



AGENDA ITEM

2.2.15

CTM BOARD

NURSE STAFFING LEVELS ANNUAL ASSURANCE REPORT 2020-2021

Date of meeting	27 May 2021
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Ben Durham, Lead Nurse for Professional Practice and Quality Assurance
Presented by	Greg Dix, Executive Director of Nursing
Approving Executive Sponsor	Executive Director of Nursing
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
(Insert Name)	(DD/MM/YYYY)	Choose an item.

ACRONYMS

NSLWA	Nurse Staffing Levels Wales Act
ILG	Integrated Locality Group

1. SITUATION/BACKGROUND

The Nurse Staffing Levels (Wales) Act (NSLWA) 2016 became law in March 2016 with the final sections of the Act coming into effect in April 2018.

Section 25E requires Health Boards/Trusts to report their compliance in maintaining the nurse staffing level for each adult acute medical and surgical ward. The Health Board (HB) must submit a three-yearly report to Welsh Government. To facilitate this, a process of submitting an annual assurance report, using a nationally agreed template, to each Health Board has been agreed through the All Wales Nurse Staffing programme.

The aim of this report is to provide an overview of the Health Board's level of compliance with the agreed nurse staffing levels; the impact upon the quality of care where the nurse staffing level was not maintained and the actions taken in response to this position

This annual report represents the third of three annual reports which will, when aggregated at the end of the 2018-2021 reporting period, form the basis of the statutory three year report to Welsh Government required by the NSLWA. The Annual report covers the time period from 6th April 2020 to 5th April 2021.

During this reporting period the COVID-19 pandemic has created many challenges within the HB, the Welsh Government position associated with the Nurse Staffing Levels (Wales) Act 2016 during these exceptional circumstances was to postpone the annual report to Board, due May 2020 to September 2020. In addition there has been further disruption to some of the All Wales Nursing Staffing Programme work streams. Most notable was the extension to the Act's second duty to Paediatric inpatient wards which was postponed until October 2021. Also during the reporting period, the bi-annual acuity audit for January 2021 was cancelled due to the ongoing COVID-19 pandemic.

The Board is asked to formally receive and note the information contained within the 2020/2021 Nurse Staffing levels (Wales) Annual Assurance Report (Appendix A) which has been produced using the prescribed NHS Wales reporting template.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

The 2020-2021 Nurse Staffing levels (Wales) annual assurance report (Appendix A) sets out the progress made within CTMUHB during 2020/21 (6th April 2020 - 5th April 2021) in relation to meeting the various statutory requirements of the NSLWA. For ease of providing assurance, the report is divided into the following sections:



- **Section 25A**, which addresses the Health Boards/Trusts overarching responsibility to ensure appropriate nurse staffing levels in any area where nursing services are provided or commissioned, in addition to the detailed requirements relating to adult medical and surgical wards (pages 1-2 of the report).
- The actions taken in relation to **calculating** the nurse staffing level on wards where section 25B applies (page 4-7 of the report).
- The use made of **the triangulated approach** to calculate the nurse staffing level on section 25B wards; and the use made of the principles underpinning this approach to provide the foundation for the work being undertaken to ensure appropriate nurse staffing levels are calculated for all areas where nursing services are provided (page 8 of the report).
- How the CTMUHB responsibilities **to inform patients** about nurse staffing levels are being met (page 8 of the report).
- **The extent to which** the nurse staffing levels in Section 25B wards have been maintained (pages 9-11 of the report).
- The robustness of the systems and processes in place for **maintaining the nurse staffing level** (page 12 of the report).
- The **impact on care quality** as a result of not maintaining the nurse staffing levels (page 13 of the report)
- The **actions taken** when nurse staffing levels have not been maintained, both in relation to specific incidents and when considering the more strategic challenges in maintaining the calculated staffing levels (page 14-15 of the report).
- Report conclusion (page 15-16 of the report)

Health Boards are required to submit a nurse levels report following the bi-annual acuity audit that is routinely undertaken in June however due to the COVID-19 pandemic the Welsh Government decided to postpone the June bi-annual acuity audit until July 2020.

Following the acuity audit undertaken in July 2020, wards that are under Section 25B were reviewed in order to ensure the calculation of the nurse staffing levels using prescribed methodology. These establishments have been authorised by the ILG Directors of Nursing. Each ward has been subjected to the triangulated approach and the workforce planning tool to produce a ward template.

The Board is asked to formally receive and note the information contained within the Annual Presentation of Nurse Staffing Levels to the Board (Appendix A) which has been produced using the prescribed NHS Wales reporting template.

Between June 2020 and 30th September 2020 within CTMUHB there have been multiple changes to 22 of the 29 wards at various points in response to COVID-19. 8 wards have been repurposed and defined as purely covid-19 wards. The Chief Nursing Officer letter 15th October 2020 clarified that these repurposed wards would remain within Section 25B of the Act unless they have been repurposed for Critical

Care or high care (non-Invasive Ventilation (NIV) capacity. All wards that remain under Section 25B of the Act within CTMUHB are displayed in Appendix B.

The January 2021 bi-annual acuity audit was cancelled, however since November 2020 the Heads of Nursing for the 3 District General Hospitals (DGHs) agreed to provide weekly reports charting any changes to wards within the acute sites. During this height of the 2nd wave of the COVID-19 pandemic, 21 section B wards had been repurposed into Red, Amber and Green as defined by Welsh Government (2020) COVID-19 – 16 point plan.

The extension to the 2016 Act second duty for Paediatric inpatient wards was postponed until October 2021, but work continued and a position paper has been submitted to the Board informing them that under the current clinical model for paediatric inpatient wards within CTM, there will be requirement to fund 43.87 wte Registered Nurse (RN) and 9.81 wte Healthcare Support Workers (HCSW) to be compliant within the 2016 Act.

Changes to note

Due to Covid-19 some of the wards within Section 25B of the Act, required their staffing establishments to be temporarily revised as wards were repurposed in response to COVID-19. Some wards have been repurposed to provide dedicated additional Covid-19 positive, critical care beds and high care respiratory beds. Due to these changes, some wards that were initially sitting within Section 25B of the Act currently sit outside Section 25B. These changes are described in more detail within the Annual Presentation of Nurse Staffing Levels to the Board (Appendix A). All wards that remain under Section 25B of the Act within CTMUHB are displayed in Appendix B.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

The Board is asked to note, in particular, under this section there is a requirement to report if there has been an impact on care quality due to not maintaining the nurse staffing levels. The incidents which need to be reported under the Act yearly are the number of serious incidents/complaints where failure to maintain the nurse staffing level was considered to have been a factor for the following patient harm incidents:

- Hospital acquired pressure damage (grade 3, 4 and unstageable).
- Falls resulting in serious harm or death (i.e. level 4 and 5 incidents).
- Medication related never events.

In addition, from 2019/20, we are also required to consider whether a failure to maintain nurse staffing levels played any part in any/all complaints received about nursing care.

Table 1 within Appendix A sets out the number of serious incidents/complaints that occurred on 25B wards between 6th April 2020 to 5th April 2021. There is also a requirement to report where failure to maintain the nurse staffing level was considered to have been a contributory factor. During this reporting period, there have been 2 identified incidents/complaints directly reported where failure to meet the nurse staffing level has been recorded. However none of these met the threshold to be reported to Welsh Government.

Detail is provided in the final section of the annual assurance report (Appendix A) in relation to the key actions taken in response to specific incidents / nursing care concerns when nurse staffing levels were not maintained as well as the broader, more strategic actions being taken to ensure that both the numbers and the skill set of the nursing workforce is appropriate to provide sensitive and individualised care to all CTMUHB patients.

It is envisaged that wards within Section 25B will continue to be repurposed in response to resetting post COVID-19 and it is recognised that this will continue to present challenges in relation to the workforce required in order to deliver care within these repurposed wards.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	Staff and Resources Safe Care
Equality impact assessment completed	Yes
Legal implications / impact	Yes (Include further detail below)
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION

The Board is asked to:

- **NOTE** the position of the Health Board against its responsibilities within the NSLWA with regard to the annual assurance report.



- **NOTE** the conclusions and recommendations have been reported on pages 11-12 of the annual assurance report (Appendix A).