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27 February 2014

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Dear David

I am writing to ask you for your support for a Committee Inquiry into community nursing.

The recent hospital reconfiguration has emphasised reducing hospital beds to enable people to be supported and cared for appropriately in their own homes. This is an aim the Royal College of Nursing wholeheartedly endorses.

This is why we are asking for the Committee to take a comprehensive overview of the situation for community nursing across Wales.

- Are there enough qualified nurses to support the patients they serve?
- What are, and should be, the relationships with social services, GPs and hospital based services?
- How do NHS community services work with independent nursing care homes, domiciliary care and third sector nursing?
- Is there sufficient development of appropriate IT support?

These are a few of the important questions we have. Attached with this letter is also a briefing on the wider issues involved.

Continued...

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Mae'r Coleg Nyrsio Brenhinol yn Goleg Brenhinol a sefydlwyd drwy Siarter Frenhinol ac Undeb Llafur Cofrestr Arbennig a sefydlwyd o dan Ddeddf Undebau Llafur a Chysylltiadau Llafur (Cydgrynhoi) 1992. The RCN is a Royal College set up by Royal Charter and a Special Register Trade Union established under the Trade Union and Labour Relations (Consolidation) Act 1992.

***Mae'r RCN yn cynrychioli nyrsys a
nyrsio, gan hyrwyddo rhagoriaeth
mewn arfer a llunio polisiau iechyd***

***The RCN represents nurses and
nursing, promotes excellence in
practice and shapes health policies***



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27 February 2014

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Thank-you for your support and please do not hesitate to contact me if you would like to discuss this matter further.

Kind regards

Yours sincerely

A handwritten signature in cursive script, appearing to read 'Tina Donnelly'.

TINA DONNELLY
DIRECTOR, RCN WALES

Taking Stock: Is Community Nursing able to cope with reconfiguration?

In 2010 the Welsh Government launched the Community Nursing Strategy. In 2011 Together for Health was described as setting out “how the NHS will look in five years time, with primary and community services at the centre of delivery”.

Since then the drive to shift care from the acute hospital to the community setting has continued apace with this ambition underlying the recent reconfiguration for the NHS in Wales.

Now is an excellent time therefore to take stock of the infrastructure of community nursing service, to celebrate innovative best practice and also to identify actions needed to strengthen services.

A Committee Inquiry could achieve all of this and provide a useful investigation of the following issues:

- How community nursing can work to integrate health and social care services
- The need to model safe and quality staffing measures
- The need to prepare the future workforce (including those transferring from an acute hospital environment)
- The need for basic workforce and information
- Assessing the impact of hospital reconfiguration on community nursing
- The role and contribution of the third sector
- The need for investment in children’s community nursing.
- ICT infrastructure
- The 24 nature of care and whether services can respond.
- The connection to palliative care services

Who might be interested in providing evidence to such an Inquiry?

- Professional Organisations (such as Royal College of GPs)
- Patient & Campaigning Groups (e.g. Age Concern, Diabetes Cymru)
- Community Health Councils
- Voluntary Organisations (e.g. Womens Institute)
- Health Boards
- Local Government (or organisations such ADSS)
- Trade Unions (e.g BMA)

Community Nursing: An introduction to the issues

Registered nurses working in the community can have many different job titles. For example they could be working in a care home, in a GP surgery, as part of a community team or as outreach staff from hospitals. They could be specifically qualified as a learning disability nurse, a school nurse or a Health Visitor (Specialist Community Public Health Nurse).

The work of nurses in the community encompasses the promotion of health, healing, growth and development, as well as the prevention and treatment of disease, illness, injury and disability. Community-based nurses, and the health care assistants who work with them, enable people to achieve, maintain or recover independence where possible, and minimise distress and promote quality of life where it is not.

Community Nurses:

- support families with the joys and stresses of a new baby;
- teach school children how to manage their asthma or diabetes and develop healthy lifestyles;
- enable adults with learning disabilities to live independently;
- assess and treat patients at local GP surgeries;
- provide clinical care and rehabilitation to people at home after an operation;
- help individuals with depression on the road to recovery;
- support people with health needs in the workplace;
- assist older people with a long term condition to remain independent;
- give dignified care to those who wish to die at home or in a hospice.

The list could go on. Few of us have not had reason to rely on a community nurse.

Nurses in the community are committed to meet the coming challenges but, historically, they have simply not benefited from the national vision and investment needed to provide us with the workforce we need today. Across the UK 27 per cent of NHS community nurses are over 50 and will have retired within the next 10 years.

We are simply not educating enough new staff to fill these posts, let alone increase services.

The RCN believes strongly that a renewed investment in the community nursing workforce is essential to support the reconfiguration process of the NHS in Wales. If the nation fails to invest in community nursing, the demand for acute health care is likely to increase.

District Nursing (DN): Special Concerns

District nurses across Wales report concerns and uncertainty about their current and future role. Without a renewed focus on the DN service across Wales, it is feared that a generalist nursing resource universally relied upon to support patients in homes and communities is in danger of disappearing.

A useful defining description of district nursing can be found in The Queen's Nursing Institute (QNI) report (2009) which asserts that *"nursing in the home is fundamentally different to nursing in clinical-type settings, in hospital or in primary care, and district nurses are specifically qualified to do it. District nursing work remains both preventive and supportive. It can also be highly technical, risk-taking, intensive and practical. The nature of the work is unpredictable and changeable; it requires district nurses to be responsive, flexible and adaptable."* The report describes the core values of the DN service as

- keeping people at home where they want to be;
- the relationship between nurse and patient as the prime therapeutic tool;
- the need to work with the whole family and their carers as a unit;
- the importance of expert assessment and care, both clinical and social; and
- the need to promote coping and independence, both practical and psychological."

District nurses could be considered the glue holding together the community nursing workforce – "specialists at being generalists" – jack of all trades in terms of clinical care, networks across health and social services – unique and necessary for untangling complexity and keeping patients safely at home

Appendix A - Community Nursing Numbers

WAG Commissioning of Community Nursing Post-registration Training Places
Statistics sourced from NLIAH

	2007	2008	2009	2010	2011-12
District Nurses	45	28	26	30	26-30
DN (modules)		98	40	40	50-107
Health Visitors	36	36	46	36	36-45
Community Psychiatric Nursing	13	21	21	21	20-33
CPNs (modules)		20	20	20	20-34
Community Learning Disability Nursing	3	2	3	2	0
CLDNs (modules)		4	6	10	4
School Nurse	22	24	24	24	22-34
School Nurse (modules)					25
Practice Nurses	20	16	18	16	16-37
PN (modules)		16	16	16	12

No. of District Nurses Sources from Stats Wales and presented to nearest whole number

	2007	2008	2009	2010	2011	2012
Number of District Nurses	1141	943	863	926	945	900
WTE District Nurses	755	836	745	806	823	780

NHS Nursing by area

Statistics sourced from Stats Wales and presented to nearest whole number. These figures are not for registered nurses only but include Healthcare Support Workers

	2007	2008	2009	2010	2011	2012
Acute, Elderly & General	32,831	18,591	18,651	18,726	18,531	18,560
WTE Acute, Elderly & General	16,392	16,134	16,048	16,072	15,908	15,950
No. of Community Psychiatry	1,128	1,086	1,261	1,220	1,326	1,414
WTE Community Psychiatry	968	1,012	1,168	1,130	1,232	1,312
Community Learning Disability	385	338	321	333	314	313
WTE Community Learning Disability	334	307	295	308	290	290
Community Services	4,850	3,849	4,240	4,292	4,347	4,411
WTE Community Services	3,116	3,156	3,336	3,413	3,485	3,548
School Nursing	167	162	184	256	298	309
WTE School Nursing	99	113	128	174	211	221
Neonatal	N/A	N/A	N/A	N/A	488	482
WTE neonatal	N/A	N/A	N/A	N/A	414	410