

The Nursing Workforce in Wales 2020



About this report

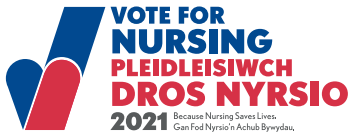
This report, produced annually by RCN Wales, is designed to provide a statistical overview of the strengths and vulnerabilities of the nursing workforce in Wales. The main sources of information on the nursing workforce in Wales are from Statistics Wales/Welsh Government and the Royal College of Nursing. These sources are identified throughout this briefing.

The latest Welsh Government figures on nursing staff employed by the NHS were published in August 2020 and are from 31 March 2020¹. In previous years, nursing figures were published annually and referred to data from 30 September of that year. Figures are rounded to the nearest whole number and usually shown as Full-Time Equivalent (FTE).

The Royal College of Nursing published the latest edition of the biannual Employment Survey in 2019. Information in this UK-wide study was drawn from a comprehensive survey of our nursing membership with 965 respondents from Wales.

Please contact Royal College of Nursing Wales for more information on any of the points raised in this briefing.





Executive Summary & Recommendations

1

Wales needs more registered nurses to deliver care.

This requires an increase in student numbers and measures to address retention. Evidence for the nursing shortage can be seen in the NHS nursing vacancy rate, the increased rate of spend on agency nursing and the extreme shortage of registered nurses in the independent sector.

2

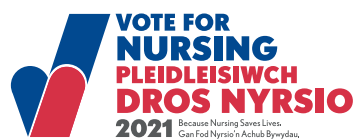
The Welsh Government and Social Care Wales should launch a national recruitment campaign for nurses in care homes.

The Welsh Government should commission an analysis of the need for nursing in this sector.

3

The Welsh Government should extend Section 25B of the Nurse Staffing Levels (Wales) Act 2016.

Section 25B of the Nurse Staffing Levels Wales Act should be extended to children and mental health inpatient wards and community nursing to protect patients.



Executive Summary & Recommendations

4

The Welsh Government should ensure annual published data on workforce vacancy rates in the NHS.

The nursing vacancy rate is a critical indicator of the pressure health boards, trusts and specific disciplines are under. It is important that this information is published and in a user-friendly manner.

5

The Welsh Government should ensure that nursing students are supported to study and increase access to the nursing degree with a national apprenticeship scheme.

There should be a strategy behind the commissioning process which looks to the nursing needs of Wales in the future and the whole career span of a registered nurse rather than taking a short-term view of the annual number of nursing students.

6

The Welsh Government should increase the number of nurses with either the Specialised Practitioner Qualification (SPQ) in district nursing or the community nursing master's degree.

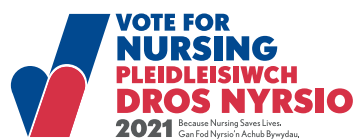
The Welsh Government needs to ensure activity and outcome information on NHS community nursing care is held nationally. Statistics Wales should publish the correct data relating to the number of district nurses who have the relevant degree



**The Welsh Government/
Health Education and
Improvement Wales
(HEIW) should plan to
expand specialist nurse
and consultant nurse roles
nationally.**

**The number of infection
prevention and control nurses
needs to increase.**

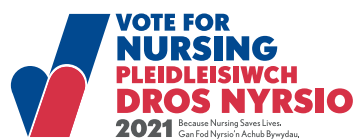




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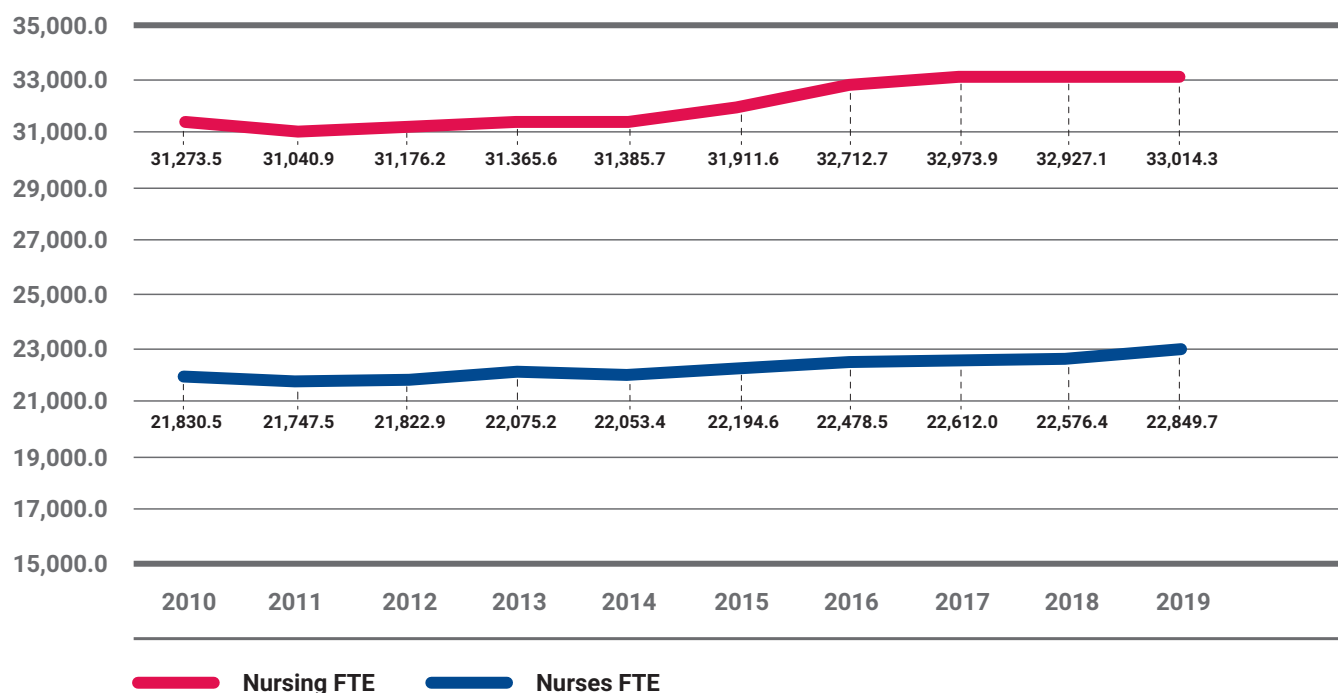


How many nurses are employed by the NHS?

Statistics Wales collects and publishes information quarterly on nurses and nursing staff directly employed NHS Wales since December 2018. Before December 2018, information was collected and published annually.

Note that “nursing” as a term includes health care support workers (HCSW). The numbers of registered nurses is a different category.

F1. Nursing Numbers (Statistics Wales)



Published in October 2020. For more information please contact the Policy&PublicAffairs.Wales@rcn.org.uk.

Figure one shows the overall nursing numbers employed by NHS Wales is generally static from 2010 with a slight rise in health care support numbers from 2015.

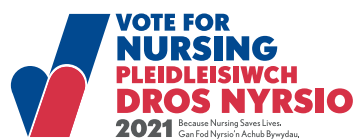
This does not reflect patient need or service developments. There is an increased nursing workload in caring for an ageing population with increased dependency and comorbidities. Patient throughput in hospitals has risen sharply, as has bed occupancy. A substantial increase in nursing is needed to ensure the ongoing delivery of high-quality patient care. Put very simply it takes a higher number of nursing staff with a greater level of knowledge and skill to care for a person with a broken hip if they are also physically frail, and living with dementia, diabetes, a heart condition and respiratory illness. This is even more the case if this person is being cared for at home, alone or in poor housing.

To understand how many nurses and nursing staff are needed in the NHS other indicators of workforce and patient need should be considered such as vacancy rates, agency spend, and workload pressure. These are explored in section 3.

HEIW along with Social Care Wales, commissioned by the Welsh Government, produced a health and social care workforce strategy (December 2019)². However, this strategy has not been approved by the Welsh Government or published in its final form. This means that despite the creation of HEIW there is still no coherent workforce strategy in Wales for health and social care.

KEY FACT

There is an increased nursing workload in caring for an ageing population with increased dependency and comorbidities. A substantial increase in nursing is needed to ensure the ongoing delivery of high-quality patient care.



How many nurses and HCSWs are employed in the independent sector?

KEY FACT

In 2018 there were only 1,545 registered nurses employed by commissioned care providers in the care home workforce in Wales: making up only 3% of all staff employed by commissioned care providers in Wales. This critically low figure illustrates how difficult providing quality nursing care in care homes in Wales has become.

The independent sector is made up of private, voluntary, charitable and not-for-profit organisation. Examples of nursing employers in this sector are care homes, hospices, charities and nursing agencies.

We know from care home providers and from our members that there is an acute shortage of registered nurses in the care home sector.

A report by Social Care Wales, detailed that 66% of the commissioned care workforce are 'care workers, care officers and care assistants' (many of whom will be providing nursing care) but only 3% of all staff employed by commissioned care providers in Wales are registered nurses (excluding managers). The data collected by Social Care Wales, notes that there were only 1,545 Registered Nurses employed by commissioned care providers in the care home workforce³. This number drastically needs to increase.

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 residents.

With a corresponding rise in the burden on the NHS will also rise with an increase in delayed discharges and repeat admissions. Furthermore, some individuals require nursing care in a care home. If they require nursing care this care should be overseen by a registered nurse and should be regulated and inspected regularly.

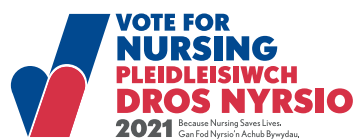
A registered nurse presence in care homes for residents with nursing needs is essential for continuous monitoring and assessing of residents' health and wellbeing. As autonomous practitioners, their clinical skills are used to recognise and anticipate problems, their clinical skills are used to recognise and anticipate problems, act when an individual's condition deteriorates 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 importance of registered nurses in care homes has become even more significant during the COVID-19 pandemic, noticeably because they provide advice and support for care home staff, whilst identifying early symptoms of COVID-19 in elderly residents and caring for patients in a safe environment.

Registered nurses promote residents' independence through proactive, rehabilitative care, promote residents' health, deliver high quality palliative care and end of life care for individuals and play a key role in advocacy for residents and families.

The close integration of health and social care means that nursing shortages in the care home sector and/or poor workforce planning are a significant risk for the NHS. Health Board Integrated Medium-term Plans (IMTPs) should set out their service plans and workforce needs reflecting on the demographics of their population. However, the thoroughness and quality of the IMTPs varies greatly across health boards as does their ability to assess workforce need in the independent sector of their region.



KEY FACT

The presence of a registered nurse in care homes for residents with nursing needs is essential for continuous monitoring and assessing of residents' health and wellbeing as well as recognising and anticipating problems and avoid unnecessary hospital admissions.

The series of workforce reports published by Social Care Wales contains no trend analysis. It states *"we are unable to provide robust comparisons with previous years[...]. As such the extent to which these differences represent real change is unknown"*⁴. The Royal College of Nursing Wales calls for the Welsh Government and Social Care Wales to take immediate action to improve this workforce data and publish a national nursing need analysis for this sector.

International nursing and migration

In May 2020, the UK Immigration and Social Security Coordination (EU Withdrawal) Bill passed the initial stages in the House of Commons. The Bill will affect the recruitment and retention of the international nursing workforce and will also have an impact on the social care workforce. As the social care workforce is considered 'low skilled' by the UK Government it would be difficult for an international care worker to gain employment in the UK based on the point-based system.

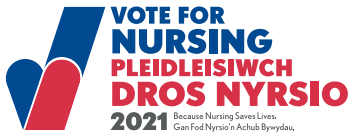
Under the point-based system the salary threshold for immigrants is £25,600. It is also expected that those coming to the UK will already have a job offer and be able to speak English. In 2018 the average earnings of an individual that works in the adult social care sector in Wales was estimated to be £16,900⁵. The Royal College of Nursing is concerned that the Immigration Bill will have a devastating effect on the recruitment and retention of the international workforce and has called for care work occupations to be added to the shortage occupation list (SOL).

RCN Wales signed and supports the Welsh Government's position paper on migration. The paper sets out an united Welsh position on the key issues in migration including the salary threshold, demographical differences and the transition period⁶.

RECOMMENDATION

The Welsh Government and Social Care Wales should launch a national recruitment campaign for nurses in care homes.

The Welsh Government should commission an analysis of the need for nursing in this sector.



Are there enough nurses and nursing staff to provide safe and effective patient care?

This section will explore four topics; overtime, agency spending, continued professional development and nurse vacancies that together provide an answer to the question “are there enough nurses and nursing staff to provide safe and effective patient care?”

Working overtime

F2. Nursing Morale in Wales (2019 RCN Employment Survey)

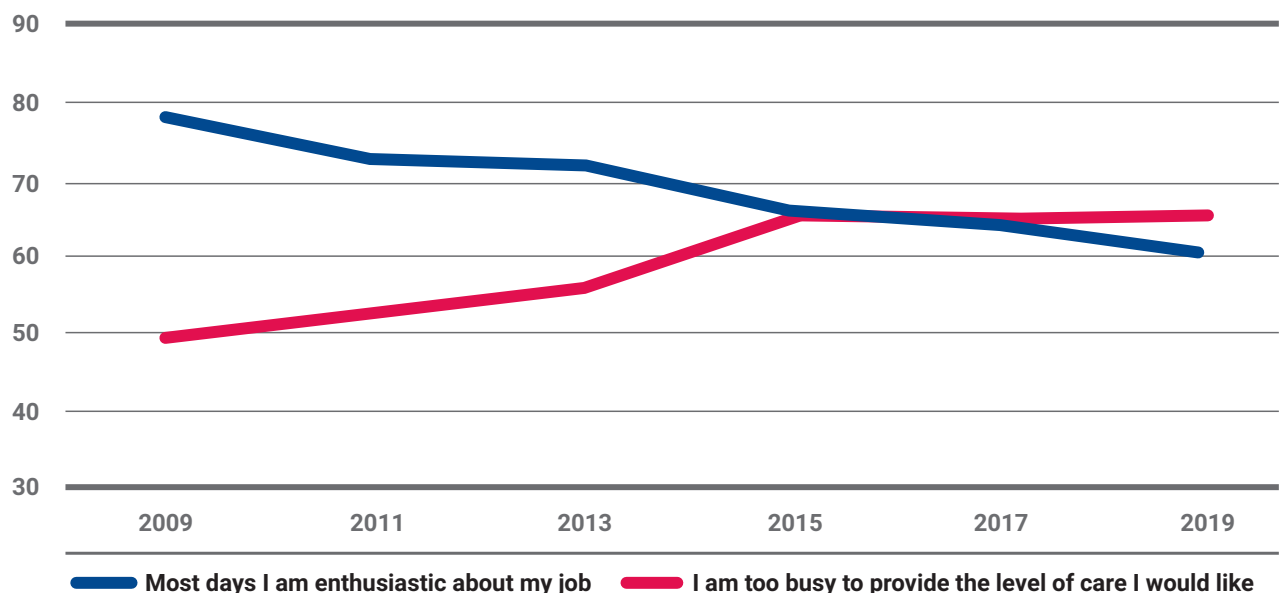


Figure two above provides a stark illustration of the pressure nurses feel in their work. The latest data from an RCN pay and work conditions survey published in July 2020, found that 58.4% of members felt their morale has worsened since before the COVID-19 pandemic. This compares to 55.6% in the UK.

Published in October 2020. For more information please contact the Policy&PublicAffairs.Wales@rcn.org.uk.

Furthermore, the 2020 survey revealed that 76.6% of members believed their stress level had worsened, and 87.7% of members felt their colleagues stress level had increased.

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.

More recently, the 2020 survey noted that 30% of members felt they are working longer hours compared to before the COVID-19 pandemic. The rise of longer hours is a worry considering nursing staff already work long shifts.

There are 22,850 FTE nurses employed in the NHS Wales. Using this figure (rather than the higher assignment count figure as an individual nurse could hold more than one post) 76% equates to 17,366 nurses.

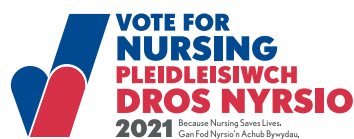
If 17,366 nurses worked just two hours more in one week NHS Wales would be receiving 34,732 additional hours of work in that one week. The equivalent of 926 full-time nursing posts.

Spending on agency nursing

There will always be a need for some element of temporary nursing in the NHS to cover short-term sickness and maternity. 'Bank nursing' is the term given to the system whereby nurses employed by the NHS can register with the 'bank' to be available to provide extra coverage. Most nurses work some hours for the 'bank', and some will work exclusively for it.

KEY FACT

Every week nurses in Wales give the NHS extra hours to the value of 926 full-time nurses. This reliance on nurses' goodwill contributes to stress, sickness, low morale and poor retention rates.



KEY FACT

NHS Wales spent £69.04m on agency nursing in 2019 – a rise of 9.94m from 2018. The Welsh Government must take action to reduce this spend and support health boards to retain registered nurses.

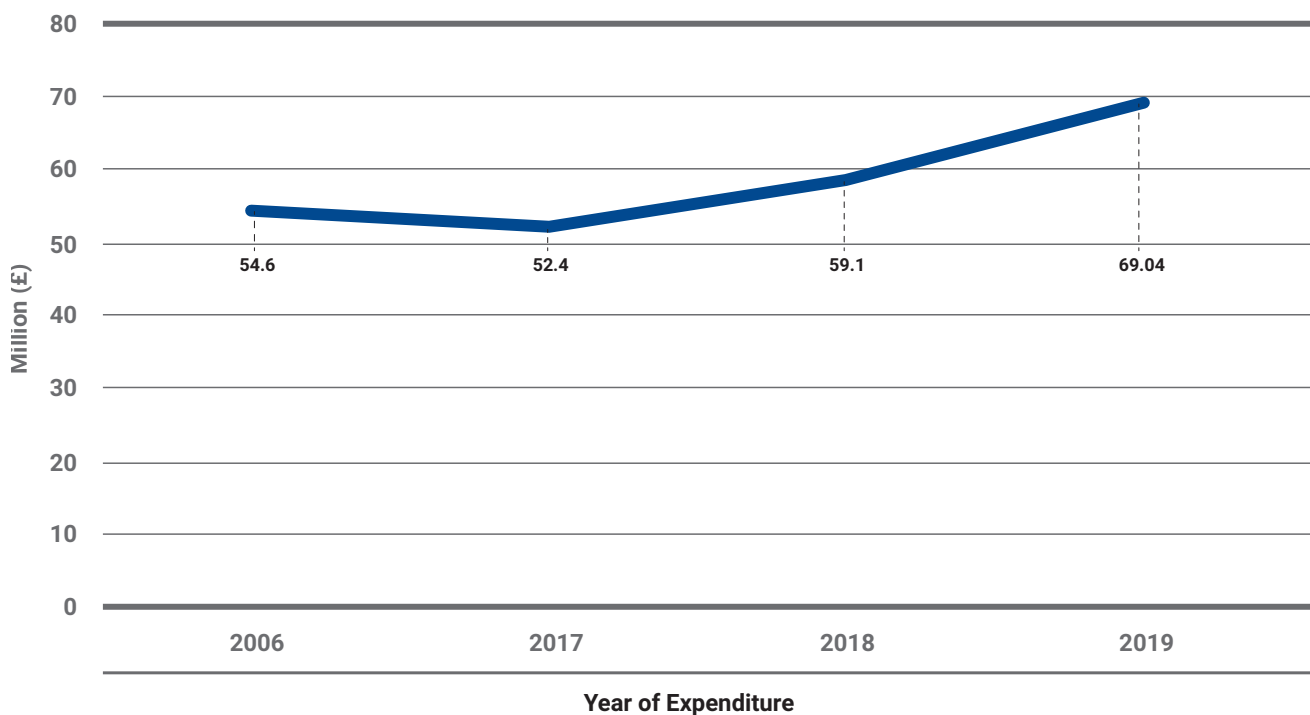
Nurses often move from the NHS to work for agencies to ensure control over their own hours of work and receive a higher rate of pay than the NHS. Nurses in Wales are frequently the sole or main wage earner in the family. They often also care for both children and older members of the family as well. Control over hours worked is therefore extremely important and/or necessary for this group. Increasingly nurses are choosing to work exclusively for agencies. If NHS Wales is to retain its nursing staff, it needs to modernise its HR procedures to allow nurses more control over when they work.

Instead of incentivising its nurses to stay, NHS Wales tries to discourage nurses from leaving by measures such as refusing to hire agency nurses who also work for the health board/trust. This creates the bizarre situation of agency nurses travelling from London or Manchester to fill vacancies in Cardiff or Ysbyty Gwynedd. NHS Wales is displaying a dangerous increasing reliance on agency nursing.

A Freedom of Information request (2019) highlights the increased spending on agency nurses by all local health boards and trusts. Total spending on agency nurses has increased to 69.04 million in the year 2019, up from 59.1 million in 2018.

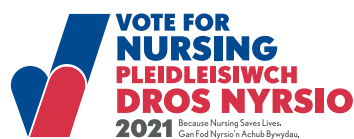
Agency nursing is expensive as there is a higher cost to cover profit to the agency. It is also not ideal for patient care as a permanent or long-term option as agency nurses will be less familiar with ward layout, polices and equipment and less able to provide continuity of care.

F3. Total Spending on Agency Nurses per year (Freedom of Information)



Continued professional development (CPD)

Professional development and learning are fundamental career-long requirements for every nurse. It is a requirement for successful revalidation by the Nursing and Midwifery Council and essential for patient safety and clinical effectiveness. Yet, because of the difficulty of backfilling nurses on the team, some health boards have stopped all access to CPD for nurses. This means that keeping up to date and learning new skills becomes something that nurses have to struggle to do at home and at their own cost. In contrast, doctors have access to CPD as part of their contracts.



'Mandatory' training includes equipment knowledge, emergency life support/CPR, and infection control. The 2019 RCN employment survey revealed that across the UK 85% of all nursing staff indicated that they had completed all their mandatory training, but this fell to 70% in Wales. Across the UK 54% said they had completed their last mandatory training in normal working hours but in Wales this falls further to a disturbing 29%. If nurses cannot complete even their mandatory training in work time, there are simply not enough nurses employed to deliver safe patient care.

Registered nurse vacancies

The Welsh Government and/or NHS Wales fail to publish national figures for nursing vacancies in the NHS. The nursing vacancy rate is a critical indicator of the pressure specific health boards or disciplines are under. It is published in the other countries of the UK.

RCN Wales estimated there is a *minimum* of an estimated 1,612 nurse vacancies in NHS Wales⁷.

This estimate is based on vacancy data found in health boards, Audit Wales and Senedd committee papers. The data is from different points in time across 2018 and mostly refers only to only Band 5 nurse vacancies or vacant posts on wards covered by the Nurse Staffing Levels (Wales) Act 2016.

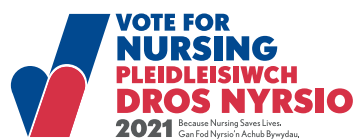
The estimate illustrates therefore, both how ridiculously difficult it is at present to scope the nursing vacancy rate in Wales, and secondly, the significant impact vacancies are having on patient care and the pressure experienced by our nurses in the NHS. RCN Wales believes it to be an *underrepresentation* of the vacancy rate.

RECOMMENDATION

The Welsh Government should publish annual workforce vacancy rate in NHS Wales.

RECOMMENDATION

Wales needs more registered nurses to deliver care. This requires an increase in student numbers and measures to address retention. Evidence for the nursing shortage can be seen in the NHS nursing vacancy rate, the increased rate of spend on agency nursing and the extreme shortage of registered nurses in the independent sector.



The Nurse Staffing Levels (Wales) Act 2016

Why the Nurse Staffing Levels (Wales) Act 2016 Act is important:

In 2007 Professor Ann Marie Rafferty surveyed nearly four thousand nurses across England and Scotland and looked at 118,752 patient episodes of care in 30 hospital trusts in England. She found that wards with **lower nurse to patient ratios had a 26% higher patient mortality rate.**

Poor staffing outcomes also associated with low levels of nursing care include adverse events after surgery; increased accident rates and patient injuries; increased cross-infection rates; and higher rates of pneumonia.

The Nurse Staffing Levels (Wales) Act became law in March 2016 and was fully implemented in April 2018. The first (Section 25A) is a general duty on NHS organisations in Wales. Where they provide nursing services the organisation must provide **“sufficient nurses to allow the nurses time to care for patients sensitively.”**

Section 25B and 25C specifies that in adult acute medical and surgical wards the level of “sufficient nursing” must be calculated according to a specific methodology as laid out in the guidance and patients must be informed of the nurse staffing level. This prescribed methodology’s algorithm has factors such as nursing skill mix and patient acuity and dependency built into it.

Ensuring safe and effective patient care everywhere

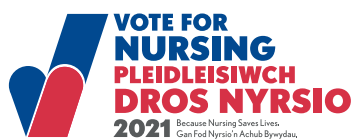
The Welsh Government has made a commitment to extend Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to children's inpatient wards.

The RCN believes section 25B of the Nurse Staffing Levels (Wales) Act 2016 needs to be extended to other areas such as mental health inpatient wards, and community nursing as a matter of urgency.

To ensure there are safe nursing levels to provide sensitive care in a timely manner it is important that the Welsh Government and HEIW work together to place the Nurse Staffing Levels (Act) Wales 2016 at the heart of workforce planning. The Royal College of Nursing recommends the expansion of pre-reg and post-reg commissioning numbers to plan for the expansion of the Section 25B of the Nurse Staffing Levels (Wales) Act 2016 and ensure there is a workforce available to provide compassionate care.

RECOMMENDATION

The Welsh Government should extend Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to children and mental health inpatient wards, care homes and community nursing to protect patient lives.



The impact of COVID-19

During the COVID-19 pandemic, the Welsh Government and NHS Wales have needed to take unprecedented measures to ensure there is capacity to treat COVID-19 patients.

Nursing as a profession has responded with radical changes with nurses returning to the profession in numbers unheard of before and nursing students working full-time in the NHS. A little over a week after the Welsh Government called for retired NHS workers to return to practice, 416 nurses and midwives had opted-in to the temporary register⁸. The ability to recruit retired nurses back into the NHS demonstrates their willingness to not only aid the COVID-19 response but also to support their colleagues, re-enter a job that they once left and provide care for the Welsh public. Steps now need to be taken to understand what would make these nurses stay post COVID-19. By understanding this it would greatly improve the NHS's ability to retain nurses and health care workers for the future.

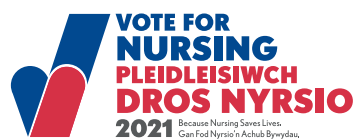
Student Nurses and the Future of Healthcare

Student nurses spend three years (years which are 42 working weeks and not merely the traditional academic calendar) undertaking the nursing degree course (fields of practice are Adult, Child, Learning Disability and Mental Health) spending 50% of their time on practical placements in NHS Wales or other settings.

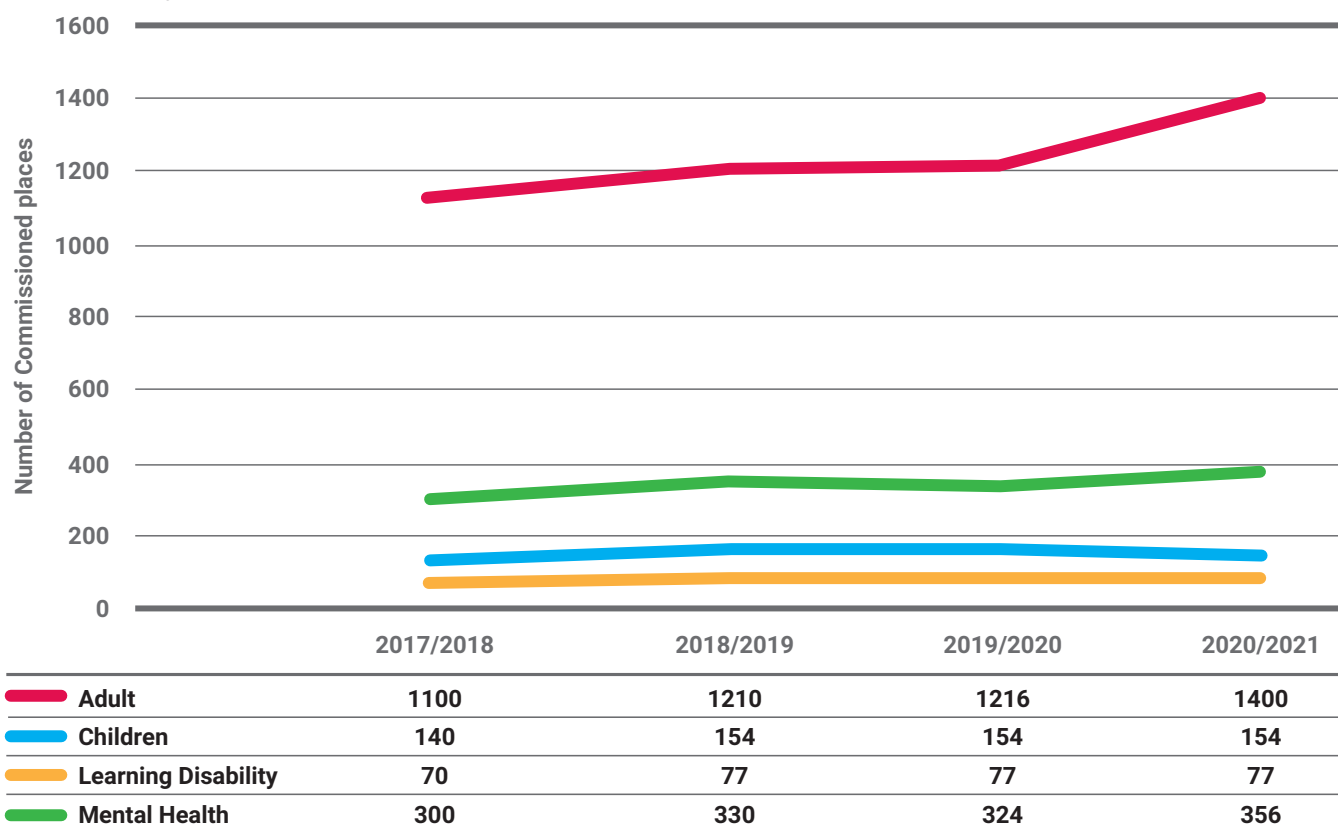
Research in 2014, conducted across nine European countries, found that a better educated nursing workforce reduced unnecessary deaths. Every 10% increase in the number of Bachelor's degree educated nurses within a hospital is associated with a 7% decline in patient mortality⁹.

In November 2019, the Minister for Health and Social Services, Vaughan Gething, announced an extra £16.4m investment in student places with a 14.5% increase in training places for nursing and midwifery. The increase is welcomed and needed.

With 1,400 places being commissioned for adult nursing the numbers for this field of practice is far greater than for children, learning disability and mental health nursing places. Student nurse places in children, learning disability and mental health nursing have remained largely static for several years.



F4. Pre-reg Nursing Student numbers by field of practice



RCN Wales urges the Welsh Government to increase the commissioning numbers for pre-registration children, mental health and learning disability nursing. There is a clear need for an increase in nursing numbers in these three fields of practice.

- There is a sharp demand from neonatal services for children’s nurses alongside an urgent need to increase numbers of children’s nurses based in community teams.

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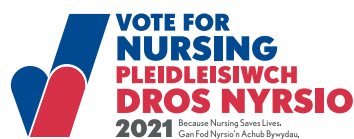
- Learning disability nurse student numbers need increasing to support children and young people with learning disabilities in the community.
- Mental health student nurse places need increasing. Poor staffing levels and inability to recruit nursing staff have been highlighted in a recent national report examining poor episodes of care. Safe quality mental health services can only be provided if the qualified workforce is available to do so.

Given the nursing shortage it is extremely important that all fields of practice are expanded. HEIW and the Welsh Government should expand children, learning disability and mental health student nursing places to prepare for the extension of Section 25B of the Nurse Staffing Levels (Wales) Act 2016 and ensure there is a workforce available to care for the future needs of the population.

Supporting Nursing Students

The average age of a nursing student is 29 and they are far more likely to have caring responsibilities. An RCN survey found that 31% had dependent children, 10% were single parents and 23% were caring for a sick, disabled or elderly relative¹⁰.

The Welsh Government pays the university the cost of tuition fees. If students commit to working for NHS Wales for two years, they receive a non-means tested grant of £1,000 and can apply to receive a means tested bursary and other means-tested benefits. In contrast the UK Government abolished the student nurse bursary in England and the number of applicants for nursing in England plummeted by 30%¹¹. Dropout rates from courses are also much higher than in Wales.



However, Wales is not reaping the full benefits of the decision to retain the bursary. Since 2016, the Welsh Government has confirmed this decision for a year or for two years. In June 2019 the Welsh Government announced that the bursary would continue into the academic year of 2020/2021. However, in July 2019 the Welsh Government announced a further round of 'engagement' on the future system. The uncertainty meant that potential students in Wales were confused and disheartened.

In November 2019, the Welsh Government announced that arrangements had been made to retain the NHS bursary package for an additional two cohorts for the 2021/2022 and 2022/2023 academic years. The announcement, coupled with the June 2019 announcement, provided welcomed certainty for the next three academic years.

Nevertheless, once again the uncertainty was rife as the Welsh Government further commented that it would *'use this time to undertake a comprehensive exercise to establish the best and most appropriate way of continuing to support those who choose to study health care related programmes in Wales'*¹².

The uncertainty after 2023 may hinder university financial planning because they cannot be certain of the system in the future. This is having a negative impact as departments fail to invest in nursing and universities may consider making cuts to provision instead of investments.

Wales needs to take action to ensure that its own supply of nurses is safeguarded and that access to the profession is widened¹³.

Nursing apprenticeships

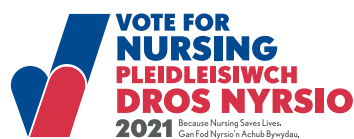
Nursing apprenticeships enable the student to work and be paid whilst studying for the nursing degree part-time. This is an attractive option for many. However, there is no clear apprenticeship route for nursing in Wales. There are only limited numbers of funded places for those already employed by NHS Wales as healthcare support workers by NHS Wales.

Apprenticeships maximise the potential of the workforce and allow the apprentice to engage with experienced staff members who can pass on skills, knowledge and behaviours.

Wales should examine ways of widening access to the nursing profession through a national approach to apprenticeships, offering direct access to this model for individuals to apply for including supported arrangements in care homes.

Education in the Welsh language

In order to provide quality health and social care in Wales, a bilingual workforce is needed. The language care is delivered in, is integral both to the experience of care (e.g. dignity, compassion etc), the quality of clinical care and health outcomes for the patient. The importance of the language of care to health outcomes can be seen in fields such as speech therapy and counselling but is equally important where healthcare professionals are relying on speech with the patient and family to make an assessment, explain a treatment or medication regime or seeking to gain consent for a course of action.



Over 25,000 nurses, nursing staff and HCSWs in Wales are members of the Royal College of Nursing. A third of these members speak Welsh. For our members to feel confident in speaking Welsh professionally and supporting colleagues to do so nursing education through the medium of Welsh and the availability of educational resources in Welsh must be increased. This would increase professional fluency and confidence and benefit the workforce and the patient.

The NHS IMTP should already, according to the Welsh Government guidance, be setting out the needs for Welsh language skills in their workforce. This need should then be reflected in the education commissioning process. The goal should be to increase opportunities to study through the medium of the Welsh language as part of the degree course or wholly through the Welsh language.

Support should also be provided for higher education providers that offer Welsh language provisions. This would ensure the continued professional sustainability of the Welsh language in nursing higher education.

Prince of Wales Nursing Cadet Scheme

The Royal College of Nursing Prince of Wales Nursing Cadet Scheme, developed in 2017, aims to prepare cadets for life, by providing them with crucial skills, tools and ambition to succeed. The scheme further aims to prepare a cadet for a potential career in nursing and healthcare.

The programme, championed by RCN Wales, combines 105 hours of guided learning, including learning modules and a clinical observational placement within their local health care region.

The cadet scheme is being piloted in Wales in conjunction with the Army Cadet Force Wales.

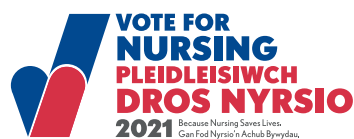
After a cadet is successful in the scheme, Welsh Universities have committed to offering a guaranteed interview to successful cadets to study nursing, and local health boards offer the cadets a guaranteed interview to work as a bank healthcare worker.

The 2 and a half year programme, prides itself on widening access to nursing. The scheme encourages 16-25 year olds, a demographic that is often missed by the traditional three-year university degree course, into roles within the NHS and into Health and Social Care.

The scheme has the possibility of greatly aiding the NHS workforce retention whilst providing the younger generation with a meaningful opportunity to contribute to the NHS, and the wider society.

RECOMMENDATION

The Welsh Government should ensure that nursing students are supported and increase access to the nursing degree with a national apprenticeship scheme. There should be a strategy behind the commissioning process which looks to the nursing needs of Wales in the future and the whole career span of a registered nurse rather than taking a short-term view of the annual number of nursing students.



6

Community Nursing and the need for the district nurse

People prefer to receive care at home. A home environment is usually more comfortable for recovery. It also allows people to maintain greater independence. When excellent care is provided in the home it is also often of a nature that prevents future illness or accidents. Advice on nutrition or help in installing simple aids such as non-slip mats are two examples of this.

Community nursing acts as a valuable link between acute services and primary care and it promotes independent living. Nurses in the community specialise in many areas, for example dementia, stroke, palliative care and Parkinson's disease and some have obtained additional qualifications to prescribe medications which ensure that older people receive a quality nursing service. Community nurses also signpost older people to appropriate third sector organisations for support, befriending and advice.

For the last decade in Wales, health boards have been reconfiguring acute hospital services, reducing bed numbers, encouraging shorter patients stays and enabling more complex treatments and care to be delivered at home. The Royal College of Nursing is supportive of this policy but there needs to be more investment in the community nursing workforce to ensure safe high quality care for patients.

There has been an increase in the number of registered nurses and nursing staff working in the community.

In addition, numbers of health visitors in Wales have remained stable in sharp contrast to England where numbers have dropped sharply in recent years. This is to be welcomed.

Given this positive news, why is the RCN concerned?

So little is known about the quality of NHS patient care in the community. Simply put the number of people receiving care, and the extent of their needs, is not fully known at a national level so it is difficult to judge the level of nursing needs required in the community.

We know there is a growing number of older people and other vulnerable groups needing nursing at home along with a rise in the number of people with long-term conditions requiring complex nursing care. However, there is no national information on the outcomes for the patients.

A recent welcome development has been the publication by the Chief Nursing Officer of the “District Nurse Guiding Staffing Principles”. These principles recommend that all community nursing teams in Wales should be led (and deputised) by a district nurse or by a nurse possessing a post-registration community nursing degree.

The Royal College of Nursing would welcome regularly published information on whether this standard has been achieved.

Secondly, the RCN is extremely concerned at the national shortage of district nurses and the Welsh Government’s inaction on this. The district nurse specialist practitioner qualification recognises a level of knowledge and practice that is highly skilled in very specific knowledge of care. It is a specialism in general community nursing. These nurses are the experienced pinnacle of a community nursing team providing clinical supervision and leadership.

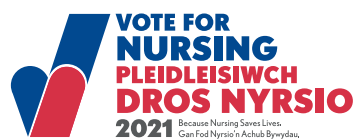
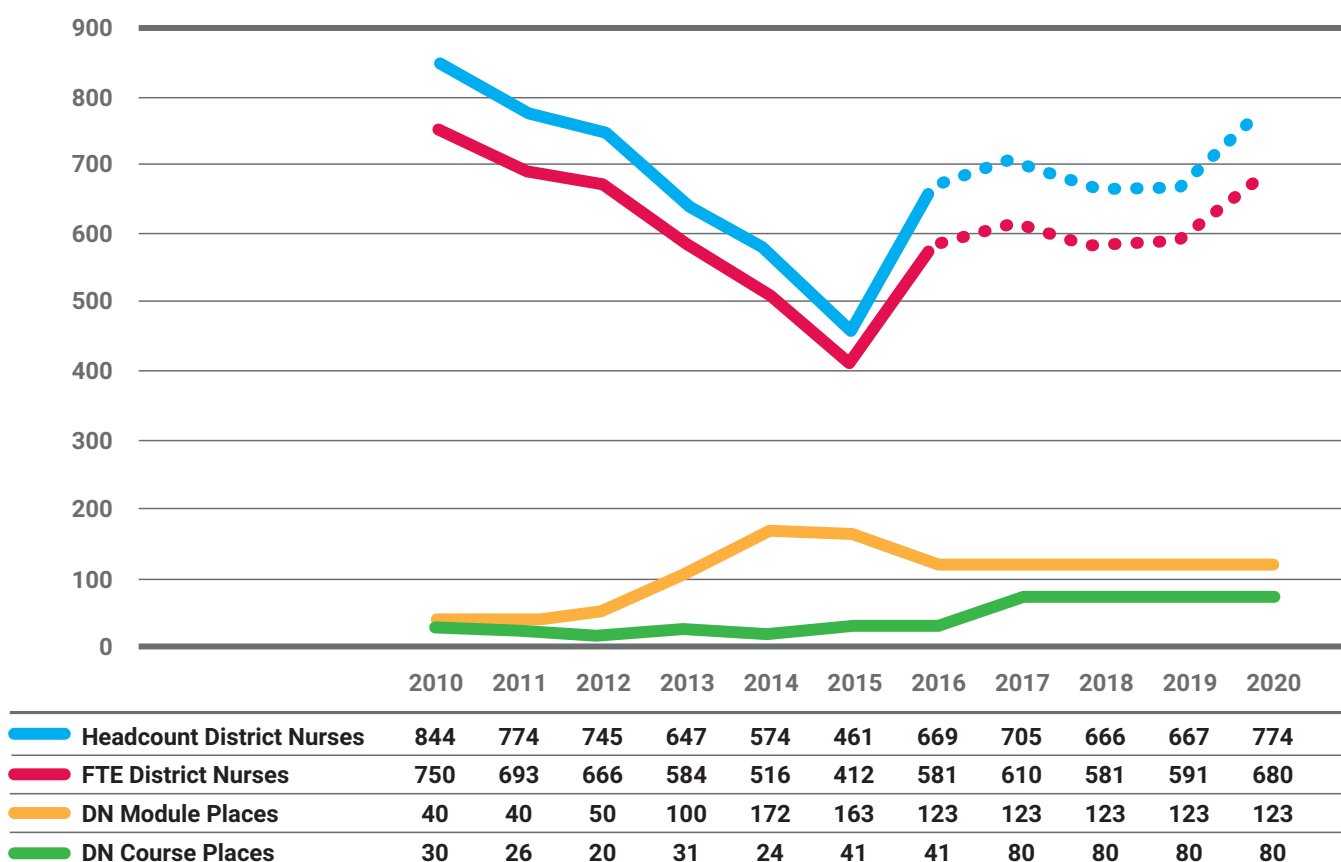


Figure five shows the sharp and rapid drop in the numbers of district nurses in Wales. This is alarming and should be of serious concern to the Welsh Government.

F5. District nurses (Statistics Wales)



Published in October 2020. For more information please contact the Policy&PublicAffairs.Wales@rcn.org.uk.

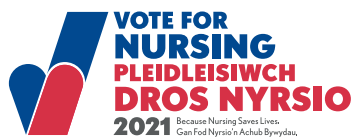
Why has the RCN used a dotted line in figure five to show the apparent rise in district nursing numbers from 2016?

Quite simply because this information is not reliable. Health boards have informed Statistics Wales that they are deliberately miscoding all registered nurses working in the community as “district nurses”. This is false information.

In the Annual Statistics Wales update (September 2019) it was recorded that enhancements in 2018 to the Electronic Staff Record meant that it is possible for Statistics Wales to see which of those ‘district nurses’ have the relevant qualification (SP:DN). Importantly it was acknowledged in the Annual Statistic Wales update (2019) that *‘there are a number of nurses coded as district nurses who should not be’*¹⁴.

Despite having the ability to identify nurses with the relevant qualifications and acknowledging the presence of inaccurate data, Statistics Wales have not publicly released the appropriate data in their December 2019 and March 2020 data publications.

The Royal College of Nursing has been publicly critical of the incorrect and misleading coding of district nurses since 2016. It is impossible for the Welsh Government and NHS Wales to safely and effectively plan patient care in the community if accurate figures for the nursing workforce are deliberately misrepresented in public. There needs to be accurate community nursing data published on the number of registered nurses, the number of nurses with a master’s degree in community nursing and those with the relevant district nursing qualification.



The number of places commissioned by the Welsh Government for the part-time district nursing course has remained static at 123 places since 2016 despite the pressing need for an increase of district nursing.

RECOMMENDATION

The Welsh Government needs to ensure activity and outcome information on NHS community nursing care is held nationally. Statistics Wales should publish the correct data relating to the number of district nurses who have the relevant degree.

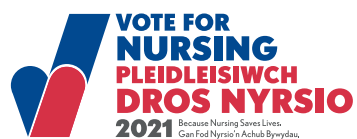


Specialist nurses and nurse consultants

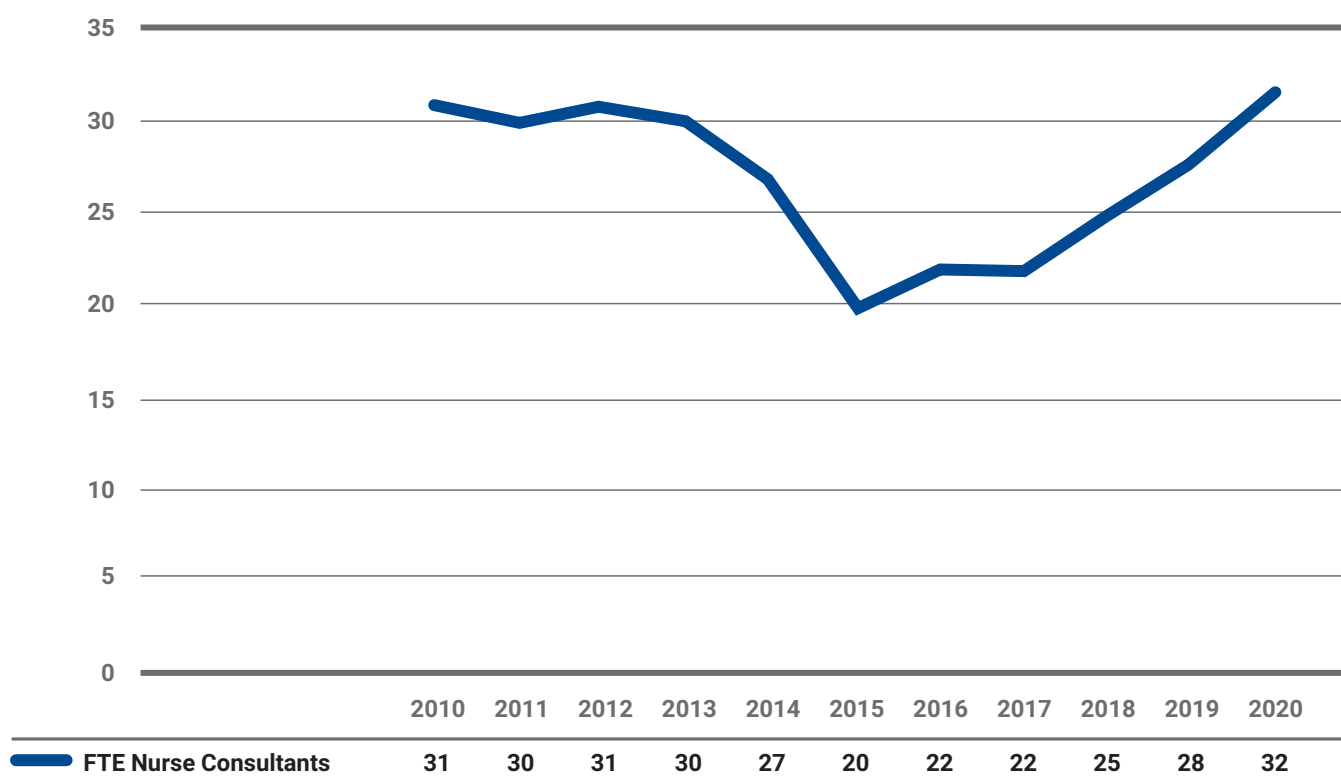
Specialist nurses not only specialise in a specific field they are an advanced level practitioner. They provide education and support for nursing and other healthcare colleagues. Specialist nurses often provide essential support to people with chronic conditions helping them to manage their condition and live as independently as possible e.g. conditions such as multiple sclerosis, Parkinson's disease or heart conditions.

Specialist nursing posts are often pump-primed or entirely supported by the voluntary sector.

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).



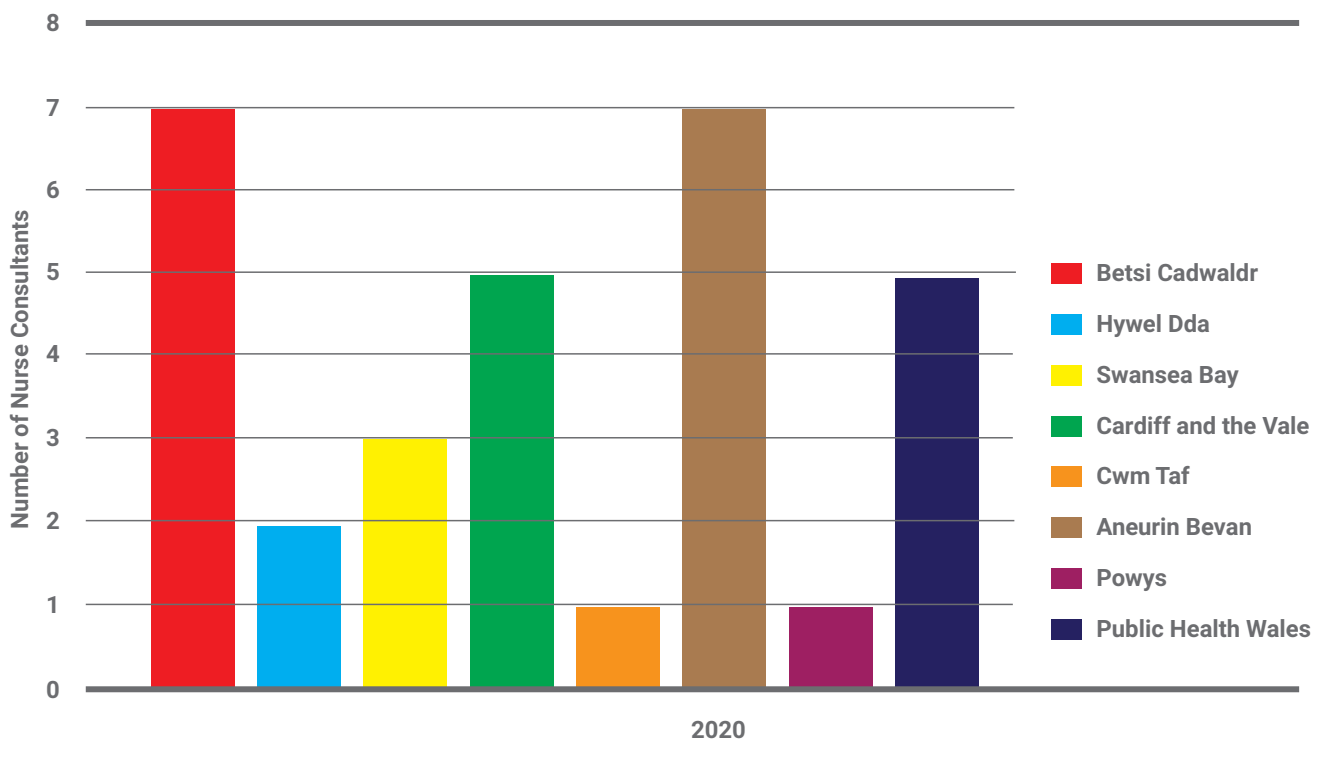
F6. Nurse consultants (Statistics Wales)



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.

F7. Nurse consultants March 2020

(Statistics Wales)



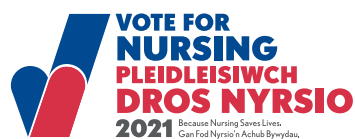
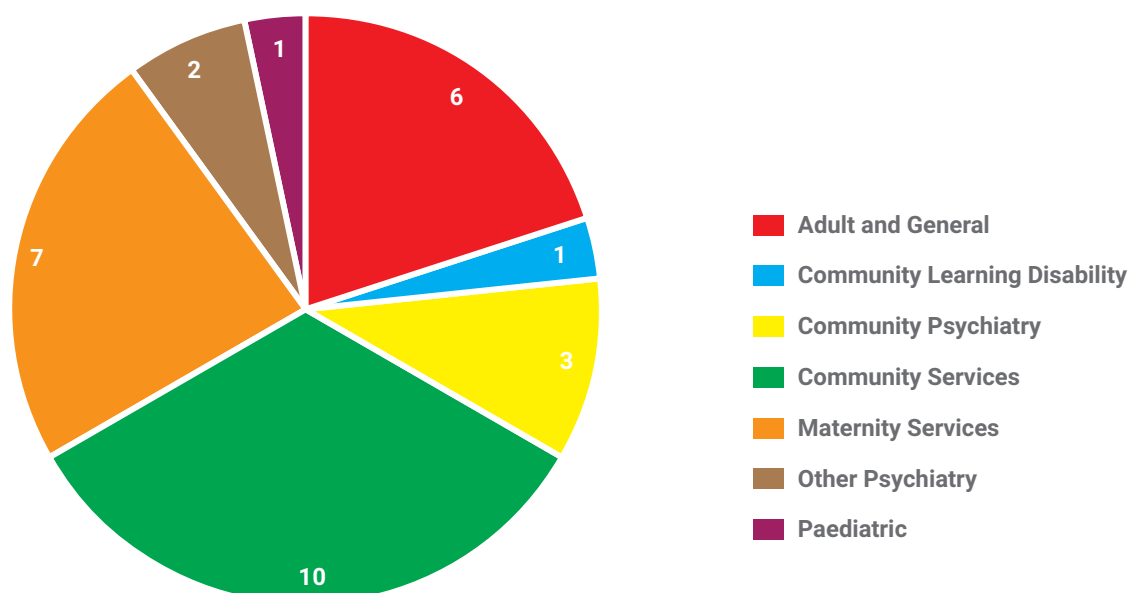


Figure 8 highlights the number of nurse consultants by area of work within the seven health boards and Public Health Wales.

Note there are no nurse consultants for education, school nursing or neonatal nursing.

F8. Nurse consultants by area of work March 2020 (Statistics Wales)



Infection prevention and control

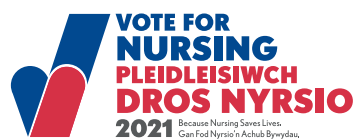
Infection prevention and control (IPC) practice is an essential component of health and social care, policy and guidance.

A postgraduate qualification in infection prevention and control has been available for registered nurses in Wales since 2008. However, it is not clear whether the Welsh Government/Public Health Wales hold data relating to how many registered nurse complete the course and how many IPC nurses there are in Wales. This data needs to be collected and published allow Welsh Government/NHS Wales to understand if they are appropriately meeting the needs of the Welsh public.

COVID-19 has certainly highlighted that there is an urgent need to commission more courses in the field of infection prevention and control. There is a need to develop more specialist nurses in this field to ensure that leadership in research, and education is present to support both the NHS, community and primary health care and the wider social care sector of care homes and hospices and domiciliary care.

RECOMMENDATION

The Welsh Government/HEIW should plan nationally to expand the specialist nurse and consultant nurse roles. The numbers of infection prevention and control nurses needs to be increased.



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