



**AGENDA ITEM**

6.2

**CTM BOARD**

**THE NURSE STAFFING LEVELS (WALES) ACT (2016) UPDATE REPORT  
FOR ADULT ACUTE FOLLOWING THE BI ANNUAL CALCULATION IN  
JULY 2020**

<b>Date of meeting</b>	26/11/2020
<b>FOI Status</b>	Open/Public
<b>If closed please indicate reason</b>	Not Applicable - Public Report
<b>Prepared by</b>	Ben Durham, Senior Nurse for Professional Standards & Quality Assurance
<b>Presented by</b>	Greg Dix, Executive Nurse Director
<b>Approving Executive Sponsor</b>	Executive Nurse Director
<b>Report purpose</b>	FOR NOTING

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

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
N/A		

**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.

The Nurse Staffing Levels (Wales) Act 2016 Statutory Guidance requires the designated person to formally present to the Board the nurse staffing requirements for adult in-patient medical and surgical wards. The aim of this report provides the Board with a detailed summary of the nurse staffing level for each ward where Section 25B applies that has been agreed by the designated person in consultation with the nursing and ILG Directors of Nursing.

The Act requires health service bodies to make provision for appropriate nurse staffing levels and ensure that they are providing sufficient nurses to allow the nurses' time to care for patients sensitively. Section 25A requires Health Boards to ensure they have robust workforce plans, recruitment strategies, structures and processes in place to ensure appropriate nurse staffing levels across their Organisations.

Section 25B identifies wards where there is a duty to calculate nurse staffing levels using a prescribed methodology and maintain nurse staffing levels. The process of determining the staffing levels across the Health Board is well established. Wards that are included in 25B undertake the bi-annual acuity audit and triangulate that information with their professional judgment of the ward, patient population and staff currently in post and a distinct number of patient outcomes that are generally regarded as being nurse sensitive.

## **2 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)**

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 from March 2020 the Welsh Government position associated with the Nurse Staffing Levels (Wales) Act 2016 during these exceptional circumstances was to postpone the June bi-annual acuity audit until July 2020.

Following the acuity audit undertaken in July 2020 as part of the bi-annual recalculation process, wards that are under Section 25B were reviewed in order to ensure the calculation of the nurse staffing levels using prescribed methodology. Following the review there have been changes in staffing levels required on these wards. 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 30 September 2020 within Cwm Taf Morgannwg University Health Board (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 (CNO) letter of 15 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.

### **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**

In a letter to Nurse Directors from the CNO in October 2020 additional clarity was provided regarding acute medical and surgical wards that have been repurposed in response to COVID-19. The guidance states that if the primary purpose of a ward remains the treatment of patients for medical or surgical conditions, and the Welsh Levels of Care tool is still applicable to that setting, those wards would remain under the auspices of 25B of the Act. Conversely, if a ward has legitimately been repurposed to treat those critically unwell Covid19 patients it would remain that those wards would be considered exclusions with an expectation that Health Boards will follow national advice on staffing critical care areas.

During this second wave of COVID-19 within CTMUHB and following engagement with the Heads of Nursing for the three acute hospitals, a process

has been developed to ensure a weekly nursing workforce review where any changes to nursing establishments due to repurposing of wards will be reported via the Corporate Nursing leads to ensure the NSLWA workforce planning templates are updated.

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

#### 4 IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	Yes (Please see detail below)
<b>Related Health and Care standard(s)</b>	Staff and Resources Safe Care
<b>Equality impact assessment completed</b>	Yes
<b>Legal implications / impact</b>	Yes (Include further detail below) Failure to adhere to the Nursing Staffing Levels Wales (2016) Act
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	Yes (Include further detail below)
<b>Link to Strategic Well-being Objectives</b>	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 July 2020 bi-annual acuity audit.
- **NOTE** the conclusions and recommendations that have been reported within this report.