

The Royal College of Nursing Response to the EFN Questionnaire on Nursing Ratios

The European Federation of Nurses Associations (EFN) requested input on the following questions from EFN members as requested by Malta NNA to establish a European Nursing Ratio Document.

1. Do you have a legislation in your country in relation to Nursing ratios?

England: No

Northern Ireland: No

Scotland: Legislation in development – not yet implemented

Wales: Yes

2. If Yes, please attach it (translated in English, please) and explain briefly how it's measured:

Scotland: The Health and Care (Staffing) Actⁱ received Royal Assent in June 2019, however, work towards implementation of the Act was postponed due to the COVID-19 pandemic. The legislation is the first in the UK to set out requirements for safe staffing across both health and care services. This includes the use of a mandatory tool to calculate staffing levels, publication of staffing decisions, and opportunities for scrutiny and discussion about the decisions made. The Scottish Government has now published a timetable for implementation, which sets out a 21-month programme of work which will see the Act come into force from April 2024. The legislation will not introduce ratios, but instead will codify the way in which staffing decisions are made.

Wales: In 2020, the RCN joined 16 other health organisations in Wales to campaign for change to the Health and Social Care (Quality and Engagement) (Wales) Act 2020.ⁱⁱ The change means that the annual quality reports of NHS Health Boards must now explain how they have improved the quality of care in terms of workforce numbers, skills and planning according to the Health Care Standards, in the aims of delivering better quality care. The Act will come into force in Spring 2023. It will empower the ward sister/charge nurse and the Nurse Director equally to ensure that there are safe nurse staffing levels.

In 2021 the RCN secured the Welsh Government's commitment to extend section 25B of

the Nurse Staffing Levels (Wales) Act 2016 to children's inpatient wards, and is now calling for this legislation to be extended to cover all areas where nursing takes place.ⁱⁱⁱ This legislation means that paediatric inpatient wards have a legal duty to both calculate and maintain nurse staffing levels - according to a specified methodology, and to inform patients of the actual and calculated levels. This legislation will have a direct impact on the quality of care received by children in inpatient wards in Wales, and if it were to be extended to cover all nursing settings, the impact on patient safety would be significant.

3. If No, state the reasons for not having established Nursing ratios in your country:

England: The introduction of the Health and Care Bill in 2021 presented a landmark opportunity to enshrine workforce assessment and planning for England into law. The UK Government chose to reject the opportunity identified by the RCN to make the Secretary of State for Health and Social Care legally responsible for workforce assessment and planning to ensure safe staffing. Instead, the legislation, now passed into Act, only requires the Secretary of State for Health and Social Care to set out how workforce planning is organised in England. It does not set any expectations for how workforce planning is defined or understood in terms of assessing requirements of health and care systems to meet the needs of the population, nor what the UK Government should be directly accountable for with regards to generating a nursing labour market for safe and effective healthcare provision in England.

Northern Ireland: In 2020, RCN members in Northern Ireland engaged in strike action to secure measures to promote safe and effective care, as well as pay parity with England. As a result of discussions with trade unions, a new safe staffing framework was agreed with the endorsement of the full Northern Ireland Executive, and pay parity with England and Wales was restored. However, there is no safe staffing legislation in place in Northern Ireland, and the RCN has continued work to hold the Department of Health to account for the full implementation of the safe staffing framework proposals, and whilst satisfactory progress has been made in some aspects - especially the increase in preregistration commissioned places and an increase in funding for post registration nurse education - the RCN remains concerned at the pace of progress over other issues, particularly the development of safe nurse staffing legislation.

4. If no, Do you have an established method of determining nursing staffing level and skill mix in your country?

There is no established method of determining nursing staffing level and skill mix across the UK. The RCN is currently preparing a full list of guidance to state what each UK country is recommending regarding nurse staffing ratios. This list can be shared with EFN in due course.

5. If yes, is this a government approved calculation method?

No

6. If yes, can you give details ?

7. Will it be helpful for your NNA and your country to have an EFN Document on Nursing Ratios?

It would be helpful, however, guidance would need to be specific to different nursing settings. Specific ratios that are suitable for one nursing setting will not be suitable for another, for example, a ratio of 1:4 in acute care would be ideal, whereas the same ratio in critical care would not be safe. However, meeting such ratios is likely to be difficult operationally in the context of severe nursing shortages across all sectors. The RCN believes that any minimum ratio must be accompanied by meaningful action to address both recruitment and retention issues across the profession.

8. Do you have established an agreement for Nurses not being accountable in cases that minimum Nursing ratios are not met?

No.

However, it is worth noting that in November 2022, the UK's chief nursing officers, the Nursing and Midwifery Council, and the Care Quality Commission expressed a commitment to keeping nurses safe, ahead of what is expected to be a 'difficult' winter. This commitment was expressed in a letter sent to the nursing profession, noting that the past few years have been some of the most challenging that health and social care and the nursing profession had faced in modern times.^{iv}

The Nursing and Midwifery Council have also released periodic statements to registered nurses, offering guidance for nurses to follow in times of crisis, for example, periods of

significant pressure on the health and care system. Such guidance sets out that pressures will be taken into account – acknowledging that nurses are not accountable for situations where nurses are under unprecedented pressure.

9. If Yes, please attach it (translated in English please)

N/A

10. Do you believe that by having a document on Nursing Accountability in cases where the established Nursing ratios in your country are not met, is of value for your NNA?

The RCN believes that such a document would be of benefit to nurses. Increasingly our members are forced to make impossible decisions that conflict with their code and the creation of clear parameters on accountability in scenarios of understaffing would safeguard nurses and simultaneously reduce the backlog of issues in HR departments and the NMC.

Such a document would be of value to the RCN, however, the RCN would be keen to engage with EFN on the development of the document. The RCN suggest that the document would be benefitted by being worded to be mindful of the RCN's Nursing Workforce Standards, which set out what must happen within workplaces to ensure the delivery of safe and effective patient care. ^v The RCN are calling for the Nursing Workforce Standards to be rolled out across NHS trusts in the UK. Standard 1C of the Nursing Workforce Standards references how decisions and accountability relating to the nurse staffing level rests with the corporate board. Executive nurses are responsible for the information and advice they provide to the board. Other board members or members of a senior management team such as HR Directors may share this responsibility in some organisations. The board collectively is accountable for the decisions they make and the action they do or do not take in response to this information and advice. The standard references that the board should collectively agree the operating framework for these decisions to include actions to be taken, and by whom, and how these will be visibly and actively monitored.

The RCN recommend that any document on nursing accountability references this guidance whilst being worded.

ⁱ <https://www.legislation.gov.uk/asp/2019/6/enacted>

ⁱⁱ <https://www.legislation.gov.uk/asc/2020/1/contents>

ⁱⁱⁱ <https://www.rcn.org.uk/magazines/Action/2022/May/Community-nursing-needs-the-full-team-safe-staffing-Wales>

^{iv} <https://www.nursingtimes.net/news/leadership-news/nurse-leaders-write-letter-to-profession-ahead-of-difficult-winter-14-11-2022/>

^v <https://www.rcn.org.uk/professional-development/publications/rcn-workforce-standards-uk-pub-009681>