Policy and practice challenges facing nurses and the profession in the run up to the next General Election

6 Cs in Nursing – Hallam Conference Centre, London
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Howard Catton
Head of Policy and International Affairs
Where was nursing one year ago?

Why have so many nurses stopped CARING?

Health care assistants want to be regulated

Hospitals need more compassion, not cash

Mid Staffs: 14 hospitals under investigation

CNO promises ‘relentless focus’ on safety and staffing levels

Many nurses 'feel discouraged from raising care concerns

NHS to face chronic nurse shortage by 2016

Mid Staffordshire NHS scandal: Government accepts that student nurses need more hands-on experience

Nursing shortage drives hospitals overseas
Where are we one year on?

▲ 2,107 extra FTE qualified nurses, midwives and health visitors overall since May 2010
▼ But still 1,199 full time RNs short of where we were back in May 2010
▲ 4,554 extra FTE nurses in acute, elderly and general care
▼ But 2,900 fewer in mental health, 2,000 fewer in community services and 1,300 fewer in learning disabilities
▲ 14 hospitals in special measures being turned around taking on new clinical recruits with new board level leadership
▼ But NHS waiting times still missing targets, bed shortages continue and 39 NHS FTs report deficits.
▲ Nearly 1,200 more nursing students commissioned than last year (+6.6%)
▼ But hospitals still struggling to recruit to perhaps 20,000 full time vacancies and is it enough to ward off a crisis in nursing supply?
▲ NHS whistle-blowing contacts up by 20 per cent
▼ But 10% nursing staff still don’t feel safe raising concerns
Staffing levels

- Francis, Keogh and Berwick all highlighted importance of staffing levels and patient safety
- Gov response: no nurse to patient ratios but:
  - Trusts to publish staffing levels
  - Regular workforce reviews
  - NQB safe staffing guidance
  - NICE commissioned to produce guidance and validate workforce planning tools – acute adult inpatients work due July 2014 (but then the harder projects start!)
- Safe Staffing Alliance – ‘never more than 8’
- 24-hour, 7-day staffing: whole system issue, not just a case of more consultants in hospitals
- Evidence for safe staffing continues to grow: every extra patient added to a nurse’s workload associated with 7% increase in mortality odds for inpatients (Aiken, Rafferty et al., 2014)
Staffing levels
Getting it right for every setting

% change since April 2010

Maternity and Neonatal
Acute, Elderly and General
Paediatric
England Total
Community Services
All Mental Health
All Learning Disabilities

FTE qualified nursing, midwifery and HV staff, NHS hospital and community services, Apr 2010-Nov 2013 (HSCIC, 2014)
Skill mix
More than just a number

- RNs:HCAs – getting the mix right and ensuring appropriate education and training, decision-making and accountability
- Francis effect with renewed recruitment will not be enough to reverse significant skill mix dilution in recent years. Loss and devaluation of senior specialist and leadership roles.

FTE qualified nursing, midwifery and HV staff, NHS hospital and community services, Apr 2010 – Nov 2013 (HSCIC, 2014)
Workforce planning
Warding off a shortage

- CfWI (2013) supply and demand projections: shortage of 47,500 nurses by 2016
- HEE national workforce planning – 19,206 pre-reg nursing places commissioned 2014/15, up 6.5% on last year
  - Adult nursing +9%
  - Learning disabilities +4%
  - Mental health +1.5%
  - Post-reg district nursing +7%
- Not just attracting new staff – but keeping the ones we already have:
  - HEE return to practice review
  - NHS working longer review
  - Pay, working conditions
Education and training

- **HCSWs:**
  - New code of conduct and training standards
  - Cavendish review: ‘Certificate of fundamental care’
  - Uniform and titles
  - Gov: Voluntary not mandatory regulation

- **Year of Care pilot for student nurses and/or**

- **New Nursing Apprenticeship**
  - Willis: NO evidence that degree-level registration was damaging to patient care. Aiken, Rafferty et al: RN4CAST data found 10% increase in bachelor’s degree nurses associated with 7% decrease in surgical death rates

- **Other issues:**
  - Tackling the quality of mentorship and preceptorship
  - Ensuring nurses receive protected CPD and proper appraisals
### Professional regulation

#### NMC timeframe

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| Jan – March 2014    | • First of a two part consultation on revalidation and a revised NMC Code  
                     | • NMC Council meets on 26 March; likely to approve a public consultation on a registration fee increase to £120 |
| June – July 2014    | • Second consultation on revalidation and the revised NMC Code           |
| October 2014        | • NMC Council meets on 1 October; potential decision on registration fee increase plus revalidation model |
| Early 2015          | • Pilots of revalidation model across nursing practice settings         |
| December 2015       | • Deadline for revalidation to be rolled out for all nurses on the register |
Professional regulation
Revalidation – key questions

◆ Who should be able to give feedback?
◆ What kind of evidence should (or should not) be acceptable as a way to demonstrate nurses have received feedback on their practice?
◆ Every nurse must be confirmed as “fit to practise, in accordance with the NMC Code”, by a third party. Should a person who is not a registered nurse or midwife be able to confirm this?
◆ The role of Appraisal and employers in revalidating your registration
◆ Advanced Practice
◆ Responsible Officers
◆ What will it cost?
Management and leadership

- Strengthening the position of nurse leadership
  - Role of the CNO and the position in NHS England
  - Nursing voice at board level
  - Making the most of nurses in CCGs

- Ward managers/sisters
  - Francis: Ward managers should operate in a supervisory capacity, be visible to patients and staff alike, work alongside staff as a role model and mentor, developing clinical competencies and leadership skills within the team, monitoring performance and delivering training.
  - Gov accepted in principle but did not mandate that ward nurse managers operate solely in a supervisory capacity due to need for local flexibility. Principle included in 6 Cs action plans.
  - RCN: importance of getting staffing right to give leaders time to lead. Making a business case for supervisory ward managers.
Duty of candour

- Francis: statutory duty of candour for registered health care professionals.
  - Gov response rejected criminalisation of individuals to avoid “unintentionally create a culture of fear’
- Williams and Dalton Review
- New offence of wilful neglect
- Raising concerns – slightly better than last year but still significant room for improvement
  - 73% nursing staff feel safe raising concerns, 57% feel confident their organisation would address their concern (2013 NHS Staff Survey)
Looking forward to 2015
How do we deliver health care?

- Integrating health and social care
  - £3.8bn Better Care Fund
  - Is it happening and how do we measure outcomes?

- Shifting care from acute to community
  - Having staff in the right place

- Bringing together primary and community care

- The future for providers
  - The place of provider mergers within the competition framework
  - 24/7 services
  - The future of district general hospitals?
Looking forward to 2015
Commissioning and regulating health care

- **System regulation**
  - The roles of the CQC and Monitor

- **The future of commissioning**
  - Is it becoming fragmented?
  - Can they innovate?
  - Can they support integration?
  - Is there meaningful multi-professional involvement including nursing?
Looking forward to 2015
Funding the future health service

- Continued challenge of population growth and aging population at a time of financial restraint
- Changing Patient expectations and Technology
- But the Money ……
- 39 NHS FTs already reporting deficits
- Will ring-fencing of health care funding continue?
Thank you – any questions?

Response of the Royal College of Nursing

Mid Staffordshire NHS Foundation Trust Public Inquiry Report

Guidance on safe nurse staffing levels in the UK

Safe staffing for older people’s wards
RCN full report and recommendations

The weaknesses of voluntary regulation for health care support workers

Breaking down barriers, driving up standards

Frontline First
Running the red light
November 2013 special report

Protecting services improving care

howard.catton@rcn.org.uk