

Guide to safe staffing

Having enough staff, who have the right values and skills, is fundamental to delivering safe care and support.

It's a major contributing factor to the success of many care providers who are rated 'good' or 'outstanding' by the Care Quality Commission (CQC), and a weakness in many services rated 'requires improvement' and 'inadequate.'

We know that recruitment and retention is a challenge for lots of adult social care employers and often directly impacts on their ability to meet and maintain the standards of care that are expected of them.

How can this guide help?

This guide explains what the CQC looks for in terms of safe staffing and how you can meet these regulations.

It includes guidance around deciding and maintaining safe staffing levels for your service, safe recruitment practices and how to ensure your staff are safe and competent.

It draws on evidence from over 60 CQC inspection reports and case studies from residential and community based services who are rated 'good' and 'outstanding,' to help you to understand what 'good' looks like and learn from best practice.

Who's this guide for?

This guide's for anyone involved in CQC inspections in regulated adult social care services including directors, board members, registered managers, nominated individuals and compliance managers.

If you want to improve safe staffing practice across your service, we recommend that you read the whole guide.

If you want to improve safe staffing in relation to a specific key line of enquiry, go to the 'What are CQC standards around safe staffing?' section (on page 8) to see which sections can help.



Safe staffing is a fundamental part of getting care and

Contents

Click on each section below to get started. Each section gives you top tips to meet CQC regulations in this area, explains how the CQC inspect this area, and shows what other providers do and what to avoid.

Introduction

- What is safe staffing?
- What are the warning signs of inadequate staffing?
- What are CQC standards around safe staffing?
- Other resources to help

1

Safe staffing levels – how many staff do you need?

- Decide how many staff you need
- Plan your staffing rota
- Put contingencies in place
- Review your staffing levels
- Using technology to support safe staffing

2

Safe recruitment practices – recruit the right staff to deliver safe care and support

- Plan your recruitment
- Attract and select the right people
- Review your recruitment and retention activities

3

Safe and competent staff – ensure staff are competent to deliver safe care and support

- Give new staff a thorough induction
- Provide learning and development opportunities for staff
- Support your staff



Introduction

There are always enough competent staff on duty. Staff have the right mix of skills to make sure that practice is safe and they can respond to unforeseen events. The service regularly reviews staffing levels and adapts them to people's changing needs.

CQC "good" ratings characteristics
– adult social care services

What is safe staffing?

Safe staffing is about having enough staff, who have the right values and skills, to deliver high quality care and support. It involves:

- having safe staffing levels, including putting contingency plans in place
- recruiting the right people, with the right values, skills and experience to deliver safe care and support
- doing the right recruitment checks
- ensuring staff are competent and safe to do their role.

Getting this right means far more than achieving a good inspection rating, it means that people receive safe and effective care and support that's responsive to their needs. If you get it wrong, you could put your staff and the people you support at risk. For example, staff shortages put services under extreme pressure and can mean staff have to choose what care can or can't be delivered that day. This could lead to neglect and/or a safeguarding incident, a damning inspection and reputational damage.

It can also impact your existing workforce. For example if you have good staff who routinely work through their breaks or have a poor work-life balance due to working extra shifts, it can lead to mental ill-health and decreased motivation in your service.



Safe staffing levels aren't just about numbers – they're about skilled and experienced staff operating within clear, agreed and ethical care plans. They're also about having a low turnover so that staff actually stay long enough to form effective relationships with residents.

Jason Denny,
Registered Home Manager,
Old Hastings House



If you don't have enough staff you may put too much pressure on the existing workforce - asking them to cover more than they can, can cause people to burn out.

My organisation manages over 600,000 domiciliary visits a year so it's important we have trust in our processes and systems.

As chief executive, I know every week how many hours of care we need

What are the warning signs of inadequate staffing?

There are some common characteristics of services who have inadequate staffing. If some, or all, of these apply to your service this could indicate that you're not meeting the requirements for safe staffing.

- ✘ High turnover of staff
- ✘ Struggle to recruit enough staff
- ✘ New staff leave within a short time of joining
- ✘ High sickness rates that are particularly stress related
- ✘ Unorganised rota system and processes that are difficult to use and review
- ✘ Rotas are constantly changing
- ✘ Staff only have time to perform duties and tasks with no time to 'care'
- ✘ Staff don't have time to communicate with people they support, families and professionals
- ✘ Little consistency in staff
- ✘ Over-reliance on temporary workers
- ✘ Staff inductions are limited and/or rushed
- ✘ Staff learning and development is restricted to mandatory training
- ✘ Limited support for staff such as supervisions

Too many providers were struggling along without having enough staff to deliver safe and effective services. It wasn't generally because the staff didn't care; it was because they didn't have the time to care as well

The impact on residential services might include:	The impact on community services might include:
no time to respond to calls for help not enough time to do an effective handover staff support people to get ready and have meals at a time that best suits them rather than the individual not enough staff to support people at meal times medication documentation is rushed.	staff miss or are late for appointments staff are unable to report their concerns to the managers customers are unable to get in contact with the office.

You can use this guide to improve your practice.

What are CQC standards around safe staffing?

The CQC regulations explain the minimum standards that adult social care services need to meet regarding safe staffing.

Regulation 18 states:

1. Sufficient numbers of suitably qualified, competent, skilled and experienced persons must be deployed in order to meet the requirements of this part.
2. Persons employed by the service provider in the provision of a regulated activity must:
 - a. receive such appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform
 - b. be enabled where appropriate to obtain further qualifications appropriate to the work they perform
 - c. where such persons are health care professionals, social workers or other professionals registered with a health care or social care regulator, be enabled to provide evidence to the regulator in question demonstrating, where it is possible to do so, that they continue to meet the professional standards which are a condition of their ability to practise or a requirement of their role.

Elements of safe staffing are also included in:

Regulation 9: Person-centred care

Regulation 12: Safe care and treatment

Regulation 13: Safeguarding service users from abuse and improper treatment

Regulation 15: Premises and equipment

Regulation 19: Fit and proper persons employed.

You can read more about these regulations on the CQC website at www.cqc.org.uk. They have guidance and FAQs to help.

Safe

What will the CQC look at as part of their inspection?	Where can I find more information in this guide?
<p>S2.3 Are people’s records accurate, complete, legible, up-to-date, securely stored and available to relevant staff so that they support people to stay safe?</p>	<p>Safe recruitment practices</p>
<p>S3.1 What arrangements are there, including within the rotas, for making sure that staff have the right mix of skills, competencies, qualifications, experience and knowledge, to meet people’s individual needs?</p>	<p>Safe staffing levels Safe recruitment practices Safe and competent staff</p>
<p>S3.2 How is safety promoted in recruitment practices, arrangements to support staff, training arrangements, disciplinary procedures, and ongoing checks?</p>	<p>Safe recruitment practices Safe and competent staff</p>
<p>S3.3 Do staff receive effective training in safety systems, processes and practices?</p>	<p>Safe and competent staff</p>

Effective

What will the CQC look at as part of their inspection?	
<p>How is the effectiveness of staff’s skills, experience and knowledge promoted in recruitment practices, arrangements to support staff, training arrangements, disciplinary procedures, and ongoing checks?</p>	

Caring

What will the CQC look at as part of their inspection?	Where can I find more information in this guide?

Other resources to help

We have other resources to help you prepare for inspection and improve your service.

Making your inspection count seminar

If you're involved in CQC inspections in your service, our 'Making your inspection count seminar' will help you understand, prepare for and implement the changes to CQC inspections that were introduced over the past year.

You'll learn about the changes to CQC inspections, what inspectors are looking for and how you can evidence this.

You'll also access an evidence and action planning tool to help you put your learning into practice and prepare for your next inspection, and have the chance to network with peers and discuss your service's specific challenges and issues.

Find out more at
www.skillsforcare.org.uk/CQCseminars.

Good and outstanding care guide

Our 'Good and outstanding care guide' draws on tips and practical examples from providers already rated good and outstanding.

It shows what differentiates CQC ratings and shares recommendations and best practice under each area of inspection.

If you're already rated good or outstanding, it'll help you maintain or improve your rating. If your service requires improvement, it'll help you avoid some of the common mistakes and take a proactive approach to improving standards.

Download your copy of the guide at www.skillsforcare.org.uk/GO.

You can also purchase the workbook edition which has activities and self-assessment checklists to assess your current performance and identify areas for improvement.

[3 6 295\]an77 v13 6 295\]an77 v1](#)



1. Safe staffing levels

It's your responsibility to decide how many staff you need to deliver a safe, effective and responsive service and ensure you plan your staffing to maintain this.

There's no one solution to doing this – it'll depend on your service and the people you support, and it might change over time.

This section will help you to decide how many staff you need, plan your staffing rota and put contingencies in place to maintain safe staffing levels.

Providers should have a systematic approach to determine the number of staff and range of skills required in order to meet the needs of people using the service and keep them safe at all times. The approach they use must reflect current legislation and guidance where it is available.

CQC Regulation 18 Guidance

Get started

Click on each section to get started.

[1.1 Decide how many staff you need](#)

[1.2. Plan your staffing rota](#)

[1.3. Put contingency plans in place to maintain safe staffing levels](#)

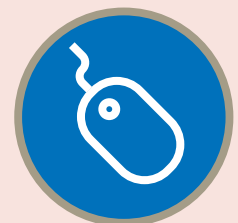
[1.4. Review your staffing levels](#)

[Using technology to support safe staffing](#)

[How will the CQC inspect this?](#)

[What other providers do](#)

[What to avoid](#)



More information: Dependency tools

Dependency tools can help you to decide how many staff you need. You can use them to collate information about the needs (or dependency) of people who need care and support, how many hours/staff support you need, and log other requirements such as time for administration, record keeping and communicating.

This can help you make informed decisions about how many staff you need in your service to meet safe staffing levels.

It also provides evidence for your inspection about how and why you've decided these levels. One CQC inspection report from a residential home rated 'requires improvement' for 'safe' said:

1.2 Plan your staffing rota

Once you know how many staff you need, for example from a dependency tool, you need to use this data to plan your staffing.

If your staffing levels don't match the data from the dependency tool, you could put people who need care and support at risk. One CQC inspection from a residential care home rated 'inadequate' for 'safe' said:

"We were told six people required two staff to assist with their care needs. This meant between the hours of 8am and 10am and 6pm and 8pm, if a person was being assisted by two care staff, there were no care staff to provide assistance to other people."

A good rota system, which lists your staff and other information such as location, working times and their responsibilities, will help you do this.

When you plan your staffing you also need to think about continuity of care – this means having consistent staff and matching them with people who need care and support. This enables staff to build relationships with the people they support, develop person-specific skills and knowledge, and means they're more likely to notice changes in health and wellbeing – all of this supports safe staffing. It also means a better experience for people who need care and support.







The number of staff on duty changed to reflect the number of people using the service each day.

The registered manager worked five days a week and a minimum of a senior, three support workers, a health and nutrition worker and housekeeper were on duty each day.

Overnight there was a waking night shift worker and one to two sleep-in staff.

CQC inspector, residential care home rated 'good' for 'safe'

Top tips: things to consider

	Use data from a dependency tool (or other process) to plan your staffing.
	Communicate staffing with your workforce and give them appropriate notice, for example through a staff rota.
	Have a system in place to alert concerns with staffing levels so you can promptly respond, for example automated alarms, electronic notifications and escalating concerns to managers.
	Ensure that staff who are responsible for determining safe staffing levels are available as an escalation point and know what to do in case of emergency.
	Have contingencies in place for short term staff shortages such as if someone is ill or doesn't turn up for work, and ensure that responsible staff know what these are.
	If there are any incidents relating to safe staffing, investigate them and use what you learn to improve your practice.

We plan a permanent pattern of work so staff know their rota six weeks in advance, and we try to let them know who they'll be visiting two weeks before. This work pattern means staff know when they'll be working for the year ahead which supports their work-life balance. It also means we expect staff to plan all non-



What works for us:

Walnut Care

Walnut Care start by planning their visits with Lego and use an online system to automate their rota and communicate with staff. They told us:

“When we’re planning our staffing levels, we start by using Lego!

I come from an accountancy background and we used Lego to plan who was doing which audits and when. We found that this same principle can be applied to managing a care service.

We split care visits up by the travel routes that our staff take, and write on a post it note the different visits we need to do on that route.

We then build this in Lego.

Each Lego brick represents a five minute block of care time and we use different coloured bricks to represent the different villages we operate in. We then allocate staff to each block of Lego and identify if there are any gaps.

We can then easily transfer this information into our computer system which automates our staff rota.

We’ve found that having a visual representation really helps us to plan our staffing. For example during times when we’re at risk of staff shortages, such as school holidays, it’s quick and easy for me to manage staff holiday requests and find cover for shifts.

The Lego sits on the wall in our office so staff can easily shuffle visits around if people ask us to fit in extra visits or we get new clients. This means that we don’t waste time and resources re-planning visits every week.”

Melanie Weatherley, Chief Executive





What works for us: Care Concern

Care Concern is a homecare provider who match their clients with a small group of regular staff. They told us:

“We introduce a small team of carers to each client so they receive consistent care and support from people who know them. It’s so important that carers and clients build a relationship based on trust, and regular visits from the same carers helps.

We have a dedicated coordinator who does our rotas each week. Our software remembers which carers have visited which clients and prompts us to make that match where possible. We can also put staff on a ‘declined list’ if someone requests this.”

Bernadette Kendall, Registered Manager



More information: Doing a safe handover

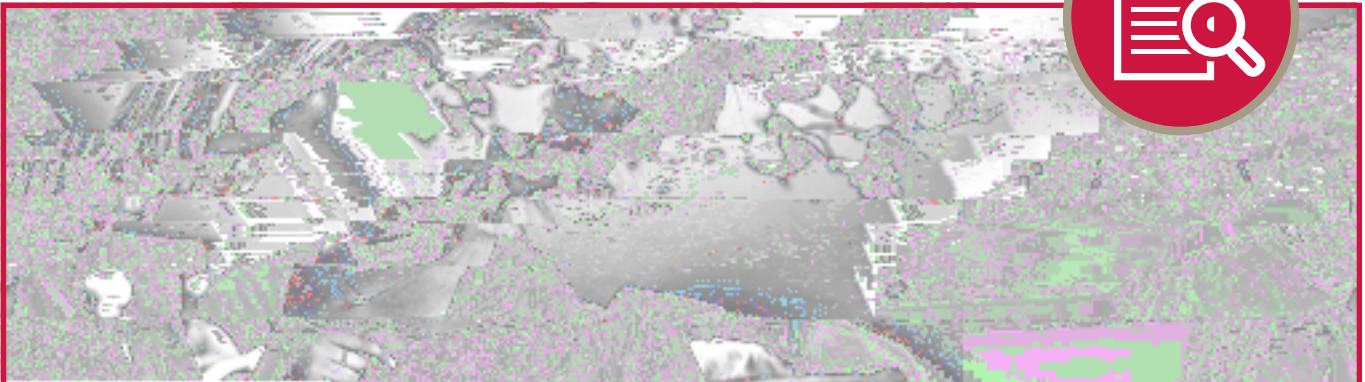
A good handover ensures staff have the right information about the people they're supporting so they can provide safe care and support.

It'll also help you to identify any changes to people's care and support needs, and share any concerns you have about people's safety.

Poor handovers can put people at risk, for example if staff don't know about a change in medication. One CQC inspection from a residential home rated 'inadequate' for 'safe' said:

"People's daily records and staff handover records did not always include the information staff needed to adapt their approach to changes in people's moods, behaviours or abilities."

Handovers should also feed into wider quality assurance processes and form part of any investigations into incidents or accidents. For example if staff tell you that someone's care needs have changed in a handover, you need to update their care plan. Handovers can put



What works for us:

Middleton Hall Retirement Village

Middleton Hall build time into their rota for staff to do an effective handover. They told us:

“An effective handover is a key part of the process that helps us deliver outstanding care at Middleton Hall.

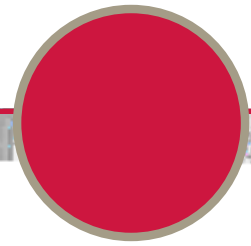
Our handovers include important information about clients or changes to our service including:

- medication
- any changes in people’s health and wellbeing
- any appointments people have been on
- new residents moving in
- communication with families
- social activity updates
- allocating tasks for the shift.

We make sure staff have enough time to do a good handover and this time is allocated into the rota.

We collect and share this information in a handover diary system which gives us an audit trail. We also share these with staff when they return from leave or absence. Our Head of Care and Quality monitors and observes handovers to ensure they’re high quality.”

Audra Hunt, Living Well Manager and Trainer



Deerhurst use a dependency profile to determine their staffing levels. They told us:

“We complete dependency profiles each month for everyone who lives in the home to show us what level of care we need, and use this to plan our staff rota.

We review the rota regularly to plan our staffing levels.

Our long term plan: We plan our rotas three months in advance on a ‘week one’ and ‘week two’ basis. This means we can see any gaps and arrange cover.

Our medium term plan: We then check the rota a month ahead to see if we need to make any changes.

Our short term plan: We check the rota every day to ensure that we have enough staff for the week ahead.

We work on a ‘week one’ and ‘week two’ basis so our staff can achieve a good work-life balance. We’ve found this helps with our retention and we have a dedicated and loyal workforce.

The care home manager is responsible for developing the rota, the deputy manager does a daily check and the administrator keeps it up to date.


We over-staff by 20% to allow for sickness, training and other unplanned absences. We have mentors in the home and offer placements for paramedic and nursing students – they provide that ‘little extra’ to the people we support. Previous students have also joined our bank staff team who help to cover holidays and weekends. At the moment we have five student paramedics and five student nurses on our bank team.

We haven’t had to use a recruitment agency for ten years and so by planning in this way, we can demonstrate that this works!”











Lesley Hobbs, Care Home Manager

1.3 Put contingency plans in place to maintain safe staffing levels

There are lots of things that can impact short term staffing levels and affect the safety of your service. You need to have contingency plans in place to respond to these and ensure that responsible staff know what these are.

		
Staff resignations e.g. removing people from rotas and organising replacement	Travel delays e.g. broken down cars, r	

Top tips: things to consider

	Have a succession plan in place to help you manage resignations or long term absences.
	Tell staff and the people you support about any changes to staffing as a result of staff shortages, and how this could impact them.
	Over-staff your service to a level that avoids poor standards of care when impacted by staff shortages.
	Train other staff to cover specific responsibilities, such as domestic workers supporting people at meal times.
	Build working relationships with other local services who could cover shifts.
	Have a team of bank staff who can cover gaps in the rota.
	Use agency staff to cover emergencies.
	Run a volunteering programme to enhance the support you provide and enable more people to enjoy new experiences and activities. However they shouldn't be a substitute for paid staff and everyone needs to understand this difference.
	In a community care service, if the route to your visits are blocked, have alternate plans in place, for example arrange for family, friends or neighbours to visit people if staff can't get there.
	Record and monitor the impact of staff shortages, for example if community care staff miss a visit, and include them in your quality assurance process.

More information: Using temporary staff

We encourage providers to use contracted workers where possible to provide continuity of care and save costs.

Using temporary staff in the long term isn't a cost effective way to fill vacancies or address short staffing.

However, they can help you maintain staffing levels and offer flexibility for other workers.

Lots of temporary staff have relevant experience and the right values to work in social care, but it's important that they get the right induction and support to provide safe care and support.

Here are some things to consider if you use temporary staff.

- ✓ Review the care and support needs of the people you support and decide if these can be met by temporary staff.
- ✓ Think carefully about the role and responsibilities of these staff, taking into account their knowledge and experience of your service and the people you support. This might be different to your other permanent staff.
- ✓ Ensure temporary staff are recruited through the same recruitment processes as other staff – they still need the right values to work in your organisation and to have the right checks.
- ✓ Ensure staff have the right values, skills and knowledge for their role and assess their competence before they work unsupervised. If you identify any gaps, provide appropriate training.
- ✓ If they have experience from the health and social care sector, check that their training and qualifications are in date.
- ✓ If they're new to social care, ensure that they meet the Care Certificate standards.
- ✓ Provide a thorough induction that introduces them to your organisation's policies and procedures, assesses their competence and ensures they're trained to use any equipment they need in their role. You could give them a mentor or buddy.
- ✓ Tell existing staff what roles and responsibilities temporary staff have.
- ✓ Provide regular feedback, supervisions and appraisals of performance both to the staff member and to their agency.

Shortages of qualified staff can have a substantial impact on the quality of care, with some roles and specialties facing more severe shortages than others. High reliance on agency, bank and locum staff can often be a characteristic of poor performing services.

The state of health care and adult social care in England 2017/18, CQC

Walnut Care is a domiciliary care agency in rural Lincolnshire so it's important they have a good contingency plan for extreme weather conditions. They told us:

"The local area is susceptible to flooding so it's vital we have a contingency plan in place.

1.4 Review and revise your staffing levels

You need to review your staffing levels regularly to ensure they still meet the needs of your service, and revise them if needed.

This should be a regular part of your quality assurance processes but sometimes you might need to do an ad-hoc review, for example if someone's care and support needs change, if they request a different time (in community care settings) or if staff ask to change their hours.

If you don't review and revise your staffing levels when needed, this can impact the quality of care and support and risk safety. Here's what two care workers from residential homes rated 'inadequate' for 'safe' told the CQC:

"Sometimes it's hard, we work our way around it but it's difficult. People's needs have got harder."

"We are all exhausted and the residents don't get the care they deserve. We have all asked for more staff and keep getting told the provider won't allow it".

Staffing levels and skill mix must be reviewed continuously and adapted to respond to the changing needs and circumstances of people using the service.

CQC Regulation 18 Guidance



I review my staffing levels at least every three months and have flexibility built into my budget to increase above normal levels where required. This is about being responsive to changing need and having proactive care planning approaches.

This also requires having a good bank team along with flexible staff. My tendency is to risk over-staffing the home slightly to create this contingency, with any slack taken up with further person-centred care and activities.

Jason Denny, Registered Manager, Old Hastings House



Using technology to support safe staffing

1. Plan your workforce

- See a live dashboard of current staffing levels
- Review what staffing levels you need in the future
- Make informed decisions about staffing based on previous data
- Create rotes for one or more services
- Review and approve changes to rotas
- Flag concerns such as high levels of agency workers
- Automatic alerts when you reach a critical staffing threshold
- Recruitment support including application forms, selection and contracts

"Our managers use a time and attendance system called 'Care Blox' which asks staff when they're available to work and tracks annual leave and sickness records so we can plan rotas. It also means we can see who's to cover in case of emergencies."

Audra Hunt, Living Well Manager and Trainer, Middleton Hall Retirement Village

6. Other areas of your service

- Support with finance functions such as raising purchase orders, payroll and charging staff hours
- Instant access to the latest care plans
- Update care plans instantly and handover to next shift/ carer

"The electronic system manages time keeping which means staff are paid for the hours they've worked. This reduces any human error and discrepancies with pay."

Darren Crowton, Registered Manager, Voyage Care Ltd

5. Support care visits (community care)



- Track time spent at visits
- People who need care and support can see who's visiting them
- Notifications of delays or changes to visits
- Calculate travel time and compare by mode of transport
- Keep a record of what's done as part of the visit

"They used computerised call monitoring system to monitor if staff were being delayed so they could provide additional support if needed. For example if an ambulance was needed, a member of the management team would wait with the person, enabling the staff to continue with their care calls."

CQC inspection report, homecare agency rated 'good' for 'safe'

"The application used geo-tagging which enabled the service to monitor that the care worker had arrived safely at the property and their time of arrival. The application monitored when the care worker left and enabled the service to monitor the time that had been spent with the person. "

Top tips: things to consider

	Get buy in from all managers and leaders before you invest time in a staffing system.
	



What works for us:

Bay Care Domiciliary Care Ltd

Bay Care use an online system to support their rota planning and communicate with staff on a day to day basis. They told us:

“We know recording information is important so we wanted to make it more simple and effective for staff by using a digital system.

We researched lots of software companies and chose PP and Mobizio because it was user friendly and met our needs.

The system enables us to do real time care planning and keep up to date notes for staff to see before their visits. Staff get direct alerts regarding their visits and what tasks need doing, updates to documents and rota changes. They can also record care notes after visits which are useful for handovers.

The system supports us in other areas such as administering medication, completing body maps, filling in incident forms, finance processes such as payroll and logging missed tasks.

We give staff one to one training to help them use the system and they can access webinars and handbooks to help. Our domiciliary care workers download the app on their mobile phone and because it's easy to use, we find that they don't need much more support.

For our managers the system provides real time reports to ensure we don't miss any visits and has online forms so we can deal with any concerns quickly. It also provides evidence of our staffing for CQC inspections.”

Katrina Green, Director and Registered Manager



What other providers do

“The service used ‘workforce planning modelling’ to ensure staffing levels were appropriate. This was done by looking at key elements such as occupancy, patient dependency, skill mix and workload. This meant people were kept safe because staffing levels were sufficient

What to avoid

Many services rated 'requires improvement' or 'inadequate' make these common mistakes when it comes to safe staffing.

They:

- fail to follow their own policies and procedures or take an inconsistent approach when determining staffing levels

- take on new care packages when they don't have enough staff with the right skills to meet people's needs

- ask staff to do things alone that require more than one person because they don't have enough staff

- don't allocate enough time for care and support

Even the basics, such as putting notes on care plans, had not always been completed by agency staff due to a lack of training. However, it's not just about numbers – staff need to be capable and deployed effectively to ensure the safety of people at a service.

The State of Health Care and Adult Social Care in England
2016-2017, CQC

2. Safe recruitment practices

Once you've decided how many staff you need, your recruitment activities need to attract and select the right people to fill them.

Without safe recruitment practices, you could fail to do essential checks and recruit people who aren't suitable to work in the sector. This increases the risk of providing unsafe care and support.

Taking a values-based approach will help you to recruit the right people at the start who are more likely to stay. This can save you recruitment time and costs and protects the continuity of care and support.

You also need to do the right recruitment checks, such as DBS, reference and right to work checks.

Quality means that providers recruit good quality staff, and support and empower their staff to do their best work and continue to develop their professional skills.

Quality Matters, 2017

Get started

Click on each section to get started.

[2.1. Plan your recruitment](#)

[2.2. Attract and select the right people](#)

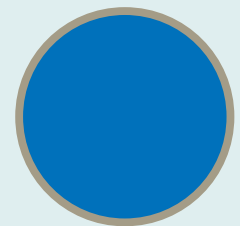
[2.3. Review your recruitment activities](#)

[How will the CQC inspect this?](#)

[What other providers do](#)

[What to avoid](#)

[Resources to help](#)



Voyage Care uses a range of ways to attract new staff and take an open approach to their recruitment, so they can recruit from a wide talent pool. They told us:


“We want to ensure people from all backgrounds and experiences have the opportunity to join a thriving sector.

We invest time and energy into raising our profile locally which makes it easier to recruit. We hold regular open days where existing staff talk to members of the

2.2 Attract and select the right people

Safe staffing isn't just about filling vacancies, it's about filling them with the right people. This will improve the quality and consistency of your care and support, reduce the number of 'wrong choices' and save you the costs and time of re-recruitment.

Top tips: things to consider

Attract the right people to your vacancies	
	

More information: Do the right checks

Recruitment checks are particularly important in adult social care because you're supporting people who could be vulnerable.

The CQC expects regulated providers to comply with schedule 3 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 which outlines what information they need to collect from all workers before they start their role.

Here are some of the checks that you need to do.

Proof of identity

You need to check original copies of potential recruit's identification (ID) which should include their full name, signature, address and date of birth. The Disclosure and Barring Service's (DBS) has guidance to help you if someone doesn't have photographic ID. [Download it here.](#)

DBS checks

You need to do DBS checks to ensure that staff are suitable to work with vulnerable groups. In fact, if you're a regulated provider you're breaking the law if you employ someone into a regulated activity from which they're barred from working – this includes voluntary and unpaid workers.

Generally all new care workers should have a completed DBS check before they start. However there may be some flexibility from the CQC if a new worker has a DBS check with a previous employer in the past three months and for a similar role.

If a candidate has a criminal record, you should review this on a case by case basis. Research in 2017 revealed that over 11 million people in the UK have a criminal record and this shouldn't be a barrier to employment.

We have a process for requesting and following up references for new workers. They told us: We ask candidates to name their

We then put our care home managers in touch with previous (or current) employers to talk about what they're like as a person and their skills and knowledge.

We check what training they've had and what they might need in the future. We also ask if they have any outstanding disciplinary action on their record.

If we're recruiting someone who's just starting their career, we accept references from reliable sources such as their GP, nurse, college lecturer or school teacher.

Wren Hall use a psychometric test to assess candidate's values at the start of their recruitment process. They told us:

"At the beginning of our recruitment process, before people have completed the application form, we ask them to complete a psychometric test.

We use a customised, online, multiple choice questionnaire to see if people are suitable for the role. It has different questionnaires for different roles so we can use it across the organisation.

The questionnaire has two parts: job fit and safeguarding. It aligns with our values



What works for us:

Middleton Hall Retirement Village

Middleton Hall use different methods of assessing whether candidates have the right values to work for them. They told us:

“We use a candidate screening tool, values-based interviewing and written scenarios in our recruitment to ensure we recruit the right people to deliver safe care.

The written scenarios are based on situations that our staff might come across and we ask candidates to tell us what they'd do in each situation. We look at their answers to ensure they put the resident first and take a person-centred approach.

Candidates are then invited to an interview with the registered manager. They do a practical assessment first where they meet residents, do a task in the community setting or join them an activity. We observe how they interact with residents and their family members.

We also look out for their key qualities to ensure they match with our values such as being a good listener, good communicator, having a caring and warm nature, able to solve problems and treating people with dignity.

We use these different assessments to build a profile of the candidate and ensure that their values and skills match what we want. We ask for feedback from the manager, staff and residents before we make a final decision.”

Audra Hunt, Living Well Manager and Trainer





What works for us: Castle Supported Living

Castle Supported Living put people who use their services at the heart of their recruitment, to ensure they recruit the right people. They told us:

“We recruit workers based on the needs and interests of the people we support. To do this we ask for candidate’s hobbies and interests on the application form so we can make suitable matches.

We ask people questions about their values and behaviours in the selection process and show them a video called ‘Our Lives – Our Way’ that was made by the people we support. We also show them our ‘Castle commitments book’ which outlines the commitment that we make to the people we support. This shows them the standards that we expect from them once they start working with us.

We’re committed to developing stable and consistent teams so that people are only supported by staff they know – we don’t use agency staff to ensure consistency of care.

We include existing workers, people who need care and support and their families in the recruitment process. For example they co-produce our job adverts and job specifications and meet candidates and get involved in interviewing and selecting.”




Debbie O’Brien, Registered Manager



2.3 Review your recruitment activities

Reviewing your recruitment activities can help you see what's working and where you can improve.

Top tips: things to consider

	<p>Review key recruitment data from your service such as staff turnover, especially of staff in their first 12 months.</p> <p>Use this to make informed changes to your recruitment activities. For example if staff are leaving in the first few months because the job isn't what they expected, review your job description.</p>
	<p>Ask people what they thought about the application process, for example did anything put them off applying or did they find anything difficult? Review your process using their feedback.</p>
	<p>Do exit interviews when people leave so you know why, and make changes to address any issues.</p>

What to avoid

Many services rated 'requires improvement' or 'inadequate' make these common mistakes when it comes to safe recruitment practices.

They:

- ✘ blame the lack of staff on recruitment difficulties and can't evidence how they're addressing these challenges. CQC inspectors will expect good services to mitigate this risk through effective recruitment activities
- ✘ drop the standard of staff to fill vacancies and employ people who don't have the right values and skills to work in social care
- ✘ don't check references or wait for completed DBS checks before staff start work
- ✘ don't value staff, for example one manager said:
"If they weren't working for us, they'd be stacking shelves at the local supermarket."



The concern I do have is that when the usual carer is going to be away, they don't seem to be able to cover leave or shortfalls.

Family member, residential home rated 'inadequate' for 'safe'

Resources to help

Finding and keeping workers

This toolkit has practical guides, tips and videos to help you attract more people, take on the right people, and develop and retain them.

Visit www.skillsforcare.org.uk/leaderskeepers.

Values-based recruitment and retention toolkit

This toolkit has practical guides and templates to help you get started with this approach. It can help you identify your workplace values and ensure that your staff match them.

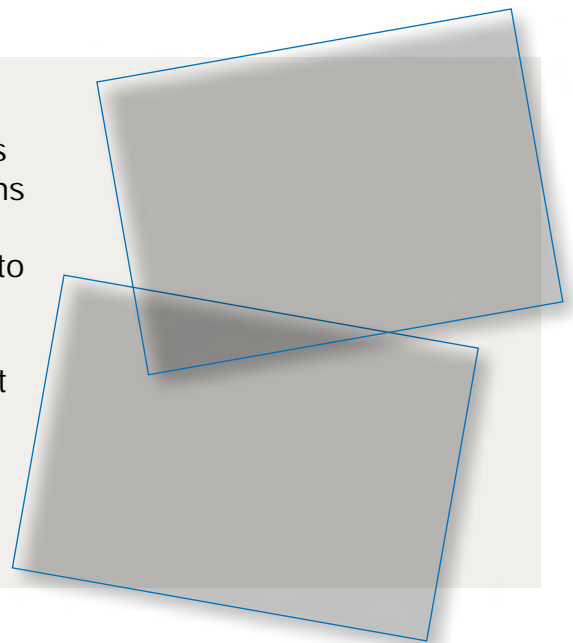
Visit www.skillsforcare.org.uk/values.

A Question of Care

This online quiz is based on real life scenarios and asks candidates to watch a short video and answer questions about it. At the end they get a personal profile which maps their answers to some of the key values needed to work in care.

You can use it in your recruitment to give you an insight into how they think and act at work.

Access the tool and download our guide at www.skillsforcare.org.uk/QofCare.



3.

3.1 Give new staff a thorough induction

Providers must ensure that they have an induction programme that prepares staff for their role. It is expected that providers that employ social care support workers should follow the Care Certificate standards to make sure new staff are supported, skilled and assessed as competent to carry out their roles.”

CQC Regulation 18 Guidance

Induction gives new staff the opportunity to learn about your organisation and the standards of service you expect from them. This ensures they're safe and competent to work with people who need care and support.

You should tailor inductions to people's previous experience. The time it takes to complete a full induction will vary and you need to be realistic when you plan this. For example the Care Certificate is likely to take several weeks to complete.

At the end of induction, you need to assess that new staff are competent to do their role before they work independently.



Regardless of people's experience, we ensure all new staff complete our induction before they visit people for the first time. This includes moving and handling, safeguarding and basic health and safety.

We know people with previous experience might have done this before, but we need to make sure it's relevant to our service and customers. For example we think it's important that they understand our approach to safeguarding so we can be consistent.

Chief Executive, homecare service rated 'good' for 'effective'



Walnut Care take a flexible approach to shadowing as part of their recruitment, and don't allow new staff to work unsupervised until they're confident and competent to do so. They told us:

"When new staff start, we give them the training they need for the people they'll be supporting. This ensures that they're safe and competent to deliver high quality care and support.

Everybody completes our induction programme which includes:

- Care Certificate face to face training and workbook
- shadowing on double-handed visits.

On the 'double handed visits' staff work with a more experienced staff member on a visit. This helps them learn on the job for 18.1 months (some experienced staff) before they work unsupervised. Some people take a few months to become



What works for us:

Voyage Care

Voyage Care have a varied induction programme for new staff, including training, learning about their organisation, shadowing and observations. They told us:

“When new staff start they have a six month probation period where they complete the Care Certificate (if they’re new to social care), learn about our organisation and the people they support.

For the first three weeks they shadow an experienced staff member to learn more about the way we work. They read through our care plans and can ask questions about what’s in there. Throughout this time we observe their work and give them constructive feedback about their strengths and areas for improvement.

We do supervisions every eight weeks throughout this probation period to see how they’re getting on and identify areas for learning and development. We produce a development plan to track their progress.

If staff need longer to become confident and competent, we can extend the probation period for another three months.”

Darren Crowton, Registered Manager

3.2 Provide learning and development opportunities for staff

The CQC expects regulated providers to invest in learning and development to ensure staff are safe and competent to deliver care and support as appropriate to their role.

This could be through apprenticeships, qualifications, on the job training, mentoring, training courses or e-learning.

If staff aren't competent, this could put people at risk and lead to a safeguarding concern. One CQC inspection from a nursing home rated 'inadequate' for 'effective' said:

"Despite all the training being in place we identified areas of concern where staff's skills did not reflect the latest best practice or guidance. For example, risk assessments and care plans did not support people's needs. The registered manager had not consistently assessed staff competencies with only a small number of competency assessments being completed."

Staff must only work within the scope of their qualifications, competence, skills and experience, and should be encouraged to seek help when they feel they are being asked to do

Top tips: what to consider



Walnut Care give staff a smart phone which they can use to access elearning and training modules in between home visits.

“When staff come and work with us we give them a smart phone and pay for their credit. Because we’re in a rural location, staff can sometimes have up to a 40 minute wait in between home visits so we encourage them to do e:learning and training modules on their phone in between.

This helps them to continually develop and keeps them active and engaged.”

3.3 Support your staff

Staff who are supported deliver better and safer care. If you don't support your staff, it can lead to a negative workplace culture, increased absence and a higher turnover which can risk safe staffing levels and lead to a negative CQC inspection.

One CQC inspection from a residential home rated 'requires improvement' for 'effective' said: *"Three out of the four night staff had not received a formal supervision for over a year. One of these staff had yet to have a probation meeting, due five months ago, to assess if they were suitable and competent to continue in their role."*

Top tips: what to consider

More information: Managing staff performance

Performance management processes are effective, reviewed regularly, and reflect best practice. Leaders and managers provide feedback to staff and there is clear evidence that this leads to improvement.

CQC "outstanding" ratings characteristics – adult social care services

Effective performance management will ensure that your staff continue to deliver safe care and support. Without it you could see standards slip which could risk the safety of your staff and service.

It can be challenging to manage poor performance of staff, but managers need to have the right skills to do this.

We discuss poor performance in supervisions and one off meetings to establish the reasons behind it. We give staff lots of advice and guidance to help them improve their performance.

We record these meetings and develop an action plan to support staff to improve in their role. This plan might include more regular supervisions, mentoring, additional training or observations.

Darren Crowton, Registered Manager, Voyage Care Ltd

Observations

They might observe:

- interactions between staff and people who need care and support
- the skills, techniques and methods that staff use
- how staff interact with people who may lack capacity to make a decision
- how staff interact with each other.

Records and policies

They might look at records such as:

- person specifications for job roles
- staff induction records
- learning and development records, including training, qualifications, registration requirements and development plans
- training content
- staff supervision, spot check and appraisal records
- communications with staff
- disciplinary meeting minutes.



What other providers do

“All staff in our retirement village have had training to recognise any changes in a resident’s wellbeing and/or behaviour and if they need any more care and support. This ensures we can provide safe care and support at all times.



Audra Hunt, Living Well Manager and Trainer, Middleton Hall Retirement Village



“I’ve had all the training. I did shadowing and was eased into it until I was confident. They (staff) always asked me if I wanted to do something or just watch. I was never pressured to do anything I wasn’t confident with.”

Care worker, from a service rated ‘good’ for ‘effective’

“We give staff a smart phone and pay for their credit. We give them a nice phone to encourage them to use it. They know they can always ring me and there’s always someone in the office to respond.”



Melanie Weatherley, Chief Executive, Walnut Care

What to avoid

Many services rated 'requires improvement' or 'inadequate' make these mistakes when it comes to ensuring their staff are safe and competent.

They:

- deliver or commission learning programmes that cover the full Care Certificate or mandatory training in one day – this isn't sufficient time

Resources to help

Learning and development guide

This online guide will help you develop a learning and development strategy for your organisation, including finding high quality training providers through our endorsement framework and funding for training (through

Acknowledgements

Skills for Care would like to thank these organisations who supported us to develop this guide.

Brunelcare – Deerhurst care home with nursing	Care Concern (Homecare) Ltd
Castle Supported Living	Egalité Care Ltd
London Care Partnership	Old Hastings House
Simply Care (UK) Ltd	Exmoor Community Care
Voyage Care Ltd	LDC Care Co
Walnut Care	Bay Care Domiciliary Care Ltd
Anchor	Dales House (Westwood Care Group)
Wren Hall Nursing Home	Middleton Hall Retirement Village

Skills for Care
West Gate
6 Grace Street
Leeds
LS1 2RP

T: 0113 245 1716
E: info@skillsforcare.org.uk

skillsforcare.org.uk