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Y Pwyllgor lechyd a Gofal Cymdeithasol

# **Health and Social Care Committee**

**Senedd Cymru** 

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#### **Welsh Parliament**

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Eluned Morgan MS

Minister for Health and Social Services

Welsh Government

28 February 2023

Dear Eluned

At its meeting on 26 January 2023, the Health and Social Care Committee held a scrutiny session with Sue Tranka, the Chief Nursing Officer for Wales (CNO), and Gill Knight, Nursing Officer for Workforce, Regulation, Nurse Staffing and Service Development, to discuss the CNO's priorities and issues affecting nurses and nursing in Wales.

A transcript of the meeting is available on our **website** but there were some issues arising that the Committee wanted to bring to your attention:

# The nursing workforce

The CNO told us this was a particularly difficult time for the nursing sector:

"I think it's really challenged. I think it's really very difficult currently. We have a growing number of vacancies, and I think there is work to be done. I'm not sure I would necessarily label it as 'crisis', but I think I would certainly say it is perhaps the most challenged position I have seen in my 31 years as a nurse."

#### **Recruitment and retention**

Concerns about nurse recruitment and retention are not new. The nursing shortage is a global issue. Other countries are also seeing high numbers of vacancies, and a growing reliance on international recruitment to fill posts.

Gill Knight advised that £260 million had been allocated in 2022-23 for healthcare professional education and training, providing the highest ever number of training opportunities in Wales.

However, the CNO confirmed that there was still a lot of work to be done in terms of attracting people to take up all those training places.



While we need to ensure that sufficient numbers of new nurses are being trained, improving nurse retention to keep experienced nurses in the workforce is one of the most important challenges to address. The CNO told us:

"...we have a workforce who are making decisions about the working conditions they are currently under, and making decisions to choose not to stay in nursing."

## Flexible working

The CNO told us that staff are increasingly looking for flexible working, opportunities for training and development, time to take breaks, and the right facilities and environment to enable this to happen. When asked if it was possible to change contracts in such a way as to provide flexibility to nurses to vary their working patterns, the CNO said that she believe it was already within the gift of health boards to enable flexibility within the provision of services:

"And there comes the balance, I think. There is a provision of service for patients that must be sustainable and has to be available, and I think in making those very difficult decisions, flexibility has to be built into that. I don't think it requires a contract change..."

She went on to talk about generational incentives to work in the NHS and the importance of understanding the different requirements of the different generations:

"...the younger generation that are coming through are very different to those of us that started in nursing 30, 40 years ago. They want something completely different. Their flexible working has a different meaning, and we have to be able to work with our newer generations to understand what they require. They want digital technology at their fingertips, and they want it in the workplace..."

The CNO said she was keen to retain the older workforce because they have such a richness of experience, so she was working with HEIW to develop a 'retired nurse network' to retain that expertise in the system:

"When they want to retire they can, but we bring them back to help us, on their terms and their conditions, and they can help the newer generations to settle in, to bed in to the new way of working, and to support them through either a mentor or a coach system."



## Use of agency staff

The CNO said there were a variety of reasons why nurses were choosing to work in other sectors, particularly the agency sector, including caring responsibilities, financial reasons and because it offered a different type of flexibility that the NHS was not yet able to offer.

She said she was concerned about the amount being spent on agency staff, however:

"That bill that you just mentioned a minute ago [£140 million] is exceptional. It's possibly the highest we have seen in Wales. Prior to the pandemic, the Welsh Government officials had done an incredible amount of work in reducing the agency bill."

Gill Knight subsequently confirmed that the annual expenditure for nursing and midwifery on agency staff was £53,846,000 in 2016-17 and £51,431,000 in 2017-2018.

The CNO advised that an 'effective use of resources' group had been set up to oversee efficiency and productivity work around agency, bank usage, looking at enhanced rates for our workforce, looking at the use of an all-Wales bank, and many other productivity measures:

"I think this is a really important one for us to consider and to also work out from the intelligence how we can bring those agency nurses back into the workforce. Because there is a way, and I think we have to be able to have some conversations that are open, honest, but also perhaps a little difficult in understanding what is it that will encourage our agency nurses back into our workforce."

### Wellbeing of the workforce

According to the CNO, since the pandemic, the workforce had been experiencing significant mental health, physical health and general health conditions:

"I think that is post-traumatic stress, moral injury and distress, and current circumstances will only lead you to have a look and see that nurses have made decisions about their own health in the workplace."

She said that a survey of nurses undertaken by Public Health Wales had shown that people felt they had to come to work if they weren't feeling well, and it was important that they knew they were not expected to come into the workplace if they were unwell. She also highlighted the importance of nurses being able to take a breaks and having a place to do so.

She went on to say that health boards were working on a number of things to ensure that nurses' health and well-being are being focused on:



"But my expectation is that health boards have early supported discussions with the workforce, that they are undertaking to signpost their workforce to the right places for support and help, that we identify quite early on when nurses require additional support from a mental health perspective or a different perspective, and that we are signposting our workforce to those places."

## **Nurse Staffing Levels (Wales) Act 2016**

The CNO said that compliance with the Act "remains high", but that there is variation across Wales:

"...what we are seeing is that there is a greater number of vacancies in some parts of the country than others, and north Wales is one of those organisations with a greater number of vacancies, not necessarily within the 25B wards, but across the entire organisation."

When asked about her ambitions for extending the Act further, the CNO highlighted that we're now operating in a "very different landscape":

"There is certainly, I think, scope to continue to monitor and get health boards as compliant with the Act as possible. I think it important also to say at this point that the Act, when developed nine years ago or so, I think was developed for a time and place and point in time, perhaps. I think the landscape is so very different now."

She said that while we always need compliance with legislation, she was not convinced that compliance with the Act was the sole requirement:

"...I think we need to think bigger and broader around how we actually use the Act to staff our wards in a way that is smart, that is different, that is multiprofessional in nature, because the Act is quite uniprofessional, as you can appreciate, and that is not how patients use our services nor how their care is delivered. So, I think there is a bit of work for us to do to consider the 'what next' with the Act."

#### Data

According to the CNO:

"...data is the thing that drives us all forward, data is what we base our improvements on and data is what we're looking for."

It is therefore disappointing that Wales is the only place in the UK that currently doesn't publish data on nurse vacancies.



The NMC register does not provide disaggregated retention data so it's not possible to identify whether there are particular specialties or health boards that are experiencing difficulties. We also heard that while health boards hold retention data for their own area, it is not collated and held centrally by the Welsh Government.

The CNO told us:

"...there is no reason why that data is not available other than we currently have a technological issue with getting that data through to us, and that is where the Minister has been really clear, and so have I, that not having transparency of data from a health board level on vacancies and retention in the way in which we would like to see it is not an acceptable position for us in Wales. We have to be able to address that, and we are currently working with HEIW to understand how we can get that data through on an all-Wales level."

We also heard that no data was collected on the age profile of agency nurses, or the areas in which they're employed.

We welcome the commitment in the National workforce implementation plan (published 1 February 2023) that, by June 2023, Welsh Government will publish NHS Wales vacancy data for the directly employed workforce. This data will assist us in our scrutiny work, as well as being of interest to health and social care stakeholders.

The issues we discussed with the CNO are important, and we will continue to consider them, and monitor progress, as we maintain our focus on the health and social care workforce throughout this Senedd

Yours sincerely

Russell George MS

Chair, Health and Social Care Committee

Croesewir gohebiaeth yn Gymraeg neu Saesneg. We welcome correspondence in Welsh or English.

cc Sue Tranka, Chief Nursing Officer for Wales

