

The Nursing Workforce

IN SCOTLAND

**Review of
progress**

November 2024



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Nursing Workforce in Scotland - Review of progress

Key messages

1

Scotland's nursing workforce crisis shows little sign of improvement. While NHS vacancies have reduced over the past six months, the overall workforce is not growing and the figures mask the fact that the NHS is still thousands of nurses short. At the same time, the number of nurses leaving the NMC register within the first ten years is increasing, and the number of students applying to study for a nursing degree is falling. We are facing a serious nursing recruitment and retention crisis, which must be addressed.

2

The Scottish government and employers must do more to tackle the many issues around working environments, and pay, terms and conditions, to respect and value the expertise of the nursing profession. And this change needs to happen at a faster rate than it currently is.

3

Despite significant influencing work, progress towards meeting the 10 recommendations made in the 2024 Nursing Workforce in Scotland report (RCN 2024), has been mixed. On clarity around key parts of the National Care Service, we have gone backwards in the second half of 2024 and little has been done to improve workforce data.

4

The Nursing and Midwifery Taskforce has the potential to address a number of the recommendations made. However, a report from a Ministerial led Taskforce is only the first step in the process. Implementing these recommendations will take time and resourcing and RCN Scotland will continue to monitor progress after the Taskforce has reported.

5

RCN Scotland will continue to press for meaningful, sustainable and fully funded proposals to tackle persistent nursing vacancies, improve retention of staff and expand domestic recruitment.

6

We welcome the fact that stakeholders, including Scottish government appear to be taking the workforce crisis more seriously following the publication of the 2024 report. However, until we have meaningful, sustainable and fully funded actions which are being implemented, then the workforce crisis in health and social care will continue.

Nursing in health and social care

In May 2024, RCN Scotland published its third Nursing Workforce in Scotland report (RCN, 2024). The report outlines how Scotland's nursing workforce crisis shows little sign of improvement. Years of underinvestment and a lack of workforce planning is being compounded by poor population health, increasing clinical need and the fallout from the pandemic.

Again, our report set out trends in nursing workforce data which illustrated the extent and urgency of the staffing crisis facing Scotland's health and social care sectors. It made 10 new recommendations, which RCN Scotland believes are needed to retain and support existing staff and recruit and mentor new people to the profession.

This interim report, published six months on, tracks progress towards achieving these proposals. Acting as a reminder for decision makers, stakeholders and partners, they remain crucial if the staffing crisis which persists in nursing in health and social care is to be tackled. This report also updates members on what RCN Scotland has done, over the past six months, to influence for change on their behalf.

Staffing challenges remain acute. The latest NHS workforce statistics, which come before the busy winter period, show that there are 3,100 nursing vacancies in the NHS, including 2,300 Registered Nurses (NES 2024). This amounts to around 5% of posts lying vacant, added to a sickness absence rate which is well above the 4% target. As noted in our 2023 Workforce Report, access to robust nursing workforce data for social care is limited. The number of registered nurses employed directly by care homes for adults also continue to fall (SSSC, 2024), despite the acuity of residents rising, and providers continue to report difficulties in recruiting nursing staff (CCPS, 2024).

The May 2024 report was published as work on the Ministerial Nursing and Midwifery Taskforce and the Agenda for Change Review were already underway. Six months on, work on both continues. While RCN Scotland agrees there is a need to ensure we take time to get meaningful and sustainable actions from both these pieces of work, a sense of urgency about the crisis which exists in nursing is required. The 2024 report included quotes from our Sensemaker[®] which starkly highlighted the desperation felt by RCN members. That desperation is as acute as it has ever been.

Progress report

Five of the ten recommendations made in the 2024 Report are being considered by the Ministerial led Nursing and Midwifery Taskforce. Two others can be considered under the heading of 'Pay, Terms and Conditions'. The report also made recommendations on safe staffing, the National Care Service and data for workforce planning.

Progress on each of the ten recommendations is summarised as follows:

Ministerial Nursing and Midwifery Taskforce

Recommendation 1: During 2024 the Scottish government must have published an agreed set of recommendations and actions from the Ministerial Nursing and Midwifery Taskforce and have established an implementation board to oversee the delivery.

Recommendation 2: The Scottish government must develop and implement a fully funded nursing retention strategy that addresses wellbeing, workplace culture, development opportunities, flexible working and career progression by April 2025.

Recommendation 6: Issues with the effectiveness of the current nursing and midwifery workload and workforce planning tools must be addressed and adjustments to the amount of time allocated for breaks and predicted absence must be made to ensure the tools provide an accurate assessment of the number of nursing staff required to deliver safe patient care. An evidence based methodology for determining safe and effective staffing in the care home sector must be developed.

Recommendation 7: The Scottish government must expand the routes into nursing to grow the domestic workforce including an increase in the number of student places and a national pathway for nursing support workers who wish to become registered nurses to gain their nursing degree. As part of the package of support for students a cost-of-living increase to the nursing bursary and associated allowances is required to ensure students can complete their studies without financial hardship.

Recommendation 8: Employers must ensure a level of staffing and resources that allows senior charge nurses (SCNs) and their community nursing equivalents to be non-caseload holding, that protects the supernumerary status of nursing students, and provides the capacity to support new registrants, nurses new to a role or those recruited from overseas.

The Ministerial Taskforce on Nursing and Midwifery ('the Taskforce') was announced in February 2023 and recommendation 1 of the 2023 Workforce Report focused on the need to ensure that the Taskforce delivered funded, timely and meaningful actions. Building on this, recommendation 1 of the 2024 report set a target for publishing a set of actions from the Taskforce and, importantly, establishing an Implementation Board to oversee progress.

Work on the Taskforce has progressed primarily through discussion by four subgroups considering attraction & retention; wellbeing; education & development and culture & leadership. RCN Scotland has worked hard to ensure that the views of our members and the

experience of the nursing workforce, as described through the listening project, informed the work of the subgroups. We have, at times, been frustrated by some of the decision making by the Taskforce, however, we remain hopeful that, taken as a set of recommendations, what comes out of the Taskforce will benefit members overall.

Actions from the taskforce are nearly finalised and are expected to be published early in 2025. The Scottish Government has accepted a need for an implementation board, and we are hopeful that this will also be established in early 2025. Throughout our work on this, RCN Scotland has sought to balance the need to ensure timely progress with the need to have meaningful, sustainable and impactful actions.

The Taskforce is also relevant to **recommendation 2**. All subgroups considered retention of the workforce and RCN Scotland hopes that the recommendations as a whole, will amount to a nursing retention strategy. Wellbeing of staff has been considered in detail by the wellbeing subgroup, workplace culture has been discussed by culture & leadership, development opportunities have been considered by the education & development subgroup and flexible working and career progression are being addressed by the attraction & retention subgroup. While we have pushed for, and received assurances, that these actions will be fully funded, we are yet to see the detail and it is very unlikely that these actions will be implemented by April 2025.

Recommendation 6 is partially being addressed through the Taskforce and partly being addressed through separate work led by the Healthcare Staffing Programme, which RCN Scotland is heavily involved with. A number of the current workload and workforce planning tools are being reviewed as part of this programme. In terms of an evidence-based methodology for the care home sector, the Care Inspectorate has developed a staffing method framework (Care Inspectorate 2024) which took into account RCN Scotland input. The Care Inspectorate is currently considering how best to develop a staffing level tool for care homes and care at home services.

RCN Scotland is hopeful that **recommendation 7** will be delivered by recommendations made through the Taskforce. Unfortunately, recent UCAS figures (UCAS, 2024) indicate that attracting students to nursing degrees in Scotland remains challenging. Given the level of Registered Nurse vacancies which still exist in the NHS and social care, as well as the numbers of Registered Nurses expected to retire in the next few years, much more needs to be done to expand routes into nursing. This academic year, there has been some reports of newly qualified nurses finding it difficult to find jobs (BBC, 2024). RCN Scotland is clear that this should not be taken as a reason to reduce student numbers given the amount of vacancies nationwide as well as the fact that vacancies vary throughout the year.

In discussions at the Taskforce, RCN Scotland has pushed for recognition of the leadership role of Senior Charge Nurses, as called for in **Recommendation 8**. The Taskforce is likely to make recommendations around ensuring that leaders have protected time to supervise staff to meet their needs, but RCN Scotland will continue to call for the Senior Charge Nurse role to be non-caseload holding.

Pay, terms and conditions

Recommendation 3: Scottish government and employers must ensure that registered nurses and nursing support workers, wherever they work, have fair pay, good employment terms and safe working conditions that reflect their safety critical role. Future pay awards should be restorative and be commensurate with the demands of the role and the level of education required.

Recommendation 4: The Scottish government and NHS employers must implement the three elements of the Agenda for Change review - protected time for learning, shorter working week and review of band 5 nursing roles - in full and nursing staff supported to challenge where employers are not delivering on these commitments.

Agenda for Change Staff were offered a 5.5% pay increase for 2024-25. Between 27 August and 20 September, just over half of eligible RCN members in Scotland responded to a ballot on this offer and of those, 61% voted to accept it. A significant minority voted to reject the offer, a demonstration of continued frustration and concern about the nursing workforce crisis facing Scotland's NHS. The 5.5% pay increase does not make up for the years of being undervalued but it is another step on the journey to fair pay. The pay uplift also only applies to AfC staff working for the NHS and so does not directly address underpay in the independent sector, including social care. The Scottish Government has provided funding to GP practices to provide a 5.5% pay uplift to all staff, but some GPNs are yet to receive this. RCN Scotland has encouraged GPNs who are yet to receive a backdated pay rise, to speak to their employer and contact us.

Despite making it clear to the Scottish government that we expect negotiations for 2025-26 to commence in a timely fashion, there has been little movement and the joint trade unions have expressed their frustration and concern about the delay. We will continue to push for future pay awards to be restorative, as called for by **recommendation 3**.

Work to implement protected time for learning, the shorter working week and the review of band 5 nursing roles, as called for by **recommendation 4** is not moving as quickly as expected and members are yet to feel the full benefit of these changes. Again, we have expressed our frustration and disappointment at the pace of progress. RCN Scotland will continue to monitor and support members in ensuring that protected time is available and the shorter working week is being implemented across services. A portal for band 5 reviews was launched in the summer and RCN Scotland continues to promote this to members and provide resources to support those who wish to apply for a review.

Safe staffing

Recommendation 5: The Scottish government must evaluate the implementation of the Health and Care (Staffing) (Scotland) Act 2019, including a review of the funding and resources for health and care employers to meet their duties under the Act. An annual parliamentary debate on safe staffing should ensure ongoing scrutiny.

Since April 2024, Health Boards have been producing quarterly reports from lead clinicians on the extent to which they consider the duties under the Health and Care (Staffing) (Scotland) Act 2019 are being met. In turn, by May 2025, Health Boards must produce an annual report on the implementation of the Act for Scottish Ministers. RCN Scotland is monitoring progress and have had discussion with stakeholders, including Members of the Scottish Parliament about how to scrutinise implementation of this important piece of legislation. We expect an annual parliamentary debate on the legislation, once these annual reports have been published, as outlined by **recommendation 5**.

National Care Service

Recommendation 9: Development of the National Care Service must recognise the essential role of the registered nurse in community services and care homes and ensure that clear clinical and professional governance processes are embedded within reformed structures.

The current proposals for the National Care Service are, arguably, even less clear in terms of governance processes than when **recommendation 9** was made. Since then, the Scottish Government has produced draft amendments which rewrite most of the Bill and seek to establish a shared accountability framework. The next stage of the Bill has now been further delayed. It is still unclear what services will be included in the NCS and the governance of the NCS will be shared by multiple bodies in a complex and unclear arrangement. RCN Scotland has seen little evidence of an increased recognition of the role of the Registered Nurse in community services or care homes. One of primary asks at Stage 2 of the National Care Service (Scotland) Bill remains for these two issues to be addressed.

Because no progress has been made towards meeting **recommendation 9**, RCN Scotland remains of the view that the Bill will do little to address the crisis in community health and social care and the Scottish Government would be better focusing on ensuring fair work is delivered in social care.

Data for workforce planning

Recommendation 10: The data being used to inform workforce planning must be improved. This includes addressing the gaps in the workforce data for the NHS, social care and general practice, and publishing data by professional group on staff absence and bank and agency use on a quarterly basis for additional transparency.

The accuracy of vacancy data has been acknowledged by NHS Education for Scotland and RCN Scotland continues to call for gaps in workforce data to be addressed. To date, no significant changes have been made on staff absence, bank or agency use data and as such Recommendation 10 remains largely unaddressed. The implementation of Health and Care (Staffing) (Scotland) Act 2019 represents an opportunity to improve a lot of this data as duties to report more regularly on staffing have now been imposed on health boards. Meaningful workforce planning across health and social care cannot realistically happen with improvements to the data held on staffing and so if Scottish government is serious about ensuring a sustainable future for services, this is a step which needs to be taken.

Conclusion

The staffing crisis within health and social care continues and the impact on the safety and quality of patient care is being felt across the country. Overcrowding and care in inappropriate places, as a direct result of the lack of capacity within community health and social care services, are being normalised in hospitals across Scotland.

NHS Scotland requires more than 3,000 nursing staff than it currently has and social care providers continue to struggle to find nursing staff. This workforce has been through the pandemic and years of staff shortages and are left feel overworked and undervalued.

The Nursing and Midwifery Taskforce is a significant opportunity to tackle some of the issues which are making it difficult to attract and retain the nursing workforce that we need. There is increasing public debate about the sustainability of the NHS and social care services. The workforce requirements must be central to this debate and as the largest professional group, the voice of nursing must be heard.

References

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Published by the Royal College of Nursing, 20 Cavendish Square, London W1G 0RN © 2024 Royal College of Nursing.

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Royal College
of Nursing
Scotland

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

Published by the Royal College of Nursing

Date: November 2024



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