

Vaughan Gething AC/AM

**Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services**



**Llywodraeth Cymru
Welsh Government**

Ein cyf/Our ref: MA-P/VG/1255/19

Dr Dai Lloyd AM
Chair
Health, Social Care and Sport Committee
National Assembly for Wales
Cardiff Bay
CF99 1NA

8 April 2019

Dear Dai,

Thank you for your letter of 25 March in which you posed an additional question regarding the Nurse Staffing Levels (Wales) Act 2016.

I am aware of the concerns raised during stage 1 of the Bill process about the potential for health boards to ensure compliance with calculated nurse staffing levels by inappropriately moving staff from other settings which could negatively impact the care of patients in those settings.

This debate during the scrutiny process led to section 25A being included in the Act which puts a duty on health boards and trusts to “*have regard to the importance of providing sufficient nurses to allow the nurses time to care for patients sensitively*”. This duty applies to any setting where nursing care is provided and also where nursing care is commissioned. The purpose of this section is to ensure that nursing staff won’t be taken from a ward to the detriment of patients on that ward solely to ensure that an adult acute medical or surgical inpatient ward could meet its nurse staffing level. The fact that it was inserted as the first section of the Act was in part to convey its overarching nature.

Health boards have a duty to manage the risks to patients across the services they provide, ensuring that those risks do not become intolerable in any one area. This sometimes requires the movement of nursing staff from one area of the health board to another.

Nurses are sometimes moved from one ward to another to support high pressure needs/demand, and this is not new or exclusive to Wales. Having a systematic legal mechanism in place to ensure regard is given to patient care in all settings, and standardising the processes of planning nurse staffing on medical and surgical wards will help ensure that those movements are done in as methodical way as possible and aren’t done to the detriment of patients on other wards.

The responsibility for ensuring compliance with section 25A lies with the health boards, and the reporting templates both for the boards’ internal annual reports and the three-yearly reports to be submitted to Welsh Government include a section for articulating the processes used to meet that duty.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

As the first internal health board reports are scheduled to be tabled at their May board meetings, the Chief Nursing Officer has liaised with the Executive Nurse Directors to gain a brief overview of the narratives they will be including with those report papers. All health boards have given assurances that they have processes in place to ensure compliance with section 25A of the Act and that nursing staff are not inappropriately moved to adult medical and surgical wards from those not covered by sections 25B and C. These processes include: established daily huddles to consider staffing and patient demand across the service and escalation policies (which have become more robust since the implementation of the Act); the application of the triangulated calculation method in all areas despite the Act not explicitly demanding so; and robust and transparent processes of staff movement with senior nurse oversight.

I hope you find my response helpful.

Yours sincerely,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, slightly slanted style.

Vaughan Gething AC/AM

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