Royal College of Nursing (RCN Wales)
evidence

1. The RCN is making a pay claim of at least 12.5% for all Agenda for Change staff

1.1 The Royal College of Nursing (RCN) is a four-nation Trade Union and professional body. Evidence providing the four-nation context for a 12.5% pay rise for all Agenda for Change staff has already been submitted to the Pay Review Body the RCN. The purpose of this supplementary evidence, provided by RCN Wales, is to inform the Pay Review Body of specific matters relating to nursing in Wales.

1.2 The RCN’s claim of 12.5% is based on a clear message from our membership. We have been undertaking continuing listening exercises with membership to understand the impact of the COVID-19 health crisis on their personal and professional lives. Many of their experiences of this pandemic only serve to reinforce the evidence of what was already known about the nursing workforce; one that was suffering from workforce shortages, low morale and operating in an environment deprived of investment and resources, as well as real terms pay decrease.

1.3 A key part of our member engagement and consultation activity has been a large survey of nursing staff working across the UK in all health and social care settings undertaken in May and June 2020. This survey, which asked a wide range of questions about their working experiences since the start of the pandemic, received the highest ever response to any RCN membership engagement which illustrates the strength of feeling among our members. It is also noteworthy because it is the first time, they have told us in clear terms about what pay increase they feel nursing staff should receive. It is because of this feedback that we take such a firm position in calling for an increase of 12.5% for 2021-22.
1.4 Wider content regarding the NHS across the UK can be located in the RCN’s evidence to the Pay Review Body. This evidence has been provided by RCN Wales and will focus on matters concerning nursing in Wales.

2. Workforce Shortages

2.1 A combination of difficulties in recruitment and retention has led to a significant workforce shortage in Wales. Nursing is a safety critical profession, yet it cannot fulfil its role with such a considerable workforce shortage. Not only do vacancies compromise the delivery of safe and effective care, but they hinder nursing staff in driving forward service improvement and addressing health inequalities. A fair pay award is necessary to recognise the skills, experience and responsibility demonstrated every day by every nursing support worker and registered nurse.

2.2 To ensure nursing remains an attractive career, and to keep the nursing workforce wanting to provide care within the NHS, the nursing workforce deserve an early, fair and meaningful pay rise.

2.3 Firstly it should be noted that the number of nurse support workers has increased over the last year by 22.5% in Wales.¹ This largely reflects the number of nursing students employed on clinical placements in response to the COVID-19 pandemic. There has been a much slower growth of 1% in the registered nursing and midwifery workforce in Wales. At this point, it is not possible to ascertain how much this growth is attributable to nursing staff returning to practice.

2.4 The Welsh Government and/or NHS Wales fail to publish national figures for nursing vacancies even though the vacancy rate is a critical indicator of the pressures faced by health boards. Vacancies rates are published elsewhere in the UK.

2.5 In the absence of any official data, RCN Wales estimated there is a minimum of 1,612 registered nurse vacancies in NHS Wales.

2.6 Nurse vacancies have a significant impact on patient care and the pressure experienced by our nurses in the NHS. Research conducted by Anne Marie Rafferty found that hospital wards with lower nurse to patient ratios had a 26% higher patient mortality rate.² Poor staffing outcomes also associated with low nurse ratios include adverse events after surgery; increased accident rates and patient injuries; increased cross-infection rates and higher rates of pneumonia.

2.7 Furthermore, poor staffing has an adverse effect on the nursing workforce with higher levels of burnout, sickness, anxiety and job dissatisfaction. The level of nursing staff sickness in 2020 can be seen in figure 1. However it is unclear what

percentage of staff sickness can be attributed to COVID-19 as the data supplied by Stats Wales does not analyse this.

Figure 1. Sickness absence: nursing, midwifery and health visiting staff (January - June 2020, Stats Wales)

2.8 Moreover, not only is there a high level of sickness within the nursing profession, NHS Wales continues to demonstrate a heavy reliance on nurses' willingness to work overtime. In 2019, 76% of nurses work overtime at least once a week. Of this the majority work between one and four hours extra a week.

2.9 There are 22,850 FTE nurses employed in the NHS Wales. Using this figure, 76% equates to 17,366 nurses. If 17,366 nurses worked just two hours more in one-week NHS Wales would be receiving 34,732 additional hours of work in that one week. The equivalent of 926 full-time nursing posts.

2.10 The combination of vacancies rates, challenges in retention, sickness rates and a reliance on nurses good will is not sustainable. A meaningful pay rise of 12.5% would greatly improve the attractiveness of the profession, reward the current nursing workforce and subsequently ease pressures on the workforce.

2.11 More information regarding the nurse vacancies can be found in Annex One: The Nursing Workforce in Numbers 2020.

3. Agency nurse spending

3.1 Agency nursing is expensive and whilst there will always be a need for agency nursing to cover short term sickness or provide maternity cover by increasing the attractiveness of nursing within the NHS the need for agency nursing will decrease.
3.2 It is known that nurses often leave the NHS for agency working due to the ability to choose their own hours and for higher pay. A fair and meaningful pay rise would reduce the attractiveness of agency working and save public money.

3.3 A Freedom of Information request (2019) highlighted the increased spending on agency nursing. Total spending on agency nurses has increased to 69.04 million in 2019, up from 59.1 million in 2018. Agency nursing is expensive as there is a higher cost to cover profit to the agency. It is also not ideal for patient care as a permanent or long-term option as agency nurses will be less familiar with ward layout, polices and equipment and less able to provide continuity of care.

4. Economics challenges of the nursing workforce

4.1 There is a clear need to financially support the nursing workforce in Wales. Not only is the NHS the largest employer in Wales, the nursing workforce represents over a third of all those employed by NHS Wales. By providing a pay rise to the nursing workforce this would greatly improve the financial situation for families and communities across Wales.

4.2 The RCN Employment survey (2019) found that 55.2% of Welsh respondents working in NHS Wales were the main or primary breadwinner of their householder.

4.3 According to the survey 19.4% of Welsh respondents working in NHS Wales had another job in addition to their main job – this is usually bank or agency working.

4.4 The average age of a nursing student in the UK is 29. A UK wide RCN survey found that 31% of nursing students had dependent children, 10% were single parents and 23% were caring for a sick, disabled or elderly relative.

4.5 It is also worth noting that there has been a marked increase in mature nursing student numbers: across the UK placed nursing applicants aged 30-34 have increased by 27% compared with 2019 and there is a 37% increase in those aged 35 and over.

4.6 It is important that the nursing workforce and nursing students feel financially secure within their careers. By providing a pay rise of 12.5% this would considerably reduce the need for the nursing workforce to seek secondary employment and easing anxieties regarding pay for everyone, but importantly for those that are a single breadwinner.

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4.7 Furthermore, by providing a pay rise of 12.5% for all nursing staff on agenda for change contracts this could encourage the independent sector to re-evaluate levels of pay and have a lasting positive influence on the perception of nursing. It would reinforce to independent care providers the value and contribution of nursing in community services.

4.8 For more information regarding the economic and demographics of the nursing workforce please see the RCN evidence submitted to the Pay Review Body.

5. The impact of COVID-19

5.1 Nursing staff have been directly involved in the response to COVID-19 by providing; clinical treatment, decontamination, isolation, communication, triaging, as well as psychological support of patients, their families and colleagues. All have been directly and indirectly impacted by changes in service delivery, with many redeployed into new roles, quickly adapting to new environments and roles. Nursing staff also face the risk of injury and infection, as well as anxieties and stress concerning their workload and the impact of the pandemic on their families.

5.2 Existing workforce challenges, such as retention, the high vacancies rate and staff burn out, were exacerbated by the COVID-19 pandemic. This shows the obvious need for the PRB to make the evidence-based recommendations necessary to not only reward the workforce for their dedication during this challenging time but recognise them as the highly skilled workforce that they are.

5.3 The additional pressure and risks associated with dealing with the first and subsequent waves of COVID-19 has had an even greater impact on supply, recruitment and retention for all nursing staff. In July 2020, the Royal College of Nursing launched a nationwide survey into working conditions and pay. The RCN received 42,000 responses including 2,011 response in Wales who work in NHS Wales. The following information used within this response is from RCN members that work in NHS Wales.

5.4 Three quarters of members surveyed (75.9%) reported experiencing an increase in stress levels, whilst over half (58%) voiced that staff morale had worsened. Highlighted in figure 2.

5.5 The combination of stress and reduced morale is not conducive to a happy work environment and may lead to a worsening of the workforce shortage as nursing staff consider leaving the profession.
Figure 2 Compared to before the COVID-19 pandemic, has your stress level and staff morale increased/improved, decreased or stayed the same? (RCN Survey, July 2020)

![Bar Chart]

Figure 3. How did you feel or expect to feel about staying in or leaving the nursing profession, end of 2019 and end of 2020? (RCN Survey, July 2020)

![Bar Chart]

Legend:
- I never thought about leaving nursing/I would never consider leaving nursing (until retirement)
- I was/will not really considering leaving nursing (until retirement)
- I was thinking about leaving nursing/I will be considering leaving nursing
- I was strongly considering leaving nursing /I will be strongly considering leaving nursing by the end of 2020
F.3 excludes those that are no longer working in the nursing profession (retired) and those that don’t know or are unsure. This accounts for 4.2% of answers in 2019 and 10.7% in 2020.

5.6 Figure 3 further highlights the perceptions of nursing members who want to stay/leave the nursing profession. The survey posed two questions: the first asked how the individual felt about remaining in or leaving the profession at the end of 2019, whilst the second asked how they expect to feel at the end of 2020.

5.7 Over a third of members surveyed (37.6%) are considering leaving the nursing profession. Over half (57.4%) cited pay as a reason for considering leaving.

5.8 It is noticeable that there has been a significant drop in the number of nursing staff who would not consider leaving nursing until retirement. Over a third of members surveyed (36.7%) are considering leaving the profession, with 12.4% strongly considering leaving by the end of 2020. This is a 9.8% rise in the number of members considering or strongly considering leaving compared to how members felt at the end of 2019.

5.9 It has never been more important to encourage the workforce to stay. There are numerous ways this could be achieved, including improving working conditions, developing a retention strategy and driving up staff morale, but as cited by RCN Wales members the main way of encourages the nursing workforce to keep nursing in the NHS is to improve pay.

6. Recruitment

6.1 To ensure the continued supply of nursing students, nursing needs to be considered a professional attractive career. To do, nursing pay needs to increase. In an RCN Wales survey conducted in 2020, nearly a third of the 753 respondents (29.2%) cited pay as a way to attract more people into nursing. This was the second highest answer after retaining the NHS bursary.

6.2 UCAS data shows that the number of placed applicants for nursing courses in the Wales has increased by 11%.

6.3 Commissioned places for nurse education are set by the Welsh Government under the guidance of HEIW. Adult nurse student places continue to rise but places for learning disability, children and mental health are largely static as are places for community post-registration qualifications.
It is vital for the health of our nation that Wales is able to attract the very best future nursing staff into the profession. The dominant route into nursing remains through a 3-year university degree (BSc Hons). The expansion of nursing education and improvement of staff retention remain the only sustainable ways to address the severe workforce shortage within nursing. By investing in nursing pay, this will greatly improve the attractiveness of nursing as a career for younger people and school leavers and will show nurses currently working in the NHS that they are valued and respected.

Investing in fair pay demonstrates that nursing is a profession respected by Welsh Government.

### 7. Post-registration education

7.1 Post-registration education is crucial for ensuring the workforce in Wales has the knowledge, skills and leadership available to provide safe and effective care. To attract more individuals into post-registration nursing education the incentive of increased pay is need.

7.2 From the table below it is clear that post-registration education has received little investment since 2018/2019

#### Table 1: Post-registration education places 2018/2019-2021/2022
The table clearly demonstrates that district nursing has not received any investment in a number of years despite the unprecedented demand.

7.4.1 “You may think from all this moaning that I do not enjoy my job but I do love the challenge that confronts me each day. It just can be exhausting when we do not have back up from managers who constantly are concerned about overtime. Staff provide excellent care but it cannot be provided in 7.5 hours due to the number of patient and complexity on the caseload… Staff do not get paid but get TIL [Time in Lieu]. We feel undervalued’ (RCN Wales Member)

7.5 Investing in the community nursing workforce by ensuring a fair and meaningful pay rise would great increase morale and incentivise registered nurses to complete the district nursing course.

7.6 Furthermore, specialist nurses not only specialise in a specific field they are an advanced level practitioner. They provide education and support for nursing and other healthcare colleagues.

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7.7 RCN Wales is concerned that the number of specialist nurses in Wales is unknown at the national level. This means it is impossible to tell if more are needed. The erratic nature of the funding intensifies this problem. Geographical areas with the greatest need may not have a specialist nurse under the current random approach. We believe that national planning may result in a more sustainable and strategic approach (e.g. specialist nurses for neurological conditions).

7.8 Nurse consultants are an extremely senior post. Education, research and clinical leadership are part of this role. In 2005 the then existing national body Health Professions Wales assessed the need for nurse consultants in Wales and approved 55 consultant nurse (and 3 therapists) posts across Wales. It is extremely disappointing therefore that there are currently only 32 in 2020, 15 years after the demand was made clear.

Figure 5 Nurse Consultant WTE by field (Stats Wales, June 2020)

7.9 By providing a fair and meaningful pay rise for all the nursing workforce employed on agenda for change contracts will ensure Wales has the nursing workforce and skill mix able to provide safe and effective care for the population of Wales.

8. Conclusion

8.1 During the COVID-19 pandemic, the nursing workforce in Wales provided clinically complex care, leadership, and compassionate support for colleagues, patients and families. However it should be noted that this is not new, the nursing workforce provide this level of care and dedication 365 days a year. The Fair Pay for Nursing campaign recognises that nursing is a highly skilled profession.
8.2 Furthermore the Fair Pay For Nursing campaign is about recognising that Wales has a chronic workforce shortage and is failing to attract sufficient number of individuals into the nursing profession, whilst also failing to encourage nursing staff to stay.

8.3 The Welsh Government must tackle these existing workforce shortages and ensure that nursing is an attractive career option, well-paid and meaningfully supported. This should be done by ensuring fair pay for nursing, a retention strategy and increasing financially sustainable routes into nursing education.

8.4 The Fair Pay For Nursing campaign recognises that these vacant roles need to be filled so that health boards and trusts can reach safe staffing levels and keep patients safe whilst providing highly skilled sensitive care.

8.5 A fair and meaningful pay rise for nursing staff employed by agenda for change would bring nursing in line with other professions. In October 2020, Kirsty Williams, Minister for Education announced teachers would receive an uplift of 8.48% to their main pay, raising their salary from £24,906 to £27,018. This pay rise was awarded to recognise the hard working and highly skilled workforce.

8.6 A Band 5 registered nurse’s starting salary is currently £24,907. With the pay rise to the teaching workforce there is a distinct difference in pay between the professions.

8.7 To ensure nursing remains an attractive career, and in line with other public sector careers, the nursing workforce deserve an early, fair and meaningful pay rise.

8.8 **RCN Wales ask the Pay Review Body to reward the highly skilled profession of nursing with a 12.5% pay rise**

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**About the Royal College of Nursing (RCN)**

The RCN is the world’s largest professional organisation and trade union of nurses, representing around 435,000 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 its own National Boards for Wales, Scotland and Northern Ireland.