to include social care in the Bill and therefore did not engage with the initial consultation on the legislation. This second consultation was designed to encourage the involvement of stakeholders from across health and social care in the development of this legislation to ensure it delivers the intended aims.

Responses to the second consultation were published (where permission had been granted) on the Scottish Government Consultation Hub⁶ website on 23 March 2018.

Overview of Consultation

Views and comments were invited from a range of stakeholders, answering as individuals or representing an organisation.

The consultation sought opinions from stakeholders on refreshed proposals on planned legislation on safe and effective staffing, building on the responses to the initial consultation covered above.

The overarching intention is for the legislation to be a further enabler of high quality care and improved outcomes for individuals. Given the importance of ensuring the right people, in the right place at the right time to deliver sustainable and high quality services with improved outcomes for service users, irrespective of setting, and of enabling integrated workforce planning, the intention is that the legislation will – in an

⁵ Discussion document to support further engagement on Safe and Effective Staffing in Health and Social Care (https://consult.gov.scot/nursing-and-midwifery/discussion-document-to-support-further-engagement/user_uploads/sct01187660801.pdf)

⁶ Discussion document to support further engagement on Safe and Effective Staffing in Health and Social Care: Published Responses (https://consult.gov.scot/nursing-and-midwifery/discussion-document-to-support-further-engagement/consultation/published_select_respondent)

appropriate and proportionate way - span the health and social care landscape. However, in taking this broader approach, the legislation will not be restrictive or prescriptive but rather will seek to be appropriate and enabling for the social care sector, and in particular support the recommendations in the co-produced Part 2 of the National Health and Social Care Workforce Plan.

Respondents were asked to consider the importance of a coherent legislative framework covering health and social care, monitoring of requirements, whether there should be guiding principles (and what these should cover), opinions on requirements for Health Boards, how future tools and methodologies should be developed and the support required, the inclusion of social work, and any potential risks that should be taken into account.

The questions posed were broken down into the following sections in the discussion document:

Sections 1-2 invited views on refreshed proposals that cover health and social care sectors and aim to create a cohesive legislative framework for workforce planning across health and social care.

Section 3 invited views on proposed requirements applicable to health boards.

Sections 4-6 invited views on proposals on how the legislation could apply to the social care sector.

Section 7 invited views on any risks or unintended consequences of the proposals.

Consultation Responses

In total, 73 written responses were received from 31 organisations and 42 individuals. The consultation posed a range of questions on the proposed legislation and what form it may ultimately take.

The organisations that responded fall into the following categories:

- Health & Social Care Partnership – 3
- Independent or Third sector health or social care organisation or committee – 6
- NHS based professional group or committee – 1
- NHS Body or Board – 8
- Other public body – 5
- Professional body, group or union – 8

The headline responses to the quantitative questions are:

- 88% of individuals and 85% of organisations believed it is important to have a coherent legislative framework across health and social care to underpin workforce planning and appropriate staffing in health and social care.
- 95% of individuals and 93% of organisations agree with the proposal that there should be guiding principles for workforce planning to provide NHS

Boards and care service providers with a foundation on which to base their staffing considerations.

- 83% of individuals and 67% of organisations agree with the proposed requirements for Health Boards. 15% of individuals and 29% of organisations neither agree or disagree.
- 78% of individuals and 71% of organisations agree with the proposed role for the Care Inspectorate in leading work, with the social care sector, to develop workforce planning tools for application in specified settings, where there is an identified need. 20% of individuals and 13% of organisations neither agree or disagree. 17% of organisations disagree with the proposal.
- 83% of individuals and 54% of organisations agree that social work should be included within the scope of the legislation. 12% of individuals and 27% of organisations neither agree or disagree while 5% of individuals and 19% of organisations disagree.

*All figures are presented as percentage of responses received to that question

Presented below is a summary of the responses received to each question. Quantitative data has been included where possible, with a summary of the high level themes from the free text responses.

Please note that a single answer may have covered more than one theme, therefore the total responses may be less than the total number of times a theme appeared.

Although a total of 73 responses were received not every question was answered by every respondent, therefore each question will highlight how many responses were received.

Section 1 – A workload and workforce planning duty applicable to Health Boards and care service providers.

In order to create a coherent overall legislative framework for workforce planning across the health and social care sector, the discussion document set out the intention that the legislation will place a duty on Health Boards and care service providers to consider the need for the provision of appropriate numbers of suitably qualified staff, similar to and learning from the current requirement for care service providers set out in Regulation 15 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

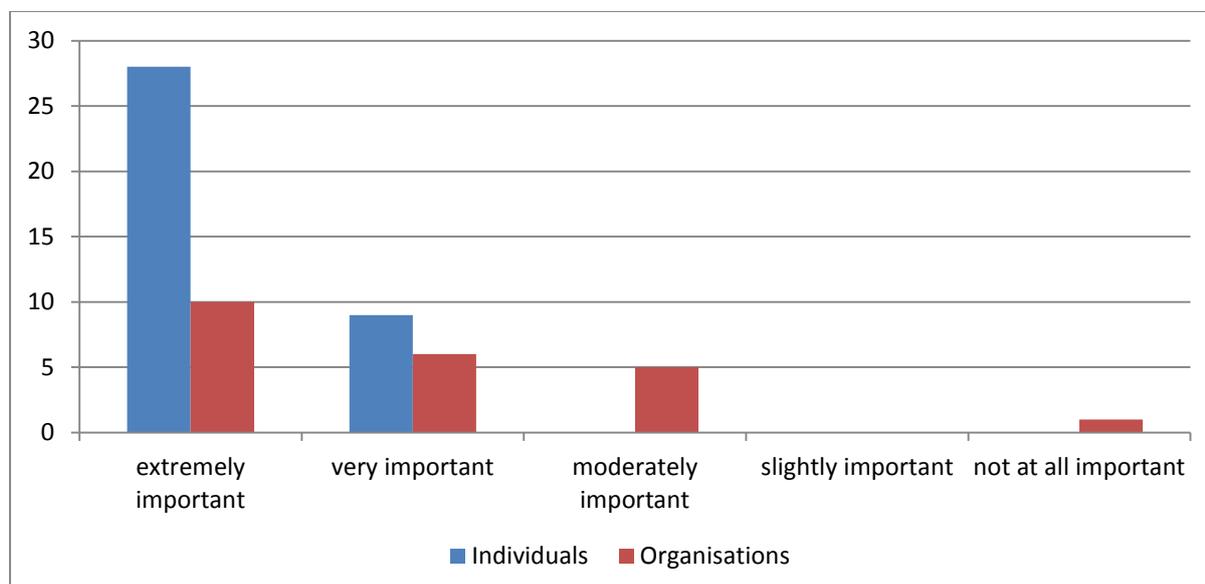
For care service providers, this duty would maintain but replace the existing requirement placed on care service providers through regulation 15. Other requirements under those regulations would be unaffected. However, individuals who do not employ staff would be excluded.

For Health Boards this duty would be required as part of their existing duty to put and keep in place arrangements for the purposes of workforce planning in section 12I(c) 6 of the National Health Service (Scotland) Act 1978. While it might replace section 12I(c), it would be an expansion of that existing duty.

Question 1a – Do you think it is important to have a coherent legislative framework across health and social care to underpin workforce planning and appropriate staffing in health and social care?

	Yes (%)	No (%)	Total Number
Individuals	88%	12%	42
Organisations	85%	15%	26

If you answered yes, how important?



Question 1b – How should organisations’ progress in meeting requirements be monitored and facilitated, taking account of what currently works well?

A total of 66 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Organisations should use/extend the reporting mechanisms that are currently in place	27	41%
Organisations should submit regular updates on their progress in meeting requirements	15	23%
Staff feedback should be taken into account when monitoring progress	9	14%

Other themes that emerged from responses included the importance of sector collaboration and data sharing, the need for reporting templates and national risk assessment, and independent monitoring/scrutiny of compliance.

There were two responses received (both from organisations) that stated additional legislation was unnecessary. One questioned the need for legislation in the social care sector as the respondent believed that a coherent legislative framework already existed. The second respondent felt that Scottish Government issued guidance would be more appropriate and less restrictive compared to additional legislation.

Question 1c – Please provide any other comments you may have

A total of 48 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
The importance of a framework that is appropriate for both health and social care and recognises the integrated landscape	13	27%
Acknowledgement of current recruitment and retention challenges	13	27%
The need for flexibility in development, use and review of tools	9	19%

Other themes that emerged from responses included staff pressures, the need for a focus on outcomes and the impact on the social care sector (such as further stretching of budgets and the challenges in developing tools for the sector).

There were 6 responses received that highlighted that the existing regulations within social care were sufficient and there was no requirement for an additional legislative framework to be developed. Of these responses, 4 were from social care organisations with 1 each from an individual and a Health and Social Care Partnership.

Section 2 – Overarching principles applicable to health and social care service providers.

The discussion document set out that the overarching principles will apply to Health Boards and care service providers (those care services required to register with the Care Inspectorate excluding individuals who do not employ any staff) who will be required to take them into account in carrying out their general workload and workforce planning activities. The general workforce planning activities and overarching principles will apply to all staff groups delivering health and care services, from commencement of the Act which results from the Bill.

Initial proposals are that the principles will set out the factors to be considered when carrying out workforce planning, notably that workforce planning must ensure:

- high quality services
- effective and efficient use of resources
- services that meet service user need
- services that respect the dignity and rights of service users.

Question 2a: What is your view of the proposal that there should be guiding principles for workforce planning to provide NHS Boards and care service providers with a foundation on which to base their staffing considerations?

	Agree %	Neither agree or disagree %	Disagree %	No. of Responses
Individuals	95%	2%	2%	41
Organisations	93%	0%	7%	28

Question 2b: Do you have a view on whether/how application of these principles should be monitored?

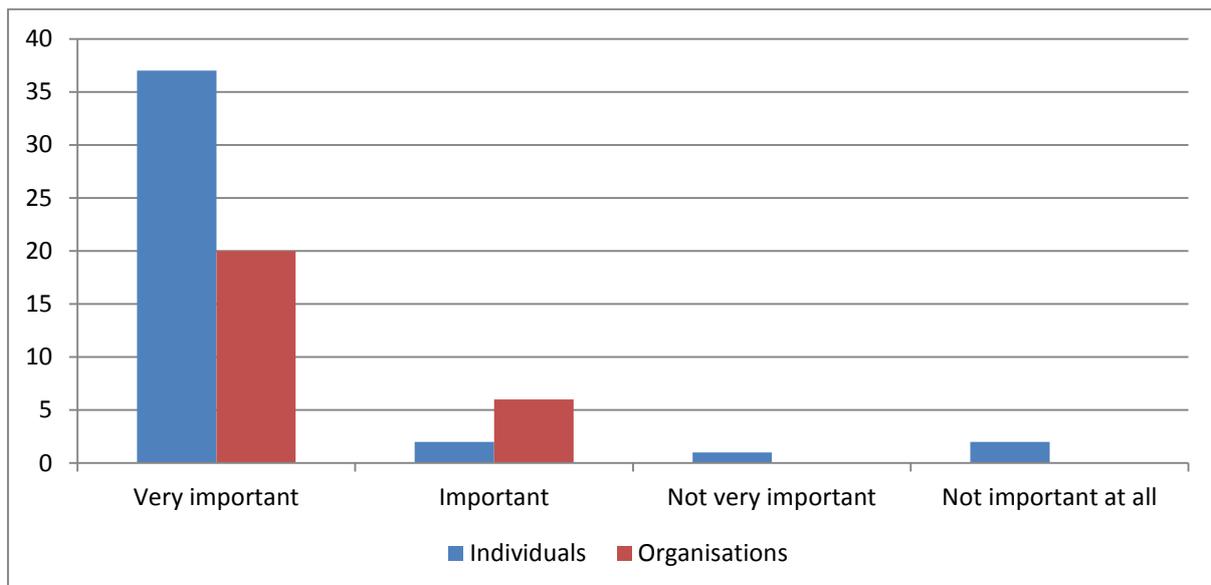
A total of 60 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Organisations should use/extend the reporting mechanisms that are currently in place	20	33%
Monitoring should include whether the principles lead to better outcomes for service users	8	13%
Organisations should provide regular reports on how the principles are being adhered to	7	12%

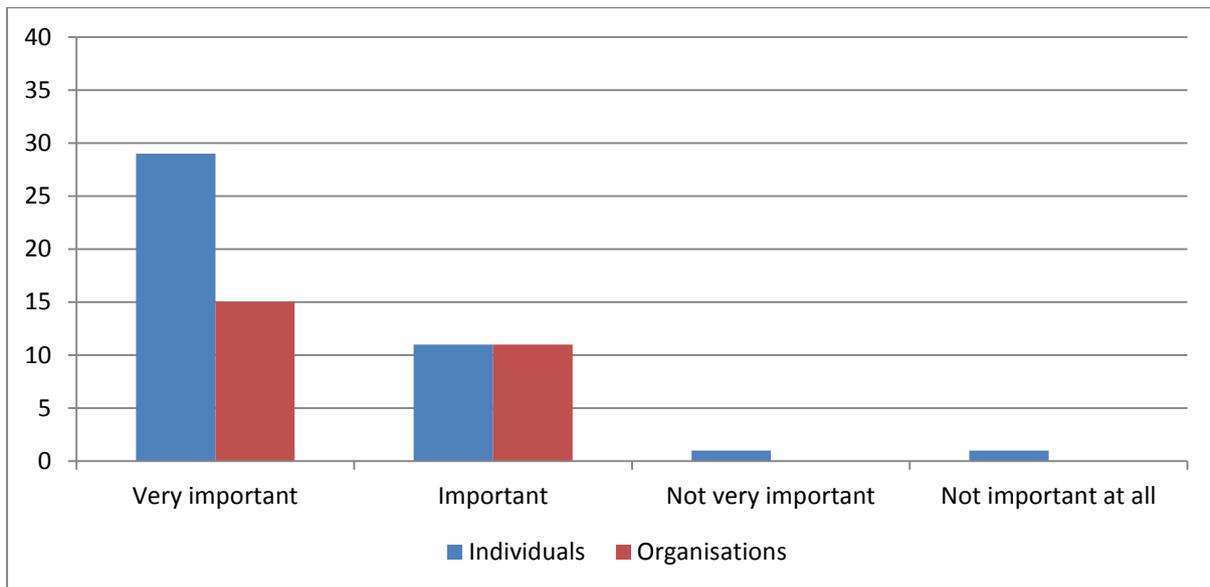
Other themes that emerged from responses included the need for risk management and escalation, self-regulation by social care employers and organisations, and implementing independent monitoring and audit of organisations adherence.

Question 2c: Please rate the following examples of potential principles:

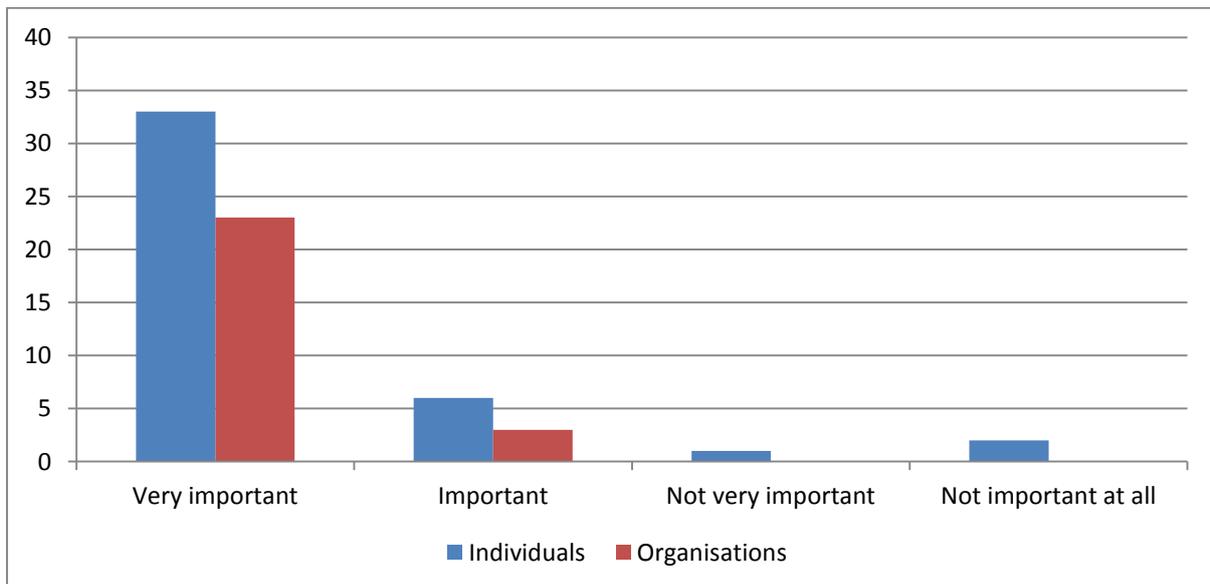
i. Workforce planning must ensure an appropriate number and mix of staff to provide high quality services.



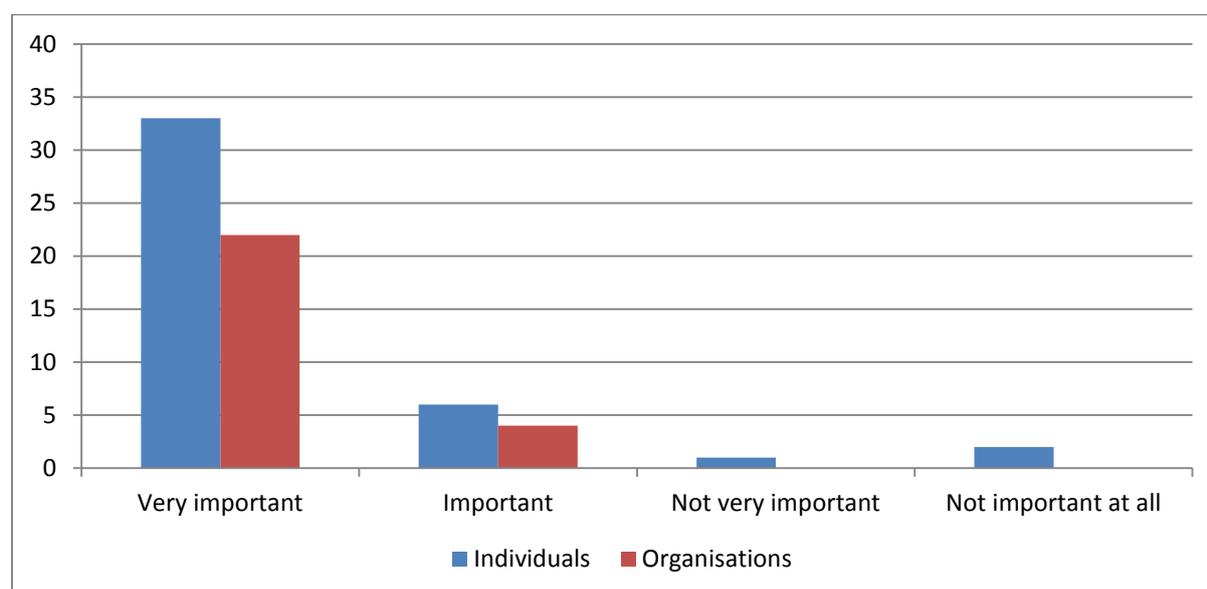
ii. Workforce planning must ensure an appropriate number and mix of staff to provide effective and efficient use of resources.



iii. Workforce planning must ensure an appropriate number and mix of staff to provide services that meet service user needs



iv. Workforce planning must ensure an appropriate number and mix of staff to provide services that respect the dignity and rights of service users.



Question 2d: Are there other principles you think should be included?

A total of 55 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Ensuring staff are properly supported and their wellbeing is taken into account	20	36%
Focus on the needs of service users	9	16%
Recognition that flexibility is needed to respond to unplanned demands and situations	6	11%

Other themes that emerged from responses included awareness of current recruitment and retention challenges, awareness of wider workforce planning, and the importance of staff skill mix.

Section 3 – Requirements applicable to Health Boards.

The discussion document set out the intention for the legislation to include more specific requirements where a validated workload planning tool and methodology exists – in the first instance this will only be applicable to nursing and midwifery services and to medical services in emergency medicine settings.

For settings where a validated workload and workforce planning tool exists, Health

Boards and, as appropriate, Integration Authorities, will have to evidence that they have followed a common methodology prior to making decisions about staffing requirements, including:

- Application of specialty specific and professional judgement tools
- Consideration of nationally agreed quality measures
- Consideration of local context
- Consideration of staff and service user views
- Consideration of the need to redesign services

Question 3a: What is your view on the proposed requirements for Health Boards?

	Agree %	Neither agree or disagree %	Disagree %	No. of Responses
Individuals	83	15	3	40
Organisations	67	29	4	24

Question 3b: Are there any other requirements you think should be included?

A total of 39 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Inclusion of staff groups out with Nurses and Midwives (Multi-Disciplinary Teams)	12	31%
The need to actively identify and manage risk	5	13%
Tools and services should be flexible and adaptable to respond to unplanned demand	5	13%

Other themes that emerged from responses included the importance of ensuring clear accountability and governance (such as the role of the Executive Nurse Director or equivalent), the need for a focus on positive outcomes for service users, and the need to take account of current recruitment and retention challenges.

Question 3c: Please provide any other comments on the proposed requirements set out in section 3.

A total of 33 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Staff groups out with Nurses and Midwives should be included	11	33%
The importance of clearly defined accountability and governance structures	8	24%
The importance of supporting, training and developing staff	6	18%

Other themes that emerged from responses included awareness of funding and resource challenges, the need for flexibility and adaptability of tools and service models, the need for a focus on positive outcomes, and clear communication and transparency of decisions made about staffing following the application of tools.

Section 4 – Development of validated tools and methodologies for the social care sector.

The discussion document set out the intention for the legislation to be appropriate, proportionate and enabling for the social care sector and to be supportive of the recommendations in Part 2 of the National Health and Social Care Workforce Plan (published December 2017). It does not seek to prescribe an approach to workforce planning, but rather to enable the development of suitable approaches for different settings in the future.

The proposal is that the legislation will build on existing legislative functions by providing:

- A function for the Care Inspectorate to work with the social care sector to develop and validate workload and workforce planning tools for use in specified settings, as agreed with and produced with the sector.
- A regulation-making power for Scottish Ministers so that they can subsequently confirm the use of any validated tools or methodologies developed by the Care Inspectorate for specified settings within the sector, following appropriate consultation with the sector.
- The ability for Scottish Ministers or the Care Inspectorate to issue guidance to care service providers setting out further detail around the duties contained within the Bill, as well as setting out requirements around reporting and compliance.

Question 4a: Do you agree with the proposed role for the Care Inspectorate in leading work, with the social care sector, to develop workforce planning tools for application in specified settings, where there is an identified need?

	Agree %	Neither agree or disagree %	Disagree %	No. of Responses
Individuals	78%	20%	2%	41
Organisations	71%	13%	17%	24

If you answered Disagree/Strongly disagree, who else do you think should lead this work?

Although there were 24 responses to the above question, the majority of responses did not indicate who they thought should lead on this work if not the Care Inspectorate.

Of the responses that did provide an alternative, 5 believed this should be led by the sector (21%). Other responses included a national working group, NHS and partner organisations, and collaboration with appropriate professional bodies.

Two responses highlighted a perceived potential conflict of interest with the Care Inspectorate leading on the development of workforce planning tools and then inspecting/regulating the users of those same tools.

Question 4b: Do you think that social work should be included within the scope of this legislation (while there is currently no proposal to include social work, this could be considered for inclusion at a later stage).

	Agree %	Neither agree or disagree %	Disagree %	No. of Responses
Individuals	83	12	5	41
Organisations	54	27	19	26

Question 4c: Please provide any other comments on the inclusion of social work within the scope of the legislation.

A total of 37 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Social Work plays a critical role within Social Care and should be included as with any other staff group to better support an integrated approach to health care	12	32%
The risk of resources being diverted to legislated staff groups at the expense of non-legislated staff groups.	5	14%
The importance of recognising multi-disciplinary teams and other staff groups working within them	4	11%

Other themes that emerged from responses included the importance of recognising multi-disciplinary teams, definition of where accountability and governance will lie, and recognition of funding and resources challenges.

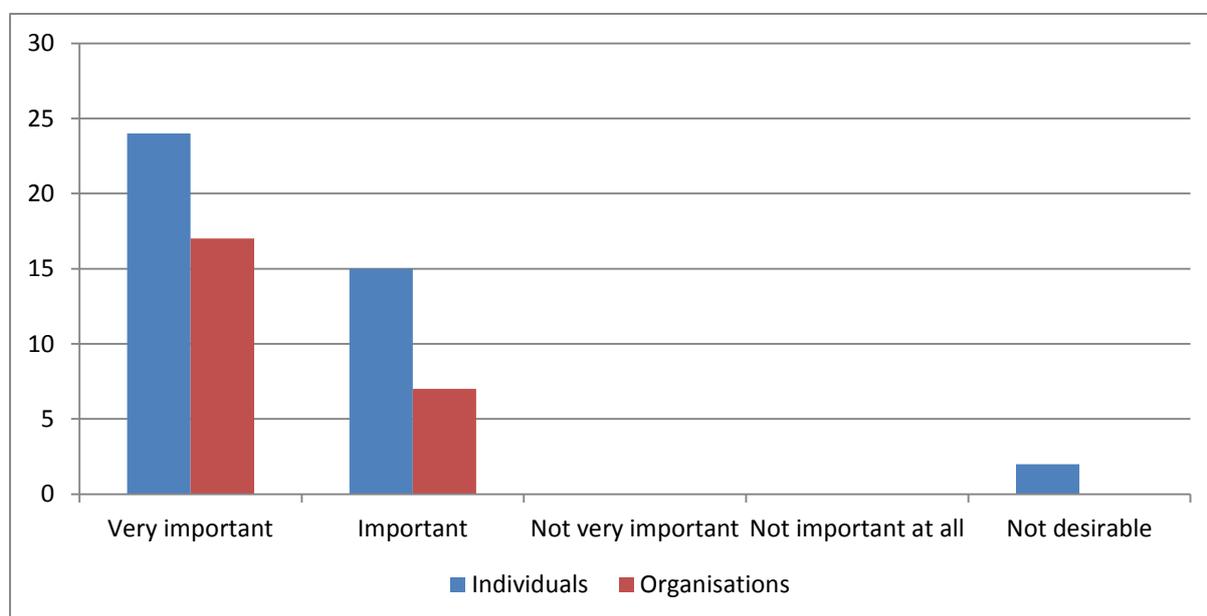
Section 5 – Role of the sector in identification of the social care settings for which there may be a need for development and application of validated tools and methodologies and for inclusion within legislation.

In Health Boards, the Nursing and Midwifery Workload and Workforce Planning Programme has taken an evidence based approach to workload and workforce planning. The ground-breaking approach, tools and methodologies have been developed over a number of years with investment of considerable time and resource. It was recognised within the discussion document that similar effort and investment will be needed for the development of approaches suitable for specific social care settings.

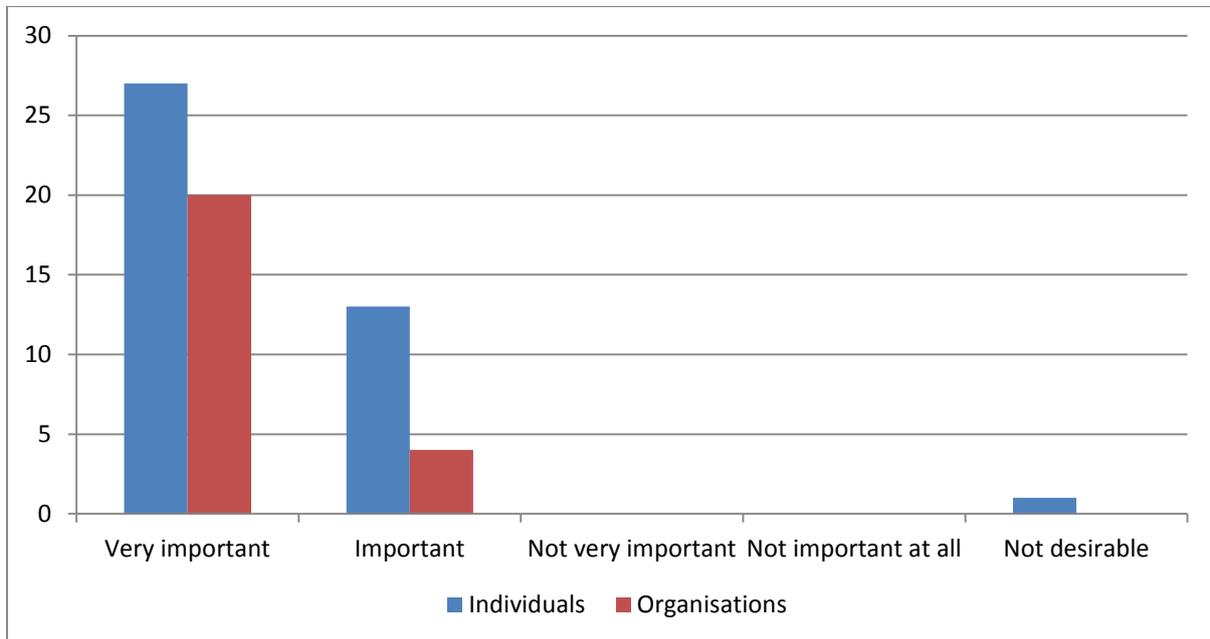
It will be important that, as for the Nursing and Midwifery Workload and Workforce Planning Programme, the sector itself is fully engaged in development and validation of tools and methodologies that are appropriate for specified settings. It will also be important that the sector supports any future use of legislation through regulations to require use of newly developed tools.

Question 5a: How important do you consider the suggestions below are in providing possible routes for the social care sector to be fully engaged in the development and validation of approaches appropriate for a specified setting?

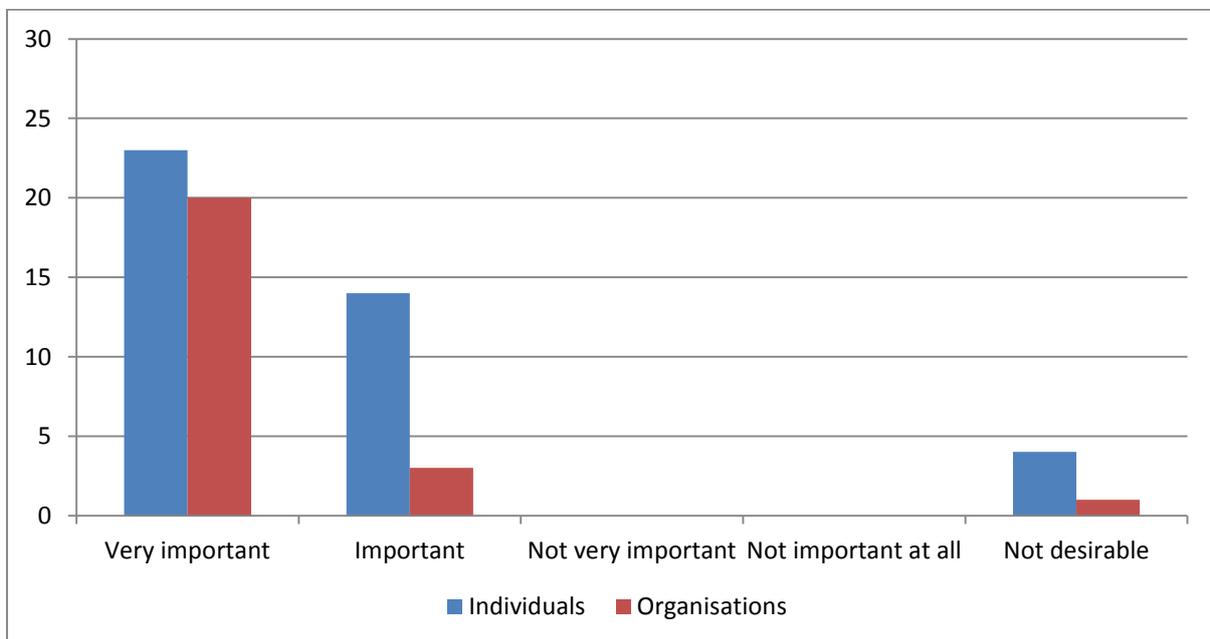
i. To work with employers/service providers and commissioners from the sector to identify and agree specified settings where there is a need for the development of workforce planning tools and methodologies.



ii. To work with service providers and commissioners from the appropriate parts of the sector to develop and validate workforce planning tools and methodologies to demonstrate that they are practicable and beneficial for specific settings.



iii. To consult with the sector before a requirement to use validated workforce planning tools and methodologies is confirmed in regulations.



Question 5a of the consultation asked respondents to rate the above statements as Very Important, Important, Not Very Important, Not Important At All or Not Desirable.

In all 3 suggestions posed above, over 90% of respondents, from both organisations and individuals, rated the suggestions as Very Important or Important.

Question 5b: Are there any other routes you think should be considered to ensure appropriate engagement with the social care sector?

A total of 32 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Engagement with staff groups	11	34%
Engagement with service users	8	25%
Engagement with trade unions	4	13%

Other themes that emerged from responses included engagement with professional bodies, consideration of service user demography, engagement with sector regulators, and awareness of the lessons learned from the health sector when creating tools for new areas.

Question 5c: Please identify any settings where you think the development of appropriate workload and workforce planning tool or methodology is most important; and any care settings where you think this is not relevant or required.

A total of 42 responses were received to this question.

There was no clear consensus on settings where development of tools would be most important. Whilst a number of respondents indicated that all care settings should be covered (7 respondents, 17%) a large range of possible settings were also identified within social care. These included care homes and nursing homes, mainstream social work teams, elderly day hospitals, residential child care and residential homes.

There were several responses that highlighted health care settings such as perioperative care, elderly care, maternity services, mental health services and trauma services. However each of these settings already have a tool or methodology in place for workforce and workload planning.

One response (from an organisation) highlighted that there may be a challenge in respect of Self Directed Support and how this may be impacted by the legislation. However the proposed legislation, as outlined in the discussion document, would apply to registered care service providers only and therefore not impact individuals using Self Directed Support budgets to directly employ Personal Assistants.

One respondent (an individual) mentioned a care setting where they believed a workload and workforce planning tool or methodology was not relevant or required, which was Hospital at Home. However they qualified this by stating this was due to it being too small at this time but may be relevant in the future.

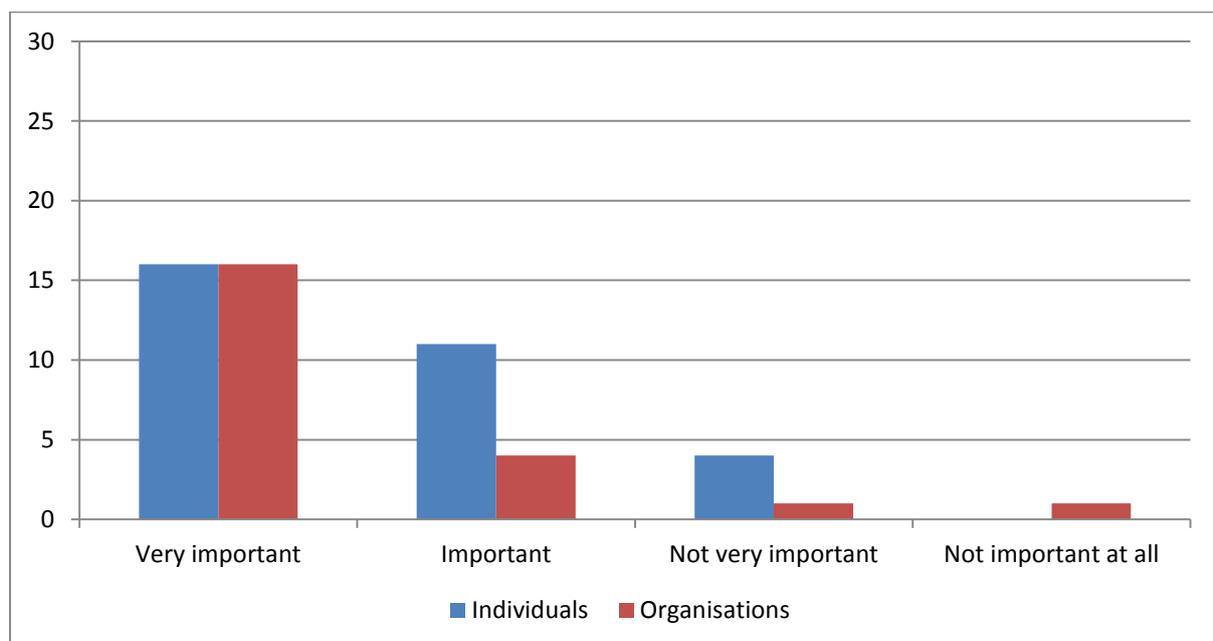
Section 6 – Support for the development of validated tools and methodologies for the social care sector.

The Nursing and Midwifery Workload and Workforce Planning tools and methodologies that will be specifically included in the legislation have been developed over a number of years with investment of considerable time and resource.

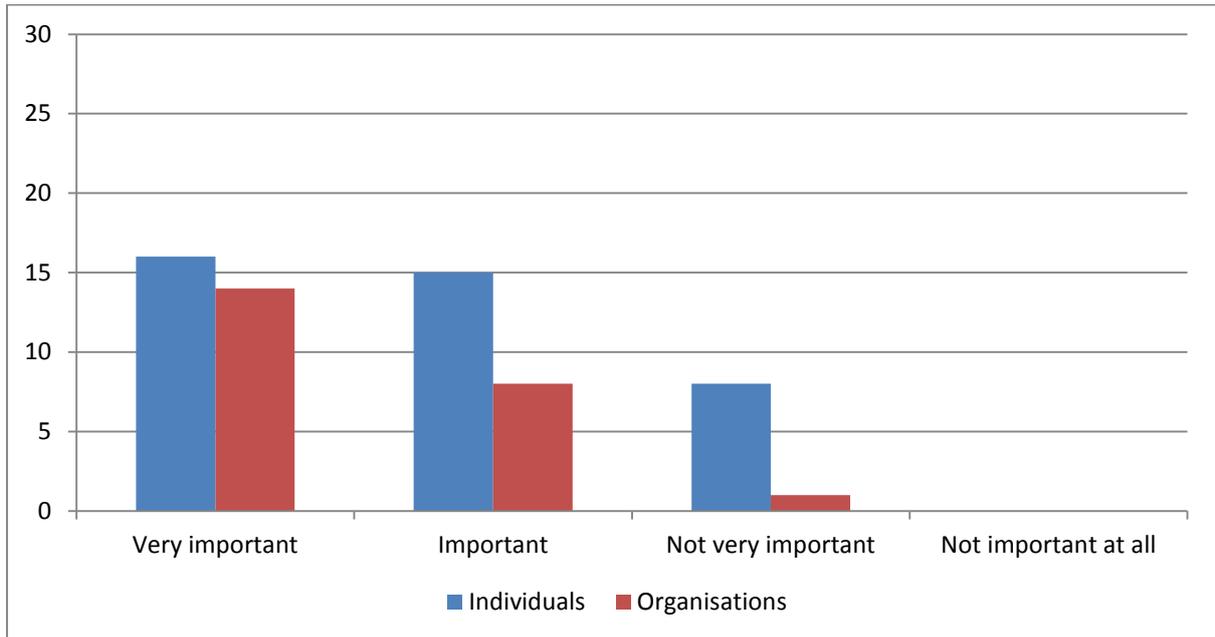
The development of similar approaches for the social care sector will require support for both the Care Inspectorate and the service providers who engage with them in the development and validation of tools and methodologies.

Question 6: What support do you think will be required / most useful to enable the development of validated tools and methodologies for the social care sector?

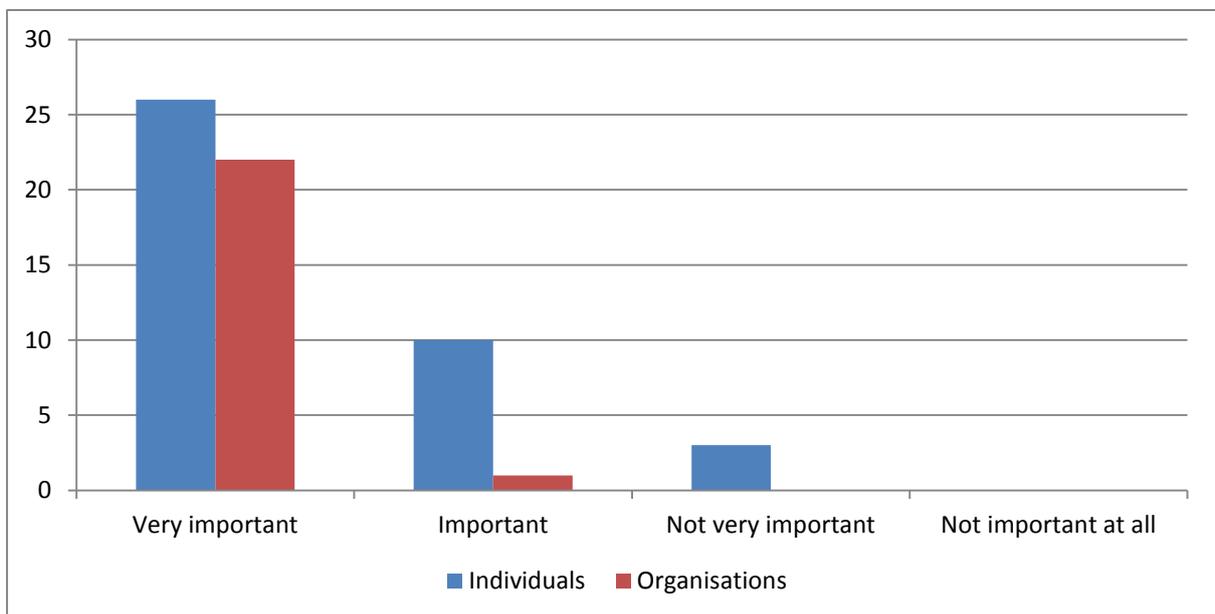
i. Dedicated central expertise for the identification of specified settings where the development of workload and workforce planning tools and methodologies would be practicable and beneficial.



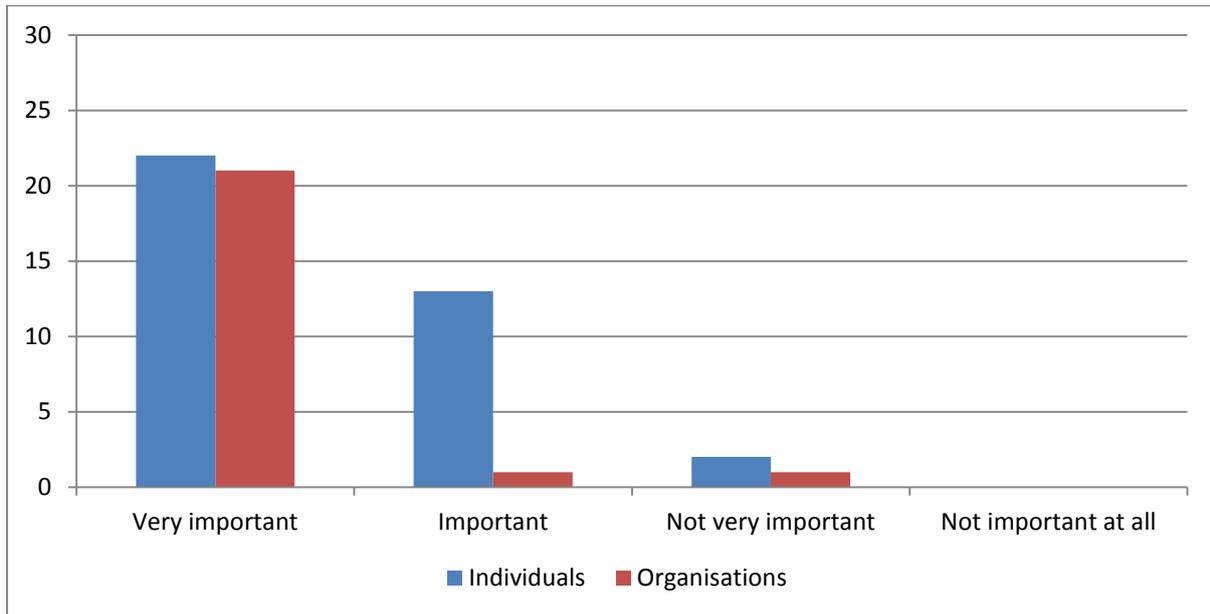
ii. Additional resource for the Care Inspectorate to enable the proposed functions.



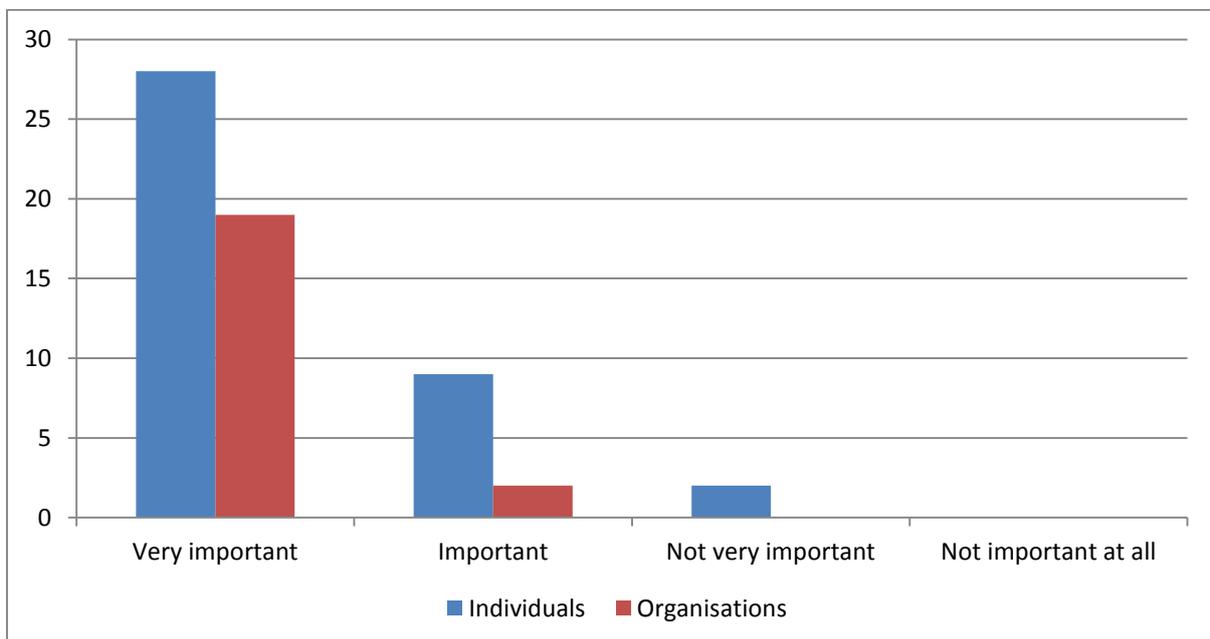
iii. Training for key personnel in the sector in the development of workforce planning approaches.



iv. Dedicated resource for service providers who engage in the development and validation of approaches, tools and methodologies.



v. Training for key personnel in specified services once validated tools and methodologies are confirmed through regulations.



Question 6 of the consultation asked respondents to rate the above statements as Very Important, Important, Not Very Important or Not Important At All.

There was some divergence in this question between individuals and organisations. For organisations over 90% of respondents rated each suggestion as Very Important or Important.

However 13% of individuals rated the first option as 'not very important' and 21% rated the second option as 'not very important'.

The remaining 3 options had over 90% of individuals rating them as either Very Important or Important.

vi. Other - please specify.

In addition to the support set out above, respondents were asked to provide any other areas of support that they felt should be considered. A total of 27 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Staff support & training in the use of tools/methodologies	7	26%
Additional funding and resources	7	26%
Development and maintenance of IT infrastructure and systems	7	26%

Other themes that emerged from responses included staff and trade union participation and reflecting on the lessons learned from the health sector.

Section 7 – Risks and unintended consequences.

Question 7a: What risks or unintended consequences might arise as a result of the proposed legislation and potential requirements?

A total of 62 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Strain on resources and budgets	18	29%
Funding diverted to legislated staff groups at the expense of non-legislated staff groups	12	19%
Additional red tape and bureaucracy	11	18%

Other themes that emerged from responses included stifling innovation and creativity through rigid tools, lack of staff knowledge and training, not taking staff skill mix into account, unclear accountability and governance, and a focus on processes over outcomes.

Question 7b: What steps could be taken to deal with these consequences?

A total of 58 responses were received to this question, the most common themes identified were:

Theme	No. of responses	Percentage
Provide resources and funding	17	29%
Ensure clear communication and engagement	16	28%
Ensure flexibility and adaptability of tools and service to respond to unforeseen demands	7	12%

Other themes that emerged from responses included setting clearly defined outcomes, addressing recruitment and retention challenges, and awareness of integration and how this could affect workforce and workload planning.

Consultation Events

In parallel to the written consultation, three public engagement events were held in Edinburgh, Glasgow and Aberdeen to seek feedback from stakeholders. Attendees were asked to work in groups with a mix of health and social care participants and discuss 4 questions regarding the proposals for the Bill.

The number of attendees and groups at each event is presented below:

Event	No. of attendees	No. of groups
Aberdeen	54	7
Edinburgh	68	9
Glasgow	60	10

A wide range of viewpoints were expressed by the attendees, some supportive and some that raised challenges to the proposals being discussed. Presented below is a summary of each question and the high level themes that were identified by each group. Responses may have covered multiple themes therefore the total responses may be less than the total themes.

Feedback was recorded from the group discussion by the groups themselves. Groups were not asked to reach a consensus, rather to simply capture the themes that were discussed within their group.

Question 1 – Discuss if you think it is important to have a coherent legislative framework across health and social care to underpin workforce planning and appropriate staffing in health and social care.

There were a total of 25 group responses to this question. The most common themes were identified as:

Theme	No. of responses	Percentage
Consideration of the impact on resources and funding	13	52%
The importance of flexibility and being able to respond to unforeseen demands	9	36%
Awareness of recruitment and retention challenges	9	36%
The importance of staff training, professional development and engagement	9	36%

In addition to the above, respondents also highlighted issues surrounding clarity of governance and accountability and where this would lie, the need for a focus on outcomes rather than processes and the importance of taking into account the skill mix of teams.

There were 6 group responses (24%) that did not believe legislation was necessary in this area.

Question 2 – What do you think of the proposal that there should be guiding ‘safe staffing’ principles to provide NHS Boards and care service providers with a foundation on which to base their staffing considerations? What might these key principles cover?

There were a total of 23 group responses to this question. The responses received were limited to what respondents thought guiding principles would need to cover and the common themes were identified as:

Theme	No. of responses	Percentage
Staff support and training	12	52%
A focus on positive outcomes and avoiding ‘box ticking’	10	43%
A flexible approach that can respond to unforeseen demands	9	39%
A focus on the service users and outcomes that benefit them	9	39%

Other themes that emerged from the responses included ensuring a focus on safety and managing risk, recognition of the challenges of staff recruitment and retention, clear definitions of terms such as ‘safe’ and timeframes.

Question 3 – What are your views on the proposed requirements for Health Boards and what key issues need to be considered?

There were a total of 23 group responses to this question. The most common themes were identified as:

Theme	No. of responses	Percentage
Awareness of funding and resource challenges	13	57%
The importance of staff engagement and training	12	52%
Importance of clear and transparent communication from Health Boards on the decisions made when using the tools	7	30%
A focus on positive outcomes over process adherence	7	30%

Other themes that emerged from the responses included taking account of local context and needs, avoiding the creation of a 'tick box' exercise, ensuring service re-design and improvement is enabled and consistent application of the requirements placed upon Health Boards.

Question 4 – What are your views on the proposed role for the Care Inspectorate in monitoring application of the duty and principles and, where there is an identified need, leading work, with the social care sector, to develop workforce planning tools for application in specified settings? What questions do we need to address?

There were a total of 24 group responses to this question. The most common themes were identified as:

Theme	No. of responses	Percentage
Engagement with stakeholders and clear communication on the development of tools and methodologies	7	29%
Ensure funding and resources are made available to develop tools and methodologies	7	29%
Where does the governance and accountability lie in the development process?	7	29%
Awareness of integration and ensuring this is taken into account when developing tools and methodologies	5	21%

Across all three events, six groups specifically mentioned that the Care Inspectorate is the most appropriate body to undertake the role of monitoring application of the duty and principles within the Social Care sector. One group disagreed stating that although the Care Inspectorate should be involved, work should be done alongside sector partners such as Social Work Scotland, Scottish Social Services Council and COSLA.

Other comments made in relation to the role of the Care Inspectorate included:

- The Care Inspectorate should have a role in validating tools but development should be delegated to an independent academic institution
- The Care Inspectorate should oversee the development of tools rather than actually develop them.

Conclusion and Next Steps

The responses and comments from stakeholders have been used to further develop and inform the legislation. The Bill will be introduced to Parliament before the summer recess 2018. The full data of responses (where permission was granted) can be viewed on the Scottish Government Consultation Hub⁷.

⁷ [Discussion document to support further engagement on Safe and Effective Staffing in Health and Social Care – Published Responses](#)

List of consultation respondents

Heath and Social Care Partnership

- Aberdeen Health and Social Care Partnership
- Chief Officers Group for Health and Social Care Scotland
- East Ayrshire Health and Social Care Partnership

Independent or Third sector health or social care organisation or committee

- Bliss Scotland
- Coalition of Care and Support Providers in Scotland/Housing Support Enabling Unit
- Key
- NHSGGC Mental Health, Forensic, Homelessness and Addictions AHP Advisory Committee
- Scottish Care
- Scottish Out of School Care Network

Individuals

- 42 individuals responded to the consultation

NHS based professional group or committee

- Scottish Executive Nurse Directors

NHS Body or Board

- Healthcare Improvement Scotland
- NHS Ayrshire & Arran
- NHS Dumfries and Galloway
- NHS Education for Scotland
- NHS GG&C Nursing and Midwifery
- NHS National Services Scotland
- NHS Tayside
- Scottish Ambulance Service

Other Public Body

- Care Inspectorate
- Coalition of Scottish Local Authorities
- Fife Council Housing Services
- Scottish Social Services Council
- Stirling Council

Professional college, body, group or union

- Allied Health Professionals Federation Scotland
- British Association of Social Workers
- Social Work Scotland
- Society of Personnel & Development
- The Royal College of Anaesthetists
- The Royal College of General Practitioners
- The Royal College of Nursing
- The Royal College of Speech and Language Therapists

Data Tables

	Question 1a: Do you think it is important to have a coherent legislative framework across health and social care to underpin workforce planning and appropriate staffing in health and social care?									
	Yes	No	No Answer	Total	If Yes, how important?					
					extremely important	very important	moderately important	slightly important	not at all important	No Answer
Individual	37	5	0	42	28	9	0	0	0	0
Health & Social Care Partnership	3	0	0	3	1	0	2	0	0	0
Independent or Third sector health or social care organisation or committee	2	2	2	6	1	0	1	0	1	0
NHS based professional group or committee	1	0	0	1	1	0	0	0	0	0
NHS Body or Board	6	0	2	8	5	1	0	0	0	0
Other public body	4	1	0	5	1	0	2	0	0	1
Professional college, body, group or union	6	1	1	8	1	5	0	0	0	0
Total	59	9	5	73	38	15	5	0	1	1
% of those answering	87%	13%		100%	66%	26%	9%	0%	2%	
% of those answering - Individuals	88%	12%		100%						
% of those answering - Organisations	85%	15%		100%						

	Question 2a: What is your view of the proposal that there should be guiding principles for workforce planning to provide NHS Boards and care service providers with a foundation on which to base their staffing considerations?						
	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	No Answer	Total
Individual	31	8	1	1	0	1	42
Health & Social Care Partnership	1	2	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	2	2	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	0	1
NHS Body or Board	6	2	0	0	0	0	8
Other public body	2	2	0	0	1	0	5
Professional college, body, group or union	2	4	0	0	1	1	8
Total	45	20	1	1	2	4	73
% of those answering	65%	29%	1%	1%	3%		100%

	Question 2ci: Workforce planning must ensure an appropriate number and mix of staff to provide high quality services.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	37	2	1	2	0	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	3	1	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	7	1	0	0	0	8
Other public body	2	2	0	0	1	5
Professional college, body, group or union	4	2	0	0	2	8
Total	57	8	1	2	5	73
% of those answering	84%	12%	1%	3%		100%

	Question 2cii: Workforce planning must ensure an appropriate number and mix of staff to provide effective and efficient use of resources.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	29	11	1	1	0	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	2	2	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	6	2	0	0	0	8
Other public body	1	3	0	0	1	5
Professional college, body, group or union	2	4	0	0	2	8
Total	44	22	1	1	5	73
% of those answering	65%	32%	1%	1%		100%

	Question 2ciii: Workforce planning must ensure an appropriate number and mix of staff to provide services that meet service user needs.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	33	6	1	2	0	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	3	1	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	8	0	0	0	0	8
Other public body	3	1	0	0	1	5
Professional college, body, group or union	5	1	0	0	2	8
Total	56	9	1	2	5	73
% of those answering	82%	13%	1%	3%		100%

	Question 2civ: Workforce planning must ensure an appropriate number and mix of staff to provide services that respect the dignity and rights of service users.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	33	6	1	2	0	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	7	1	0	0	0	8
Other public body	2	2	0	0	1	5
Professional college, body, group or union	5	1	0	0	2	8
Total	55	10	1	2	5	73
% of those answering	81%	15%	1%	3%		100%

	Question 3a: What is your view on the proposed requirements for Health Boards?						
	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	No Answer	Total
Individual	21	12	6	0	1	2	42
Health & Social Care Partnership	1	2	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	0	1	2	0	0	3	6
NHS based professional group or committee	1	0	0	0	0	0	1
NHS Body or Board	1	6	0	0	1	0	8
Other public body	0	1	2	0	0	2	5
Professional college, body, group or union	1	2	3	0	0	2	8
Total	25	24	13	0	2	9	73
% of those answering	39%	38%	20%	0%	3%		100%

	Question 4: Do you agree with the proposed role for the Care Inspectorate in leading work, with the social care sector, to develop workforce planning tools for application in specified settings, where there is an identified need?						
	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	No Answer	Total
Individual	18	14	8	0	1	1	42
Health & Social Care Partnership	1	0	0	2	0	0	3
Independent or Third sector health or social care organisation or committee	2	2	0	0	0	2	6
NHS based professional group or committee	0	1	0	0	0	0	1
NHS Body or Board	1	5	1	0	0	1	8
Other public body	2	2	0	0	0	1	5
Professional college, body, group or union	0	1	2	2	0	3	8
Total	24	25	11	4	1	8	73
% of those answering	37%	38%	17%	6%	2%		100%
% of those answering - Individuals	44%	34%	20%	0%	2%		100%
% of those answering - Organisations	25%	46%	13%	17%	0%		100%

	Question 4b: Do you think that social work should be included within the scope of this legislation (while there is currently no proposal to include social work, this could be considered for inclusion at a later stage)?						
	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	No Answer	Total
Individual	19	15	5	1	1	1	42
Health & Social Care Partnership	1	0	0	2	0	0	3
Independent or Third sector health or social care organisation or committee	2	0	2	0	0	2	6
NHS based professional group or committee	0	1	0	0	0	0	1
NHS Body or Board	1	5	2	0	0	0	8
Other public body	0	2	1	1	1	0	5
Professional college, body, group or union	1	1	2	0	1	3	8
Total	24	24	12	4	3	6	73
% of those answering	36%	36%	18%	6%	4%		100%

	Question 5ai: How important do you consider the suggestion . . . To work with employers/service providers and commissioners from the sector to identify and agree specified settings where there is a need for the development of workforce planning tools and methodologies.						
	very important	important	not very important	not important at all	not desirable	No Answer	Total
Individual	24	15	0	0	2	1	42
Health & Social Care Partnership	3	0	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	0	1
NHS Body or Board	4	3	0	0	0	1	8
Other public body	3	1	0	0	0	1	5
Professional college, body, group or union	2	3	0	0	0	3	8
Total	41	22	0	0	2	8	73
% of those answering	63%	34%	0%	0%	3%		100%
% of those answering - Individuals	59%	37%	0%	0%	5%		100%
% of those answering - Organisations	71%	29%	0%	0%	0%		100%

	Question 5a: How important do you consider the suggestion . . . To work with service providers and commissioners from the appropriate parts of the sector to develop and validate workforce planning tools and methodologies to demonstrate that they are practicable and beneficial for specific settings.						
	very important	important	not very important	not important at all	not desirable	No Answer	Total
Individual	27	13	0	0	1	1	42
Health & Social Care Partnership	3	0	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	0	1
NHS Body or Board	5	2	0	0	0	1	8
Other public body	3	1	0	0	0	1	5
Professional college, body, group or union	4	1	0	0	0	3	8
Total	47	17	0	0	1	8	73
% of those answering	72%	26%	0%	0%	2%		100%
% of those answering - Individuals	66%	32%	0%	0%	2%		100%
% of those answering - Organisations	83%	17%	0%	0%	0%		100%

	Question 5aiii: How important do you consider the suggestion . . . To consult with the sector before a requirement to use validated workforce planning tools and methodologies is confirmed in regulations.						
	very important	important	not very important	not important at all	not desirable	No Answer	Total
Individual	23	14	0	0	4	1	42
Health & Social Care Partnership	2	1	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	0	1
NHS Body or Board	6	1	0	0	0	1	8
Other public body	2	1	0	0	1	1	5
Professional college, body, group or union	5	0	0	0	0	3	8
Total	43	17	0	0	5	8	73
% of those answering	66%	26%	0%	0%	8%		100%
% of those answering - Individuals	56%	34%	0%	0%	10%		100%
% of those answering - Organisations	83%	13%	0%	0%	4%		100%

	Question 6i: What support do you think will be required / most useful . . . Dedicated central expertise for the identification of specified settings where the development of workload and workforce planning tools and methodologies would be practicable and beneficial.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	16	11	4	0	11	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	3	0	1	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	4	2	0	0	2	8
Other public body	2	1	0	0	2	5
Professional college, body, group or union	3	1	0	1	3	8
Total	32	15	5	1	20	73
% of those answering	60%	28%	9%	2%		100%
% of those answering - Individuals	52%	35%	13%	0%		100%
% of those answering - Organisations	73%	18%	5%	5%		100%

	Question 6ii: What support do you think will be required / most useful . . . Additional resource for the Care Inspectorate to enable the proposed functions.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	16	15	8	0	3	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	2	1	1	0	2	6
NHS based professional group or committee	0	1	0	0	0	1
NHS Body or Board	3	3	0	0	2	8
Other public body	2	2	0	0	1	5
Professional college, body, group or union	4	1	0	0	3	8
Total	30	23	9	0	11	73
% of those answering	48%	37%	15%	0%		100%
% of those answering - Individuals	41%	38%	21%	0%		100%
% of those answering - Organisations	61%	35%	4%	0%		100%

	Question 6iii: What support do you think will be required / most useful . . . Training for key personnel in the sector in the development of workforce planning approaches.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	26	10	3	0	3	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	6	0	0	0	2	8
Other public body	3	1	0	0	1	5
Professional college, body, group or union	5	0	0	0	3	8
Total	48	11	3	0	11	73
% of those answering	77%	18%	5%	0%		100%
% of those answering - Individuals	67%	26%	8%	0%		100%
% of those answering - Organisations	96%	4%	0%	0%		100%

	Question 6iv: What support do you think will be required / most useful . . . Dedicated resource for service providers who engage in the development and validation of approaches, tools and methodologies.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	22	13	2	0	5	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	5	0	1	0	2	8
Other public body	3	1	0	0	1	5
Professional college, body, group or union	5	0	0	0	3	8
Total	43	14	3	0	13	73
% of those answering	72%	23%	5%	0%		100%
% of those answering - Individuals	59%	35%	5%	0%		100%
% of those answering - Organisations	91%	4%	4%	0%		100%

	Question 6v: What support do you think will be required / most useful . . . Training for key personnel in specified services once validated tools and methodologies are confirmed through regulations.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	28	9	2	0	3	42
Health & Social Care Partnership	3	0	0	0	0	3
Independent or Third sector health or social care organisation or committee	4	0	0	0	2	6
NHS based professional group or committee	1	0	0	0	0	1
NHS Body or Board	4	2	0	0	2	8
Other public body	3	0	0	0	2	5
Professional college, body, group or union	4	0	0	0	4	8
Total	47	11	2	0	13	73
% of those answering	78%	18%	3%	0%		100%
% of those answering - Individuals	72%	23%	5%	0%		100%
% of those answering - Organisations	90%	10%	0%	0%		100%

	Question 6vi: What support do you think will be required / most useful . . . Other.					
	Very important	Important	Not very important	Not important at all	No Answer	Total
Individual	10	0	1	0	31	42
Health & Social Care Partnership	1	0	0	0	2	3
Independent or Third sector health or social care organisation or committee	1	1	0	0	4	6
NHS based professional group or committee	0	0	0	0	1	1
NHS Body or Board	4	0	0	0	4	8
Other public body	1	0	0	0	4	5
Professional college, body, group or union	0	0	0	0	8	8
Total	17	1	1	0	54	73
% of those answering	89%	5%	5%	0%		100%



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Any enquiries regarding this publication should be sent to us at
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St Andrew's House
Edinburgh
EH1 3DG

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