



Royal College
of Nursing
Scotland

**RCN Scotland's response to the
Scottish Parliament's Health, Social Care and Sport
Committee call for evidence on**

Pre-Budget Scrutiny 2024-25

**This response was originally submitted
using a Scottish Parliament online form**

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Question: Budget context

The Scottish Government's [Medium-Term Financial Strategy](#) identifies planned increases of 4% per year in real terms for health and social care over the next four years:

How would you see these planned budget increases meeting the various challenges facing health and social care over the next four years, including:

- Addressing the treatment backlog
- The planned creation of a National Care Service
- Cost and demand pressures in areas such as NHS pay, drug costs and demographic pressures?

RCN Scotland response:

One of the key messages from Audit Scotland's NHS in Scotland in 2022 report was that, despite the general trend of health spending in Scotland being one of growth, growing financial pressures present a real risk to the investment needed to recover and reform services.

The Scottish Government's Medium-Term Financial Strategy sets out the considerations behind the decision to apply a higher growth rate of 4% per annum to Health and Social Care expenditure, including inflationary pressures, an ageing population and increasing disease burden. But it doesn't adequately address the fact that Scotland simply doesn't have the nursing workforce that it requires right now, with Audit Scotland's report also concluding that workforce capacity remains the biggest risk to the recovery of NHS services. It found that the NHS workforce remains under severe pressure, with concerns over staffing levels, wellbeing and retention. It warned that the NHS Recovery Plan was not informed by robust modelling and that the NHS continues to experience high vacancy and turnover rates, higher than usual sickness absence and gaps in the workforce.

The forthcoming budget will therefore be set within a context where Scotland needs urgent action to ensure there are enough registered nurses and nursing support workers to deliver safe and effective care across all settings:

- The NHS vacancy rate for nursing and midwifery has increased from 4.5% in March 2017 to 8% in March 2023. Over 4,000 registered nurse posts across Scotland remained vacant at the end of March and there has been a decrease of 558 WTE nursing and midwifery staff in post in the past year. Meanwhile the nursing and midwifery staff turnover rate has increased to 10.4% and the NHS Scotland sickness absence rate is 6.2% - both are the highest rates reported in ten years.

- To fill the gaps in the nursing workforce, the use of staff from agencies has increased dramatically, rising to the equivalent of 1,741 WTE nursing and midwifery staff in 2022/23, up from 1,018 WTE in 2021/22. The cost in 2022/23 was a staggering £169.7m, up 91% from £88.8m the previous year. To put this in perspective, the agency spend two years ago was £39.3m. Total spend on bank and agency staff combined was £447m in 2022/23, up 39% on the previous year.
- Despite increasing clinical need, there are over 1,400 fewer registered nurses in care homes for adults since 2012, a 27% decrease.
- Data from UCAS show the number of acceptances onto nursing courses last year fell by 340 (8%), with the total number of applications also falling by 8%, adding to the workforce crisis of the future.
- The number of nurses leaving the NMC register in Scotland increased again over the past year and it is worrying that after retirement, concerns for their physical or mental health was the most common reason for leaving the register.

The failure to establish the current supply of registered nurses in Scotland to meet the growing demands and complexity of health care that is required, is not only a result of an insufficient pipeline and an inability to retain experienced nurses; it is a symptom of poor planning and a lack of recognition of the highly skilled, safety critical nature of nursing. This must be properly addressed in workforce planning and the fundamental issue of an under resourced and undervalued nursing workforce must be tackled head on. Scotland has to have a clear fully funded plan to ensure a sustainable nursing workforce for the future.

RCN Scotland priorities for the 2024-25 budget:

An improved financial package for student nurses

We are calling on the Scottish Government to implement a cost-of-living increase to the nursing student bursary, and associated allowances, and establish a regular review to ensure the bursary increases in line with the cost of living. The Scottish government and SAAS must also uplift the value of travel and accommodation expenses to reflect the rising cost of living.

Nursing students across Scotland are facing serious financial pressures that are having a significant impact on their education, financial security and physical and mental wellbeing. This is the main conclusion from an RCN Scotland survey of nursing students in Scotland which found that:

- 99% of respondents said their finances cause them some level of concern
- 74% said this was having a high or very high impact on their mental health, and 48% on their physical health
- 58% said this was having a high or very high impact on their academic performance
- 66% have considered dropping out of their course due to financial concerns

RCN Scotland is therefore calling on the Scottish government to ensure the financial support package for nursing students allows them to prioritise their education, cope with the rising cost of living, and finish their studies without falling into financial hardship.

Fair pay for nursing staff across health and social care

The Scottish Government and employers must ensure that registered nurses and nursing support workers, wherever they work, have fair pay, good employment terms and safe working conditions that reflect their safety critical role. Future pay awards should be restorative, recognising that for over a decade, nursing pay has failed to keep pace with the rising cost of living. Nursing staff employed within publicly funded social care services should have equal pay, terms and conditions to equivalent roles in the NHS.

The Scottish Government must also deliver on its commitment to review Agenda for Change to support recruitment, sustainability and retention. Modernisation of Agenda for Change is a fundamental part of the 2022/23 and 2023/24 pay settlements and no doubt a key factor in resolving the RCN dispute on pay in Scotland. Given the small majority of members who voted in favour of the pay offer, and the feedback from members on the importance of the review of Agenda for Change, in particular the review of Band 5 nursing profiles, real progress needs to be made on this work and adequate investment to deliver the changes required.

Implementation of Scotland's safe staffing legislation

The Health and Care (Staffing) (Scotland) Act has not yet come into force and the Scottish Government has committed to implementation in April 2024. RCN Scotland is calling for implementation to be accompanied by the investment and resources to allow health boards and care employers to meet their duties under the Act and to tackle nursing vacancies. The Act provides tools to facilitate safe staffing levels across health and care, but its successful implementation relies entirely on retaining and recruiting more nurses.

Ministers must also address the unsustainable reliance on temporary nursing staff. Over reliance on temporary staff may result in a lack of continuity of care for patients, add to clinical risk, increase pressure on existing nursing staff and lead to even more financial pressure when budgets are already extremely tight.

Delivering positive change through the Nursing and Midwifery Taskforce

The Scottish Government must ensure the new Nursing and Midwifery Taskforce delivers funded, timely, meaningful and sustainable actions that make a positive difference for the nursing profession and address persistently high nursing vacancies. This should include the development of a nursing retention strategy. A retention strategy must:

- Ensure nursing staff can develop and progress in their careers, including protected contracted time for CPD.
- Set out clear investment in the development of nursing careers.
- Flexible working opportunities throughout an individual's career.
- Improve working conditions and workplace culture with action to address psychological safety, bullying and violence and aggression.
- Promote health at work with a focus on adequate facilities and time for breaks.

Focus on improving community health and social care services and tackling the staffing crisis within these sectors

We have serious concerns about the current National Care Service Bill and the potential huge costs involved in this structural overhaul. We share the desire to improve the quality and consistency of social care and health services across Scotland. However, it is entirely unclear how the current Bill will achieve this or address the serious challenges within a sector that is in crisis.

Figures published by the Care Inspectorate and Scottish Social Service Council in November showed that 60% of care services that employ nurses reported vacancies. The rate of WTE nursing vacancies for these services was 16.2%. District nursing services play a key role in supporting people to return home from hospital and in preventing hospital admissions in the first place but the vacancy rate for district nursing has reached 10.5%, with almost 500 posts unfilled.

Ultimately improving the quality and consistency of services cannot be achieved without increasing investment, tackling the workforce crisis and recognising (and resourcing) the increasing need to deliver complex clinical care within community and care home settings. Services within the social care and community sectors must have the right numbers of staff, with the right skills, in the right place. This is where the focus needs to be just now. Fair pay, terms and conditions for nursing staff employed within the social care sector are vital and nursing staff should have equal pay, terms and conditions to equivalent roles in the NHS.

Many questions remain about the scope of the National Care Service and how it will operate in practice, but it seems clear that the funding attached to the Bill is nowhere near enough to address the problems facing the sector currently. The Scottish Government must invest now in the social care workforce, in particular tackling low pay and poor terms and conditions.

Grow the domestic nursing workforce

The Scottish Government must take steps to grow the domestic nursing workforce by continuing to increase the number of nursing student places and expanding the routes into nursing, including implementing the recommendations that come from the Ministerial Nursing and Midwifery Taskforce. As outlined above, improving the financial support package for nursing students is vital for attracting and retaining students throughout their education, ensuring sustainable domestic recruitment.

Question: Longer-term outlook

Challenging decisions lie ahead in relation to health and social care spending. Pressures result from demographics, pay, technology and drugs, but opportunities also exist through use of artificial intelligence and service re-design.

- Given the short-term and immediate pressures on the health and social care system, how can the Scottish Government take the more radical decisions required around service redesign, or reducing/stopping existing services?
- Is there any evidence of longer-term thinking in budgeting for health and social care, either in Scotland or elsewhere in the UK or abroad?

RCN Scotland response:

There is much to be done if the determination and willingness to adapt and innovate to best meet the needs of patients, that is at the heart of our NHS, is to continue and flourish. This must include the successful implementation of the Health and Care (Staffing) (Scotland) Act, legislation designed to deliver and protect safe staffing levels. We also need realistic conversations with the public about expectations, access to services and what is achievable. We agree with the point made by Audit Scotland, in its NHS in Scotland in 2022 report, that there needs to be an open and honest discussion about the ongoing level of investment, and new ways of working, that will be required to meet the growing demands on Scotland's health and care services.

Improving public health is essential if Scotland is to successfully face up to the challenges of increasing population demands on our health and care services and continued financial pressures on budgets. Action to address health inequalities, prevent ill health and ensure the resources and investment are in place for early intervention is essential for both the physical and mental health of Scotland's population.

Community nurses are ideally suited to respond to public health challenges as they understand the communities they work in and have the knowledge and expertise to promote health as part of their clinical practice. Yet initiatives to promote public health, to support people to manage their health and wellbeing and to address health inequalities, will continue to be severely constrained by a lack of available workforce.

Community nursing teams were under resourced before COVID-19 struck and the pandemic has significantly increased pressure on these services. Over 1,400 NHS community nursing posts are vacant – this is 11% of community nursing posts in Scotland. Our members tell us that patient care is being compromised daily because of staffing levels, they are having to make difficult decisions about which patients to prioritise and they are finishing their shifts feeling like they have not been able to provide the quality of care that they want to.

The system is in crisis and these severe workforce shortages must be addressed if services are to have the capacity to focus on prevention and early intervention. Improving Scotland's public health requires health and care services having the right staff, with the right skills in the right place and there needs to be wider recognition of the role community nursing services play in this. Tackling the workforce crisis must be a priority for Ministers, or our health and care services will continue to struggle with limited progress on improving Scotland's public health record or tackling persistent inequalities.

Question: Health and social care outcomes

In relation to health and social care, a range of different performance frameworks and targets exist, including the National Performance Framework, Local Delivery Plan (LDP) standards, the 'National health and wellbeing outcomes' and the Wellbeing Economy Monitor.

- How should health and social care budgets be prioritised in this landscape of multiple frameworks and targets and which targets or outcomes should take precedence?

RCN Scotland response:

RCN Scotland has called for a move away from looking at resources and budgets in an isolated way and over short-term periods if we are to address health issues in Scotland and ensure that our health services are sustainable. The current approach to setting and reporting on national targets and measures, while having initially delivered some real improvements, is now often skewing clinical priorities, with a confusing myriad of often competing measures the NHS has to achieve.

If our health care services are to be sustainable, it needs to be simple for health boards and other service providers to report on how they are performing and easy for the public and politicians to assess whether services are doing what we want them to do – and doing it well. And it needs to be done in a way that supports improved outcomes for individuals for generations to come. We have called for a new approach to health care targets that helps our health care services to be sustainable in the long term and improve outcomes for all.

If we continue to deliver care in the same way we do now, we know the demands on our health care services will continue to outstrip our ability to pay for them. Tough decisions on what to invest in or disinvest from need to be made, in partnership with the public, with staff and across all political parties. That is why we want to see the creation of a set of clear, consistent and transparent criteria to be used when MSPs or Scottish Government take any decision on health care funding. Having a shared set of principles on which to base funding decisions will support MSPs to make difficult but necessary choices, and allow for rigorous scrutiny.



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