
Hywel Dda UHB - Nurse Staffing Level Compliance – Additional Testing (H DUHB 1920-41)

Introduction

An Internal Audit covering compliance with the requirements of the Nurse Staffing Levels (Wales) Act 2016, was undertaken as part of the 2018/19 Internal Audit Plan, with a Substantial Assurance rating given. Following the audit the Audit and Risk Assurance Committee requested that further testing was undertaken as part of the Internal Audit Plan for 2019/2020.

The additional testing was undertaken alongside the review being undertaken of the e-Roster system. The audit work was limited to this additional testing. This paper sets out the results of this testing only.

Overview of Testing

A sample of 5 wards were subject to audit testing, these being Ward 7 WGH; Ward 3 PPH; Ward 6 PPH; Ceredig Ward BGH and Meurig Ward BGH. Testing was undertaken to establish whether staffing levels were within compliance with the requirements.

For each of the wards visited:

- The staffing skill mix per shift for each ward was confirmed;
- From a roster period of 4 weeks, each shift during the period was reviewed to ensure that the staffing ratios worked were in line with the nurse staffing levels deemed necessary under the Act.

Results of Testing

An audit (Audit Report Ref: HDUHB-1819-24) of the processes in place to ensure that the Health Board was complying with the requirements of the Nurse Staffing Levels (Wales) Act 2016 was undertaken in May 2019. The report returned a Substantial Assurance rating in the planning and production of compliant rosters within designated areas. Where the numbers of staff in post fell short of the required establishments to meet the planned rosters, temporary staff were being utilised in line with the 'reasonable steps' listed as appropriate steps to be taken to maintain the nurse staffing levels within the statutory guidance.

This audit work highlighted that there was a process in place which wards utilised to manage their compliance with the nurse staffing requirements and the work also identified that each ward publically displayed their required staffing levels per shift.

However, the audit work did identify numerous shifts in the four-week period where staffing levels did not comply with the requirements due to a number of contributing factors, including high levels of unplanned sickness and vacancies on Ceredig Ward and Ward 7 WGH, whilst on Ward 6 PPH we found that the majority of the non-compliant shifts were for unqualified staff.

The table below summarises the total number of shifts across the wards visited that were not compliant with the Act over the period tested:

	No. of Shifts in Week Not Compliant with Skill Mix (Inclusive of Qualified and Unqualified Staff)			
	w/c 27.5.19	w/c 3.6.19	w/c 10.6.19	w/c 17.6.19
Ward 7 WGH	9	4	9	7
Ward 3 PPH	0	0	2	1
Ward 6 PPH	17	17	23	24
Ceredig Ward	12	10	9	7
Meurig Ward	1	1	0	1

Audit & Assurance Services

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