

Safe staffing, Scotland

Summary

Safe and effective staffing is one of the RCN's General Election manifesto asks as part of the Nursing Counts campaign.

RCN key messages

- RCN is calling for guaranteed safe and effective staffing levels in all health and care settings across the UK.
- There is clear evidence that the right number of registered nurses caring for patients is linked to better outcomes for patients and safer care.
- Safe staffing levels in every health and care setting will ensure that people using services are safe and well cared for, wherever they are.
- Safe staffing must be underpinned by a long term and robust approach to getting workforce planning right.

Why it's important

There is clear evidence that the right number of registered nurses caring for patients is linked to better outcomes for patients and safer care. The RCN recognises that there is no fixed ratio for getting this right – staffing levels need to change in response to the severity of patients' illness.

RCN believes that safe staffing levels in every health and care setting will ensure that people using services are safe and well cared for, wherever they are. That's why the RCN is calling for guaranteed safe and effective nurse staffing levels in each country in the UK.

What's happening in Scotland?

NHS boards in Scotland should already use the Nursing and Midwifery Workload and Workforce Planning (NMWWP) tools, which cover 98% of clinical areas in the NHS.

At Congress last year, First Minister Nicola Sturgeon MSP, announced that the Scottish Government would enshrine NMWWP tools in law. This means that a Bill would go through the Scottish Parliament, stating that NHS boards have to use the tools. RCN Scotland expects a Bill to be introduced to the Scottish Parliament in autumn 2017.

The Scottish Government launched a consultation a few weeks ago asking broad questions about what a Bill on safe staffing in Scotland should look like. The RCN will be responding to this consultation, and is already working with the Scottish Government to shape the proposed safe staffing Bill, from a professional and trade union perspective.

What's happening across England, Wales and Northern Ireland?

Safe staffing legislation which covers NHS hospitals has already been introduced in Wales. The RCN is continuing to campaign to ensure that this law improves the situation for nursing teams and their patients. The RCN is also working with the Welsh Government to extend the legislation to other areas of nursing.

In Northern Ireland there is no law on nurse staffing levels, but the Department of Health has outlined nurse staffing in the Delivering Care framework.

In England there is no law related to nurse staffing. NHS Trusts have not been told to use specific workforce planning tools, but resources and national guidance are used to support local decision making on staffing.

What should safe staffing look like in Scotland?

The RCN believes that there are a number of issues which any Scottish legislation must address:

The legislation must do more than just repeat in a Bill that NMWWP tools are to be used.

- Scotland's health boards have already been directed to use the tools. But this isn't resulting in the right workforce being in place to meet patient need.

Principles about quality and positive patient outcomes must be included in the legislation.

- Having the right staff, with the right skills, in the right place is about patient care. Safe staffing is not just about using workforce tools or allowing affordability to dictate how many nursing staff are needed.

The legislation should be strong enough to ensure that organisations which fail to meet safe staffing requirements are held to account.

- Scotland has a legal 12 week Treatment Time Guarantee for patients, but more than half of all NHS boards missed this in 2015-16, and faced no real penalties for doing so. The safe staffing legislation needs more teeth than this.

Safe staffing must address real time patient safety and quality challenges, and help effective long-term workforce planning. These are both issues which affect patient safety.

NMWWP tools cover over 98% of NHS nursing environments. The legislation should cover all these areas from the start.

- A phased approach risks skewing budget and resources towards areas which are covered by safe staffing laws.

People deserve the same levels of safety and quality, no matter who delivers nursing care.

- The Bill must make it easy to extend legislation to new settings – such as care homes – and help the push to develop new workforce tools that work outside the NHS.

Data is important but professional judgement from nursing leaders at ward/team level must be a core component.

- Any safe staffing law must recognise and require professional judgement, and nursing team leaders must be supported to be able to input their judgement effectively.
- Clinical data from sources such as care quality dashboards should be used.

Workforce planning should be transparent - organisations delivering health and care should be required to regularly publish how they are managing risk (specifically patient safety and quality) arising due to workforce pressures.

- It is important that organisations are clear and open about where staffing shortages occur because of a gap between the number of nursing staff required and the number that can be afforded or recruited.
- Nursing staff and the public need to have confidence in any safe staffing legislation and be able to see that it is making a real difference to safety and quality.

Performance monitoring is important.

- It should be clear that patient safety and quality is being maintained where it is already of a high standard, and improved where needed.

The Bill should enhance the multi-disciplinary team model.

- Legislation should not take funding away from professional colleagues, such as AHPs, because the focus is on nursing alone.