



Thank you for providing the Royal College of Nursing Wales the opportunity to respond to the evidence session held with Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW). In your letter dated 29 November 2021, you asked for comments relating to the health and wellbeing of the workforce, digital skills and training.

### **Health and wellbeing of the workforce**

How effectively does A healthier Wales: our workforce strategy for health and social care address staff wellbeing?

The Royal College of Nursing Wales appreciates the forward-thinking behind the workforce strategy as a starting point for the development of an inclusive, engaged, sustainable and flexible workforce. However, we do not believe the strategy effectively addresses staff wellbeing and does not go far enough to address the underlying challenges facing nursing.

In our response to the draft strategy, RCN Wales called upon HEIW and SCW to be more ambitious and to go further in their aims and actions to tackle the nursing workforce challenges across Wales. This ambition now urgently needs to be demonstrated in the delivery plans that will support the strategy.

The strategy does not go far enough to address the underlying issues that are currently challenging the nursing workforce including access to Continued Professional Development (CPD), flexible working and career pathways.

For example, Action 5 is to 'incorporate a set of workforce wellbeing and engagement measures in the performance framework for organisations, and the broader health and social care system'. There has been work ongoing on wellbeing and HEIW's website does list a variety of resources, but to our knowledge there has not been any external work on a performance framework for organisation. This shows a lack of ambition and delays to the progress of the strategy.

Action 21 simply expresses an ambition to 'continue to invest in increasing the numbers of health and social care professionals who are trained in Wales, with a focus on value.'<sup>1</sup> There is no information regarding how this will be achieved, the number of places that will be invested in, what professional groups would benefit from this and what a 'focus on value' means.

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<sup>1</sup> [Health and Social Care Workforce Strategy - HEIW \(nhs.wales\)](https://www.nhs.uk/health-and-social-care-workforce-strategy/)

Action 24 aims to ‘develop a clear strategy for Continuing Professional Development (CPD) across professional and occupational groups.’<sup>2</sup> While this is a vital step is recognising the importance of CPD, assess to CPD differs across professions, doctors have protected time, nurses do not. Therefore an inter-professional strategy lacks ambition and will not go far enough to address the profession specific challenges associated with accessing CPD.

### What are your views on current approaches to assessing staff well-being?

There are a number of wellbeing initiatives being developed by health boards. For example in Aneurin Bevan, the health board has developed integrated capacity with the Employee Wellbeing Service to offer ‘on the ground support’. The health board also aims to establish a wellbeing and education centre at the Grange University Hospital.

However it is our view that there is no concerted national approach to promoting staff wellbeing: it is this national leadership and drive that is missing. As part of this approach the Royal College of Nursing Wales strongly recommends the Welsh Government introduce a nursing retention strategy as a means of improving staff wellbeing and thereby improving nursing retention.

A 2020 RCN Wales member survey included the question, “how do you think nurses and nursing staff in the NHS could be encouraged to keep nursing?” Nearly 90% of respondents said higher pay was important, with 44% naming it the single most important thing the Welsh Government could do to keep nursing staff working for the NHS. The second most popular answer (chosen by 41%) was to recruit more staff to enable better care and create a less pressured environment. Other factors that are important to RCN Wales members are safer working conditions, more flexible working opportunities, and more opportunities for continuous professional development.

An NHS nursing retention strategy must consider:

- Expanding Section 25B of the Nurse Staffing Levels (Wales) Act 2016 to provide safer working conditions.
- Moving away from the traditional NHS rostering system and providing greater flexibility of hours.
- Planning and Development of better career opportunities, and access to Continuing Professional Development to be undertaken during working hours.
- Simplifying the documentation nursing staff need to complete.

Are surveys as a standalone tool sufficient to provide an accurate picture of the wellbeing of the health and social care workforce? Are there other measures that you believe should be adopted?

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<sup>2</sup> [Health and Social Care Workforce Strategy - HEIW \(nhs.wales\)](https://www.nhs.uk/health-and-social-care-workforce-strategy/)

Anonymous surveys, with a large response rate are useful in providing quantitative snapshots of the current wellbeing of the health and social care workforce. As a data method that requires very little interaction, they are the quickest and easiest way of understanding complex matters. The Royal College of Nursing Wales has itself used surveys as a tool of member engagement.

However surveys only provide a snapshot of the workforce. It is important that to fully understand the wellbeing of the health and social care workforce qualitative data is gathered through various methods, i.e. focus groups. The Royal College of Nursing would also recommend ensuring survey findings are viewed alongside other data sets such as flexible working arrangements, exit interviews and issues raised at local partnership forums. This will provide a detailed analysis of the wellbeing of the workforce. For example if a survey finds that staff would prefer flexible working this needs to be viewed alongside current flexible working arrangements and what the employer offers.

### **Staff workload**

*“...working with trade union partners across the sector. Well-being is something that we do discuss through the partnership forums, and that's why we're really keen, as we're looking at the staff survey for next year, to see what else we can build in around the type of experience that staff are having.”*

In your view, are the partnership forums referred to above by HEIW operating effectively?

In 2021 HEIW created an 'External Advisory Group' (EAG) for stakeholders. The Royal College of Nursing was pleased to be included in this group. At the June 2021 meeting a presentation was given to EAG without advance notice on Education Training Plan purporting to set out plans for every single profession. In the presentation no pre or post registration nursing figures were shared, there was no information on Health Boards IMTPs or reference to the regulatory changes to the nursing pre-registration standards. Members of the group were informed that the plan would subsequently be ratified and then recommended to the Welsh Government. Subsequent to the EAG meeting a copy of the NHS Wales Training and Education Plan 20-222/23 marked 'final draft' was circulated to members by e-mail with no information as to the purpose of the circulation.

The Royal College of Nursing wrote to Alex Howells, Chief Executive of HEIW to express our concerns.

In October 2021 a Stakeholder Reference Group (SRG) was proposed to replace the EAG. The SRG would be established to build upon existing relationships with stakeholders, facilitate engagement, dialogue and feedback from stakeholder to inform HEIW's planning and decision making. The Royal College of Nursing is cautiously optimistic that this group will have a real input into the workings of HEIW.

To what extent is there sufficient staff capacity to ensure that workloads are manageable and that staff are able to take breaks, annual leave, access wellbeing support and undertake training and professional development?

No, there is not sufficient staff capacity to ensure workloads are manageable.

In 2020 Public Health Wales conducted a survey and found that over half (50.6%) of the nursing and midwifery workforce reported they frequently missed work breaks. To put this into context, a 'normal' shift for the nursing workforce is 12 hours. This demonstrates the physically demanding nature of the role. Furthermore despite 72.5% saying they had access to water on their shift, only 58.5% felt adequately hydrated.

Nurses and nursing staff have been on the forefront of the COVID-19 pandemic in every aspect of health and social care and many are feeling tired and burned out. A 2020 survey of 2,011 RCN Wales members found that the level of stress among respondents had increased, whilst the level of staff morale had decreased. Three quarters of members surveyed (75.9%) reported experiencing an increase in stress levels, whilst over half (58%) voiced that staff morale had worsened. 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.

Furthermore, members are worried about their mental health. Over half (52%) of respondents to our 2020 survey were concerned about their mental health. This is extremely worrying.

Is the picture improving or deteriorating, and do staff feel they are sufficiently supported in this respect by their organisations' leadership and management?

The picture is deteriorating. In the RCN's 2021 Employment survey, 65.4% of Welsh responses felt there was too much pressure on them, and 62% said they were too busy to provide the level of care they would like to.

According to the NMC register 15.8% of the registered workforce is 51-55 and approaching retirement.

Since the start of the COVID-19 pandemic a significant number of RCN members feel less valued by the Welsh Government and senior executive management in their organisation compared to before the pandemic. In a (June) 2020 RCN survey we found that over a third (34%) of members felt less valued by the Welsh Government compared to before the COVID-19 pandemic. This is the highest rate amongst all UK nations. For the first time in the RCN's history in Wales, members are considering taking industrial action against the Welsh Government, and NHS employers. This demonstrates the strength of feeling within the nursing workforce.

27% of respondents also felt less valued by senior executive management in their health organisation. In comparison 74% of those surveyed that felt more valued by the general public.

### **Digital training**

What are your views on the pilot approach to assessing staff's digital skills, capabilities and training needs? Is a self-assessment tool sufficient to identify where there are skills gaps across health and social care, and what further action is needed to ensure the health and social care workforce have the digital skills required.

Currently nursing staff do not feel they have enough time to provide the high quality patient care they would like, complete their mandatory training or take their breaks. If the use of the self-assessment tool is considered a priority there needs to be time allocated to facilitate this.

The Royal College of Nursing believes there is a need to recognise that many professions and sectors in health and social care lack access to basic technology such as email communication, mobile phones and cameras. Despite improving during the COVID-19 pandemic, a programme to ensure access to this type of technology in all areas where care is delivered would make a tremendous difference to the capabilities and productivity of the workforce. A structural governance connection and policy synergy are needed with the Informing Healthcare programme of work. In addition, any programme of technological development, including the self-assessment tool must take account of the need to function bilingually.

In addition when equipment is assessable, the nursing workforce have significantly difficulties accessing any form of professional development and learning due to current workforce pressures.

*“All my staff complete e-learning at home as we do not have time in work also the system is not always accessible. I make sure they get the time back. We do not have protected time for study!” (RCN Member, 2019)*

Professional development and learning are fundamental career-long requirements for every nurse and it is a requirement for successful revalidation by the Nursing and Midwifery Council. Yet, because of the difficulty of backfilling nurses on the team, some health boards have stopped all access to Continued Professional Development (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 2021 RCN employment survey revealed that only 63.7% of nursing staff indicated that they had completed all their mandatory training in 2020. Only 37% completed their training exclusively in working hours.

If nurses cannot complete even their mandatory training in working hours, there is very little chance the uptake of new *optional* training will be successful.

#### **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 27,000 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.

The RCN represents nurses and nursing, promotes excellence in nursing practice and shapes health and social care policy.