

THE GLOVES ARE OFF

**It's time to value
nursing properly**

Because Scotland's
health depends on it.

BRIEFING:
Valuing
the nursing
profession



Introduction

Nursing is a degree-educated, safety-critical profession, and high-quality nursing care is taking an increasingly prominent role in all health and social care settings. However, nursing pay, terms and working conditions routinely undervalue and undermine nursing knowledge and skills, not only in recognising nurses' contribution to our health and care services but also in comparison to other professions.

An often-overlooked feature of the challenges facing the nursing profession is the fact that the workforce is overwhelmingly made up of women. Nursing suffers from a historical construction as a vocation, still often being referred to as 'a calling'. This has significant consequences for modern nursing and is perhaps seen most clearly in the amount of goodwill demonstrated by nursing staff, who often work beyond their paid hours with no financial reward.



In our 2025 employment survey, **66%** of respondents reported that they work over their contracted hours at least once a week with around half (53%) saying these hours were unpaid.

Historic perceptions of nursing and nurses - that fail to match the reality of a professional life defined by high level technical, emotional and cognitive skills - continue to affect efforts to improve the standing and attractiveness of nursing as a career.

The next Scottish government must implement key measures that will help value the profession better to promote retention of today's workforce and to attract the workforce of the future.

**We believe nurses deserve better,
a belief supported by the evidence.**

The case for change

Nursing deserves a career structure that supports clear progression and greater reward to recognise clinical skills, competence, expertise and greater responsibilities assumed while keeping care close to the patient.

Our Employment Survey, run every two years, is a significant barometer of how our members are feeling in their jobs. In the results for 2025, almost four in 10 said they are actively planning or considering leaving their job. Those members told us that feeling undervalued, under too much pressure, exhausted and concerned about low staffing levels are the main reasons for wanting to leave.

The toll this level of pressure is taking is clear in these results.

Just under **six in 10 described nursing as a rewarding career, **down** from a high of **71%** in 2019.**

Now, **50% say they are enthusiastic about their career, **down** from **64%** in 2019.**

Only **31% said they would recommend nursing as a career, a **15% decrease** since 2019.**

The case for change

Fair pay

The years of austerity, below inflation pay increases and rising living costs have hit nursing staff hard. While pay awards in recent years have begun to close the gap, RCN Scotland members remain of the view that they are undervalued.

Only a third (36%) of members who responded to our employment survey feel their level of pay is appropriate given their responsibilities, pointing to a need to do more to improve pay, terms and conditions.



For NHS staff, a commitment to the inflation guarantee which formed part of the 2025/26 and 2026/27 pay deal, offers an element of protection against unpredictable and fluctuating inflation rates. A commitment to maintain this as part of future pay offers would maintain a steady improvement in nursing pay.

We expect the new Scottish government to maintain direct pay negotiations with the joint health trade unions, and to prioritise pay negotiations for further years, beginning with 2027/28, and a mechanism to ensure members receive pay awards in a timely manner.

Out with the NHS, including in general practice, social care and the third sector, the pay bands set out in Agenda for Change should be considered the minimum pay level for equivalent roles. The Scottish General Medical Services contract should include a mechanism to provide assurance that allocations for primary care staff are delivered as intended. For social care, a sectoral bargaining system is needed, that recognises and values the contribution of social care to our health and care system and our wider communities and supports work to make careers in social care attractive.

Given the pressures on Scotland's universities, there is also a need to ensure that the academic nursing workforce is maintained and developed. We call for an urgent review of nursing academic roles across universities to include salaries and terms and conditions.

The case for change

Career progression

Career progression and professional development is an important factor in feeling recognised and valued. But career progression for nursing roles has been falling behind when compared to midwives and Allied Health Profession (AHP) staff. Band 5 staff make up the largest proportion of the nursing workforce (40%). By comparison, only 10% of midwives and 14% of AHPs are paid at band 5, despite starting their careers at the same pay band as registered nurses. In addition, band 5 nurses have tended to have less success when formally appealing their job banding using the normal job evaluation process.

Meanwhile, midwifery has the highest proportion of the workforce at band 6 (54%) compared to AHPs (45%), with nursing having the lowest proportion at 19.5%, less than half the amount of the other two professional groups.

The AHP workforce has the highest percentage at band 7 and the proportion at bands 8a-9 (5.3%) is twice the nursing and midwifery workforces at those grades (2.6% and 1.9% respectively).

These variances suggest a continuing inequitable and inconsistent application of the Agenda for Change profiles.



Nurses face slower progression through pay bands compared to other professions.

Nursing knowledge and skills are clearly being undervalued when compared with midwifery and AHPs.

The band 5 nursing role review, secured by the RCN as part of the 2023-24 NHS pay deal, was designed to begin to address this inequity. The review launched in June 2024 and its results are helping to prove the case for a pathway for progression. Currently, over 85% of the applications that have been assessed have been rebanded to band 6.

This high success rate clearly illustrates that nursing job descriptions and associated pay banding have not kept up with the changes in nursing practice, clinical skills and expectations of delivery of care.

Given this statistic, it seems inefficient and inequitable to require individual nurses to go through a job evaluation process which has significant resourcing implications for health boards.

The case for change

Career progression (cont.)

Annex 20 is part of the Agenda for Change (AfC) Framework and provides for professional development of roles enabling progression from band 5 to band 6, provided the role is sufficiently autonomous in decision making and delivery of care.

Other professions, including midwives, can progress from band 5 to band 6 following a period of preceptorship through Annex 20. Despite similar pathways into health and care, this progression is not in place for nursing staff, and too many end their career on the same pay band in which they started. The results from the band 5 nursing role review demonstrate that nursing meets the criteria for a progression pathway.

The introduction of a progression pathway from band 5 to band 6 would recognise that nursing has evolved considerably since the introduction of Agenda for Change, with the modern nursing workforce consistently demonstrating more skill, autonomy, greater technological proficiency, higher levels of leadership, a larger burden of risk and increased specialism and complexity relative to the nursing workforce of 20 years ago.

A pathway to progression giving parity with colleagues in other health disciplines would be a key driver for recruitment and retention in the profession. Boosting recruitment is badly needed at a time when the number of students applying to study nursing has fallen in recent years, demonstrating the public no longer views nursing as a career of choice. Providing a pathway to progression also limits the risk of UK nurses leaving the NHS for opportunities working abroad.

Whilst pay is only one element of the complex web which runs through the recruitment and retention crisis, we strongly believe that providing career progression will attract more people into the profession and encourage more nurses to remain on the Nursing and Midwifery Council register and working, once training has taken place.



The case for change

Ministerial Nursing and Midwifery Taskforce

The Scottish government's Nursing and Midwifery Taskforce was established in 2023 in response to RCN campaigning on safe staffing and fair pay.

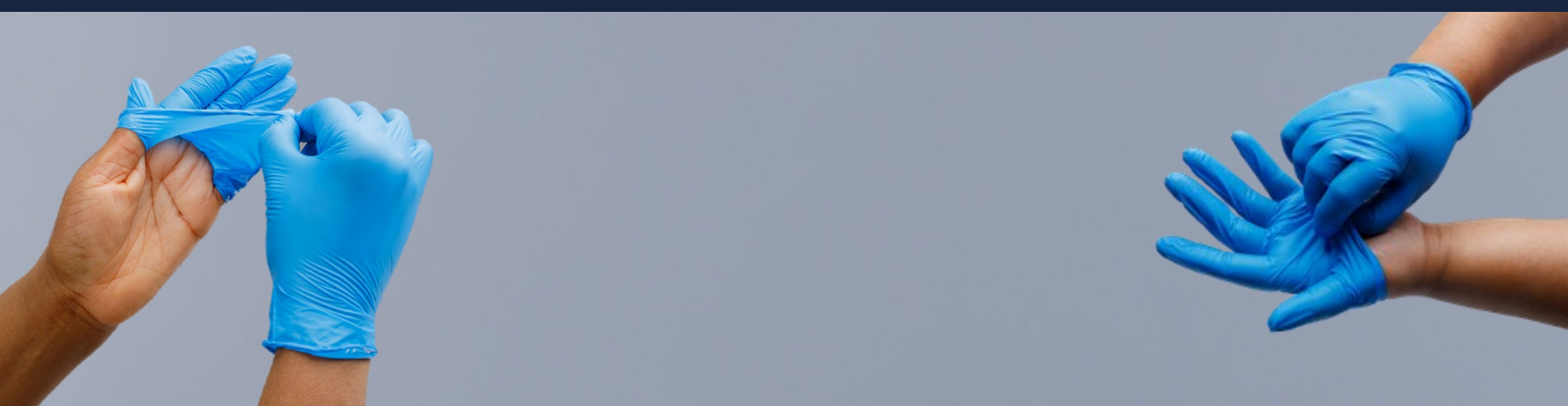
The Taskforce brought together key stakeholders to develop a series of recommended actions to improve retention of experienced staff; attract new nurses; improve workplace culture and environments; increase staff wellbeing; and improve access to education and development.

The Taskforce report¹ was published in February 2025 and contains 44 recommended actions. They include actions designed to ensure nursing staff receive their breaks, improve access to flexible working and improve workplace culture, with an emphasis on psychological safety and compassionate leadership. Other commitments include expanding the routes into nursing and a review of the predicted absence allowance to ensure it reflects non-clinical aspects of nursing and realistic levels of absence. We have been calling for this to be increased for some time.

Taken as a whole, these recommendations are ambitious and, if implemented well, will help transform workplaces and develop a sustainable nursing workforce for the future.

The Taskforce report is the culmination of two years of collaborative working and we have a clear set of recommendations that must be delivered to meet the aspiration of making Scotland the best place for nurses and midwives to work. This opportunity must not be wasted. The new Scottish government must pick up this work with renewed energy. Our members need to see real, measurable progress in 2026.

If the taskforce recommendations are not implemented the **current crisis in the nursing workforce will only **worsen**.**



The case for change

Safer workplaces

The levels of violence and aggression that nursing staff face on a daily basis are unacceptable.

In our 2025 employment survey nearly 4 in 10 (37%) of respondents reported experiencing physical abuse.

Over 70% reported that they had experienced verbal abuse in the past 12 months.



Members also reported that abuse was discriminatory in relation to factors including ethnicity. Over a third of Asian respondents and over half of Black respondents reported they had experienced physical abuse in the previous 12 months.

There is a clear link between system pressures, such as long waiting times and corridor care, growing frustration among patients and their families and the levels of abuse experienced. Six in 10 respondents felt this was the trigger for the verbal abuse they experienced.

Confidence in reporting systems is poor and while reporting of abuse is relatively high, satisfaction with the response is low. Reports of abuse are too often 'swept under the carpet' reinforcing perceptions of organisational indifference and a lack of accountability.

Improvements are needed in data collection to fully understand the extent of the problem and reporting systems need to be strengthened to rebuild trust among staff. However, tackling the root cause of violence and aggression requires action to reduce the pressures on the system and ensure safe staffing levels.

Within social care, we have had worrying reports of overseas care workers being exploited by rogue employers. Practices such as repayment clauses are being used by employers to trap migrant care workers. Across the UK the RCN has seen an increase in reports from members about these repayment clauses.

The next Scottish government must engage with the UK government on improving the protections for staff to leave exploitative work situations.



Our manifesto calls for:

- Registered nurses and nursing support workers in the NHS, independent sector and social care must have fair pay and good employment terms and conditions that reflect their safety critical role. A sectoral pay bargaining system should be swiftly established to ensure fair pay in social care.
- The introduction of a clear career pathway that allows registered nurses to progress from band 5 to band 6 after completing a period of preceptorship. The expertise and experience of nurses working at band 6 and above must also be better recognised and valued, putting nursing on a more equitable footing with other graduate health professions.
- Implementation of the Nursing and Midwifery Taskforce recommendations, and the investment necessary to deliver this.
- The transformation of workplaces so that nursing staff can thrive and flourish, including the delivery of protected time for learning and development.
- Action to tackle violence and abuse and an end to the exploitation of health and social care workers.

References:

- i Ministerial Scottish Nursing and Midwifery Taskforce: report and recommended actions
Scottish Government
<https://www.gov.scot/publications/report-recommended-actions-ministerial-scottish-nursing-midwifery-taskforce/>



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For more information about our priorities for the next Scottish government, as well as information on how you can support our campaign, please visit:

rcn.org.uk/glovesoff