

Nursing and Midwifery Council's response to Health Education and Improvement Wales' and Social Care Wales' consultation on 'A Healthier Wales: A Workforce Strategy for Health and Social Care'

About us

- 1 As the professional regulator of nurses and midwives in the UK, and nursing associates in England, we work to ensure these professionals have the knowledge and skills to deliver consistent, quality care that keeps people safe.
- 2 We set the education standards professionals must achieve to practise in the UK. When they have shown both clinical excellence and a commitment to kindness, compassion and respect, we welcome them onto our register of nearly 700,000 professionals.
- 3 Once registered, nurses, midwives and nursing associates must uphold the standards and behaviours set out in our Code so that people can have confidence that they will consistently receive quality, safe care wherever they are treated. We promote lifelong learning through revalidation, encouraging professionals to reflect on their practice and how the Code applies in their day-to-day work.
- 4 On the rare occasions that care goes wrong, or falls short of people's expectations, we can step in to investigate, and take action when needed. But we want to prevent something going wrong in the first place. So, we promote a culture that encourages professionals to be open and learn from mistakes, gives the public an equal voice and where everyone involved is treated with kindness and compassion.

Summary

- 5 We welcome the opportunity to provide a response to this consultation. The health and care sectors in Wales are facing a period of intense challenge and uncertainty, and so this workforce strategy and the discussions that accompany it are well timed. Our response focuses on the areas which relate to our remit as a professional regulator, including recruitment and retention, education and supporting the workforce.
- 6 We are very keen to increase collaboration with Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW) in regards to any of the areas touched upon in the workforce strategy or in our response. We are currently planning an increased level of focus and engagement in Wales, and we view both organisations as key stakeholders.
- 7 Nurses and midwives perform one of the most important roles in health and care delivery across Wales, and a fully resourced and supported nursing and midwifery workforce is key to both service delivery and patient safety. As of March 2019

there were 36,001 nurses and midwives on our register with an address in Wales. This is a slight increase from 35,725 in 2018.¹ We approve five Approved Educational Institutions to deliver 116 nursing and midwifery programmes across Wales.

8 In summary, our views on the proposals in the consultation are:

- 8.1 We support the overall aims of the strategy and believe that the desired integration of health and social care in Wales is a positive development for people using services, the public and for health and social care professionals. We commend the fact that the strategy has been developed to cover both health and social care in Wales and to consider this as one system working together;
- 8.2 Nurses and midwives are the cornerstones of the workforce in Wales and are unique in that they work in a variety of settings, roles and capacities across both health and social care. Providing increased support for the nursing and midwifery workforce in Wales is paramount to realising the ambitions set out in the strategy;
- 8.3 We support the ambition of making the health and social care sector the 'employer of choice' in Wales. Nursing and midwifery are trusted professions and we believe that the public perception of them could be further improved if the varied and fulfilling roles available in the delivery of quality health and social care services were brought to the attention of a wider audience;
- 8.4 We agree that 'ensuring safe and open cultures' should be a key priority for the strategy. We believe that promoting a just culture that treats people who use services, their families and staff with fairness and respect is central to improving patient safety, and in improving staff experiences; and
- 8.5 We strongly agree with the priorities identified in the workforce strategy in regards to education and learning, and in particular making education and training more accessible throughout Wales, including via more flexible and innovative approaches, ensuring that education and training are aligned with the health and social care needs of the people of Wales; and
- 8.6 We strongly agree that Continuing Professional Development (CPD) is vital in supporting the workforce and with the priority of widening access to education and learning across Wales. We require all the professionals on our register to revalidate every three years. This demonstrates a continued ability to practise safely and effectively and supports continued learning and access to CPD is a key component of this.

To achieve the ambitions in the workforce strategy we believe the particular priorities for investment in education and training are:

¹ Nursing and Midwifery Council (2019) The NMC register – 31 March 2019: breakdown by country, <https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/nmc-register-data-march-19-breakdown-by-country.pdf>

8.6.1 Capacity for high quality clinical placements;

8.6.2 Quality of preceptorship; and

8.6.3 Time and resources for CPD.

9 We also believe that the workforce strategy should be accompanied by a focus on how its implementation can be achieved in practice. In our view, this can only be achieved through involvement and alignment with professional regulators, systems regulators and quality regulators. A more joined up approach across regulators in Wales would support the implementation of the workforce strategy and we are happy to work with HEIW and SCW to achieve this.

10 There are four key priorities we believe should underpin the workforce strategy, these are:

10.1.1 **Induction and support for new staff.** Induction and support for new staff is essential in ensuring that new members of staff can access the best possible opportunities to learn and develop and to feel a valued part of the workforce. We have expanded on this under question 17 under the theme of 'education and learning', including access to clinical placements and preceptorships. In addition to this we have highlighted in response to question six that we support the ambition of providing a value based, common induction programme but we believe this would be beneficial to the wider health and social care workforce as a whole, and not just to primary and community care;

10.1.2 **Tackling unprofessional behaviour.** Tackling unprofessional behaviour, and promoting a just culture that treats people who use services and their families and staff with fairness and respect is paramount in improving patient safety and supporting the workforce. We have set out our views on the importance of a just culture and tackling unprofessional behaviours in greater detail in response to question three on the theme of 'valuing & retaining our workforce';

10.1.3 **Leadership.** We strongly support the vision outlined under theme six of 'leadership', focusing on compassionate leadership and the importance of continuous improvement. These values are reflected in our Code, our new Fitness to Practise (FtP) strategy and our new nursing and midwifery standards. We have outlined our views on this in response to question 21 under the theme of 'leadership'; and

10.1.4 **CPD.** We believe that CPD is vital in supporting the workforce in Wales, including in regards to staff retention, and that good quality opportunities for post-registration learning lead to a more satisfied workforce able to provide good quality care. We have set out our views on this in greater detail in response to question 17 under the theme of 'education and learning'.

- 11 Since April 2019, we have been developing our new strategy for 2020-2025. We have been listening to the views of our partners, professionals on our register, and the public about the key issues facing health and social care services over the next five years, their impact on nursing and midwifery and what that means for the future of the NMC. From this we know that the top three issues those on our register would like to see addressed are staff shortages, pay and working conditions. While these issues are not within the remit of the NMC, we believe that bringing them to the attention of those responsible for funding, workforce and education is the right thing to do.

Our response to the consultation questions

Theme 1 – valuing & retaining our workforce

Q1 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 12 Yes. A workforce that feels valued, supported and developed is key to ensuring that services are delivered safely and effectively. This is also in line with the recommendations and aspirations outlined in the 2018 Parliamentary Review of Health and Social Care in Wales² and the Welsh Government’s ‘A Healthier Wales: our Plan for Health and Social Care’.³
- 13 In our response to the previous consultation we highlighted that 30% of nurses and midwives leaving our register mentioned that one of the reasons was too much pressure.⁴ We encourage HEIW and SCW to continue to consider these challenges and how the workforce strategy can be designed to alleviate these issues. In our response to theme five on ‘Education and learning’ we have set out in greater detail how this can be supported by investment in staff training and learning.
- 14 We also support the ambition of making the health and social care sector the ‘employer of choice’ in Wales (page 6 of the consultation document). Nursing and midwifery are trusted professions and we believe that the public perception could be further improved if more people were aware of the opportunities available. We encourage HEIW and SCW to consider how this would tie in with the workforce strategy and how awareness of these roles and opportunities can be enhanced.

Q3 – Are the emerging priorities and actions we have identified sufficient?

- 15 Yes. We support the priorities identified in the workforce strategy, including the focus on building parity of esteem, enhancing flexible career pathways and the focus on delivering seamless care.

² The Parliamentary Review of Health and Social Care in Wales: Final Report (2018)
<https://gov.wales/sites/default/files/publications/2018-01/Review-health-social-care-report-final.pdf>

³ Welsh Government (2018) A Healthier Wales
<https://www.basw.co.uk/system/files/resources/180608healthier-wales-mainen.pdf>

⁴ Nursing and Midwifery Council (2019) The NMC register – 31 March 2019,
<https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/nmc-register-data-march-19.pdf>

- 16 In addition to this we think it is important to emphasise that we fully support that the workforce strategy is identifying 'ensuring safe and open cultures' as an emerging priority.
- 17 We strongly believe that promoting a just culture that treats people who use services and their families and staff with fairness and respect is paramount in improving patient safety. Our new Fitness to Practice strategy, 'New Strategic Direction - Ensuring public safety, enabling professionalism'⁵ signals our commitment to moving away from a blame culture towards a just culture in health and social care and embedding the values of openness and learning that are central to a patient safety culture.
- 18 We believe that the professional duty of candour ties in with the emerging priority of 'ensuring safe and open cultures'. The professional duty of candour is essential in supporting health and social care professionals being open when things go wrong and the professional duty of candour is reflected in our Code⁶, our proposed new Fitness to Practise strategy and our new education standards.

Theme 2 – Seamless Working

Q5 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 19 Partially. We believe that the integration of health and social care in Wales is a positive development and a step in the right direction. Increases in life expectancy, demand for care and complexity of care are widely acknowledged as growing challenges for the health and social care workforce. We believe that effective workforce planning, including delivering seamless working, is paramount in delivering the right workforce with the right skills and ensuring high quality care and patient safety. This also ties in with the recommendation under theme seven on 'developing integrated workforce plans' and the nursing and midwifery workforce will be a key component of any such plan.
- 20 Nurses and midwives are in a unique position to contribute and enable multidisciplinary working as they work in a variety of settings, roles and capacities across both health and social care. We support the ambition of encouraging multi-disciplinary learning as long as nurses and midwives are working within their scope of practice and in line with our Code.
- 21 Our standards for student supervision and assessment provide the opportunity for student nurses to be supervised by any regulated health and social care professional, which fully supports inter-professional learning and a variety of placement learning opportunities across the health and social care spectrum. Likewise, the standards of proficiency for registered nurses apply across the four fields of adult; children; mental health and learning disabilities and expect the delivery of care to be personalised.

⁵ Nursing and Midwifery Council (2018) New strategic direction - Ensuring public safety, enabling professionalism,

https://www.nmc.org.uk/globalassets/sitedocuments/consultations/2018/ftp/ensuringpublicsafety_v6.pdf

⁶ Nursing and Midwifery Council (2018) The Code - Professional standards of practice and behaviour for nurses, midwives and nursing associates, <https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf>

- 22 We also support measures that prioritise further investment in nursing and midwifery via recruitment, retention and career development. This will help to build capacity, meet increasing demands and support this workforce to protect the public.

Q6 – If not – what is missing?

- 23 We support the potential action of providing a value based, common induction programme for all of the workforce (page 9 of the consultation document). However we believe that this should not be limited to primary and community care, but that it would be beneficial to the wider health and social care workforce as a whole.

Theme 3 – digital

Q9 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 24 Yes. The way that our healthcare services are delivered is going to be transformed by changes in technology in the years ahead. It is essential that technology is considered laterally as a theme across all parts of the strategy, including education and training, how health and care professionals work, and in how the public access services.

- 25 We agree with the vision in the workforce strategy of ‘a workforce who are competent, capable and confident to use digital technology’ (page 10 of the consultation document). This vision is aligned with our new standards of proficiency and they specifically take into account these considerations. For example, our Future Nurse proficiencies include that nurses must:

“demonstrate the numeracy, literacy, digital and technological skills required to meet the needs of people in their care to ensure safe and effective nursing practice” (page 9 of ‘Future nurse: Standards of proficiency for registered nurses’)⁷

- 26 In our view it would be helpful to consider how the ambitions outlined in the workforce strategy to deliver digital literacy programmes and embed digital literacy would interplay with the points we make throughout our response in regards to continued access to training for staff as well as funding for training.

Theme 4 – attraction and recruitment

Q13 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 27 Yes. We support the ambition to create opportunities to help young people consider a career in health and social care, or to support individuals who would consider a change to a career in health and social care. We also support the potential for using incentives and bursaries for shortage areas (page 12 of the

⁷ Nursing and Midwifery Council (2018) Future nurse: Standards of proficiency for registered nurses, <https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/future-nurse-proficiencies.pdf>

consultation document). We have set out our views on funding of training and education in more detail under theme five – ‘education and learning’.

- 28 As we stated earlier in our submission, making the health and care sector the ‘employer of choice’ and demonstrating to the wider public how enriching and rewarding such a career can be is key to this.
- 29 High quality nursing and midwifery education is important in attracting and recruiting individuals to these professions. Our new pre-registration nurse standards (and when agreed, the future midwife standards), which will be implemented over the next two years, set out ambitious expectations of enhanced clinical skills and knowledge.⁸ In regards to international recruitment we outlined in our response to the previous consultation that we are currently undertaking work to streamline and improve our international registration process.⁹

Theme 5 – education and learning

Q17 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 30 Yes. We strongly agree with the statements in the workforce strategy under this theme, including that:
- 30.1 CPD is vital in supporting the workforce and with the priority of widening access to education and learning across Wales;
- 30.2 Making education and training more accessible throughout Wales, including via more flexible and innovative approaches like apprenticeships and digital learning. We are supportive of innovative models however all nursing and midwifery training must meet our standards for education;¹⁰
- 30.3 Ensuring that education and training are aligned with the health and social care needs of the people of Wales;
- 30.4 Designing the funding of education and training to maximise programme throughput;
- 30.5 Enhancing existing strategic partnerships in health and social care to enable joint delivery of, and access to joint learning opportunities (page 15 and 16 of the consultation document); and
- 30.6 The potential action to commission quality improvement as part of undergraduate curricula. This also ties in with work we have undertaken in regards to our standards for nursing and midwifery education and our Future Nurse and Future Midwife work. As part of this our new standards

⁸ Nursing and Midwifery Council. Retrieved from: <https://www.nmc.org.uk/standards/standards-for-nurses/>

⁹ ‘NMC response to Health Education and Improvement Wales’ (HEIW) and Social Care Wales’ (SCW) consultation on the development of a Health and Social Care Workforce Strategy’, <https://www.nmc.org.uk/globalassets/sitedocuments/consultations/2019/nmc-response-to-scw-consultation-on-health-and-social-care-workforce-strategy-10.05.19.pdf>

¹⁰ Nursing and Midwifery Council. Retrieved from: <https://www.nmc.org.uk/education/our-role-in-education/>

have taken account of the service needs across the devolved countries and have looked ahead at the changing landscape of health and social care in order to future proof the standards to provide safer better care, including allowing for local innovation.

- 31 Funding of education and learning within health and social care systems impacts directly on workforce. As a regulator we are not in a position to comment on precise levels of funding required, however we have outlined below particular areas where we feel investment in the nursing and midwifery workforce should be focussed.
- 32 To achieve the ambitions in the workforce strategy we believe the particular priorities for investment in education and training are:
 - 32.1 Capacity for high quality clinical placements;
 - 32.2 Quality of preceptorship; and
 - 32.3 Time and resources for CPD.

Introduction of revalidation

- 33 In 2016 we introduced revalidation which requires all nurses, midwives and nursing associates in England to complete continuing post-registration essential learning activities in order to remain on our register.¹¹ This requirement was made partly in recognition of the fundamental importance of this for workforce retention and service transformation. Good quality opportunities for post-registration learning lead to a more satisfied workforce able to provide good quality care.
- 34 We require all the professionals on our register to revalidate every three years by meeting requirements including those for post-registration learning hours, reflection and feedback. Revalidation demonstrates a continued ability to practise safely and effectively and encourages professionals to stay up-to-date with professional practice and develop new skills and CPD is a key component of this. It fosters a culture of reflection, continual improvement and sharing best practice. We also believe that revalidation is an opportunity for employers to proactively promote training and continued learning.

Increasing funding for effective clinical placements

- 35 The opportunity to learn in practice is critical to effective nursing and midwifery education. High-quality practice learning is at risk in times of staff shortages and ongoing financial challenges. Supporting high quality education encourages the best and brightest to join and remain within the nursing and midwifery.
- 36 We know from recent work by the King's Fund and Nuffield Trust¹² that the availability of clinical placements in the workforce can act as a bottleneck in the

¹¹ Nursing and Midwifery Council, Revalidation, retrieved from: <https://www.nmc.org.uk/about-us/reports-and-accounts/revalidation-reports/>

¹² Closing the gap: Key areas for action on the health and care workforce (2019) <https://www.kingsfund.org.uk/sites/default/files/2019-03/closing-the-gap-health-care-workforce-fullreport.pdf#page=11>

training pipeline, and that the ability to support these placements is particularly challenging when services are under pressure and when budget cuts mean insufficient trainers are available to supervise.

- 37 50 percent of pre-registration training takes place in practice, and is delivered by current practising registrants who are also responsible for providing care to people who use services. Any increase in overall placement capacity through university recruitment is entirely dependent on having adequate numbers of sufficiently qualified nurses and midwives who have had appropriate training, and have sufficient time to supervise students. It is important that consideration of the former is not given without equal consideration of the latter.
- 38 We believe that when considering how to fund sufficient clinical placements, an integrated view should be taken across health and social care on how best to equip future nurses and midwives to provide the kind of care that the whole community needs. Thus clinical placements in social care settings such as nursing and care homes should become a key and normal component of pre-registration training. Workforce trends show that a career in the vitally important social care sector may be perceived as a less attractive option than say one in the NHS, and so clinical experiences outside acute settings can be a rewarding and career enriching experience for students, perhaps helping to reverse this trend.

Improving nursing and midwifery productivity and retention through funding for preceptorship and CPD

- 39 In addition to current registrants requiring sufficient CPD to be effective supervisors and assessors of students, preceptorship and CPD are also essential to improve nursing and midwifery productivity and support retention. We believe that this should be a key area of focus for the strategy.
- 40 A key factor in nurses and midwives leaving the workforce is the lack of focus on career development and learning. Last year, our data showed that across the four UK countries over 24,000 left the register.¹³ Reasons for leaving are multi-faceted but include a lack of sufficient opportunity for CPD.¹⁴
- 41 We would like to see concrete proposals around two groups who pose the greatest retention risk: early career professionals and 'affirmed practitioners'. Our data highlights that the number of people under 30 and over the age of 51 on our register is increasing.¹⁵ The former need access to a person who can provide ongoing guidance, help advice and support ('preceptorship') when commencing employment. This requires sufficient investment and capital but allows

¹³ Nursing and Midwifery Council, Register data tables, 31 March 2019. Retrieved from: <https://www.nmc.org.uk/about-us/reports-and-accounts/registration-statistics/>

¹⁴ Nursing and Midwifery Council (2019) Revalidation, Annual data report - Year 3: April 2018 to March 2019, https://www.nmc.org.uk/globalassets/sitedocuments/annual_reports_and_accounts/revalidationreports/revalidation-annual-report-year-3.pdf

¹⁵ Nursing and Midwifery Council, Register data tables, 31 March 2019. Retrieved from: <https://www.nmc.org.uk/about-us/reports-and-accounts/registration-statistics/>

consolidation of learning and promotes early career retention.¹⁶ We would be very keen to work with HEIW, SCW and other partners to discuss how to achieve this.

- 42 For those who have been in practice for longer who are at risk of experiencing burnout, we would like to see investment into career-long training.¹⁷ This would provide development opportunities for new roles and essential post-registration learning. Without this we risk losing this specialist group from frontline practice.
- 43 As nursing and midwifery evolves, members of the profession are assuming roles in higher risk and more complex activities, including diagnosis, and increasingly supporting treatment and care of people with multiple long-term conditions. This is of benefit to people who use services, but it will not be possible to deliver this ambition without adequate CPD to support the required learning. We continue to work with stakeholders and partners to further explore the potential regulatory approaches to advanced practice, and how this may add value.

Theme 6 - leadership

Q21 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 44 Yes. We strongly support the vision outlined within this theme which includes creating safe and open environments for people to suggest improvements or raise concerns, a focus on compassionate leadership and the importance of continuous improvement (page 17 of the consultation document).
- 45 We would welcome the opportunity to work more closely with HEIW and SCW to explore how these ambitions can be realised in Wales. For example, these values are reflected in our new nursing and midwifery standards, our Code, and in our new Fitness to Practice strategy which focuses on developing and supporting a just culture. We provided further comments on the importance of a just culture and continuous improvement under the questions to theme one.

Theme 7 – workforce shape

Q25 – Does this theme support the workforce transformation needed to deliver A Healthier Wales?

- 46 Yes. We strongly support the ambition of targeting key shortage areas and that this will include workforce planning and modelling, education and training. We have addressed these areas under the previous themes. We are also supportive of the development of integrated workforce plans and the nursing and midwifery workforce will be a key component of any such plan.
- 47 We hold substantial data on the nursing and midwifery professions, including aggregated information on training locations, work settings, scopes of practice and equality and diversity. We regularly publish this data on our website, with the most

¹⁶ ibid

¹⁷ Closing the gap: Key areas for action on the health and care workforce. (2019).

<https://www.kingsfund.org.uk/sites/default/files/2019-03/closing-the-gap-health-care-workforce-fullreport.pdf#page=11>

recent publication released on 8 May 2019.¹⁸ We welcome the opportunity to contribute where we can with the workforce strategy or any priorities stemming from it going forward.

Language – impact of the proposals on opportunities for people to use Welsh and treating the Welsh language no less favourably than the English language

Q26 - What effects do you think there would be?

- 48 We support the ambition of the workforce strategy that the Welsh workforce will be “reflective of the population’s diversity, Welsh language and cultural identity, with the right values, behaviours, skill and confidence to deliver care and support people’s wellbeing as close to home a possible” (page 5 of the consultation document). We believe that registrants, people who use services and their families and the public should be able to use the Welsh language however they wish to. We are fully committed to the principle that the English and Welsh languages will be treated on the basis of equality and this is set out in our Welsh Language Scheme.
- 49 We have not identified any scenario where the consultation proposal would impact on treating the Welsh no less favourably than the English.

¹⁸ Nursing and Midwifery Council (2019) The NMC register – 31 March 2019, <https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/nmc-register-data-march-19.pdf>