Harrogate and District NHS Foundation Trust

Safer Staffing Bi-Annual Establishment Review

DATA COLLECTED IN MARCH 2026

ESTABLISHMENT REVIEW COMPLETED JULY 2026

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Purpose of Report

This report provides the Board of Directors with assurance regarding the nursing workforce establishments across Harrogate and District NHS Foundation Trust's Adult inpatient wards, Emergency Department and Children and Young People's inpatient services following completion of the Trust's bi-annual safer staffing establishment review.

The review has been undertaken in accordance with NHS England's Developing Workforce Safeguards (DWS) standards and the National Quality Board (NQB) publication Supporting NHS Providers to Deliver the Right Staff, with the Right Skills, in the Right Place at the Right Time. Together these frameworks set the national expectations for evidence-based workforce planning, safe staff deployment and Board assurance.

The review considers whether current nursing establishments remain sufficient to safely meet patient demand, acuity and dependency, whilst ensuring the workforce remains sustainable, productive and financially responsible.

Evidence from the licensed Safer Nursing Care Tool (SNCT) has been triangulated with professional judgement, patient quality indicators, workforce metrics, operational intelligence and financial information to determine whether existing funded establishments continue to provide quality, safe and effective care.

This report also demonstrates Harrogate and District NHS Foundation Trust's compliance with national safer staffing requirements, Care Quality Commission Regulation 18 (Staffing), the NHS England Developing Workforce Safeguards standards, National Quality Board expectations and the Trust's Safer Staffing Policy.

Background

Delivering safe, high-quality care depends upon ensuring that the right staff, with the right skills, are available in the right place at the right time. Safe staffing is therefore a fundamental component of patient safety, clinical effectiveness, patient experience and workforce wellbeing.

Harrogate and District NHS Foundation Trust have embedded the principles of NHS England's DWS within its nursing workforce governance arrangements. These safeguards recognise that workforce establishments should never be determined by financial considerations alone but instead should be informed through a triangulated assessment of:

- evidence-based workforce planning tools;
- professional judgement;
- patient outcomes and quality indicators;
- workforce indicators;
- operational intelligence;
- local service configuration.

The Trust undertakes formal bi-annual establishment reviews across adult inpatient wards, the Emergency Department and Children and Young People's inpatient services using the nationally recognised licensed SNCT.

The SNCT remains the only evidence-based workforce planning tool endorsed by NICE for adult inpatient nursing establishments and provides an objective assessment of nursing workload based upon patient acuity and dependency. However, both NHS England and the NQB are clear that no workforce planning tool should be used in isolation. This approach ensures that workforce decisions reflect the complexity of modern healthcare delivery, local patient need and the operational context of each clinical area rather than reliance upon numerical outputs alone.

HDFT Safer Staffing Governance

Harrogate and District NHS Foundation Trust have established a comprehensive safer staffing governance framework that provides assurance from ward to Board that nursing workforce establishments are safe, evidence based and responsive to changing patient need. Rather than relying on periodic establishment reviews alone, the Trust has embedded safer staffing into daily operational management and strategic workforce governance, ensuring that staffing is continually monitored, reviewed and challenged.

Safe staffing assurance is therefore achieved through multiple interconnected governance processes operating at operational and strategic levels. These arrangements ensure that workforce risks are identified promptly, mitigated appropriately and escalated where necessary, whilst maintaining oversight of patient safety, workforce wellbeing and financial sustainability.

The Trust's governance framework includes:

Strategic Governance

Formal Establishment Review Panel, where recommendations are subject to multidisciplinary scrutiny by Corporate Nursing, Finance and Operational leaders prior to approval.

Bi-Monthly Ward-to-Board Safer Staffing Reporting, providing transparent assurance on planned versus actual staffing, Care Hours Per Patient Day (CHPPD), fill rates, temporary workforce usage and quality indicators.

Bi-annual Establishment Reviews, using the licensed Safer Nursing Care Tool (SNCT) alongside professional judgement to determine evidence-based nursing establishments.

Operational Governance

Daily Staffing Escalation Processes, providing clear operational oversight and timely executive escalation where staffing risks cannot be mitigated locally.

Weekly Roster Assurance Meetings, reviewing roster quality, temporary staffing utilisation, headroom, annual leave, study leave and workforce availability to maximise safe substantive staffing.

Daily SafeCare Staffing Meetings to review staffing levels across all clinical areas, identify workforce risks, agree mitigation plans and ensure safe deployment of staff for every shift.

Weekly Matron Review of Future Rosters, ensuring upcoming rosters continue to meet safer staffing standards, roster key performance indicators and anticipated patient demand.

Quality Assurance

Monthly Fundamentals of Care Triangulation Meetings, bringing together staffing, quality, patient experience and clinical outcome data to identify emerging themes and ensure staffing establishments continue to support safe, effective and compassionate care.

Professional Judgement Review Meetings, ensuring SNCT outputs are interpreted alongside ward-specific operational factors, patient acuity, ward layout, patient flow, enhanced care requirements and workforce experience before any establishment changes are agreed.

SNCT Training and Inter-rater Reliability Programme, providing assurance that patient acuity data is collected consistently and accurately across all inpatient areas.

Matron Peer Review of Daily SNCT Data, strengthening the validity of acuity and dependency scoring through independent clinical oversight.

Supporting Frameworks

Daily Staffing Escalation Processes, providing clear operational oversight and timely executive escalation where staffing risks cannot be mitigated locally.

Weekly Roster Assurance Meetings, reviewing roster quality, temporary staffing utilisation, headroom, annual leave, study leave and workforce availability to maximise safe substantive staffing.

Safer Staffing Policy, establishes the Trust's governance framework for determining, reviewing and monitoring nursing and midwifery workforce establishments, ensuring compliance with national safer staffing standards and defining clear accountability from ward to Board.

SafeCare Standard Operating Procedure, providing a structured approach to the daily review, escalation and deployment of the nursing workforce, enabling timely operational decision-making to maintain safe staffing levels across all clinical areas.

Temporary Workforce Standard Operating Procedure, defines the governance and approval processes for the use of temporary staffing, promoting safe, effective and value-based workforce deployment while supporting the Trust's ambition to maximise substantive staffing and minimise reliance on temporary workforce.

Redeployment Standard Operating Procedure, supporting the safe and efficient deployment of substantive staff across clinical areas in response to changes in patient demand.

Equality, Quality Impact Assessments (EQIAs) undertaken for all substantive workforce establishment changes to ensure decisions are equitable, evidence based and fully consider any potential impact on patients, staff and protected groups.

Collectively, these governance arrangements provide robust assurance that nursing workforce establishments remain responsive to changes in patient acuity, dependency and service demand. They enable Harrogate and District NHS Foundation Trust to demonstrate that staffing decisions are not based solely on numerical workforce planning tools but are informed through continuous professional oversight, quality surveillance and organisational governance, ensuring the right staff, with the right skills, are available in the right place at the right time.

March 2026 Results

Adult Inpatient Wards

The March 2026 SNCT review was completed across all adult inpatient wards. The review concluded that the current nursing establishments continue to provide safe and effective staffing aligned to patient acuity, dependency and service demand. Demonstrating that the existing funded establishments remain appropriate across the majority of adult inpatient wards, providing assurance that previous establishment reviews and workforce investment continue to reflect the clinical needs of patients (ap. Quality indicators remained stable, with no evidence of systemic staffing concerns that would require significant changes to funded establishments.

Only three minor establishment refinements were identified through the review. Within the Long Term Unscheduled and Community Care Directorate, a minor adjustment to the Registered Nurse skill mix, on Granby Ward, was recommended to better align staffing with increasing daytime patient acuity and dependency. Within the Planned, Surgical and Children's Care Directorate, an unused Clinical Support Worker vacancy was approved for transfer from Rowan Ward to Bolton Ward, strengthening overnight staffing resilience where patient demand is greatest. These changes optimise the deployment of the existing workforce, improve alignment between staffing resource and patient need, and were approved through the Establishment Review Panel (ERP) and Executive governance processes. All changes are cost neutral and are being implemented within existing funded establishments.

The outcome of the review provides assurance that Adult inpatient nursing establishments remain evidence based, responsive to patient need and compliant with the DWS standards, NQB expectations and the Trust's Safer Staffing Policy.

Headroom Review

Alongside the March 2026 establishment review, the Trust completed a comprehensive review of the headroom provisions applied to adult inpatient nursing establishments. This work was undertaken to ensure roster resilience is based upon contemporary workforce data, current organisational policies and national workforce standards, replacing the previous compounded methodology with a more transparent and evidence-based approach.

The revised model aligns headroom to the predictable workforce unavailability experienced across adult inpatient wards and provides funded capacity to support safe roster production, reduce reliance on temporary staffing and improve resilience within substantive establishments. The review incorporated twelve months of workforce data, analysis of actual staff unavailability, organisational leave policies and the legislative training requirements, together with national recommendations regarding evidence-based headroom calculations.

The revised headroom provision comprises:

- Annual Leave: 14.96%
- Sickness Absence: 4.10%
- Study, Training and Professional Development: 3.34%
- Other Planned and Unplanned Leave: 1.00%

This results in a total headroom provision of 23.40%, replacing the previous compounded provision of approximately 25.76%. The revised methodology more accurately reflects modern workforce requirements by recognising statutory and discretionary leave provisions, enhanced education and training requirements, and realistic sickness allowances whilst removing the historic "headroom on headroom" calculation. The outcome delivers a more accurate, sustainable and transparent approach to workforce planning, supporting safe staffing, improved roster resilience and consistent application across all adult inpatient wards.

Care Hours Per Patient Day (CHPPD) Benchmarking

Care Hours Per Patient Day (CHPPD) provides an established national metric that supports Board assurance by demonstrating the amount of Nursing and Midwifery care delivered to patients in relation to occupied bed days. Whilst CHPPD should not be used in isolation to determine workforce establishments, it provides an important benchmarking measure when triangulated alongside evidence-based staffing tools, professional judgement, quality indicators and other workforce metrics.

Analysis of Model Hospital benchmarking data demonstrates that Harrogate and District NHS Foundation Trust continues to deliver nursing care hours broadly in line with comparable NHS organisations. During the March 2026 reporting period, the median CHPPD for peer organisations was 8.1 hours, compared with 8.3 hours delivered by HDFT. This places the Trust slightly above the peer median, indicating that the nursing workforce is delivering care hours consistent with organisations of a similar size and case mix.

The alignment between planned and actual staffing delivery, together with CHPPD performance above the national peer median, provides additional assurance that funded nursing establishments are translating into safe staffing levels in practice. When considered alongside the positive findings from the SNCT review, stable quality indicators, daily operational oversight and robust safer staffing governance arrangements, the CHPPD data supports the conclusion that adult inpatient nursing establishments remain appropriately resourced to meet patient demand.

Emergency Department

The March 2026 Emergency Department (ED) establishment review was undertaken using the Emergency Department Safer Nursing Care Tool (ED SNCT), with findings triangulated against professional judgement, workforce metrics, patient quality indicators, activity, operational performance and service demand (appendix 1).

The review provided assurance that the current funded nursing establishment remains appropriate to safely support the delivery of emergency care within a complex and continually changing operational environment. The review recognised sustained growth in Emergency Department attendances, increasing patient acuity, rising mental health presentations and ongoing operational pressures associated with ambulance handover standards and patient flow. Despite these challenges, the current establishment continues to provide a safe staffing model supported by daily operational oversight, dynamic deployment of staff and continuous review through the Trust's safer staffing governance arrangements.

The review confirmed that no further substantive establishment changes were required. This reflects the workforce refinements approved through the ERP following the previous ED SNCT review, which introduced a cost-neutral redistribution of staffing from overnight shifts to twilight shifts to better align Registered Nurse and Clinical Support Worker availability with periods of peak patient demand. Evaluation of this revised workforce model demonstrates improved alignment of staffing resource with departmental activity while maintaining the overall funded establishment.

The outcome of the review provides assurance that the Emergency Department nursing establishment remains evidence based, responsive to patient demand and aligned with DWS standards, NQB expectations and the Trust's Safer Staffing Policy. The establishment will continue to be monitored through routine operational and strategic safer staffing governance processes to ensure it remains responsive to future changes in activity, acuity and service delivery.

Children and Young People Inpatient Ward

The March 2026 review of the Children and Young People's inpatient service was undertaken using the Children and Young People Safer Nursing Care Tool, with findings triangulated alongside professional judgement, patient quality indicators, workforce metrics, activity data and operational intelligence to determine whether the current workforce establishment continues to meet patient need (appendix 1).

The review confirmed that the existing nursing establishment continues to support the delivery of safe and effective care across Woodlands Ward. The review recognised the unique operational characteristics of the service, including the Children's Assessment Unit (CAU) and Day Surgery Unit (DSU) provision, both of which require professional judgement to complement the SNCT methodology. Quality indicators remained positive throughout the review period, with no falls, hospital-acquired pressure ulcers, staffing-related Datix incidents or formal complaints identified.

The review identified several refinements to the workforce model to further strengthen alignment between the rostered establishment and service delivery. These include

adoption of the Trust's evidence-based headroom methodology, formal recognition of supervisory management time, allocation of headroom for the Play Specialist role, refinement of the DSU Registered Nurse provision and separation of management time for the Special Care Baby Unit to improve governance and roster performance monitoring. In addition, it was agreed that future SNCT data collections will focus on inpatient activity only, with the CAU continuing to be managed through activity data and professional judgement rather than the inpatient SNCT methodology.

These proposed workforce refinements are currently being finalised through detailed financial modelling and establishment review processes prior to submission to the ERP. Subject to approval, the changes will further strengthen the alignment of the workforce model with patient demand whilst remaining consistent with the Trust's safer staffing governance framework.

Conclusion

Following completion of the March 2026 bi-annual safer staffing establishment review, the Board can be assured that Harrogate and District NHS Foundation Trust have robust governance arrangements in place to determine, monitor and review nursing workforce establishments across Adult Inpatient Wards, the Emergency Department and Children and Young People's inpatient services.

The triangulated review demonstrates that the current funded nursing establishments across all three services remain evidence-based, appropriate to patient acuity, dependency and service demand, and continue to support the delivery of safe, effective and high-quality patient care. Where minor refinements to workforce models have been identified, these are focused on improving alignment between staffing resource and patient need rather than addressing deficits in safe staffing. All proposed changes have been subject to professional judgement, Equality, Quality Impact Assessments, financial scrutiny and Executive governance through the Establishment Review Panel.

The review provides assurance that:

- Adult Inpatient Ward establishments remain safe, evidence-based and aligned to the SNCT, with only minor cost-neutral refinements required to optimise skill mix and workforce deployment.
- The Emergency Department nursing establishment continues to provide a safe staffing model that is responsive to increasing patient demand and operational pressures, supported by robust daily operational oversight and the workforce improvements implemented following the previous review.
- The Children and Young People's inpatient establishment continues to safely meet patient need, with proposed refinements further strengthening roster resilience, supervisory capacity and alignment of staffing to service delivery.
- Care Hours Per Patient Day (CHPPD) benchmarking demonstrates that HDFT continues to deliver nursing care hours above the Model Hospital peer median (8.3 compared with 8.1), providing further assurance that funded nursing establishments are translating into safe staffing delivery in practice.

Collectively, these findings demonstrate continued compliance with the Developing Workforce Safeguards standards and National Quality Board expectations. Together with the Trust's comprehensive safer staffing governance framework, including daily SafeCare oversight, enhanced roster governance, professional judgement, quality triangulation and evidence-based establishment reviews, the Board can be assured that Harrogate and District NHS Foundation Trust continues to provide patients with the right staff, with the right skills, in the right place, at the right time, whilst maintaining a sustainable and financially responsible nursing workforce.

Appendix 1

March 2026 SNCT Raw Data (before triangulation)

Clinical Area	Current Budgeted Establishment (WTE)			March 2026 SNCT Requirement (WTE)			Variance
	Registered	Unregistered	Total	Registered	Unregistered	Total	
Acute Frailty Unit	20.32	15.72	**36.04**	23.02	18.84	**41.86**	**-5.82**
AMU	32.00	17.44	**49.44**	32.41	23.34	**55.75**	**-6.31**
Bolton	22.30	17.50	**39.80**	22.26	14.84	**37.10**	**2.70**
Byland	24.79	22.88	**47.67**	26.73	17.82	**44.55**	**3.12**
Emergency Department	59.34	16.63	**75.97**	57.00	14.30	**71.30**	**4.67**
Fountains	24.76	19.76	**44.52**	26.04	17.36	**43.40**	**1.12**
Granby	19.34	14.99	**34.33**	20.82	13.88	**34.70**	**-0.37**
Jervaulx	24.79	22.88	**47.67**	27.27	18.18	**45.45**	**2.22**
Lascelles	12.69	9.99	**22.68**	13.85	9.23	**23.08**	**-0.40**
Nidderdale	24.97	16.28	**41.25**	28.08	18.72	**46.80**	**-5.55**
Oakdale	24.79	19.38	**44.17**	26.29	17.52	**43.81**	**0.36**
Rowan	11.67	6.14	**17.81**	8.33	5.55	**13.88**	**3.93**
Trinity	14.63	12.09	**26.72**	16.02	10.68	**26.70**	**0.02**
Wensleydale	38.67	17.68	**56.35**	37.56	16.10	**53.66**	**2.69**
Woodlands	19.20	7.60	**26.80**	18.00	4.50	**22.50**	**4.30**