Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Addiction Services

March 2017

Workforce

The National Standards for Safer Better Healthcare

WORKBOOK

6

QUALITY ASSESSMENT
& IMPROVEMENT
QA+I

Effective Care and Support

Safe Care and Support

Person Centred Care and Support

Better Health and Wellbeing

CULTURE OF QUALITY AND SAFETY

Service User

Leadership, Governance and Management

Use of Information

Workforce

Use of Resources

INTRODUCTION

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

There are 4 Standards and 4 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 content within each Level are guiding prompts 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.

Although the National Standards for Safer Better Healthcare and QuADS Organisational Standards were initiated in 2012, it is recognised that implementing these standards may be challenging and require significant effort by effort by HSE Addiction 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 patient 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.
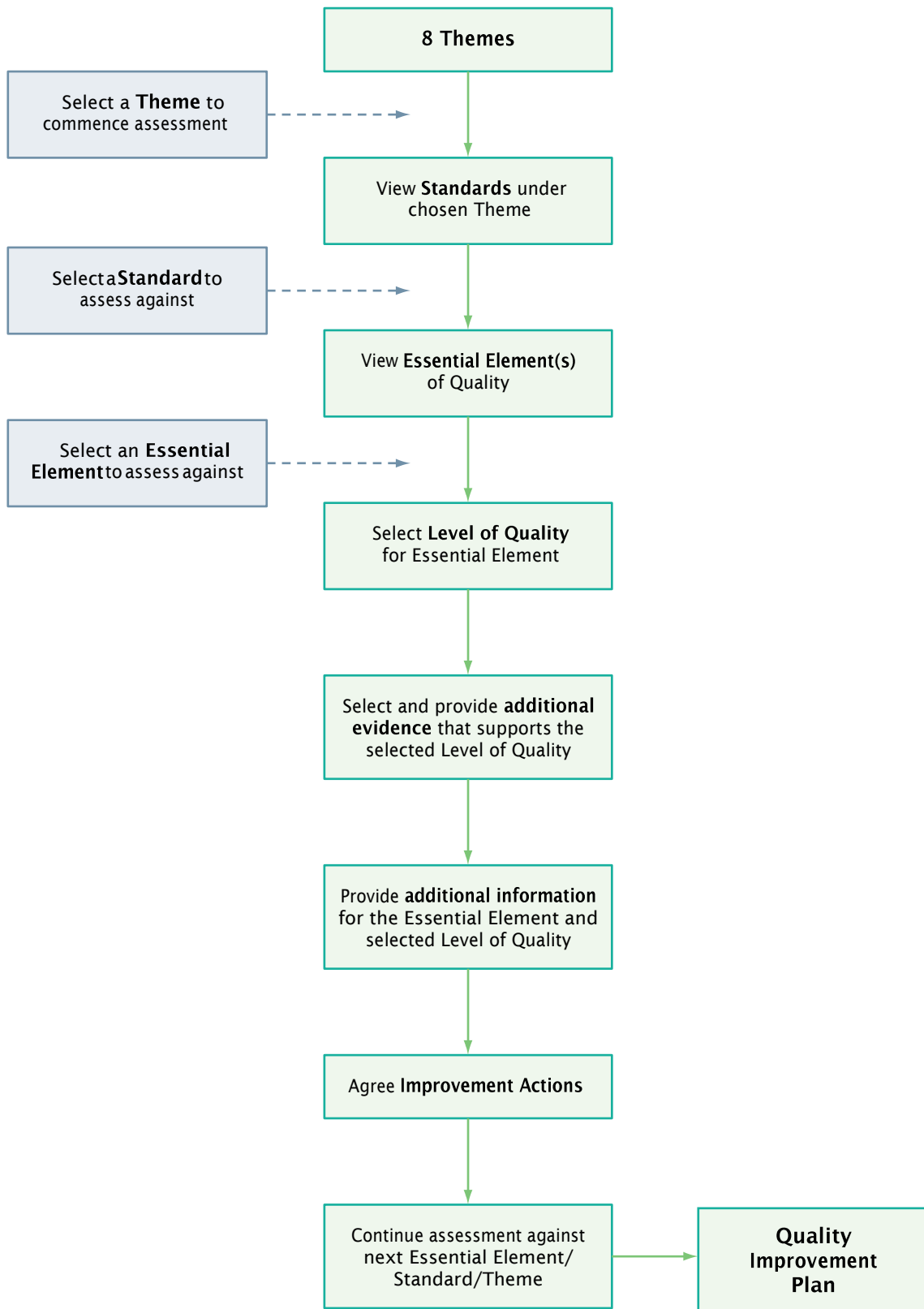
Similarly services may wish to consider the following bullets to guide them in providing additional information to support their assessment:

- 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 addiction services in implementing the National Standards for Workforce and improving the quality of your service.

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

8 Themes

Select a **Theme** to commence assessment

View **Standards** under chosen Theme

Select a **Standard** to assess against

View **Essential Element(s)** of Quality

Select an **Essential Element** to assess against

Select **Level of Quality** for Essential Element

Select and provide **additional evidence** that supports the selected Level of Quality

Provide **additional information** for the Essential Element and selected Level of Quality

Agree **Improvement Actions**

Continue assessment against next Essential Element/ Standard/Theme

Quality Improvement Plan

WORKFORCE

STANDARDS	ESSENTIAL ELEMENTS	WHAT A SERVICE USER CAN EXPECT WHEN A ADDICTION SERVICE IS MEETING THESE STANDARDS
STANDARD 6.1 Service providers plan, organise and manage their workforce to achieve the service objectives for high quality, safe and reliable healthcare.	Maximising Staff Resources	The service you are attending plans and manages its staff to ensure there are staff 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 have the competencies required to deliver high quality, safe and reliable healthcare.	Maintaining Competent Staff	Staff caring for you will regularly receive the necessary 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.	Support Systems for Staff	The Addiction service you are attending listens to the views and the feedback of staff 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 health care.

Essential Element: **Maximising Staff Resources**

Addiction staff are effectively managed to meet the service's current and projected future needs for all addiction services throughout the CHO. This also applies to all addiction service providers funded by the CHO.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• There are structures and processes to support the management and engagement of addiction staff members. • Management of addiction staff members takes account of deployment and the short term needs of the service. • Organisation and deployment of addiction staff members support service delivery within the Employment Control Framework. • Employment legislation and any changes are communicated to addiction staff members.	☐
Continuous Improvement (CI)	• Systematic review of staff resources throughout addiction services within the CHO 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 across addiction services and reflects relevant legislation and government policy. • Staffing deficits across addiction services are risk assessed and linked to the service's risk management process. • Outcome measures are reviewed and reported to governing committees with reciprocal feedback to staff.	☐
Sustained Improvement (SI)	• Workforce planning is integrated into primary services 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 addiction services and support staff in adapting to change. • Outcome measures are consistently achieved and reported to governing committees with reciprocal feedback to staff. • Workforce planning takes account of staff capability, capacity and skill-mix to meet long term needs of the service.	☐
Excellence (E)	• Benchmarking with other 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

- Addiction services workforce plan aligned to service plan objectives.
- Future needs assessments are in incorporated into workforce plan.
- Development and evaluation of a workforce plan.
- Testing of workforce models.
- Implementation of contingency plans.
- Implementation of improvement plans based on benchmarking.
- Implementation of succession planning.
- TOR for Clinical Team
- HR system monitors statutory requirements, organisational needs, supervision records, leave (maternity, annual, sick), absenteeism, disciplinary/grievance procedure, gender, ethnic origin, disability
-

ADD YOUR OWN EVIDENCE

ADDITIONAL INFORMATION

<table>
<tr><td>**STANDARD**
6.2</td><td>**Service providers recruit people with the required competencies to provide**</td></tr>
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Essential Element: **Effective Staff Recruitment**

There are effective evidence based arrangements to support staff recruitment for all addiction services throughout the CHO. This also applies to all addiction service providers funded by the CHO.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• The addiction service has policies, procedures and guidelines based on Irish and European legislation. • Changes in legislation are reflected in all relevant documentation. • Addiction staff members involved in recruitment receive relevant training. • Addiction service providers have documented service level agreements with external recruitment agencies. • Publicly available information on recruitment and selection procedures for addiction.	☐
Continuous Improvement (CI)	• HR policies are regularly reviewed and changes are communicated to addiction staff members throughout the CHO. • Review of arrangements that support annual verification of professional registration. • Review of service level 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 relevant addiction staff members are vetted and have appropriate qualifications, professional registration and are medically fit for the role. • Review of feedback that is sought from candidates and line managers informs improvements across addiction services within the CHO.	☐
Sustained Improvement (SI)	• Evaluation of systems to ensure effectiveness of recruitment processes. • Audits undertaken by the Commission for Public Service Appointments (CPSA) demonstrates compliance with Code of Practice.	☐
Excellence (E)	• Innovative methods of recruitment to recruit best candidates for addiction are explored.	☐

EVIDENCE TO VERIFY SELECTED LEVEL OF QUALITY

EXAMPLES

- Governance arrangements that support recruitment and selection.
- Implementation of HR PPPGs.
- Recruitment and selection PPPGs take account of equal opportunities legislation and service's policy
- Recruitment and selection PPPGs are reviewed regularly
- Assurance checks to verify addiction staff member's qualifications, statutory registration, health and Garda vetting.
- System that verifies annual verification of professional registration.
- Innovative approaches to recruitment.
- Attendance at relevant staff training & training database
- Pre and post interview candidate information packs.
- Trade Union recognition agreements

ADD YOUR OWN EVIDENCE

ADDITIONAL INFORMATION

STANDARD **6.3**	Service providers ensure their workforce have the competencies required to deliver high quality, safe and reliable healthcare.

Essential Element: **Maintaining Competent Staff**

Service Providers have arrangements in place to support addiction staff members in maintaining and further developing their competencies. This also applies to all addiction service providers funded by the CHO.

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

EVIDENCE TO VERIFY SELECTED LEVEL OF QUALITY

EXAMPLES

- Addiction training needs analysis report.
- Addiction training and development plan with short, medium and long term goals.
- Training plan and training evaluations
- Completion of competency assessment frameworks.
- Regular review of professional development plans.
- Evaluation of induction programme.
- Report of attendance at mandatory training and induction programme.
- PPPGs to support supervision, mentoring and coaching.
- Implementation of innovative approaches to facilitating staff training e.g. e-learning.
- Contract of employment, conditions of service documents and supervision records for each employee on file
- Competency based job descriptions
- Code of conduct identifies professional boundaries and responsibilities

ADD YOUR OWN EVIDENCE

ADDITIONAL INFORMATION

STANDARD 6.4	Service providers support their workforce in delivering high quality, safe and reliable healthcare.

Essential Element: Support Systems for Staff

Service has arrangements to support staff for addiction services throughout the CHO in delivering quality healthcare. This also applies to all addiction service providers funded by the CHO.

LEVEL OF QUALITY	GUIDING PROMPTS	SELECT
Emerging Improvement (EI)	• Governance arrangements within the CHO support clarity on roles, responsibilities and lines of accountability for all addiction staff members. • Governance arrangements support the management of addiction staff performance including under performance. • Governance arrangements exist to address identified clinical concerns at local level initially with onward reporting to professional and regulatory bodies as appropriate. • Governance arrangements support addiction staff engagement, consultation and responding to staff feedback. • Addiction policies and local processes support staff in making protected disclosures. • The addiction work environment is risk assessed in line with legislation and policies.	☐
Continuous Improvement (CI)	• Arrangements for engaging with and gathering feedback from addiction staff throughout the CHO are reviewed, improvement plans implemented and there is reciprocal feedback on outcomes. • The findings from risk assessments inform improvement plans which are implemented at all levels within addiction. • Training and support is provided to addiction staff members working in areas identified as potential risk environments. • Staff safety incidents are analysed, trended and inform improvements at all levels within addiction. • Human resource systems to manage performance are fully utilised.	☐
Sustained Improvement (SI)	• Evaluation of performance management system with implementation of improvement actions at all levels within addiction. • Methods of engagement with addiction staff members are evaluated and improvement plans developed. • Evaluation of the staff health and safety programme is undertaken. • The addiction service provides an occupation health service and employee assistance programme to addiction staff members.	☐
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/policy.
- Evidence of performance being reviewed and monitored.
- Performance improvement plan is linked to training and development.
- Access to occupational health services.
- Risk assessment 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.
- Recruitment and selection PPPGs include employment of people who have had or have alcohol/drugs related issues.
- Staff handbook / employee resource pack

ADD YOUR OWN EVIDENCE

ADDITIONAL INFORMATION

STANDARD	ESSENTIAL ELEMENT	IMPROVEMENT ACTION	RESPONSIBLE TEAM MEMBER	DUE DATE
IMPROVEMENT ACTIONS FOR THEME 6: WORKFORCE				