

Meeting Date	24th September		Agenda Item	4.3			
Report Title	Annual Assura	Annual Assurance 2019-20 report on compliance with the					
	Nurse Staffing Levels (Wales) Act.						
Report Author	Elizabeth Williams, Corporate Matron						
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	Patient Experie	ence		-			
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	Experience		_				
Presented by	Christine Williams, Interim Executive Director of Nursing and						
-	Patient Experience						
Freedom of	Open						
Information							
Purpose of the	Overall complia	ance with the req	uirements of the	Nurse			
Report	Staffing Levels	(Wales) over the	past 12 month p	period			
	1.4.2019 - 5.4	.2020.					
Key Issues	Nurse Staffing	Levels (Wales) A	ct 2016 and purp	ose of report			
	is to report ove	erall compliance v	vith the requirem	ents of the			
	Nurse Staffing	Levels (Wales) A	Act.				
	Work being un	dertaken within o	ther specialities i	n relation to			
	25A of the act.						
Specific Action	Information	Discussion	Assurance	Approval			
Required			✓				
(please ✓ one only)							
Recommendations	NOTE t	he report					

NURSE STAFFING LEVELS (WALES) ACT 2016

1. INTRODUCTION

The Nurse Staffing Levels (Wales) Act 2016 became law on 21st March 2016 with the final sections of the Act coming into effect in April 2018.

Section 25E requires Health Boards to report their compliance in maintaining the nurse staffing level for each adult acute medical and surgical ward. The Health Board must submit a three yearly report to Welsh Government in May 2021. To facilitate this, an annual assurance report (using an All Wales template) has been agreed through the All Wales Nurse Staffing programme.

The aim of this report is to provide the overall compliance with the requirements of the Nurse Staffing Levels (Wales) Act over the past 12 month period 1st April 2019 to 5th April 2020.

This annual report represents the second of three annual reports, which at the end of the 2018 - 2021 reporting period, will form the basis of the statutory three year report to Welsh Government required by the Nurse Staffing Levels (Wales) Act.

The annual report to Board for May 2020 was delayed following agreement by the Executive Nurse Directors due to the COVID-19 pandemic emergency outbreak. As a result of COVID-19 the Chief Nursing Officer issued a Welsh Government letter on the 24th March 2020 to Health Boards. The letter offered the flexibility to decide when to undertake the bi-annual calculations of nurse staffing levels and whether to present their annual report to Board as planned in May 2020. In line with the agreement by the Executive Nurse Director an exceptional paper, COVID –19 Disruption to the Nurse Staffing Levels (Wales) Act 2016 paper was brought to board on 25th May 2020.

The Health Board is asked to formally receive and note the information contained within the Nurse Staffing levels (Wales) Act Annual Assurance report which has been produced using the All Wales reporting template.

2. 2019-2020 ACTIONS & POSITION

Actions during 2019 – 2020 include:

- Two formal reviews of nurse staffing requirements undertaken in June 2019 and January 2020.
- The triangulated method of calculating the required nurse staffing levels was carried out following the June 2019 acuity audit. Following this the November 2019 Board agreed the proposed uplifts to the Acute Medical & Surgical wards under section 25B of the act. From November 2019 wards were working to the agreed establishments and formally re-aligned in April 2020.
- An increase in patient acuity levels recorded during each audit within Swansea Bay UHB has led to the development of an Enhanced Supervision Framework which has been introduced into the workplace in March 2020.
- At a strategic level we continue with our review of workforce planning procedures, for 2018 to 2021, which include; Health Board recruitment events, retention, workforce planning & redesign, training and development. The success of top of

- licence work that was completed last year with a plan to further look at key areas this year.
- The NHS Wales Shared Services Partnership (Internal) Audit & Assurance 2019 identified two key findings for consideration one has been actioned and in relation to the second this will be discussed further in the paper.
- Continuing to apply a rigorous data approval process to ensure accuracy of the 6 monthly acuity data prior to sign off.
- Holding daily safety huddles within our Service Delivery Units which includes monitoring live Acuity via SIGNAL & Staffing levels.
- The triangulated method for the January 2020 audit scrutiny panels were postponed in March 2020 due to COVID 19. The Triangulated process has now been undertaken and completed, during July 2020 as outlined in the paper.
- The Health Boards monthly Nurse Staffing Act Steering Group was cancelled on the 30th April 2020 in line with cancellations of the All Wales Nurse Staffing Groups. These meetings resumed in June 2020.
- In response to COVID-19, the development of a Nurse Staffing Silver Logistics Cell to monitor & manage risks in line with section 25A & 25B provided a coordinated focus on the nurse staffing requirements across all Service Delivery Units
- In addition, a Corporate Training and Education Hub was established which included co-ordination of central recruitment.

Below is the number of Adult acute medical and surgical wards where section 25B applies

Number of adult acute medical inpatient wards included	15
Number of adult acute surgical inpatient wards included	14
Number of occasions where nurse staffing level was recalculated in addition to the bi-annual calculation	0

The Nurse Staffing Levels (Wales) Act annual assurance report sets out the overall compliance with the requirements of the Nurse Staffing Levels (Wales) Act over the past 12 month period from 1st April 2019 to 5th April 2020.

The report is divided into the following sections

- Section 25A refers to the Health Boards overarching responsibility to ensure Appropriate Nurse Staffing levels in any area where nursing services are provided or commissioned, not only adult medical and surgical wards.
- Section 25B Actions taken in relation to Calculating the Nurse Staffing Levels on section 25B wards during the reporting period acute adult and surgical wards. Using the Triangulated Approach to calculate the nurse staffing levels on adult acute medical and surgical wards where section 25B wards applies and Informing patients.
- Section 25E (2a) the Extent to which the nurse staffing levels have been maintained and process for Maintaining the Nurse staffing level (2b) Impact on care due to not maintaining the nurse staffing levels (2c) Actions taken if the nurse staffing level is not maintained.

2.1 Nurse Staffing Levels Assurance Report 2019-20

	Health board/trust reporting template
Health board	Nurse Staffing Act Meeting
Date annual assurance report	24 th September 2020
with compliance with the Nurse	
Staffing Levels (Wales) Act is	
presented to Board	
Reporting period	1.4.2019 – 5.4.2020
Requirements of Section 25A	25A refers to the Health Boards overarching responsibility to have regard to providing sufficient nurses in all settings not only acute adult medical and surgical wards. The Board must consider and have due regard to the duty on them under this section, to have the appropriate number of nurses to allow them to care for patients sensitively wherever nursing services are provided. The Health Board has been undertaking a structured approach to the review of the nurse staffing levels in all those areas where nursing services are provided or commissioned. We are currently collecting and reviewing establishment calculations from the following areas: Paediatrics Critical Care Units High Care units/wards Mental Health Operating theatres Act Neonatal areas Health Visiting

- Primary Care settings
- Emergency Departments
- Non –acute inpatient wards

For these nurse staffing work streams under the national nurse staffing programme. Whether the service under review is supported by the All Wales Staffing Levels Act or not, SBUHB has adopted as far as is practically possible, the principle of using the same triangulated approach to calculating the nurse staffing as set out in the Act and the act statutory guidance for those wards where Section 25B applies. In undertaking these reviews the nursing management structure and designated person take into account:

- National guidelines which guide the assessment of nurse/patient ratios to the identified clinical area
- Quality indicators appropriate to the area and informed by consideration of any relevant expert professional nurse staffing guidance, principles or research, and current best practice standards
- Themes associated with professional judgement appropriate to that clinical service
- And then they exercise professional judgement in analysing the data before agreeing a
 planned roster for the service and calculating a required establishment for that clinical area.
 The process is under taken with colleagues from finance, workforce and organisational
 development operational teams and the designated person. The designated person will
 calculate the nurse staffing levels based on the use of professional judgement, an evidencebased workforce planning tool, and consideration of how far patients are sensitive to
 nursing care.

In addition the progress made within the Health Board which relate to the individual work streams of the All Wales Nurse Staffing programme:

Paediatric In- patient Work Stream

In December 2019 the Health Minister announced plans to extend the Nurse Staffing Levels (Wales) Act 2016 to include paediatric inpatient wards. Within SBUHB a Task and Finish Group has been set up and a progress report on compliance with the interim paediatrics inpatient nurse staffing principles. The Paediatric Welsh Levels of Care draft document continues to be tested by paediatric nurses.

A letter received by the Chief Nursing Officer (CNO) on 24th March 2020 around COVID-19 pandemic and in relation to the extension of the Act to include paediatric inpatient wards confirmed that :

- Welsh Government will proceed with the legislative steps that will allow extension of the Acts second duty within this government term as committed. This will be achieved through delaying the public consultation to late 2020 and the plenary debate to early 2021
- The planned April 2021 coming-into-force date will be postponed based on at what point health boards have returned to normal enough circumstances to reasonably proceed with the necessary preparations for extension of the Acts second duty into paediatric inpatient wards.

Actions taken in relation to calculating the nurse staffing level on section 25B wards during the reporting period.

The Nurse Staffing Levels (Wales) Act for 29 adult medical and surgical wards where section 25B applies.

Following the bi-annual review in October 2019 using acuity audit data from 1st to 30th June 2019 and quality indicators from 1st March 2019 to 31st August 2019, the nursing establishments were

 Adult acute medical inpatient wards

Adult acute surgical wards

reviewed. In November 2019 the Board agreed the proposed uplifts to the Acute Medical & Surgical wards under section 25B of the Nurse Staffing Levels (Wales) Act. From November 2019 wards were working to the agreed establishments and budgets formally re-aligned in April 2020.

The Bi annual calculation for the January 2020 audit scrutiny panels were postponed in March 2020 due to COVID 19. The Bi annual calculation has now been undertaken and completed, during July 2020. The establishments are outlined below and template attached as appendices.

Number of adult acute
Medical inpatient wards where section 25B applies

Swansea	Bay UHB	April 2019 Nov 2019		2019	Actions	May 2020		
Unit	Ward	RN	HCSW	RN	HCSW		RN	HCSW
Singleton	Ward 3	22.32	23.1	22.32	26.77	No action required	22.32	26.77
Singleton	Ward 4	20.54	23.1	19.71	26.77	No action required	19.71	26.77
Singleton	Ward 6	22.32	13.38	22.32	19.54	No action required	22.32	19.54
Singleton	Ward 8	22.32	16.94	22.32	16.94	No action required	22.32	16.94
Singleton	Ward 9	20.54	11.61	20.54	11.61	No action required	20.54	11.61
Singleton	Ward 12	34.64	24.87	34.64	24.87	No action required	34.64	24.87

The triangulation review for Singleton NSA Wards has been completed and agreed no uplift required for RN or HCSW.

(Appendices 1 Summary of Nurse Staffing Levels for wards where Section 25B applies)

Swansea Bay UHB		April 2019 Nov 2		2019 Actions		May 2020		
Morriston	Ward C	23.00	13.27	25.72	15.21	Budget realigned	25.72	15.99
Morriston	Ward D	20.9	21.67	20.9	26.18	No action required	20.9	26.18
Morriston	Ward F	24.42	22.6	24.45	22.62	No action required	24.45	22.62
Morriston	Ward S	21.7	19.9	21.73	19.92	No action required	21.73	19.92
Morriston	Anglesey	29.9	19.9	29.9	19.9	No action required	29.9	19.9
Morriston	Cardigan	21.7	16.2	21.73	18.95	No action required	21.73	18.95
Morriston	Dan	15.4	9.00	15.77	11.59	Budget realigned	16.23	11.59
	Danino							
Morriston	Gowers	21.7	19.00	21.73	21.67	No action required	21.73	21.67

The triangulation review for Morriston NSA Wards has been completed and agreed. Ward C and Dan Danino budgets have been realigned.

(Appendices 1 Summary of Nurse Staffing Levels for wards where Section 25B applies)

Swansea Bay UHB April 2019		Nov 2019		Actions	May	2020		
NPT	Ward B	14.5	5.08	13.84	5.04	No action required	13.84	5.04

(Appendices 1 Summary of Nurse Staffing Levels for wards where Section 25B applies)

Number of adult acute Surgical inpatient wards where section 25B applies

Swansea Bay UHB		April 2019		Nov 2019		Actions	May 2020	
Unit	Ward	RN	HCSW	RN	HCSW		RN	HCSW
Morriston	Pembroke	27.2	9.00	27.18	9.00	No action required	27.18	9.00
Morriston	Cyril Evans	21.7	13.5	23.25	14.77	No action required	23.25	14.77
Morriston	Clydach	14.5	9.00	21.73	14.45	No action required	21.73	14.45
Morriston	Ward A	23.5	17.2	23.5	19.9	No action required	23.5	19.9
Morriston	Ward B	22.7	16.2	22.67	18.95	No action required	22.67	18.95
Morriston	Ward G	27.2	17.2	27.18	17.17	No action required	27.18	17.17
Morriston	Ward H	22.5	11.8	23.5	17.17	No action required	23.5	17.17
Morriston	Ward J	23.5	16.2	24.33	20.73	No action required	24.33	20.73
Morriston	Ward R	28.00	19.9	28.00	21.67	No action required	28.00	21.67
Morriston	Ward T	26.2	14.4	28.00	19.9	No action required	28.00	19.9
Morriston	Ward V	28.00	19.00	28.00	20.73	No action required	28.00	20.73
Morriston	Ward W	18.1	9.8	15.33	5.33	No action required	15.33	5.33
Morriston	Powys	12.7	3.6	12.73	3.55	No action required	12.73	3.55

The triangulation review for Morriston NSA Wards has been completed and agreed no uplift required for RN or HCSW. It has been identified that 11 wards require a hostess.

(Appendices 1 Summary of Nurse Staffing Levels for wards where Section 25B applies)

Swansea Bay UHB April 2019		Nov 2019		Actions	May 2020			
Unit	Ward	RN	HCSW	RN	HCSW		RN	HCSW
Singleton	Ward 2	28.66	16.68	28.66	16.68	No action required	28.66	16.68

(Appendices 1 Summary of Nurse Staffing Levels for wards where Section 25B applies)

Number of occasions where nurse staffing level was recalculated in addition to the biannual calculation

There were no occasions where nurse staffing levels was recalculated in addition to the bi-annual calculation.

As COVID-19 become an established and significant pandemic staff and services were under significant and unprecedented pressure. As a result the Health Board had to respond at pace, taking swift action to manage an unpredictable and constantly evolving situation under increasing pressure and with limited resources in an attempt to manage the COVID-19 pandemic. Wards/departments were closed to enable the creation of dedicated COVID- 19 positive wards/critical care beds and high respiratory beds on other medical and surgical wards to enable the Registered Nurses and non- registered nursing workforce to be temporarily repurposed. Allied Health Professionals supported the clinical areas as well as Student Nurses and Medical Students in repurposed roles.

Using the triangulated approach to calculate the nurse staffing level on section 25B wards.

The process of establishing a review of wards that fall within the reporting element of the Act is the triangulated approach divided into sections:

- An acuity audit.
- Quality indicators (Falls, Pressure ulcers, Medication errors, Complaints about nursing care resulting in patient harm) review.
- Professional judgement.
- Planned roster submissions.
- WTE's required calculations including 26.9% headroom & 1 WTE supernumerary status Ward Manager/Sister.
- Unit Nurse Director & Service Delivery Unit's Finance representatives review.
- Scrutiny panel Executive Director of Nursing & Patient Experience holds a series of panels that include the Executive Director of Workforce & Organisational Development, the Executive Director of Finance, Unit Nurse Directors and service delivery units finance representatives. In line with the requirements of the Act, the Designated Person (Director of Nursing & Patient Experience) will calculate the nurse staffing levels and sign off the establishment review calculations and also the triangulated methodology to formulate the results.

	The triangulated approach to calculate the nurse staffing levels for each ward has become embedded as a routine 6 monthly cycle that is undertaken for Acute Medical & Surgical wards under section 25B of the Nurse Staffing Levels (Wales) Act.
Informing patients	 Section 25B states that Health Boards must make arrangements to inform patients of the nurse staffing level. We have achieved this in several ways: The production and distribution of a frequently asked questions leaflet on the nurse staffing level that is easily accessible on each adult acute medical and surgical ward. Posters illustrating the planned roster displayed outside each individual adult acute medical and surgical ward in both English & Welsh with the date the nurse staffing level was presented to the Health Board. Regular update papers presented to the executive board of which the freedom of information status is open. Papers are also published on the Health Boards intranet site.

	Section 25E (2a) Extent to which the nurse staffing levels are maintained
The extent of	When the second duty of the Nurse Staffing Levels (Wales) Act 2016 (the Act) came into force in April 2018, there was
which the	no consistent solution to extracting all of the data explicitly required under section 25E, and health boards were using a
nurse staffing	variety of e-rostering and reporting systems. During the reporting period of 1st April 2019 to 5th April 2020 all health
levels have	boards/trusts in Wales have been working as part of the All Wales Nurse Staffing Programme to develop a consistent
been maintained	approach to capturing quantitative data on a daily basis (in lieu of a single ICT solution) to enable each organisation to meet the reporting requirements to which the extent the Nurse Staffing Levels across the health board have been maintained in areas which are covered by Section 25B/C of the Act. For the 2019/20 annual report, this health board (together with all other health boards/trusts in Wales) is providing narrative to describe the extent to which the Nurse Staffing Levels have been maintained in order to meet its statutory reporting requirement under Section 25E of the Act.
	Health Care Monitoring System Enhancements have been made in July 2020 to enable us to capture the extent nurse staffing levels have been maintained against the planned roster for both night and day shift. For the 2020/21 reporting period, it is anticipated that this section of the annual report will contain quantitative data for part of the year at least. This data, once available for every health board in Wales, will be presented by all health boards in a consistent manner. Agreed required uplift in funded establishments in November 2019 to ensure Board comply with the Nurse Staffing Levels (Wales) Act. The increased patient acuity levels within our Health Board over the last few years have resulted in the need for increased levels of enhanced supervision (1:1) reducing the risk of falls, pressure damage and to improve the patient experience.

Process for maintaining the nurse staffing levels

We have acknowledged our responsibility in ensuring all reasonable steps have been taken to meet and maintain the Nurse Staffing Levels for each adult acute medical and surgical inpatient ward on both a shift by shift and long term basis. These reasonable steps and the operational framework and escalation procedures include:

- Monthly risk assessments on all areas under 25B submitted to NSA steering group.
- Ward Managers / Matrons / Off ward staff allocated 'in the numbers' to meet planned roster.
- Temporary staffing Bank/agency/excess hours/overtime/re-deployment from other areas within the organisation.
- Daily safety huddle meetings to review acuity levels and admit/transfer mindful of current levels changes of patient pathway. Roll out of Signal to support this.
- Production of HB operation framework and escalation policy.
- Roster/Annual leave/Study leave reviews.
- Using underspends in other clinical areas to support bank/agency cost.
- Recruitment recruitment events, overseas recruitment, student streamlining.
- Retention plans clinical supervision, top of licence working.
- Adjustments in flexible working arrangements.
- Well-being at work strategies.
- Imbedding Electronic rostering systems and Scrutiny panels.
- In response to COVID-19, the development of a Nurse Staffing Silver Logistics Cell to monitor & manage risks provide a co-ordinated focus on the nurse staffing requirements across all Service Delivery units.

E-Rostering

The Health Board is now moving to the next phase of the project to implement the rostering tool, Safecare. The system will be implemented in all wards that report under the requirement of the Nurse Staffing Act (Wales). It is estimated that this will include 28 wards across the three Delivery Units.

Safecare is an acuity based rostering tool that provides an overarching view of staffing levels and patient acuity across the Health Board. This will support decisions to deploy staff appropriately. Discussions have taken place with Allocate to remove the multipliers from the system.

In February 2020, the Health Board began to implement Safecare in the Singleton Delivery Unit with a plan to follow in Neath Port Talbot and Morriston Delivery Unit. The rollout of the Safecare module has been suspended due to COVID-19 with a plan to recommence in September 2020. Section 25E (2b) Impact on care of not maintaining the nurse staffing levels 1.4.19 – 5.4.2020 1) Total number of 3) Total number of 5) Number of serious Patient harm 2) Total number of 4) Increase closed serious (decrease) in incidents/complaints incidents (i.e. closed serious serious incidents/complaints incidents/complai incidents/complaint number of closed where failure to maintain nurse-sensitive Serious during last reporting nts during current s not closed and to serious the nurse staffing level Incidents/Compl period reporting period. be reported incidents/complaint was considered to have aints) on/during the next s between been a factor reporting period reporting periods Hospital 12 10 0 0 **↓** 2 acquired

pressure

damage (grade									
3,4 and									
unstageable)									
Falls resulting	26	26	5	0	^				
in serious					<u>^</u> 2				
harm or death									
(i.e. level 4&5									
incidents).									
Medication	0	0	1	0	0				
related never									
events.									
Complaints	Not available as no data	31 Yellow graded		Not applicable	1				
about nursing	was required to be	complaints							
care resulting	reported for the 2018/19	5 Amber graded							
in patient	annual assurance report	complaints							
harm.									
	Reportable PRESSURE I	DAMAGE		,	,				
	 There is a total number of 10 closed hospital acquired serious pressure damage incidents. This is a decrease in 2 from last year (12). Of these 10 none of these incidents are reported as failure to maintain nursing staffing levels is considered to have been a factor. 								
	Reportable FALLS								
	There is a total nun	There is a total number of 26 closed falls resulting in serious harm there is no increase from last year (26).							

- Of these 26 incidents 2 are reported where failure to maintain nursing staffing levels is considered to have been a factor.
- 1. Incident one reported Nurse Staffing Levels on duty were below the agreed levels and a contributory factor.

On review of the incident there was unplanned sickness with a HCSW, a bank shift was requested however this was not filled. However the patient had been risk assessed on admission to an admission unit as high risk of falls and 1-to-1 enhanced observation put in place. On transfer to the ward, it is reported there had been some miscommunication and the 1-to-1 enhanced observation was not continued. It was during this period of time the patient fell and came to harm. The E-rostering report shows the planned roster was not maintained due to unexpected sickness and bank were unable to fill however the 1-to-1 enhanced observation had not been identified or rostered by the ward.

Therefore the Primary contributory factor is the :

- a. Patient was not risk assessed when transferred to the ward.
- b. Lack of communication regarding the 1 to 1 enhanced observation in place for the patient identified as high risk of falls.
- c. Resulting in no 1 to 1 enhanced observation in place.

Failure to maintain nursing staffing levels was considered to have been a Partial Contributory factor.

2. Incident two reported Nurse Staffing Levels on duty were below the agreed levels and a contributory factor. The patient was assessed as high risk for 1 to 1 enhanced observation. The ward requested the bank shift in a timely manner however bank were unable to fill the requested shift. It was during this period of time the patient fell and came to harm. The E-rostering report confirms the 1 to 1 enhanced observation shift bank was not filled. A falls alarm and a high-low bed were in situ.

 There are 5 open fall incidents where the initial screening has identified that Nurse Staffing Levels is not a contributory factor and these will be reported on during the next reporting period.

Reportable MEDICATION

 There is one incident of a medication related never event which is not closed. The initial screening has identified that Nurse Staffing Levels is not a contributory factor and this incident will be reported on during the next reporting period.

Reportable COMPLAINTS about Nursing Care

There was no requirement to report Complaints about Nursing Care resulting in serious patient harm in the 2018/19 annual assurance report.

Within SBUHB Complaints are graded according to the actual outcome/consequences of the care/treatment as Green to Red. Green graded complaint is classed as non-clinical or process issues that can be easily and speedily addressed with no harm arisen. This paper reports on the yellow to amber complaints. Red graded complaints would be investigated under a Serious Investigation process.

There were 36 closed complaints graded Yellow and Amber, 5 of these complaints were graded Amber as causing serious harm, 1 of these complaints refers to where failure to maintain the nurse Staffing level was considered to have been a factor.

The complaint refers to inappropriate nurse staffing levels on a ward which resulted in poor nursing care experience. The ward has since received significant uplift in the funded establishment for RGN and HCSW.

	Section 25E (2c) Actions taken if the nurse staffing level is not maintained
Actions taken when the nurse staffing level was not maintained	All of the incidents included in this report have been scrutinised both by the operational teams and the nurse staffing programme team to review whether the nurse staffing levels were maintained at the time and if not, whether failure to maintain the nurse staffing level contributed to any harm suffered by the patient but also to determine whether there are any other lessons to be learnt from the incidents as outlined above.
	Conclusion & Recommendations
	Year 2019/2020 has been a year of significant progress in meeting the requirements of the Nurse Staffing Levels (Wales) Act 2016.

- Agreed the proposed uplifts to the Acute Adult Medical & Surgical wards under section 25B of the ACT.
- Improvement with quality indicators, with a reduction in falls, pressure damage, complaints, length of stay and medication errors on wards previously invested in under the remit of the Nurse Staffing Levels (Wales) Act.
- Development Enhanced Observation and Support Framework. This will have a positive effect on identifying patients that need enhanced supervision as well as rescuing the time it's in place.
- E Rostering supporting the rollout of the Safe care rostering system.
- Acknowledge the work being undertaken within other specialities in relation to 25A of the Act.
- Recruitment & Retention. Several work streams interlinked with the Health Boards High Value Opportunities a
 summary of developments are: Top of licence working, Efficient nursing workforce and Enhanced Supervision. All will
 have a direct impact on our ability to accurately calculate and report on our staffing levels, plus also to design a service
 by developing new nursing roles tailored to meet the needs of our patients.

3. GOVERNANCE AND RISK ISSUES

Corporate risk register Ref: 51 – risk increased from 16 to 20 as a result of reduction in staff availability in relation to staff isolation/sickness – COVID-19.

NHS Wales Shared Services Partnership (Internal) Audit & Assurance.

During 2019 SBUHB was audited in relation to the arrangement in place to ensure that the Health Board has appropriate processes in place to comply with the requirements for the Nurse Staffing Levels (Wales) Act 2016. The review identified two key findings for consideration.

The first finding, there was no robust record of the Unit Nurse Directors approval of the wards levels calculated. This has been actioned and all nursing staff templates have been signed to date by the Unit Nurse Director.

The second recommendation highlighted the annual assurance paper to board report, did not present data on the extent to which the calculated nurse staffing levels were achieved during the year. We continue working with the All Wales Group towards a consistent approach in relation to reporting the extent to which staffing levels are maintained.

4. FINANCIAL IMPLICATIONS

Formal budget uplift came into effect 1st April 2020 as outlined in the paper.

5. RECOMMENDATION

Note the contents of the paper

Governance an	nd Ass	urance									
Link to	Suppo	orting better health and wellbeing by actively	promoting and								
Enabling		wering people to live well in resilient communities	promoting and								
Objectives		Partnerships for Improving Health and Wellbeing									
(please choose)		Co-Production and Health Literacy									
(prodec criceco)	Digital	ly Enabled Health and Wellbeing									
		er better care through excellent health and care service	es achieving the								
		mes that matter most to people /alue Outcomes and High Quality Care									
		erships for Care									
		ent Staff									
		ly Enabled Care									
		anding Research, Innovation, Education and Learning									
Health and Car											
(please choose)		g Healthy	П								
(produce errocce)	Safe C										
		ve Care									
	Dignified Care ⊠ Timely Care □										
		lual Care									
		and Resources									
Quality, Safety		atient Experience									
		els (Wales) Act requires Health Boards and NHS	S Trusts to								
		reasonable steps to maintain nurse staffing levels									
		he required amount of nursing staff needed withi									
		gical wards by the use of the triangulated method									
		ity and professional judgement	,								
Financial Impli											
		f the nurse staffing levels over the last two years	has been								
	•	registered nurse and health care support workfor									
		ncluding equality and diversity assessment)									
	uirement to fulfil the requirements of the Act.										
Staffing Implica	Iffing Implications										
	ent budgets represent full compliance with the Act.										
	m Implications (including the impact of the Well-being of Future										
Generations (V	(Wales) Act 2015)										
_											
Report History		Nurse staffing Act steering group									
Appendices		Appendix 1									

Appendix: Summary of Nurse Staffing Levels for wards where Section 25B applies

Health board/trust:	Name: Swansea Bay UHB	
Period reviewed:	Start Date: September 1 st 2019	End Date: March 31 st 2020
Number of wards where section 25B applies:	Medical:	Surgical:
LOD applico.	12	17

To be completed for EVERY wards where section 25B applies

*Supernumerary i.e. 1 WTE supernumerary ward sister/charge nurse included in the establishment Medical

Ward	Planned Roster		Required Establishment at the start of the reporting period (October 2019)		Is the Senior Sister/Charge Nurse supernumerary to the required establishment at the start of	Planned Roster		Required Establishment at the end of the reporting period (Sept 2020)		Is the Senior Sister/Charge Nurse supernumerary to the required establishment at the end of	Biannual calculation cycle reviews, and reasons for any changes made			Any reviews outside of biannual calculation, if yes, reasons for any changes made				
×		RN	HCSW	RN WTE	HCSW WTE	the reporting period?*		RN	HCSW	RN WTE	HCSW WTE	the reporting period?*	Completed	Changed	Rationale	Completed	Changed	Rationale
Morriston	Е	3	1	23.5	19.9	Yes	Е					Choose an		Choose		Choose	Choose	
Ward A	LD	2	3				LD					item.		an		an	an item.	
	TW	2	1				TW					TCCTTT.		item.		item.		
	N	3	3				N							iteiii.		item.		
Morriston	Е	2	2	22.67	18.95	Yes	Е					Yes	NA	NA		NA	NA	
Ward B	LD	3	2				LD											
	L	1	1				L											
	TW						TW											
	N	3	3				N											

E = Early shift	L = Late shift	TW = Twilight shift	LD = Long Day	N = Night duty
The number of staff per shift needs to be	entered. The information should reflect the	e information on the informing patient tem	plate.	

Morriston	E	2 1	25.72	15.99	Yes	Е				01	Choose	$\overline{}$
Ward C *	LD	2 3	25.72	13.33	103	LD		Choose an	Choose	Choose an	an item.	
	L	2 0	1			1		item.	an	item.	all itelli.	
	TW	 	1			TW			item.			
	N	4 2				N			reciii.			
Morriston	E	1 2	20.9	26.18	Yes	E		Choose an	Choose	Choose an	Choose	-
Ward D	LD	3 3	1			LD			CHOOSE	CHOOSE all	an item.	
	L	1 2				L		item.	an	item.		
	TW					TW			item.			
	N	3 4				N						
Morriston	Е	2 1	24.45	22.62	Yes	E		Choose an	Choose	Choose an	Choose	
Ward F	LD	2 3				LD					an item.	
	L	2 1				L		item.	an	item.		
	TW					TW			item.			
	N	4 4				N						
Morriston	E	2 1	27.18	17.17	Yes	E		Choose an	Choose	Choose an	Choose	
Ward G	LD	3 3	1			LD		item.	an	item.	an item.	
	TW	2 1	1			TW			item.			
	N	4 2	1			N			iteiii.			
Morriston	E	3 1	23.5	17.17	Yes	E		Choose an	Choose	Choose an	Choose	
Ward H	LD	2 2	1			LD					an item.	
	L	2 1				L		item.	an	item.		
	TW					TW			item.			
	N	3 3				N						
Morriston	Е	4 2	24.33	20.73	Yes	E		Choose an	Choose	Choose an	Choose	
Ward J	LD	1 2				LD					an item.	
	L	3 2				L		item.	an	item.		
	TW					TW			item.			
	N	3 3				N						
Morriston Ward R	E	3 2	28	21.67	Yes	E		Choose an	Choose	Choose an	Choose	
waru K	LD	3 1	1			LD		item.	an	item.	an item.	
	TW	3 1	1			TW			item.			
	N	4 3	1			N			iteiii.			
Morriston	E	2 1	21.73	19.92	Yes	E		Choose an	Choose	Choose an	Choose	
Ward S	LD	2 3	1	1010=		LD					an item.	
	L	2 1				L		item.	an	item.		
	TW					TW			item.			
	N	3 3				N						
Morriston	E	3 1	28	19.9	Yes	E		Choose an	Choose	Choose an	Choose	
Ward T *	LD	2 3				LD					an item.	
	L	3 1	1			L		item.	an	item.		
	TW		4			TW			item.			
	N	4 3				N			<u> </u>	 		
Morriston	E	3 2	28	20.73	Yes	E						

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Ward V	LD	2 2				LD		Choose an		Choose	Choose an	Choose	
	L	3 2				L		item.		an	item.	an item.	
	TW					TW		iteiii.			iteiii.		
	N	4 3				N				item.			
Morriston	E	3 1	15.33	5.33	Yes	E		Choose an		Choose	Choose an	Choose	
Ward W	LD	0 0				LD		item.		an	item.	an item.	
	TW	2 2	-			TW							
		2 0	-							item.			
Morriston	N	2 0	29.9	40.0	Vac	N		_					
Ward	E LD	2 1 3	29.9	19.9	Yes	LD		Choose an		Choose	Choose an	Choose	
Anglesey	L	2 1	-			LD		item.		an	item.	an item.	
Aligicacy	TW	2 1	+			TW				item.			
	N	5 3				N				iteiii.			
Morriston	E	2 2	21.73	18.95	Yes	E		Cl		Cl	Classic	Choose	
Ward	LD	2 2	21.73	10.55	163	LD		Choose an		Choose	Choose an	an item.	
Cardigan	L	2 1	1			1		item.		an	item.	an item.	
	TW		1			TW				item.			
	N	3 3				N							
Morriston	Е	2 1	21.73	14.45	Yes	Е		Choose an		Choose	Choose an	Choose	
Ward	LD	2 2				LD						an item.	
Clydach	L	2 1				L		item.		an	item.		
	TW					TW				item.			
	N	3 2				N							
Morriston	Е	2 2	23.25	14.77	Yes	E		Choose an		Choose	Choose an	Choose	
Ward Cyril	LD	2 1				LD		item.		an	item.	an item.	
Evans	L	2 1				L		iteiii.			iteiii.		
	TW					TW				item.			
	N	3 2				N							
Morriston Ward	E	1 1	16.23	11.59	Yes	E		Choose an		Choose	Choose an	Choose	
Dan Danino *	LD	2 1	-			LD		item.		an	item.	an item.	
Dan Danino	TW	1 1	+			TW				item.			
	N	2 2				N				iteiii.			
Morriston	E	2 2	21.73	21.67	Yes	E		Classassas		Classes	Classassas	Choose	
Ward Gower	LD	2 2	21.73	21.07	103	LD		Choose an		Choose	Choose an	an item.	
	L	2 1				L		item.		an	item.	arricerri.	
	TW					TW				item.			
	N	3 4				N							
Morriston	Е	3 1	27.18	9	Yes	Е		Choose an		Choose	Choose an	Choose	
Ward	LD	3 1	1			LD						an item.	
Pembroke	L	1 1				L		item.	1	an	item.		
	TW					TW				item.			
	N	4 1				N			<u> </u>		 		
Morriston	Е	1 1	12.73	3.55	Yes	Е		Choose an			Choose an	Choose	
Ward Powys	LD	1 0]			LD		item.			item.	an item.	
	L	1 1				L		itelli.			ILCIII.		
	TW					TW							

E = Early shift	= Early shift L = Late shift		LD = Long Day	N = Night duty					
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	N	2	0				N			Choose		
										an		
										item.		
Singleton	Е	3	1	28.66	16.68	Yes	E		Choose an	Choose	Choose an	Choose
Ward 2 *	LD	1	1				LD					an item.
	L	3	1				L		item.	an	item.	
	TW						TW			item.		
	N	3	2				N					
Singleton	E	3	3	22.32	26.77	Yes	E		Choose an	Choose	Choose an	Choose
Ward 3	LD	1	2				LD		item.	an	item.	an item.
	L	3	3	_			TW		TCCTT.		icciii.	
	TW N	3	4				N			item.		
Singleton	E	3	3	19.71	26.77	Yes	E	-				Chana
Ward 4	LD	1	2	19.71	20.77	res	LD		Choose an	Choose	Choose an	Choose an item.
Wald	L	3	3	1			L		item.	an	item.	all itelli.
	TW	-	-				TW			item.		
	N	2	4	1			N			1001111		
Singleton	E	3	3	22.32	19.54	Yes	E	+ +	Choose an	Choose	Choose an	Choose
Ward 6	LD	1	1				LD					an item.
	L	3	2				L		item.	an	item.	
	TW						TW			item.		
	N	3	3				N					
Singleton	Е	3	3	22.32	16.94	Yes	E		Choose an	Choose	Choose an	Choose
Ward 8	LD	1	1				LD		item.	an	item.	an item.
	L	3	2				L		iteiii.		iteiii.	
	TW	<u> </u>	<u> </u>				TW			item.		
	N	3	2			.,	N					
Singleton Ward 9	E	3	1	20.54	11.61	Yes	E		Choose an	Choose	Choose an	Choose
ward 9	LD	2	1				LD		item.	an	item.	an item.
	TW		-	1			TW			item.		
	N	3	2	1			N			iteiii.		
Singleton	E	5	4	34.64	24.87	Yes	E		Classassas	Classes	Classassass	Choose
Ward 12	LD	1	1	- 07.07	24.01	100	LD		Choose an	Choose	Choose an	an item.
	L	5	4	1			L		item.	an	item.	
	TW						TW			item.		
	N	5	3				N					
Neath Port	Е	0	1	13.84	5.04	Yes	E		Choose an	Choose	Choose an	Choose
Talbot	LD	3	2				LD					an item.
Ward B *	L	0	0				L		item.	an	item.	
	TW						TW			item.		
	N	2	0				N					

^{*}Morriston Ward C - The planned roster increases on a Monday-Fri late shift by 1 x HCSW.

^{*}Morriston Ward T – The planned roster indicates the 1 x HCSW on the late shift is a band 3. On the night shift, there are 2 x HCSW band 2 and 1 x HCSW band 3.

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*Morriston Ward Dan Danino – The planned roster has 1 x additional RN 10am-10pm on a Wednesday LD and a Wednesday night shift. Also 1 x additional HCSW on a Thursday Early and Night shift.

*Singleton Ward 2 – To support the theatre admissions unit the planned roster increases on a Monday-Friday by 3 x RN's and 2 x HCSW on an early shift. The late shift also increases by 2 x RN's and 2 x HCSW.

*Neath Port Talbot Ward B - This ward is an elective surgical ward therefore the planned roster fluctuates daily. The above figures represent the planned roster for Tuesday - Thursday.

On a Friday the planned roster decreases by 1 x HCSW on an early shift.

On Saturday and Sunday, the planned roster decreases by 1 x HCSW on an early shift and decreases by 1 x RN and 2 X HCSW's on a LD.

E = Early shift	L = Late shift	TW = Twilight shift	LD = Long Day	N = Night duty					
i									
The number of staff per shift needs to be entered. The information should reflect the information on the informing nation template									