



Coleg Nyrsio Brenhinol
Cymru
Royal College of Nursing
Wales

2022

Nursing in Numbers



SAFE STAFFING SAVES LIVES
MAE STAFFIO DIOGEL YN ACHUB BYWYDAU



FAIR PAY FOR NURSING
TÂL TEG AR GYFER NYRSIO



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Table of Contents

About this report	3
Recommendations	4
Section 1 How many nurses and health care support workers are employed by NHS Wales?	6
Are there enough nurses and nursing staff employed by NHS Wales to provide the best care?	7
Assistant practitioners	8
Registered nurse vacancies	9
Working overtime	10
Agency nursing	11
Section 2 How many nurses and nursing staff are employed in the independent sector?	14
General Practice Nurses (GPNs)	14
Care home nursing	15
Section 3 How to achieve safe and effective care	17
Recruitment	17
Pre-registration nursing education	17
How is pre-registration education commissioned?	19
International nursing and migration	20
Retention	21
Fair pay for nursing	21
Retaining nurses in NHS Wales: What matters?	22
Retaining nurses in care homes: What matters?	24
Post-registration workforce planning	24
Advanced nurse practitioners	24
Specialist nurses	25
Consultant nurses	26
Infection prevention and control (IPC) nurses	28
Community Nursing Teams	28
Health Visitors	29
The Nurse Staffing Levels (Wales) Act 2016	32

About this report

The Royal College of Nursing (RCN) Wales produce this report annually. It is designed to provide a statistical overview of the strengths and vulnerabilities of the nursing workforce in Wales. This report was produced in September 2022.

Data on the nursing workforce in Wales is published by the Welsh Government through StatsWales, Social Care Wales (SCW) and Health Education Improvement Wales (HEIW).

The latest Welsh Government data on the NHS nursing workforce was published by StatsWales on 17 August 2022. Since 2019, data has been published quarterly. In previous years, nursing data was published annually on 30 September. Data is rounded to the nearest whole number and shown as Full-Time Equivalent (FTE).¹

The latest HEIW workforce trends report was published in March 2021. The biennial report provides information on workforce demographics, agency spend and sickness trends.²

The latest SCW data was collected between April and June 2021. The data has not yet been published but was shared with RCN Wales by SCW. The data is based on a response from 100% of local authorities and 72% of commissioned care providers.

The RCN Employment Survey is undertaken every two years and the series began publication in the 1980s. This is a significant source of nursing workforce information in the UK. RCN published the 29th edition of the biennial employment survey in 2021 and 1,556 people responded from Wales. In addition, the RCN undertook a 'Last Shift' survey of members in 2022, and 974 people responded from Wales.

In this report, the term "nursing staff" includes healthcare support workers. "Nurses" refers specifically to registered nurses.

Please contact Policy&PublicAffairs.Wales@rcn.org.uk for more information.

¹ StatsWales. 2022. *Nursing, midwifery and health visiting staff, by grade and area of work*. Available at <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Staff/Non-Medical-Staff/nursingmidwiferyandhealthvisitingstaff-by-grade-areaofwork-year>.

² Health Education and Improvement Wales. 2021. *NHS Wales's Workforce trends (as at 31 March 2021)*. Available at <https://heiw.nhs.wales/files/nhs-wales-workforce-trends-as-at-31-march-2021/>.

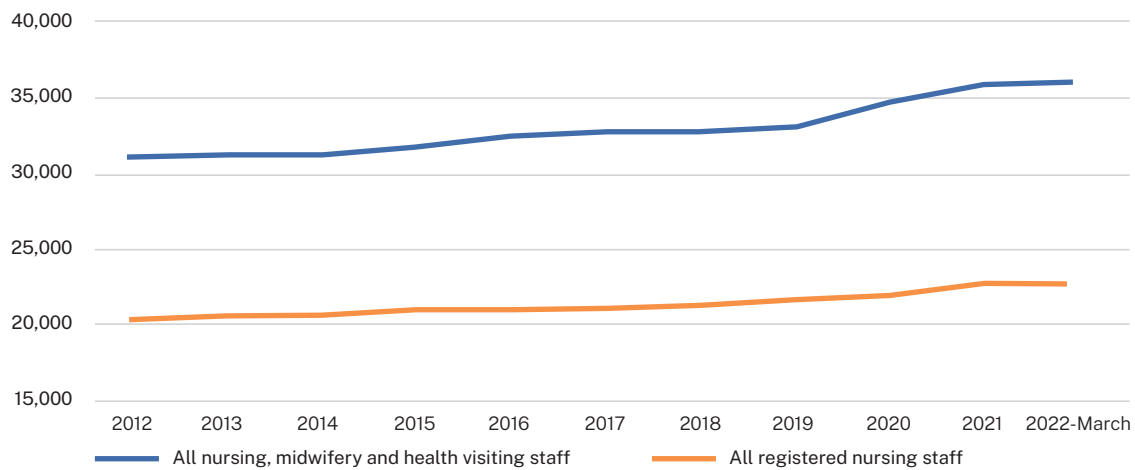
RECOMMENDATIONS

- 1** The Welsh Government must publish registered nurse vacancy data to improve workforce planning across the health and social care sector.
- 2** The Welsh Government, NHS Wales and Health Education and Improvement Wales should develop a national nursing retention strategy to encourage nurses and nursing staff to continue to work in the NHS.
- 3** The Welsh Government should set out a timeline to extend Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to community nursing and mental health inpatient wards.
- 4** The Welsh Government and Social Care Wales (SCW) should launch a national programme to raise the profile of nursing in care homes and ensure equity of pay and terms and conditions of employment between health and social care.
- 5** Health Education and Improvement Wales must ensure the commission figures for pre- and post-registration nursing education are accompanied by a strategy setting out the rationale for these choices and must consult meaningfully with stakeholders in this process. This will ensure the health and care needs of the population are reflected in the numbers and skills commissioned.
- 6** The Welsh Government should instruct Health Education and Improvement Wales to produce a strategy for commissioning and developing post-registration nursing education. This will ensure that Wales has the advanced practice and consultant nursing roles required. This will also ensure provision of specialist roles and knowledge, for example, in neonatal care, infection prevention and control, alongside specialities such as district nursing, health visiting etc.

Section 1 How many nurses and health care support workers are employed by NHS Wales?

There are 36,077 FTE nursing staff employed by NHS Wales, of which 22,899 FTE are registered nurses. The nursing and midwifery workforce is the largest workforce in the NHS, making up 40% of the entire NHS Wales workforce.³

F1 NHS Nursing Numbers, 2011-2022, StatsWales



Where are registered nurses employed?

Betsi Cadwaladr	4,986
Cardiff and the Vale	3,905
Aneurin Bevan	3,529
Swansea Bay	3,401
Cwm Taf Morgannwg	3,348
Hywel Dda	2,666
Powys	535
Welsh Ambulance	223
Velindre	208
Public Health	82

There has been a growth in the number of registered nurses and nursing staff employed by NHS Wales over the last 10 years.

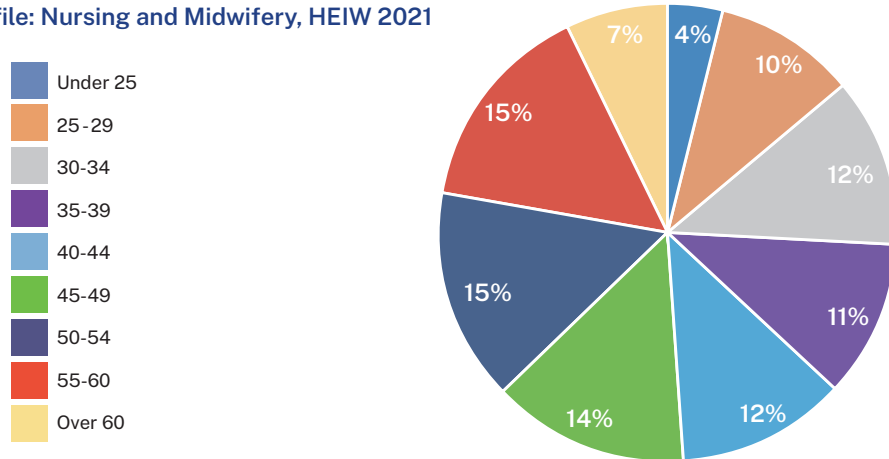
The nursing workforce has increased by 16% since 2012. However, the registered nurse workforce has only increased by 11%, an annual increase of 1%. This growth does not reflect the increase in patient need.

The nursing and midwifery workforce is 91% female compared to 9% male. Over a third (37%) of the nursing and midwifery workforce are over 50, compared to 14% that are under 30.⁴ Only 4% of the nursing and midwifery workforce is under 25.

³ Welsh Government. 2022. *Staff directly employed by the NHS: as at 30 September 2021*. Available at: [Staff directly employed by the NHS: as at 30 September 2021 | GOV.WALES](https://gov.wales/staff-directly-employed-by-the-nhs-as-at-30-september-2021/).

⁴ Health Education and Improvement Wales. 2021. *NHS Wales's Workforce trends (as at 31 March 2021)*. Available at <https://heiw.nhs.wales/files/nhs-wales-workforce-trends-as-at-31-march-2021/>.

F2 Age Profile: Nursing and Midwifery, HEIW 2021

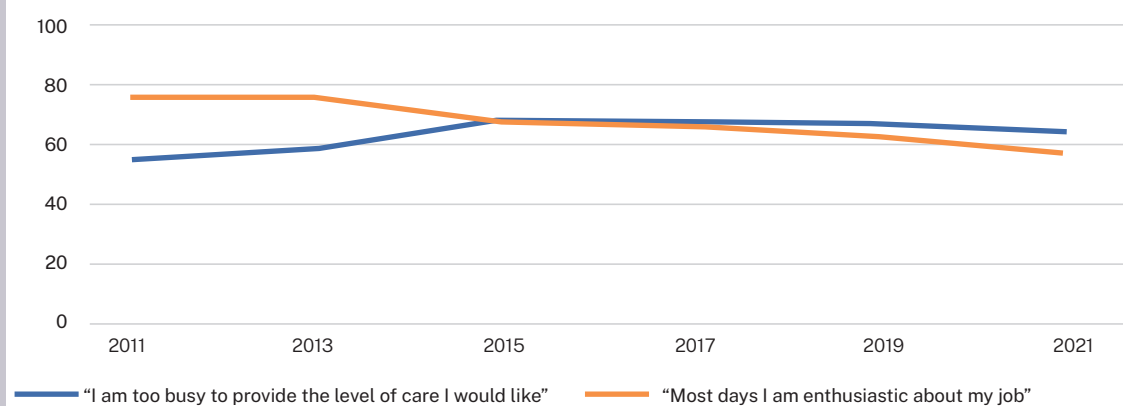


Are there enough nurses and nursing staff employed by NHS Wales to provide the best care?

No, there are not enough registered nurses or nursing staff employed by NHS Wales and this is having a devastating impact on nursing morale.

In the last 10 years the percentage of nursing staff that feel enthusiastic about their job has dropped by 19%. Those that feel they are too busy to provide the level of care they would like has increased by 9%. This speaks to the mounting pressure nursing staff are facing in Wales.

F3 Nursing morale in Wales (RCN Employment survey 2011-2021)



There has been an increase in nursing workload as nurses are caring for an ageing population with increased dependency and comorbidities. Patient throughput in hospital has risen sharply, as has bed occupancy.

A substantial increase in nursing staff is needed to ensure the delivery of high-quality patient care. Put very simply, it takes a high number of nursing staff with a great level of knowledge and skill to care for a person with a broken hip if they are also physically frail, living with dementia, diabetes, a heart condition and respiratory illness. This is even more so the case if this person is being cared for at home, alone, or in poor or ill-suited housing conditions.

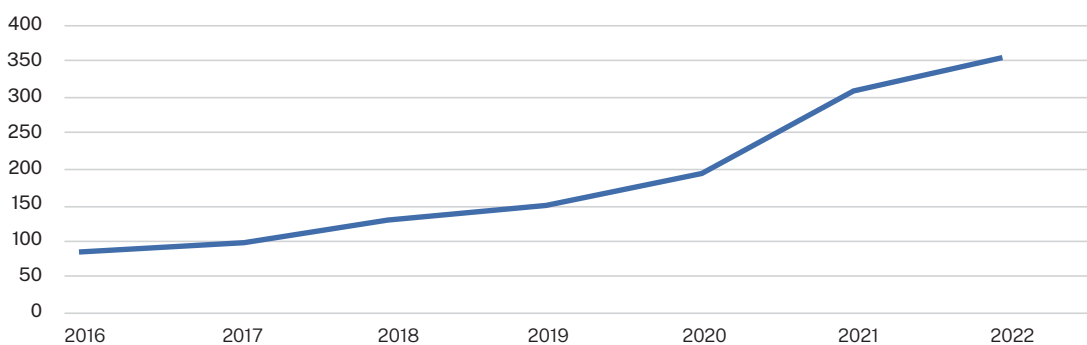
To understand how many nurses and nursing staff are needed in the NHS, indicators of patient need and workforce pressure such as vacancy rates, agency spend, and workload pressure should be considered.

Assistant practitioners

Healthcare support workers (HCSWs) are a valuable part of the nursing team. Making sure these roles, including Band 4 assistant practitioners, exist, are appointed to, and supported at a sufficiently advanced level is very important. However, assistant practitioners are not a replacement for registered nurses and cannot be used to substitute registered nurses or fill registered nurse vacancies.

In recent years, Wales has seen a rapid expansion of assistant practitioners, predominately Band 4, as shown by F4. The number of assistant practitioners increased by 63% between September 2020 and September 2021, and an additional 13% by March 2022.

F4 Number of Assistant Practitioners (FTE) 2016-2022, StatsWales



During the pandemic many health boards, including Aneurin Bevan, Betsi Cadwaladr, Cwm Taf Morgannwg and Hywel Dda, sought to reduce the pressure on registered nurses through the delegation of appropriate work to other roles, specifically assistant practitioners. Hywel Dda health board expressed that assistant practitioners were identified as a necessity to ensure an adequate and sustainable nursing workforce during the pandemic.

Assistant practitioners are a vital part of the nursing family and provide support to registered nurses; however, these roles need to be clinically supervised by registered nurses. The evidence is very clear that the professional knowledge, skills and judgement of the registered nurse in a supervisory position makes the critical difference to patient outcomes. Assistant practitioners cannot be used to substitute registered nurses.

Registered nurse vacancies

The Welsh Government fails to publish national statistics for nursing vacancies in Wales. **Wales is currently the only country in the UK not to publish this data.**

In May 2022, Eluned Morgan, Minister for Health and Social Services, committed to publishing this data, detailing that 'NHS Wales vacancy data for the directly employed workforce will be routinely collected and published in the coming months'⁵. However, no such data has been published.

Since 2019, RCN Wales has been gathering this data from health board papers and estimating a national figure. This is challenging as health boards do not routinely publish this data and the data would be taken from different points in the year. This year many health boards have not published the number of registered nurse vacancies, rather opting to publishing nursing and midwifery vacancies, a vacancy rate or simply not publishing any information. As the vacancy information was not easily accessible and/or available via health board papers, this year RCN Wales put forward a Freedom of Information (FOI) Request. Betsi Cadwaladr did not respond to the FOI request, this is deeply concerning.

There needs to be national scrutiny from the Welsh Parliament if a health board decides not to publish this data, and more importantly, questions raised as to when the Minister Eluned Morgan intends to fulfil her commitment to publishing the national vacancy figure she has promised.

Wales continues to be the only country in the UK not to publish this data. Wales did publish vacancy data up to 2011, although it only related to posts that had been vacant for longer than three months.

How many registered nurse vacancies are there in NHS Wales?

RCN Wales has estimated that there are at least **2,900** registered nurse vacancies in NHS Wales.

⁵ Eluned Morgan. 2022. *Welsh Parliament Written Question*. Available at [Written Question -WQ85120 -Welsh Parliament \(assembly.wales\)](https://www.assembly.wales/Written-Question-WQ85120).

The data was gathered from 2001 to 2011 due to the ‘large number of posts that were vacant for three months’ or more – 1,400 in 2001, peaking at 1,700 in 2002. The publication was stopped due to the number of posts vacant for three months or more declining below 100. However, if the publication of vacancies was started due to the large number of posts being vacant (for longer than three months), why has this not been reinstated when we know there are now over 2,900 vacancies?

Where are the registered nurse vacancies?

Health Board	Estimated Vacancy	Source of Estimate
Aneurin Bevan	364.94	Jul 22 Freedom of Information Request
Betsi Cadwaladr	636.4*	Nov 21 Quality, Safety and Experience Committee
Cardiff and the Vale	566.63	Jul 22 Freedom of Information Request
Cwm Taf Morgannwg	147.38	Jul 22 Freedom of Information Request
Hywel Dda	539.2	Jul 22 Freedom of Information Request
Powys	77	Jul 22 Freedom of Information Request
Swansea Bay	568.86	Jul 22 Freedom of Information Request

**Did not respond to FOI request. Nursing and Midwifery*

RCN Wales estimates that registered nurse vacancies have risen from 1,612 in 2020 to 1,719 in 2021 and to 2,900 in 2022.

The Welsh Government must urgently improve the transparency of registered nurse data and publish vacancy data in a similar manner to Scotland, Northern Ireland and England.

Working overtime

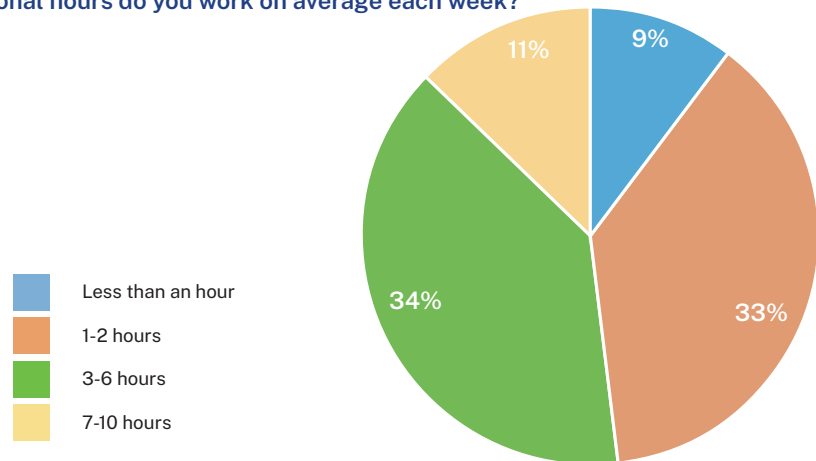
How many hours do nurses work overtime?

Every week nurses give the NHS an additional 67,780 hours a week. This is the equivalent of 1,807 nurses.

NHS Wales continues to demonstrate a heavy reliance on nurses’ goodwill to work overtime. In 2021, 74% of those that responded to the RCN Employment survey expressed that they worked additional hours at least once a week; 42% of these hours were not paid, while 29% received TOIL. Of the 74% that worked additional hours, 34% worked between three to six hours extra a week.

This means that the number of registered nurses employed by NHS Wales and working overtime is 16,945. If these nurses worked an additional four hours a week this equates to 67,780 hours.

F5 How many additional hours do you work on average each week?



The NHS is getting 67,780 hours a week from nurses' goodwill. This is the equivalent of 1,807 additional full-time registered nurses working every week.

A Freedom of Information (FOI) request by the Welsh Conservative Party found that in 2020/2021 health boards spent £23m on nursing and midwifery overtime. This rose by £10m compared to 2019/2020. These figures do not include overtime spend at Hywel Dda.

How much do health boards spend on overtime?

In 2020/2021, six health boards spent over £23 million on nursing and midwifery overtime – a rise of £10 million from 2019/2020.

Agency nursing

Agency nursing refers to a nurse or HCSW that works for a nursing agency, which is a private company. Agency nurses and agency HCSW can decide to work for an agency full-time or part-time while also being directly employed by NHS Wales on an Agenda for Change contract.

There will always be a need for some element of temporary nursing in the NHS to cover short-term sickness and maternity leave. When this cannot be covered by permanent staff or 'bank' nurses, the NHS turns to agency nursing. The term bank refers to an internal NHS system used to respond to staffing requirements; any nurse or HCSW can sign up to work 'bank' for the health board they are employed by. In addition, some nurses and HCSW only work bank shifts.

From the perspective of the individual nurse, agency nursing is very attractive. Agency nurses have better pay, more freedom over location and hours and can focus on their patients rather than worrying about staff shortages and internal challenges.



Flexible working A nurse is able to choose the hours and days they *want* to work. This makes agency nursing attractive for family life and those who want to spend time on their education.



Career opportunities An agency nurse can experience a variety of roles in different locations that may help them develop their skills and competencies.



Better pay Agency nursing offers better pay compared to the NHS. A registered nurse can earn on average £42.50 an hour for an ICU shift and £51 an hour for an A&E shift.



Improved work/life balance An agency nurse is able to choose their own hours and location, and with less stress, better pay and more career opportunities, their work/life balance is greatly improved.



Choose work location An agency nurse is not confined to one hospital or health board. They can choose the health board and even the hospital they want to work in.



Focus on patient care An agency nurse provides complex care for patients, but there is generally less responsibility and pressure to address staffing shortages, time pressures and increased workloads.

How much does NHS Wales spend on agency nursing?

In 2021/22, NHS Wales spent £133.4 million on agency nursing. This is an increase of 41% from the previous financial year.

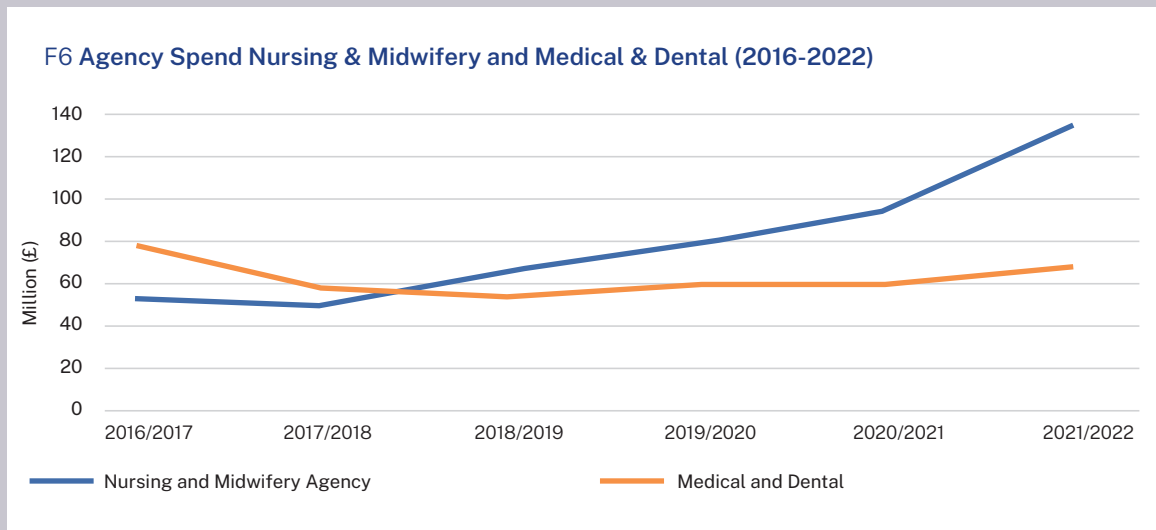
This would pay for the salaries of 4,930 newly qualified nurses.

Agency nursing is expensive for the NHS as there is a higher cost to cover agency profit margins. In 2006, the Welsh Government implemented the All Wales Agency Framework Contract, introducing capped hourly rates of pay to nursing agencies. Suppliers of agency nurses through the framework contract are referred to as 'on-contract' agencies, whereas those that are not part of the framework contract are 'off-contract' and can charge a higher premium. This contract was initially introduced for two years, with an option to extend for a further two years.

A new All Wales Agency Framework Contract was signed in 2021 for the years 2021 to 2024, with the possibility to extend for an additional year. The contract continues to cap the hourly rates of pay to nursing agencies.

Agency nursing is not ideal for patient care as agency nurses will be less familiar with ward layout, policies, and equipment.

This is less conducive to providing continuity of care for the patient as it means permanent nursing staff have to provide an induction into the clinical environment for each new agency nurse, thus taking valuable time away from patient care.



NHS Wales tries to discourage nurses from working for agencies with measures such as refusing to hire agency nurses who also work for the health board/trust. This creates a situation of agency nurses travelling from London or Manchester to fill vacancies in Cardiff or Ysbyty Gwynedd and vice versa.

NHS Wales spent £133.4 million on nursing and midwifery agency in 2021/2022. This was an increase of 41% compared to the previous financial year.

F6 highlights that while agency spending for the medical and dental workforce has decreased and remained relatively stable since 2016/2017, nursing and midwifery agency spend has nearly doubled during the same period.

NHS Wales is displaying a dangerous and growing reliance on agency nursing over its own workforce. If this trend continues, this risks leading to a situation where health boards no longer directly employ staff to provide patient care and instead move to a model in which most or all nursing care is outsourced. This is not a shift that should take place without a conscious government policy decision.

Section 2 How many nurses and nursing staff are employed in the independent sector?

Nurses and nursing staff employed within the independent and social care sector work for a range of non-NHS employers including hospices, nursing agencies, prisons, GP practices, private hospitals, charities and voluntary community services.

It is difficult to find comprehensive data on the total number of nurses working for employers in this sector as there is no single source of data. While the Welsh Government does provide data on certain nursing groups in the independent sector, there is no easily accessible overall nursing number.

However, there are currently 36,045 nurses registered with the Nursing and Midwifery Council (NMC) with a Welsh residential address.⁶ Meanwhile, 26,301 nurses are employed by the NHS.⁷ That leaves 9,744 registered nurses working elsewhere. However, it is important to note that some of those registered may not be practicing and others may live in Wales but work in England, therefore this is only an estimate of nurses working in the independent sector.

HOW MANY NURSES WORK IN GENERAL PRACTICES?

In March 2022, there were 1,419 registered nurses working in general practices in Wales.

General Practice Nurses (GPNs)

The majority of GPNs and nursing support workers are directly employed by general practitioners (GPs) who are subcontracted by the health boards to deliver the General Medical Service (GMS) contract. A small number of GPNs and nursing support workers are employed directly by health boards.

There are 1,419 registered nurses working in general practices in Wales. To put this in perspective, there are 2,019 GPs.⁸

GPNs provide direct patient care. They assist patients in managing long-term conditions such as diabetes and epilepsy, provide respiratory care, vaccinations and take blood tests.

GPNs are essential for delivering the Primary Care Model for Wales.

GP practices work in clusters. There are currently 64 clusters in Wales which seek to develop services in their locality. The GP practice is central to the cluster. GPNs work on a cluster basis to ensure consistency in care and ease of communication between GPs, GPNs, and the wider community workforce including district nurses. GPNs need to be included in the design and delivery of cluster care.

⁶ Nursing and Midwifery Council. 2022. *NMC Register Wales 1 April 2021 – 31 March 2022*. Available at <https://www.nmc.org.uk/globalassets/sitedocuments/data-reports/march-2022/nmc-register-data-march-2022-wales.pdf>.

⁷ StatsWales. 2022. *Nursing, midwifery and health visiting staff, by grade and area of work (headcount)*. Available at <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Staff/Non-Medical-Staff/nursingmidwiferyandhealthvisitingstaff-by-grade-areaofwork-year>.

⁸ StatsWales. 2022. *General Practice Workforce*. Available at <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/General-Medical-Services/General-practice-workforce>.

Care home nursing

Care home providers and RCN Wales members have reported an acute shortage of registered nurses in the care home sector. The majority of those working in social care will be working in care homes or mental health residential facilities.

In 2018, there were 1,545 registered nursing staff employed by commissioned care providers in Wales. In 2019, this decreased to 1,438. In 2021, this decreased again to 1,119, with an additional 204 nurses employed by local authorities.

In 2021, 319 registered nursing staff left the sector, and only 204 joined. This is a deficit of 115. To add to this, at the time of gathering data there were 129 'live' vacancies.

The combination of vacancies and decrease in the number of registered nursing staff working in social care is concerning given the challenges the sector faces. In addition, the social care sector has an ageing nursing workforce.

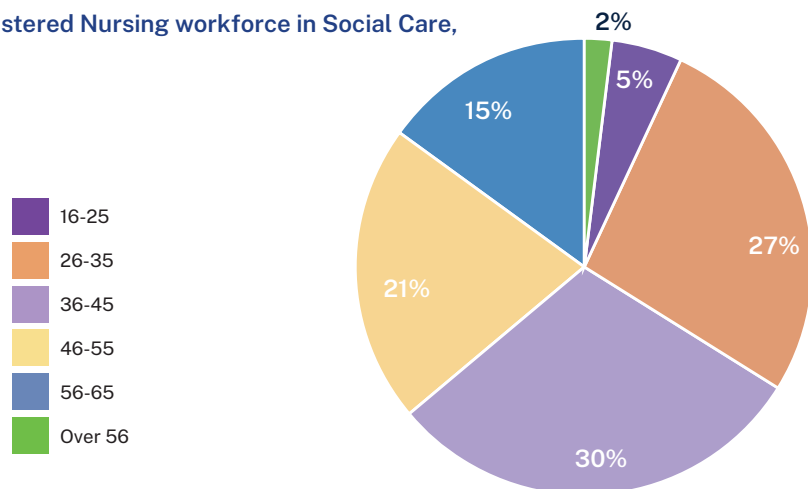
HOW MANY NURSING STAFF WORK IN SOCIAL CARE?

In 2021, there were 1,323 registered nursing staff employed in social care (based on 72% commissioned services and 100% local authority).

AGE PROFILE OF NURSING IN SOCIAL CARE

Over a third (32%) of nursing staff in social care are over 56, while an additional 30% are over 46. This is worrying as they may be considering retiring or reducing their hours in the coming years.

F7 Age Profile of Registered Nursing workforce in Social Care, SCW 2021



If there are not enough registered nurses in the care home workforce then the quality of the nursing care provided will fall, resulting in poor health and reduced life expectancy for older people cared for by the sector.

The challenges faced in the care home sector will in turn spread to the NHS and increase the number of delayed discharges and repeat admissions will rise.

As autonomous practitioners, nurses' clinical skills are used to recognise and anticipate problems, act when a person's condition is deteriorating, and avoid unnecessary hospital admissions. Registered nurses are key to managing acute illness, making decisions around the management of long-term conditions, and delivering complex interventions in emergency or crisis situations. They also help to support the seamless transition from hospital back into the care home.

The role of nurses in care homes does not end with the clinical needs of the resident. Rather, the nursing workforce is often left to manage and overcome non-clinical challenges, especially at night. For example, a nurse may be left to oversee a fire drill, building maintenance and manage equipment breakdowns. To do this effectively takes responsibility, skill and leadership.

The registered nurse role in care homes is important and should not, and cannot, be marginalised in policy development. Current policy has failed to recognise and articulate the powerful benefits of this role. This has added to the pressure faced by nurses in care homes and dissuaded nursing students from seeking a career in the field.

Section 3 How to achieve safe and effective care

Delivering safe and effective care should be the first priority for the NHS and social care providers. Patients deserve to know they are receiving the best possible care, in a timely manner, from the right professional. Unfortunately, the ability to deliver safe and effective care is restricted by the high number of vacancies, high burnout and pressures the nursing workforce is currently facing.

There are four actions the Welsh Government needs to take to ensure safe and effective care is deliverable; recruitment, retention, workforce planning and enshrining safe staffing in legislation through the extension of Section 25B of the Nurse Staffing Levels (Wales) Act 2016.

Recruitment

Pre-registration nursing education

The majority of nurses will spend three years undertaking a full-time degree in nursing with each year consisting of 42 working weeks – considerably longer than a typical academic year. Part-time and short-term courses are available for individuals with relevant qualifications or experience, such as HCSWs. Apprenticeships are also available, albeit limited.

Nursing students spend 50% of their time on practical placements in NHS Wales and other settings, including care homes and GP surgeries. Higher education institutions are commissioned by the Welsh Government to deliver this education.

Glyndŵr University offers limited non-commissioned (not funded by the Welsh Government) placements in seven NHS England Trusts for adult nursing.

Research conducted across nine European countries found that a better-educated nursing workforce reduced unnecessary deaths. Every 10% increase in the number of bachelor's degree educated nurses within a hospital is associated with a 7% decline in patient mortality.⁹

There are four areas of pre-registration nursing education: adult nursing, mental health nursing, children's nursing, and learning disability nursing.

Successive Welsh Governments have invested in all fields of nursing undergraduate education, although not evenly.

Every **10% increase** in the number of bachelor's degree educated nurses within a hospital is associated with a **7% decline** in patient mortality.

⁹ Rafferty, A.M. et al. 2014. 'Nurse staffing and education and hospital mortality in nine European countries: a retrospective observational study'. *The Lancet*, 383(9931), pp.1824-1830. Available at [https://doi.org/10.1016/S0140-6736\(13\)62631-8](https://doi.org/10.1016/S0140-6736(13)62631-8).

PATIENT SAFETY SCORECARD

How the Welsh Government can ensure safe and effective patient care in NHS Wales

- Extend Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to mental health inpatient care and community care
- Without it, health boards cut corners by not employing enough nurses
- This puts patients at increased risk of pressure sores, medication errors and falls
- Risk of patient mortality increases by up to 26%

- X** PAY NURSING STAFF FAIRLY
- X** Introduce a national Nursing Retention Strategy
- X** Increase access to continuing professional development
- X** Increase access to time flexing

LEGISLATION

Make NHS Wales Health Boards legally responsible for nurse staffing levels

RETENTION

Keeping nurses working in NHS Wales

WORKFORCE PLANNING

So tomorrow's workforce meets tomorrow's needs

RECRUITMENT

Growing the NHS nursing workforce



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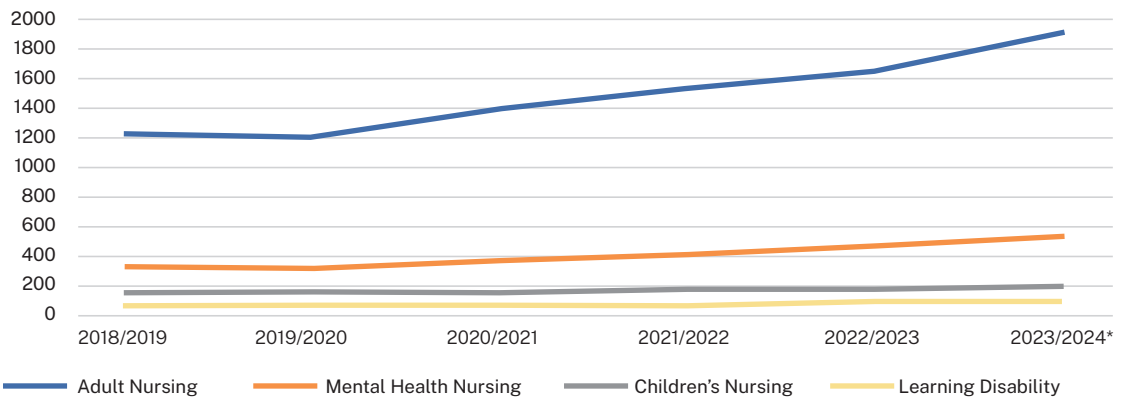
- Publish a strategy for commissioning nursing student places
- Publish a postgraduate education strategy for nurses to develop specialist skills

- ✓** Increase nursing student numbers
- ✓** Increase apprenticeship routes into nursing
- ✓** Recruit internationally



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F8 Pre-registration nursing education commissioned by the Welsh Government 2018-2024



*HEIW recommendation (2022)–not yet approved by the Welsh Government

How is pre-registration education commissioned?

Nursing education is commissioned by the Welsh Government based on recommendations made within HEIW's Education and Training Plan. HEIW make these recommendations following consultation with health boards and a review of the board's Integrated Medium Term Plans (IMTPs). However, HEIW do not always recommend the IMTP figures.

The recommendations proposed by HEIW for 2023/24 for all four fields of nursing are far below the IMTPs.

- Adult, **66% of IMTP numbers**
- Mental health, **82.6% IMTP numbers**
- Children, **66.4% IMTP numbers**
- Learning disability, **50.9% IMTP numbers**

IMTPs are a key document for health boards to set out the milestones and actions they are wanting to take in the next 1-3 years. The plans are developed based on the health needs of the population, the delivery of quality services and ensuring equitable and timely access to care. The plans set out the workforce forecasting, which often includes expected vacancies, retirements and workforce need.

This year, RCN Wales was able to feed into the consultation process for HEIW's education and training plan, but there remains a lack of transparency leading up to the Welsh Government announcement and health organisations are often unaware of the figures prior to the announcement.

The education commissioning process should be transparent and allow professional bodies, higher education institutions and patient representatives to contribute their expertise and constructively challenge the rationale. Having a transparent process for stakeholders to contribute evidence would increase confidence in the process and increase the quality and robustness of the outcomes and their relationship to the needs of Welsh health and social care.

International nursing and migration

The Welsh Government expects that by 2038, 1 in 4 people in Wales will be over 65 years old. The population aged over 75 in Wales is also projected to be 13.7% in the same year.¹⁰ Wales has an ageing population and, despite efforts to recruit nurses locally and nationally, there may not be enough working-aged people in Wales to provide care for those needing social care in the near future. Wales is reliant on international recruitment to ensure the delivery of social care but it is often up to the individual employer and there is no national mechanism to support social care employers to recruit international nurses.

Registered nurses are the staff group within social care with the highest proportion of non-UK EU workers – **approximately 17.7%**.

Research commissioned by the Welsh Government found that registered nurses are the staff group within the Welsh independent and social care sectors with the highest proportion of non-UK EU workers (approximately 17.7%).¹¹ The same research found that within these sectors, nursing faces the most acute retention challenges of all occupational groups.

In March 2020, RCN Wales signed the Welsh Government's migration position paper.¹² The paper set out a united Welsh position on a number of key migration issues, including the need to recognise demographic differences across the UK, the Welsh requirements for a new immigration system, and the salary threshold.

Alongside social care, the NHS is reliant on international nursing recruitment. In June 2019, Aneurin Bevan University Health Board had 350 FTE registered nurse vacancies. In May 2021, the health board had 165 vacancies, which was largely attributed to a successful international recruitment campaign. Cwm Taf Morgannwg University Health Board commenced an overseas recruitment campaign for nurses in June 2019 and has since recruited 213 FTE nurses, primarily from India. In May 2022, the Chief Nursing Officer announced the recruitment of 400 international nurses.

Internationally recruited nurses should be supported to live and work in Wales. It is also important that health boards and employers follow ethical international recruitment practices and adhere to the World Health Organization Global Code of Practice.

It is important to note that international recruitment is only one tool of recruitment. The Welsh Government should ensure that all avenues of recruitment, including increasing student placements in Welsh universities, is explored. This will ensure appropriate nurse staffing levels to care for patients in Wales.

¹⁰ Welsh Government. 2020. *Age Friendly Wales: Our Strategy for an Ageing Society* [Consultation Document]. Available at https://gov.wales/sites/default/files/consultations/2020-12/consultation-document_0.pdf.

¹¹ Hutcheson, L; Ormston, R. 2019. *Research on Implications of Brexit on Social Care and Childcare Workforce in Wales*. Available at <https://gov.wales/sites/default/files/statistics-and-research/2019-03/implications-brexit-social-care-and-childcare-workforce.pdf>.

¹² Welsh Government. 2020. *Wales position paper on migration*. Available at <https://gov.wales/sites/default/files/pdf-versions/2021/1/3/16105620/wales-position-paper-migration.pdf>.

Retention

Fair pay for nursing

Every hour of every day nurses make life-saving decisions for thousands of patients: time-sensitive, safety-critical decisions on medication, temperature, breathing rate, mobility, swallowing, patient risk, monitoring and more.

In 2021, the Welsh Government decided a newly qualified nurse (Band 5 Agenda for Change) should be paid £13.15 an hour. This amounted to a pay 'rise' of 38 pence per hour.

In 2022, the Welsh Government announced a £1,400 rise for all NHS pay bands, enhanced for the top of Band 6 and 7, which equals a pay increase of 4% – or 71 pence per hour – for newly qualified (Band 5) nurses. The pay 'award' leaves an experienced nurse over £1,000 worse off in real terms.

Inflation (RPI) is currently at 11.8%¹³. UK prices have jumped by 10.1%, the highest in 40 years. In October 2021, the typical household energy bills were £1,277. The UK Government has announced energy prices will be capped at £2,500 from October, an increase of 96% from the previous year. ONS statistics show average retail prices for selected common food items have grown significantly since last year.

Nurses Vs Inflation

In June 2022, inflation rose to 11.8% (RPI).

In 2021, a newly qualified nurse received a **38p** an hour pay rise. In 2022, they received a **71p** an hour pay rise.



¹³ Office of National Statistics. 2022. RPI All Items: Percentage change over 12 months: Jan 1987=100. Available at <https://www.ons.gov.uk/economy/inflationandpriceindices/timeseries/czbh/mm23>.

Food Item	2021 price	2022 price	% increase
Sliced ham (100g)	£0.79	£1.00	27%
Margarine (450g)	£0.79	£1.00	26%
Milk (2 pints)	£0.94	£1.16	24%
Tomatoes (6 pack)	£0.62	£0.75	21%
Lamb chops (300g)	£3.76	£4.40	17%
Fresh chicken breast (1kg)	£5.59	£6.49	16%
Beef mince (750g)	£3.39	£3.90	15%
Bananas (5 loose)	£0.61	£0.70	14%
Total	£16.50	£19.40	18%

The 2021 RCN Employment survey found that 58.3% of respondents were their household's main or sole breadwinner.

Nursing staff deserve fair pay. Not only would this allow them to better support themselves and their families, but it would also ensure they have a salary that reflects their skills, knowledge and dedication to patient safety.

The Welsh Government is responsible for nurses and HCSW salaries. It needs to ensure that nurses and HCSWs receive a fair pay rise.

Retaining nurses in NHS Wales: What matters?

Improved pay is a major contributor to retaining nurses, but it is not the only solution.

In 2022, RCN Wales published a report, 'Retaining Nurses: What's important?'¹⁴. The report provided an insight into what health bodies across England and Wales are doing to address the rate of attrition. It recommended health boards drive the development and implementation of plans to address the rate of attrition focusing on areas such as:

- Staff wellbeing
- Early identification and intervention
- Career pathways and professional development
- Staff engagement
- Staff communication.

¹⁴ Royal College of Nursing. 2022. *Retaining Nurses in the Profession: What matters.*

Retaining nurses in the profession: What matters? Case Study

Employment flexibility

The University College London Hospitals NHS Foundation Trust set up a ‘Nurse Internal Transfer Scheme’ to enable nurses to move sideways into a different specialty, and Sheffield Teaching Hospitals NHS Foundation Trust established a ‘Transfer Register’ for Band 5 Registered Nurses and Band 2 Clinical Support Workers. The aim of these initiatives was to retain staff within the organisation by enabling transfers to another specialty without the need to follow normal recruitment procedures. The case studies highlighted several outcomes that helped to both retain nurses in their local health services, and to identify other challenges and opportunities, including:

- Increased retention of employees where the schemes have encouraged staff to stay within the organisation even if they leave their original speciality.
- Reduction in time-to-hire as the transfer process requires no pre-employment checks. Promotion of hard-to-recruit areas to individuals looking for a speciality change.
- Identification of specialities that may be heading for “crisis” if a high number of requests for transfers are logged.
- Discussion encouraged between staff and managers about the working environment and how to better retain staff.
- Amongst nursing students there is growing awareness of the schemes, which some cited as a reason for choosing their Trust.

During the development and dissemination of the report, RCN Wales offered to work with HEIW to take this work forward. RCN Wales has presented the report to Health Board Executive Nurse Directors and the National Nursing Workforce Group, but no tangible activity has been developed by HEIW or the Welsh Government. The Welsh Government must develop a national nursing retention strategy focusing on the areas identified within the RCN Wales report.

Retaining nurses in care homes: What matters?

The need for nursing staff in care homes is clear, but sadly many are choosing to leave. The Welsh Government and independent sector employers need to encourage nurses to keep working within care homes. This will benefit patient care by enabling the workforce to grow in numbers.

An RCN Wales survey (2020) asked members what is needed to change for nurses to choose to remain in the care home sector. Two-thirds of respondents listed pay as an important factor, with 38% of respondents ranking it as most important. The top answer was recognition and respect for the nursing role in care homes.

There are long-standing challenges with low and unfair pay, unsatisfactory employment terms and working conditions in the social care sector generally, and specifically within care homes. There is no consistency between care homes, within the social care sector as a whole, or between providers and the NHS. This means that pay for equivalent roles can vary significantly by employer.

RCN Wales has consistently called for fair pay, good employment terms and safe working conditions in social care, competitive with the NHS. Pay structures should be underpinned by the Real Living Wage. Staff should be paid properly for all the hours they work – including applying overtime rates to working hours that exceed 37.5 a week.

Post-registration workforce planning

After a nurse completes their pre-registration nursing degree, many wish to specialise and advance their career. This will require education and practice-based learning leading to a recognised postgraduate qualification or degree.

The Welsh Government is responsible for commissioning post-registration nursing education. Below are examples of post-registration nursing education, the potential of which the Welsh Government has yet to maximise.

Advanced nurse practitioners

Advanced practice is a level, rather than type, of practice. Advanced nurse practitioners are educated to master's level in clinical practice and their competence, while their expert clinical knowledge and skills have been assessed as meeting an extremely high standard.¹⁵

Williamson et al. (2012) explored the role of ward-based advanced nurse practitioners. They found that advanced nurse practitioners not only reduced costs of care delivery but also possessed enhanced complex communication and practice skills which they used to interpret medical instructions for nurses, other allied health professionals, and patients. They were proactive rather than reactive in supporting and facilitating patients' holistic care and reducing their length of stay.¹⁶

HEIW should consider the importance of advanced nurse practitioners and the Framework for Advanced Practice when considering post-registration commissioning.

¹⁵ Royal College of Nursing. 2018. *Advanced Level Nursing Practice Section 1: The registered nurse working at an advanced level of practice*. Available at <https://www.rcn.org.uk/professional-development/publications/pub-006895>.

¹⁶ Williamson, S., Twelvetree, T., Thompson, J., & Beaver, K. 2012. An ethnographic study exploring the role of ward-based Advanced Nurse Practitioners in an acute medical setting. *Journal of Advanced Nursing*, 68(7), pp.1579–1588. Available at <https://doi.org/10.1111/j.1365-2648.2012.05970.x>.

Specialist nurses

Specialist nurses are practitioners with a specialised set of skills, knowledge, and expertise in a given field. They provide education and support for nursing and other healthcare colleagues.

Specialist nurses often provide essential support to people with chronic conditions, helping them to manage their condition and live as independently as possible. Specialist nursing posts are often partially funded or entirely supported by the voluntary sector. The erratic nature of the funding intensifies the instability of specialist nursing services.

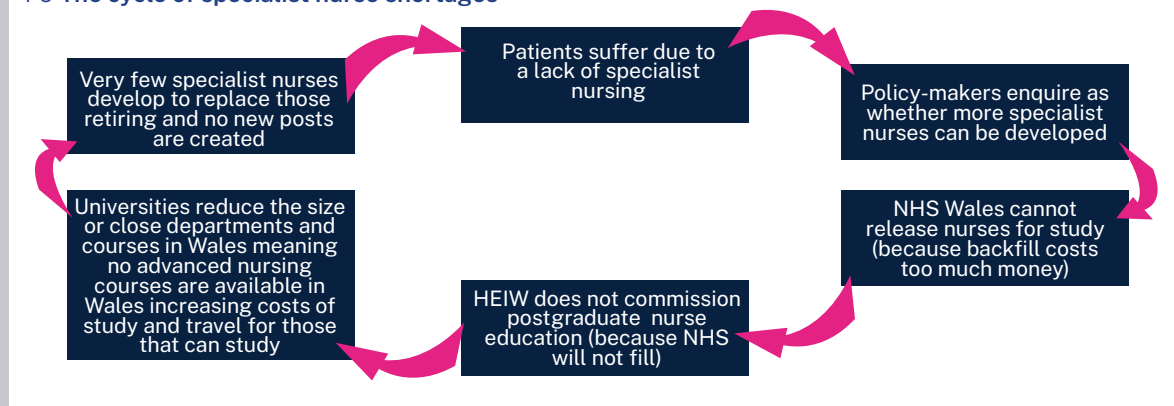
The benefits of specialist nurses has been highlighted recently with the appointment of endometriosis nurses to every health board. A statement by the Welsh Government expressed that the endometriosis nurses ‘would spend time with patients and clinicians to improve service’.¹⁷ The investment is extremely welcomed but there needs to be additional investment in women’s health as well as all areas of specialist nursing.

Specialist cancer nurses provide skilled personalised care and improve the experience of both cancer patients and the multidisciplinary colleagues they work with. However, there are not enough specialist cancer nurses in Wales to provide this care. Research conducted by Macmillan shows that 1-in-5 of those diagnosed with cancer in the past five years said they lacked specialist cancer nursing support during their diagnosis or treatment. Macmillan’s research has noted that if the number of specialist cancer nurses remains at the same level, by 2030 Wales will be 166 nurses short.

To educate 166 specialist cancer nurses it would cost £12 million – £6.4 million on undergraduate education and £5.8 million on post-registration education.

The Royal College of Nursing is concerned that the number of specialist nurses in Wales is unknown at the national level. Geographical areas with the greatest need may not have a specialist nurse under the current unplanned approach. F9 illustrates why the current process for funding and educating specialist nurses is unsuitable.

F9 The cycle of specialist nurse shortages



¹⁷ Welsh Government. 2022. *New endometriosis nurses to improve awareness and diagnosis in Wales*. Available at <https://gov.wales/new-endometriosis-nurses-improve-awareness-and-diagnosis-wales#:~:text=WALES-,New%20endometriosis%20nurses%20to%20improve%20awareness%20and%20diagnosis%20in%20Wales,affects%20one%20in%20ten%20women.>

To break the cycle, NHS Wales and employers need to release nurses to study. HEIW must commission post-registration nursing education and universities must re-establish specialist advanced nursing courses.

Consultant nurses

The role of a consultant nurse is one of the highest levels of nursing a registered nurse can achieve. They are often educated to MSc or PhD level. There are five core aspects to a consultant nurse role:

Expert advanced clinical practice (*direct and indirect practice*). Working directly with individuals, families and carers, whilst indirectly influencing clinical work through supervising and providing guidance to others, developing practice protocols and exploring practice issues.

Professional leadership and consultancy. Providing professional leadership and direct evidence-based, client-centred recommendations to those involved in service development and delivery.

Education, training and development. Facilitating other clinicians to develop their roles, gain knowledge and skills either by strategic planning education initiatives, advising on higher education routes or promoting positive learning and clinical settings.

Practice service development, research and evaluation. Developing evidence-based protocols, research and exploring the implications of research upon service delivery.

Strategic service development. Taking the lead in interpreting and implementing national guidance and policy in their area of speciality.

Consultant nurses are essential for the delivery of high-quality patient centred care, educating the next generation of health professionals, advancing research within health and social care, and developing guidance and principles for quality patient care.

The first consultant nurses were only appointed in 2000 and the importance of the role was recognised almost immediately. In 2005, the previously known national body, Health Professions Wales, assessed the demand for consultant nurses in Wales and approved the need for 55 consultant nurses.

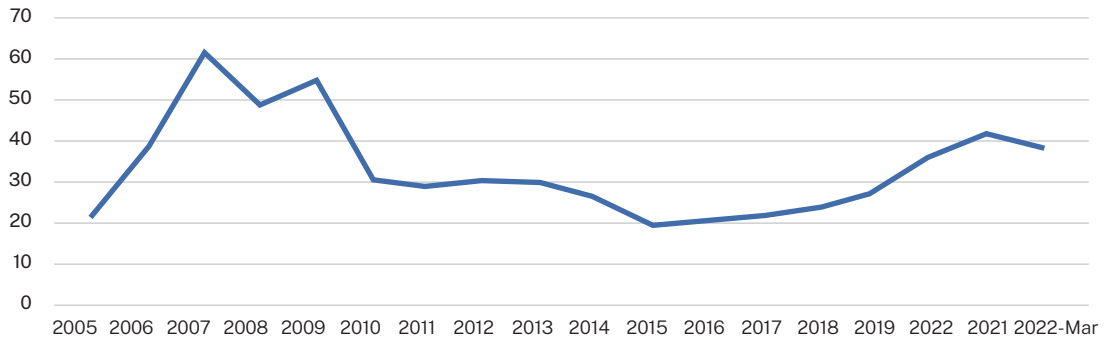
The demand for consultant nurses has increased since 2005, due to a rise in the population, people living longer with more complex health requirements and an increase in comorbidity and complexity of care delivered to patients.

There was a rapid expansion of consultant nurses between 2007 and 2008. However, as F10 demonstrates, the number of consultant nurses decreased sharply in 2010. Since 2017, there has been a consistent, albeit slow, increase in the number of consultant nurses, but Wales remains far below the required amount as set out by Health Professions Wales. Sixteen years since the demand was made clear by Health Professions Wales, Wales still falls short of the recommendations by 15.1 consultant nurses.^{18,19}

¹⁸ StatsWales. 2022. *Nursing, midwifery and health visiting staff, by grade and area of work*. Available at <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Staff/Non-Medical-Staff/nursingmidwiferyandhealthvisitingstaff-by-grade-areaofwork-year>.

¹⁹ StatsWales. 2022. *Nursing, Midwifery and Health Visiting Staff by grade and area of work pre 2009 data*. Available at <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Staff/Non-Medical-Staff/Pre-2009/NursingStaff-by-Grade-Year>.

F10 Number of Consultant Nurses (FTE) , 2012-2022, StatsWales

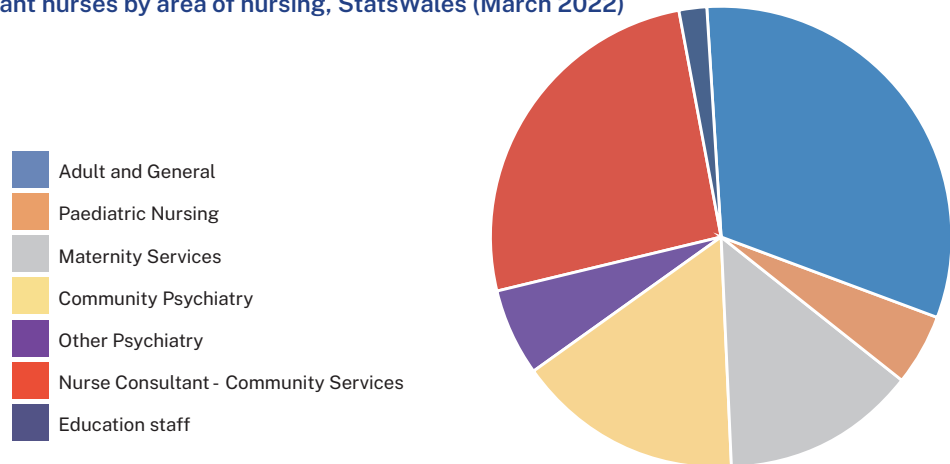


Adult and general is the areas that have received the most investment in recent years. Currently there are 12.4 FTE consultant nurses in adult and general services.

It is clear that there is a vast disparity in the number of consultant nurses depending on the area of nursing. There are no consultant nurses in neonatal nursing, school nursing, or learning disability nursing.

There is a clear lack of succession planning for consultant nurse roles. This is evident by the learning disability consultant nurse post that became vacant in 2021 and has yet to be filled. Similar cases can be found in other areas of nursing. Without succession planning and a clear career pathway from student to consultant nurse, posts remain empty and the unique and expert influence on patient care will remain absent.

F11 Consultant nurses by area of nursing, StatsWales (March 2022)



Infection prevention and control (IPC) nurses

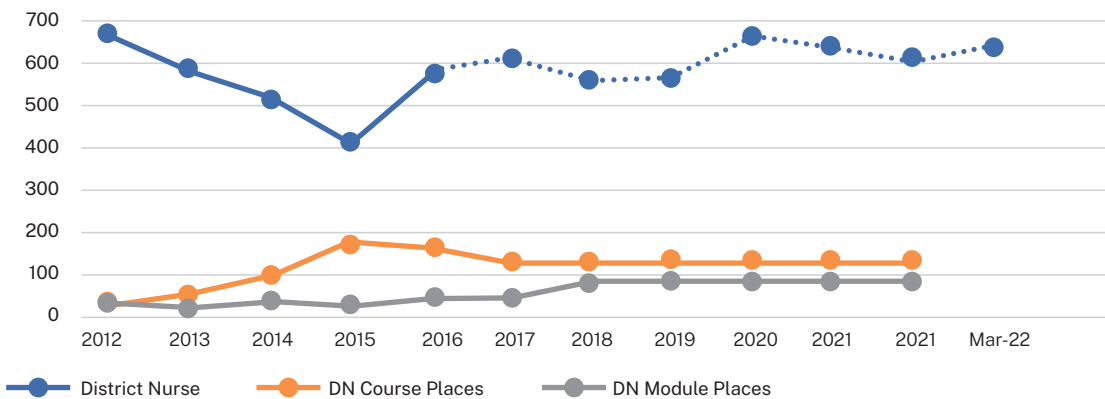
IPC consultant nurses are the pinnacle of IPC advice and practice. Yet the pandemic has highlighted that there are not enough IPC consultant nurses employed by NHS Wales. Investing in IPC consultant nurses would ensure that Wales has the resources available to provide expert knowledge across systems. It would also ensure that Wales has the resources available to educate the next generation of IPC nurses. These posts would facilitate the sharing of expertise at a senior level across national boundaries, elevating the status of IPC nursing and the Welsh contribution to it.

Every health board must employ an IPC consultant nurse and build succession planning into their Integrated Medium Term Plans. To invest in IPC consultant nurses is to invest in the whole system and place infection prevention and control rightfully at the centre of health and social care.

Community Nursing Teams

Community nursing teams are led by district nurses or registered nurses with a community nursing post-registration (master's) degree. These nurse leaders are the experienced pinnacle of a community nursing team, providing support, expert advice and leadership to registered nurses and HCSWs.

F12 District nurses FTE, DN modules and course places (StatsWales/HEIW)



Why is the apparent rise in district nursing numbers after 2016 shown with a dotted line in F12? Quite simply, because this information is not reliable. Health boards have informed StatsWales that they have miscoded registered nurses working in the community as district nurses. From the information displayed by StatsWales, it is impossible to know how many nurses working in the community are district nurses, nurses with a community master's degree or registered nurses working in the community.

This information is necessary for workforce planning, as without understanding the number of district nurses and nurses with a community master's degree, it is difficult to predict demand and ensure community nursing teams are appropriately staffed.

Without this senior nursing leadership, community nursing teams will struggle to manage caseloads and provide the level of care patients deserve.

Information should be gathered and made public on how many district nurses, nurses with a community master's degree and registered nurse work in the community. This would allow for better workforce planning and understand what needs to be commissioned by HEIW to meet demand.

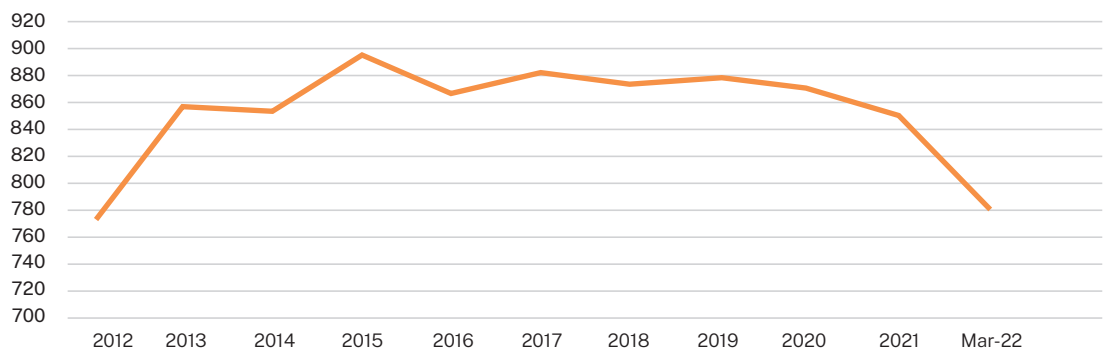
Health Visitors

Health visitors are nurses or midwives who have undertaken a post-registration community public nursing (SCPHN) qualification.

Health visitors are generally responsible for supporting children from 0-5 years and their families, providing antenatal and postnatal support, assessing growth and development needs, teaching parents about the nutritional needs of infants and young children and encouraging the development of healthy lifestyles, enabling and empowering parents to allow their children to meet their full potential. They are also key to addressing health inequalities and ensuring the safeguarding of children by identifying risks such as those associated with domestic abuse and neglect.

The number of health visitors is decreasing. This is extremely concerning as health visitors are vital to a child's healthy start in life.

F13 Number of health visitors 2012-2022, StatsWales



The number of health visitor full-time and part-time courses commissioned by the Welsh Government has not increased since 2019. Currently Wales only offers 58 places for full-time and 34 places part-time study respectively.

Universities work with health boards to provide the practical aspect of the post-registration health visitor course. It can be difficult for universities to accept a nurse onto a health visiting course if they are from a health board that the university is not currently partnered with. This means that nurses can struggle to be accepted onto courses despite places being available. There is a need for better cooperation and communication between health boards and universities in regard to placements.

The Nurse Staffing Levels (Wales) Act 2016

Safe staffing levels save lives.

Research has shown that low nurse staffing levels increased patient mortality by up to 26% compared to better staffed wards. Safe and effective nurse staffing levels have also been shown to reduce readmissions, health care associated infection rates, medication errors, falls and pressure ulcers.²⁰

A 2021 study by Akine et al. of hospitals found that patients in hospitals where nurses had a high patient ratio compared to hospitals where nurses had a lower patient ratio were more likely to experience adverse conditions including a 41% higher chance of dying, 20% higher chance of being readmitted and 41% chance of staying longer.²¹

Wales has a history of poor nurse staffing levels resulting in poor care. This cannot be allowed to continue.

Public inquiries and reports into poor patient care

Mid Staffordshire NHS Foundation Trust (2013)

Unacceptable delay in addressing the *issue of shortage of skilled nursing staff*.

Princess of Wales and Neath Port Talbot Hospitals (2014)

Both hospitals appear to be operating a sedation policy which is not acceptable, with sedation being used to *enable staff to cope with the pressures* of caring for patients overnight.

Tawel Fan - Ockenden report (2018)

Inadequate levels of capacity and capability in relation to the workforce in...*nurse staffing* in particular.

Cwm Taf Maternity Services (2019)

A *significant shortage* of midwives.

Hergest Unit - Holden Report (2021)

Inadequate staffing to meet the needs of the patients in the unit.

Betsi Cadwaladr Vascular Services (2022)

Immediate operational pressures due to consultant availability and *nurse staffing* in vascular services within the health board.

Delivery of healthcare to Swansea Prison (2022)

Quality Governance Arrangements in Swansea Bay University Health Board do not adequately support the delivery of good quality, safe and effective healthcare services to the population of HMP Swansea...*more nurses [are needed]* as the ones here are always very busy so this limits the time they can spend with each case.

Ysbyty Glan Clwyd's Emergency Department (2022)

Not all aspects of care were being delivered in a safe and effective manner. "The nursing staff and HCSW are at *breaking point*. Staff morale is at an all-time low. We are being expected to take on additional work which is leaving the staff on the floor at risk of burnout."

²⁰ Rafferty, A.M et al. 2007. 'Outcomes of variation in hospital nurse staffing in English hospitals: cross-sectional analysis survey data and discharge records', *International Journal of Nursing Studies*. Available at: <https://pubmed.ncbi.nlm.nih.gov/17064706/>.

²¹ Akine, L.H. et al. 2021. 'Hospital nurse staffing and patient outcomes in Chile: a multilevel cross-sectional study', *The Lancet Global Health*. Available at: <https://pubmed.ncbi.nlm.nih.gov/34224669/>.

RCN Wales campaigned for the Nurse Staffing Levels (Wales) Act 2016 in order to protect patient care and continues to champion this approach.

Wales has led the way in patient safety. The Nurse Staffing Levels (Wales) Act 2016 was the first of its kind in Europe and put safe nurse staffing levels in legislation.

The key provisions of the Nurse Staffing Levels (Wales) Act 2016 are:

Section 25A

places an overarching responsibility on health boards and trusts to provide, in all settings, sufficient staff “to allow the nurses time to care for patients sensitively”.

Section 25B

requires health boards to calculate and take reasonable steps to maintain the nurse staffing levels in all adult acute medical and surgical wards and, as of October 2021, paediatric wards. Health boards are also required to inform patients of the nurse staffing level.

Section 25C

requires health boards to use a specific method to calculate the nurse staffing level in all acute adult medical, surgical, and paediatric wards.

Section 25D

relates to the scope of statutory guidance issued by the Welsh Government in respect of Sections 25B and 25C

Section 25E

requires health boards to report their compliance in maintaining the nurse staffing level for each adult acute surgical and medical ward.

Research has shown that where there are lower numbers of nurses, patients are up to 26% more likely to die overall and 29% more likely to die following a complicated hospital stay. Furthermore, nurses working in areas of poor staffing are 71% more likely to experience high burnout and job dissatisfaction than nurses on more favourably staffed wards.²²

²² Rafferty, A.M et al. 2007. 'Outcomes of variation in hospital nurse staffing in English hospitals: cross-sectional analysis survey data and discharge records', *International Journal of Nursing Studies*. Available at <https://pubmed.ncbi.nlm.nih.gov/17064706/>.

SAFE AND EFFECTIVE CARE ALLIANCE

In June 2021, **16 organisations** wrote to the First Minister to urge the Government to ensure safe nurse staffing and expand Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to mental health inpatient wards and community settings. Organisations included:

- Abergavenny Community Trusts
- Age Cymru
- Bladder and Bowel Community
- Bridgend Carers Centre
- British Medical Association Cymru Wales
- Carers Wales
- Children’s Commissioner for Wales
- Conwy Connect
- Epilepsy Action
- Learning Disability Wales
- Mencap Cymru
- Mind
- Royal College of Nursing Wales
- Royal College of Physicians
- Royal College of Psychiatrists
- Tŷ Hapus

Section 25B was implemented in 2018 and has already provided safer staffing levels in Wales. Not only has there been a rise in the number of nurses educated in Wales, but RCN Wales has found that on wards covered by Section 25B, there has been an increase in the number of nurses.²³ This is supported by Welsh Government evidence. A Welsh Government report found that on a national level the number of nursing staff on wards covered by Section 25B is higher now than before the Act was passed.

In 2022 **10,572** people signed a petition calling on the Welsh Government to **extend** Section 25B of the Nurse Staffing Levels (Wales) Act 2016.

There are an additional 139.74 FTE registered nurses and 597 FTE HCSWs in November 2020 compared to March 2018 (before Section 25B came into force)²⁴.

On wards covered by Section 25B, there have been fewer patient falls, pressure ulcers and complaints about nursing where staffing levels have been considered a contributing factor. This demonstrates the importance of Section 25B to patient safety.

Additional evidence shows that in preparation for the extension of Section 25B to paediatric wards in October 2021, all health boards (where this would apply) recruited more paediatric nurses and proposed the need for additional funding and/or resources. The Nurse Staffing Levels (Wales) Act 2016 once again has shown that Section 25B results in an increase in nursing staff and better patient care.²⁵

About the Royal College of Nursing (RCN)

The Royal College of Nursing is the world's largest professional organisation and trade union for nursing, representing over 465,000 nurses, midwives, health visitors, healthcare support workers and nursing students, including over 26,000 members in Wales. RCN members work in both the independent sector and the NHS. Around two-thirds of our members are based in the community. The RCN is a UK-wide organisation, with National Boards in Wales, Scotland and Northern Ireland. The RCN represents nurses and nursing, promotes excellence in nursing practice and shapes health and social care policy.

²³ Royal College of Nursing Wales. 2022. *Progress and challenge in delivering safe and effective care 2022: How NHS Wales has implemented the Nurse Staffing Levels (Wales) Act 2016.*

²⁴ Welsh Government. 2022. *Nurse Staffing Levels (Wales) Act 2016 – Statutory summary of nurse staffing level reports 2018-2021.* Available at [nurse-staffing-levels-wales-act-2016-statutory-summary-of-nurse-staffing-level-reports-2018-2021.pdf](#).

²⁵ Royal College of Nursing Wales. 2022. *Progress and challenge in delivering safe and effective care 2022: How NHS Wales has implemented the Nurse Staffing Levels (Wales) Act 2016.*