

National Assembly for Wales / Cynulliad Cenedlaethol Cymru <u>Health and Social Care Committee</u> / Y Pwyllgor Iechyd a Gofal Cymdeithasol

<u>Safe Nurse Staffing Levels (Wales) Bill</u> / <u>Bil Lefelau Diogel Staff Nyrsio (Cymru)</u> Evidence from Welsh Independent Healthcare Association - SNSL(Org) 25 / Tystiolaeth gan Cymdeithas Gofal Iechyd Annibynnol Cymru - SNSL(Org) 25

Safe Nurse Staffing (Wales) Bill

Bill extension to Independent Sector?

Written Submission

Introduction

The Welsh Independent Healthcare Association (WIHA) is a representative association of the vast majority independent acute and mental health hospitals in Wales. WIHA represents the interests of a number of healthcare organisations in order to make a positive contribution to public policy regarding healthcare in Wales.

Nurse Staffing Ratio

WIHA supports the principle of ensuring that there is a scheme via which safe staffing can be assured for all patients regardless of the environment in which they are cared for. However there are some specific issues which WIHA feel need to be considered for the Independent sector in Wales but which may equally affect the NHS.

The Ratio of Registered Nurses to patients and Registered Nurses to Healthcare Support Workers (HCSW) does not take into account the level of training of the HCSW and whilst the rationale may be on the premise that the HCSW has only had minimum training. At two of the 6 acute independent hospitals it has been reported HCSWs are employed or trained to NVQ levels 2 and 3. HCSWs trained to NVQ level 3 have also attained individual competencies on top of this and are therefore very capable of more in-depth patient care than a minimum trained HCSW, and indeed get much job satisfaction from managing their own caseload under the supervision of a Registered Nurse.



The level of training the HCSW has attained is not reflected within the Bill. Whilst WIHA appreciate the existing research does reflect on the percentage of degree qualified nurses, WIHA believe the level of qualification of the HCSW should also be taken into account.

The proposal to ensure the ward sister is supernumerary is within the calculation is not new, the free to care proposals gave this view and it is one which WIHA members have implemented, though the job title may differ within the Independent Sector, using terms such as inpatient manager.

It will also need to be recognised that within the Independent Sector some units may have very small inpatient "wards" or departments which may not require an individual Sister/Charge Nurse to be in charge. For instance a 10 bedded day care unit may be overseen by a ward sister who takes care of day care and a small surgical unit of 18 beds. The Bill would need to leave sufficient flexibility to ensure that it will allow the differing structures within the Independent Sector to meet the terms of the Bill. The Independent Sector internal nursing hierarchy does not directly match the NHS and does not necessarily need to replicate this structure to ensure that safe care is given.

Reporting mechanism

Internal Reporting mechanism for safer staffing within the independent sector in individual hospitals would be via their hospitals governance boards. Internal organisational reporting would be via their organisational governance structures that would replicate reporting of other governance events e.g. IPC/never events, untoward incidents etc.

HIW would consider staffing levels on their inspection process as an external validity process.

Sanctions if falling below required level

Sanctions for Independent Sector organisations would need to be considered and could only be linked to HIW regulatory powers. This would include provision of an action plan to ensure falling below the required standard was being addressed.

Conclusion

The WIHA is very pleased to have had the opportunity to comment on a possible amendment for the Safe Nurse Staffing Bill to include the independent healthcare sector and it is important that should the Bill be extended that is will include all of the Independent Sector not just NHS funded care within the Sector.

For further information please contact:



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