



Meeting Date	27 th March 2	019	Agenda Item	5.2		
Meeting	Workforce and Operational Development committee					
Report Title	Nursing and Midwifery Board Update					
Report Author	Helen Griffiths Corporate Head of Nursing					
Report Sponsor	Cathy Dowling Assistant Director of Nursing & Patient Experience					
Presented by	Gareth Howells, Director of Nursing and Patient Experience					
Freedom of Information	Open					
Purpose of the Report	Provide an overview on the key nursing discussions in relation to Workforce & OD matters in the Nursing & Midwifery Board meeting held on February 26 th 2019 & work undertaken as part of the Nurse Staffing Act Steering Group.					
Key Issues	 Professional Updates Work undertaken to support the Nurse Staffing Act Steering Group. 					
Specific Action	Information	Discussion	Assurance	Approval		
Required (please ✓ one only)	~					
Recommendations	Members are • NOTE	asked to : the update				

NURSING MIDWIFERY BOARD

1. INTRODUCTION

This paper will provide an overview of the key discussions in relation to relevant Nursing Workforce & OD matters.

2. BACKGROUND

The Nursing Midwifery Board meet on a monthly basis the last meeting was on the 26th February 2019. The Nurse Staffing Act Steering Group also meets on a Monthly basis the last meeting was held on February 9th 2019.

3. ASSESSMENT

This Paper will provide a number of key Nursing updates as outlined below;

3.1 Professional Update Paper

A Professional update paper outlining the current health board's position on professional issues was provided to the Nursing & Midwifery Board as outlined below;

3.2 Open Nursing & Midwifery referrals across the Health Board.

The health board continues to maintain a central database of all nursing & midwifery referrals, and reports at least on a six monthly basis to the Nursing & Midwifery Board.

The health board has a total of,

- ✓ Fifteen open referrals, as well as two referrals that involve Agency Nurses whilst working in the health board.
- ✓ Three Registrants out of the fifteen remain employed.
- ✓ A key theme around referrals and disciplinary issues appear to be alcohol-related. For example, driving offenses and attending work under the influence of alcohol.
- ✓ The board discussed the need to highlight this issue and look to see if there are any preventative strategies to raise awareness & support for staff.

3.3 Suspensions

At present across the health board, there are the following suspensions relating to Registered Nurses & Health Care Support workers (HCSW)

- ✓ One band five Registered Nurse
- ✓ Four Health Care Support Workers

There are also a number, of Registered nurses, and Health Care Support Workers, that are working in non-clinical roles due to ongoing Disciplinary investigations.

3.4 Revalidation & Registration

Revalidation and Registration is a professional requirement of every registered nurse or midwife. The Revalidation & Registration policy sets out the legal and contractual requirements for all individuals employed as a registered nurse or midwife to be revalidated and registered with the Nursing & Midwifery Council. The policy sets out a framework to ensure that effective systems are in place within the health board to verify the revalidation and registration status of all staff employed as nurses or midwifes. Both the individual practitioner and the health board have a responsibility to ensure that individuals practicing as a registered nurse or midwife has a live registration status. The information below outlines the number of lapsed registrations within the health board over the last Six months.

August 2018

Neonatal	1 fee paying lapse
Singleton	1 Revalidation
Total	2

September 2018

Morriston	1 Revalidation & 1 fee paying				
Neonatal	1 Revalidation & 3 fee paying				
Singleton	1 fee paying				
Mental Health & Learning	1 fee paying				
Disabilities					
POW	1 Revalidation				
Primary & Community Care	1 fee paying				
Total	10 of which 4 are Revalidation				

October 2018

Mental Health	1 Revalidation & 1 fee paying
Total	2

November 2018

No lapses	
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December 2018

Mental Health	1 fee paying lapse
Total	1

January 2019

POW	1 fee paying lapse
Mental Health	1 Revalidation lapse
Total	2

Following any lapse the Service Delivery Unit completes an investigation in line with the Health Board policies. An update is then provided as part of an SBAR report to Nursing Midwifery Board this supports sharing of learning around any themes.

3.5 NURSE STAFFING ACT (WALES) 2016

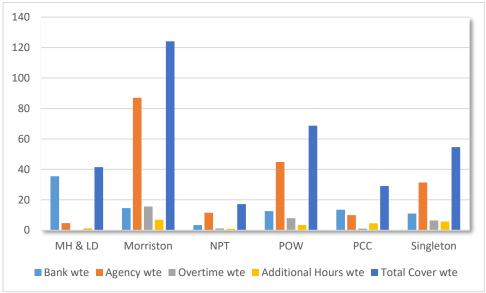
The Nurse Staffing Act calculations during 2018 identified that there was a need to change the funded establishments of registered and nonregistered nurses across the 39 wards. The board agreed to fund by way of a phased risk assessed implementation plan. This phased implementation increased investment in nursing by £2.4m for Phase 1 and a further £1.5m for Phase 2 in April 2019 making us fully compliant with the financial/funding element of the Act. Bi-annual establishment reviews continue using acuity data, quality indicators and professional judgement to ensure that safe & appropriate nurse staffing is maintained within the Health Board.

3.6 NURSE BANK

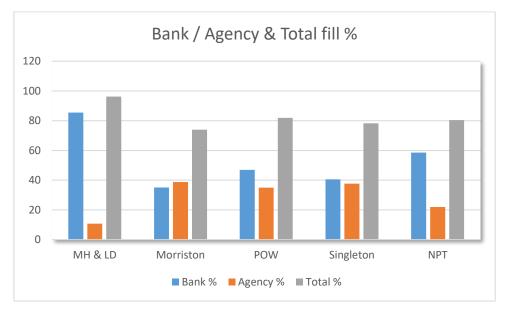
The need of temporary staffing within our Service Delivery Units is paramount to ensure that the correct numbers of nurses are present within clinical areas. Evidence shows that when the correct staffing requirements are not met it can have a direct negative impact on patient safety, experience and outcomes.

The Health Board continues to rely on temporary staffing (bank and agency) to ensure safe staffing levels are maintained. The Nurse Bank provides a seven day week service across the Health Board filling vacant shift requests with Registered Nurses and Health Care Support Workers (HCSW)

A number of elements influence the decision and need to request temporary staffing. Varying levels of patient acuity, increasing the capacity of ward beds short-term and staff sickness are factors, however the amount of vacancies the Health Board currently holds is by far the greatest issue. With all Service Delivery Units (SDU) having significant vacancy levels, the need for requesting extra nursing hours within our clinical areas is paramount. The graph below illustrates the number of whole time equivalents per SDU booked to provide nursing cover by these methods during January 2019:

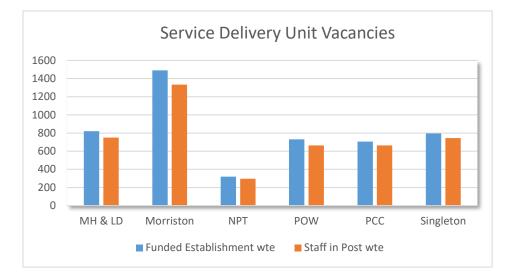


Although it is obvious to see that a significant amount of staff are deployed by Nurse Bank to cover the requested shifts, the Health Boards bank & agency fill rate is 82.1%. Below represents how this breaks down per SDU and the percentage of both bank & agency during January 2019:



3.7 VACANCY ANALYSIS

Service delivery units remain extremely active in their recruitment events, with at least monthly events being held at Morriston's education centre. These events although hosted by Morriston are able to recruit for all areas that have vacancies and open job adverts. We currently have 408 band 5 nurse vacancies, establishment and staff in post data per SDU can be seen in the table below:



3.8 OVERSEAS RECRUITMENT

The Health Board currently has three sources of Overseas Nurse Recruitment:

- i. Philippine Nurses sourced by the agency HCL 2016.
- ii. EU Nurses working has HCSW in ABMU Health Board sourced by HCL
- iii. Internationally educated nurses employed has HCSWs in ABMU Health Board

All Philippine Nurses either sourced by HCL or working currently in the health board as HCSW are subject to acquiring the following to register with the Nursing Midwifery Council:

- a) English Language IELTS level 7 or OET Level B
- b) CBT Exam
- c) Documents approved by the NMC (including qualification records)
- d) Occupational health and TB screening
- e) OSCE Exam

In addition dependent on their right to work status a certificate of sponsorship and VISA are required.

EU Nurses working currently in the health board as HCSW's are subject to acquiring the following to register with the NMC:

- 1) English Language IELTS level 7 or OET Level B or proof of working at a satisfactory English Language in the health board provided by their Manager
- 2) Documents approved by the NMC (including qualification records)

Philippine Nurses sourced by the agency HCL 2016

- 46 nurses have arrived in the health board since 30th May 2017 of which 5 have returned home due to failing their OSCE exam.
- 31 Nurses remain interested in commencing employment with the Health Board but are struggling to obtain the English Language requirements set by the NMC
- The next cohort of nurses that will be able to join the health board will be May 2019.

3.9 GROWING OUR OWN

We have 10 new commissioned places for Part time nursing degree at Swansea University to commence in September – currently recruiting from our HCSWs for these places. We will also have further Open University (OU) nursing degree places but haven't had the numbers yet. Our first 6 OU nursing degree students (our HCSWs) commenced their placements in February 2019.

3.10 STUDENT STREAMLINING

We are currently recruiting students qualifying in September 2019 via the Student Streamlining process. The Health Board has uploaded all vacancies (approximately 180 wte) which are suitable for new registrants onto the system. Student nurses from across Wales have access to the system and can view all HB vacancies and they are asked to make 4 job choices. Almost 90% of the last cohort had their first choice of job. There are 868 students due to register in Wales, including 248 from Swansea University and 233 from the University of South Wales. These comprise all fields of nursing - Adult, Child, Mental Health and Learning Disabilities. The student streamlining is still a new development and a full evaluation will be undertaken after this second cohort have been through the process. There are a series of student showcase recruitment events during March which the HB are attending. We are hosting our own event on 21st March. There is evidence of difficulty in attracting new registrants to NPTH and Singleton and there is some work ongoing to try to improve this.

3.11 RETURN TO PRACTICE

The first cohort of 2019's Return to Practice course commenced on the 6th March. Students were given a short presentation about ABMU Health Board and the opportunities that we offer should they seek employment with us. As with previous cohorts the students were very interested in the advantages of having their clinical placement during the course within the service area that they have been offered a position. ABMU are currently the only Health Board within Wales that offer this facility and feedback from previous students has been extremely positive.

3.12 NURSING E-DOCUMENTATION

ABMU are on track to pilot the All Wales Adult in-Patient assessment in June 2019 over a 2-week period. The National solution (based on

ABMU's work) is made up of the in-patient assessment, 7 core risk assessments:

- Pain
- Skin
- Nutrition
- Falls
- Patient Handling
- Continence
- Digital NEWS.

In the first pilot cycle, lasting 8 weeks each Health Board and Trust within Wales will have tested the assessment.

NWIS will then evaluate the feedback to determine what changes (if any) will be required for testing within the second pilot cycle scheduled for September 2019 over a 4 week period. The assessment will be available for national implementation by December 2019. It will be for each Health Board to determine how this implementation is managed. The Nursing Team at Ward A Neath Port Talbot have been instrumental in the design of the solution and they will continue to test this on behalf of ABMU –So a big thanks to them for their work.

In addition, ABMU HB will be the first in Wales to implement an Electronic Prescribing and Medicines Administration (EPMA) system. The system will be configured and ready to go live during 2019. The current plan is to implement over the course of three months in NPTH before moving onto Singleton after a period of evaluation. The e-prescribing implementation team are busy engaging with medical, nursing and pharmacy groups to ensure governance on configuration is completed prior to go live. EPMA will reduce medication administration and prescribing errors by providing clinical decision support, legible prescriptions, tools for nurse handover/prioritisation and there will be no more missing drug charts or waiting for rewrites. It is also completely auditable so that all decisions can be followed up where necessary and unclear charting will be a thing of the past. EPMA is an exciting opportunity to provide a safer environment for patients and improve efficiency in working practice

4. RECOMMENDATIONS

Members are asked to :

• **NOTE** the update

Governance and Assurance									
Link to	Promoting		Delivering		Demonstratin	Securing a fully		Embedding	
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agenda	,			•			,		
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Staffing Implic	cations								
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Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)									
Report History				dwiferv	Board Febru	ary 26 th 20)19.		
	Nurse Staffing ACT Steering Group Meeting								
		Partnership Forum							
Appendices	ppendices None								