



AGENDA ITEM

5.4

CTM BOARD

NURSE STAFFING LEVELS ANNUAL ASSURANCE REPORT 2021-2022

Date of meeting	26 th May 2022
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. From the 1st October 2021 the second duty of the Nurse staffing Levels (Wales) Act was extended to paediatric inpatient wards.

Section 25E requires Health Boards/Trusts to report their compliance in maintaining the nurse staffing level for each adult acute medical and surgical ward and paediatric inpatient wards.

The aim of this report is to provide an annual report covering the time period from 6th April 2021 to 5th April 2022, with 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.

The triangulated methodology prescribed in section 25C of the Act sets out the principles to calculating the nurse staffing levels. Due to the Covid-19 pandemic during this reporting period and the pressure this placed in the acute settings in hospitals, the Welsh Government informed Health Boards that they were not mandating for the bi-annual audit in January 2021 to be undertaken. In response with the 'Once for Wales' approach Executive Nurse Directors agreed that their Organisations would defer this bi-annual audit and subsequent calculations of nurse staffing levels until June 2021.

The Board is asked to formally receive and note the information contained within the 2021/2022 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 2021-2022 Nurse Staffing levels (Wales) Annual Assurance report (Appendix A) sets out the progress made within CTMUHB during 2021/22 (6th April 2021 - 5th April 2022) in relation to meeting the various statutory requirements of the NSLWA.

Following the acuity audit undertaken in June 2021, wards that are under Section 25B were reviewed in order to ensure the calculation of the nurse staffing levels using the prescribed methodology. These establishments have been reviewed and authorised by the ILG Nurse Directors. Each ward has been subjected to the triangulated approach and the workforce planning tool to produce a ward template.

Changes to note

On the 1st October 2021 the second duty of the 2016 Act was extended to paediatric inpatient wards therefore this annual report contains information from the 1st October 2021 until 5th April 2022.

During the last reporting period there has been a number of wards under section 25B that have changed. Prior to the Covid-19 Pandemic the 25B wards within CTMUHB were relatively stable regarding their required staffing establishment, however in response to the pandemic there have been a number of wards repurposed frequently to meet demand.

At the time of this report there are still 5 ward areas across CTMUHB which continue to be repurposed into high care respiratory or ITU and therefore remain outside of the Section 25B wards. These are currently:

- Ward 9 in PoWH has been repurposed from an acute surgical ward into a Covid-19 high care admissions area.
- Ward 3 in PCH has been repurposed from an acute orthopaedic surgical ward into a Covid-19 high care area and Ward 4 has been converted temporarily from an acute trauma surgical ward into ITU due to building works.
- Ward 3 in RGH has been repurposed from an acute Trauma & Orthopaedics surgical ward into a Covid-19 admission ward.
- Ward 7 in RGH has been repurposed from an acute surgical ward into ITU surge capacity.

Wards added to section 25B:

- Ward 10 in RGH, is currently an elective surgical green pathway ward area.
- Ward 20 in RGH has been repurposed from a rehabilitation ward to an acute medical ward.
- Ward 21 PoWH is currently an adult acute short stay surgical unit.
- Protected Elective Surgical Unit (PESU) in PCH, is currently a green elective surgical ward.

Wards no longer within Section 25B:

- Ward 8 in PoWH is currently relocated to Ward A in Ysbyty'r Seren and has been repurposed into a rehabilitation ward therefore no longer sits within the Act.
- Ward 11 in PoWH was a respiratory ward during Covid-19 but has now been decommissioned and is closed.

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.

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.

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 adult 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.

The incidents which need to be reported under the Act yearly for paediatric inpatient wards are:

- Hospital acquired pressure damage (grade 3, 4 and unstageable).
- Infiltration/extravasation injuries
- Medication related never events.

In addition, the Health Board is also required to consider whether a failure to maintain nurse staffing levels played any part in any/all complaints received about nursing care.

The table below provides a summary of the incidents outlined above between 6th April 2021 to 5th April 2022. This information is provided in more detail within Appendix A.

	Adult acute S25B wards		Paediatric inpatient wards	
Incidents of patient harm with reference to quality indicators and any complaints about care provided by nurses on ADULT acute medical and surgical wards	Number of incidents/complaints when the nurse staffing level (planned roster) was not maintained	Number of incidents/complaints where failure to maintain the nurse staffing level (planned roster) was considered to have been a contributing factor	Number of incidents/complaints when the nurse staffing level (planned roster) was not maintained	Number of incidents/complaints where failure to maintain the nurse staffing level (planned roster) was considered to have been a contributing factor
Hospital acquired pressure damage (grade 3, 4 and unstageable)	3	3	0	0



Falls resulting in serious harm or death (i.e. level 4 and 5 incidents).	2	1	N/A	N/A
Medication errors never events	0	0	0	0
Infiltration/extravasation injuries	N/A	N/A	4	Incomplete data on datix
Any complaints about nursing care	0	0	1	1

The total analysis for the impact of not maintaining the staffing level for this reporting period cannot be made due to 27 open incidents still being investigated.

From 1st April 2022, the updated 'Once for Wales' e-datix reporting system includes a mandatory field ensuring that ward staffing levels are always considered when a fall, medication error, pressure damage or Infiltration/extravasation injuries are reported.

All the incidents and complaints included in this report have been reviewed by the Heads of Nursing in the three Acute Hospitals via their internal weekly, scrutiny panel meetings. The incidents which identified that the nurse staffing levels were a contributing factor and subsequent learning from these has been shared more widely.

Conclusion

In summary, 2021-2022 has been a challenging year due to the continued impact of COVID-19 pandemic within the Health Board and its communities. Meeting the staffing levels for the 25B wards has been difficult due to higher levels of sickness and staff requiring to shield at home. The repurposing of wards including retraining of staff to meet the clinical demands during the COVID-19 pandemic and the temporary re-deployment of staff to support the additional demands including high care respiratory wards, ITU and the temporary Field Hospital has placed additional pressure on the Health Board.

Despite these challenges there continues to be successes and achievements within this reporting period:

- Paediatric inpatient wards have successfully been incorporated into section 25B wards via the extending the 2nd duty of Act on 1st October 2021.
- The majority of the wards that were repurposed to meet the clinical demands during the COVID-19 pandemic are returning to either their originally specialty/designation, or being utilised to support a new clinical model.
- 211 of the 216 overseas Registered Nurses who were recruited into the

Health Board during 2020/2021, remain working within CTMUHB.

- 188 nurses have been recruited via the student streamlining process.

Next steps for 2022-2023

- The first bi-annual acuity audit and report for inpatient paediatric wards will be undertaken.
- Plans to implement 'Safecare' within the Health Boards Section 25B wards.
- The CNO has provided 18 months funding for the recruitment of a designated AWNSA Lead. It is anticipated that this individual will be in post by July/August 2022.
- As part of the All Wales overseas registered nurse recruitment programme, there will be 100 nurses recruited into CTM UHB between April 2022- November 2022.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	Staff and Resources If more than one Healthcare Standard applies please list below: Safe Care
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	Yes If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below.
Legal implications / impact	Yes (Include further detail below)
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
Link to Strategic Goals	Improving 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.