

WP 02

Ymchwiliad i barodrwydd ar gyfer y gaeaf 2016

Inquiry into winter preparedness 2016/17

Ymateb gan: Coleg Nyrsio Brenhinol

Response from: Royal College of Nursing



INQUIRY INTO WINTER PREPAREDNESS 2016/17

Submission from the Royal College of Nursing Wales

Presented to the National Assembly for Wales Health, Social Care and Sport Committee

09/09/16

ABOUT THE ROYAL COLLEGE OF NURSING (RCN)

The RCN is the world's largest professional union of nurses, representing 430,000 nurses, midwives, health visitors, health care support workers and nursing students, including over 25,000 members in Wales. RCN members work in a variety of settings including the NHS and the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession. The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing.

INQUIRY INTO WINTER PREPAREDNESS 2016/17

Submission from the Royal College of Nursing Wales

1. RCN Wales believes the traditional pressure experienced by health services (particularly in emergency care) during the winter period from November to March has in recent years becomes an all year concern.
2. This change is symptomatic of the broader pressures facing health and social care services. Historically, the focus has been on the provision of Accident and Emergency services however the pressures are wide ranging and multi factorial. The outcome of these pressures result in significant risk to the quality of patient care, safety and increased morbidity and mortality rates¹.

The current pressures facing unscheduled care services

3. The key pressures facing unscheduled care services are staff shortages which are a result of inadequate workforce planning. This chronic shortage of staff brings additional staff stressors which result in increased sickness and problems with retention². An additional factor is the retirement phenomenon where one third of the workforce is nearing retirement³
4. The rapid decline in District Nurses in recent years alongside the disinvestment in community Rapid Response Teams is increasing the pressures on other services⁴. This disinvestment of Primary and Community services in turn leads to unnecessary admissions to hospital which in turn leads to queues of ambulances outside of A&E departments and cancelled operations whilst delayed transfers of care affects the seamless transition between health and social care sectors.
5. Building better multidisciplinary care for people with complex needs would see a reduction in these unnecessary admissions⁵. In addition extended opening hours for GP surgeries⁶ and better use of Triage by the best person with the right skills

¹ Royal College of Nursing (2013) RCN Labour Market Review: Safe Staffing Levels- A National Imperative. The UK Nursing Workforce Labour Market Review 2015. London: NMC.

² Royal College of Nursing (2013) Beyond Breaking Point: A Survey of RCN Members in Health Wellbeing and Stress. London: RCN.

³ Institute for Employment Studies (2016) The Labour Market for Nurses in the UK and its relationship to the demand for and supply of International Nurses in the NHS. IES: Brighton.

⁴ BBC News . 2016. *Royal College of Nursing concern over fall in district nurses in Wales*. [ONLINE] Available at: <http://www.bbc.co.uk/news/uk-wales-36828072>. [Accessed 18 August 2016].

⁵ Edwards, N. (2014) *Community Services: How They Can Transform Care*. London. The Kings Fund.

⁶ PULSE. 2013. *Longer GP opening hours needed to boost productivity*. [ONLINE] Available at: <http://www.pulsetoday.co.uk/your-practice/regulation/longer-gp-opening-hours-needed-to-boost-productivity-says-monitor/20004689.fullarticle>. [Accessed 18 August 2016].

would alleviate pressures, improve the patient journey and lead to better outcomes⁷.

6. An additional pressure is the delay in the 'Go Live Dates' for the 111 service due to IT processes. The introduction of 111 was to amalgamate and streamline the current services of NHS Direct and the Out of Hours Service. The delay in implementation could potentially be adding to unscheduled care pressures due to lack of appropriate services and therefore patients being signposted to Accident and Emergency⁸.

Has been sufficient progress in the Fourth Assembly?

7. The Royal College of Nursing Wales does not believe there has been sufficient progress in making the NHS system more robust and effective at dealing with these demands. Attached as an Annex1 to this evidence is the document Emergency Care - A Call for Action 2009. This is a set of recommendations presented by the Royal College of Nursing Wales to improve the emergency care service to the Welsh Government in September 2009. Regrettably most of these calls for action are still relevant. We draw the Committee's attention in particular to recommendations 9 and 10 which call for investment in primary and community care.

The actions needed to produce sustainable improvements

8. The RCN is holding a conference on the 26th September 2016 in Cardiff to examine some of these issues to utilise our member's expertise. Committee Members and Secretariat are invited to attend and we would be delighted to welcome you. Topics areas for discussion will be: Emergency Care for the People of Wales; Opportunities & Challenges; Patient Flow; A Modern Responsive Emergency Department; The contribution of nursing to emergency care triage.
9. We would be happy to send a short note sharing the outcome of this conference to the Committee.
10. In conclusion RCN Wales believes the following actions are needed to produce sustainable improvements to urgent and emergency care services, and the whole system, ensuring the Welsh NHS builds resilience to seasonal demand and to improve the position for the future.

⁷ Department of Health (2015) Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values. DH: Williams Lea Publishers.

A mandate from the Government to Health Education England: April 2015 to March 2016

⁸ The King Fund . 2016. *What's going on in A&E?* [ONLINE] Available at:

<http://www.kingsfund.org.uk/projects/urgent-emergency-care/urgent-and-emergency-care-mythbusters?>
[Accessed 18 August 2016].

- Improved workforce planning to address the shortages of nurses, this should consider increasing the numbers of pre-registration places, better coordination and management of clinical placements.

- Improved coordination and management in relation to recruiting and retaining international nurses.

- Development and deployment of enhanced skill mix including triage to ensure the right people deliver the right care in the right place at the right time.

- Greater investment in, and increased access to the primary care team (including nurse practitioners with independent prescribing).

- Greater investment in community healthcare services with a particular reference to the need to increase the numbers of District Nurses and Rapid Response teams;

- Emphasis on citizen engagement to ensure patients access the right services for example extensive publicity of the 'Choose Well' campaign.