

Royal College of Nursing written evidence to the House of Commons Public Accounts Committee inquiry into Sustainability and Transformation in the NHS, Thursday 5th March 2018

1. The RCN is supportive of the stated aims and underpinning objectives of sustainability and transformation in the NHS in England but we have concerns about how this is applied in practice.
2. For successful delivery of these ambitious changes the Government must ensure that adequate funding is made available. Organisational transformation of this kind cannot be achieved safely and effectively without funding transitional costs to ensure that standards of patient care are maintained. The Sustainability and Transformation Fund is inadequate for this purpose and many Sustainability and Transformation Partnership plans suggest this is to be used to plug funding gaps rather than to genuinely support transition and transformation.
3. These ambitious changes must also be seen in the context of existing demands on the system. The health and care system in England is under unprecedented pressure. Figures recently published by NHS Improvement show that over 35,000 nurse posts in the health service in England are currently vacantⁱ. From May 2010 to September 2017 there were nearly 12,000 more nurses employed in acute hospitals. The decision to increase nurse staffing levels in hospitals was a direct response to the Francis report which highlighted poor nursing care contributed to the failings at Mid Staffordshire NHS Foundation Trustⁱⁱ. However, over the same period, the nursing workforce in community services has shrunk by 15% (over 6,000 FTE posts)ⁱⁱⁱ. This is alongside cuts of 60% to funding for continuing professional development for nursing staff, including training for nurses to mentor and supervise nursing apprentices and preventing staff from advancing their training and skills.
4. This strain, coupled with rising patient demand for services and challenges such as A&E waiting times, is combined with sustainability and transformation plans that often seek to implement significant organisational and cultural changes to improve population health outcomes. There is a serious risk that the system, and the people working within it, are being asked to achieve more than the current capacity and resources that are in place to deliver.
5. Any changes to service provision must be evidence-based, focused on the needs and safety of patients, and once agreed, must be fully funded, including transformation costs. The Government needs to ensure necessary funding is available to support effective implementation of any service redesign. This includes ensuring appropriate nurse staffing levels for safe and effective patient care, including support for improving the recruitment and retention of the nursing workforce.
6. Many Sustainability and Transformation Partnerships have drawn-up plans which focus primarily on addressing the deficits of their constituent organisations and, as a consequence of that approach, on reducing or removing services or treatment options. We are also aware of some plans proposing reductions in overall nursing numbers, or substitution of registered nurse posts with support staff roles, although we appreciate that these run counter to comments made by NHS England that “*The NHS will need more registered nurses in 2020 than today, as will the social care system. HEE forecasts growth of at least 6,000 extra nurses but this could be considerably higher...*”^{iv}. Without

a clear evidence base for decisions about changes and/or reductions in the numbers and types of staff, and a transparent impact assessment regarding patient safety and experience, health outcomes staff working conditions, this practice is totally unacceptable.

7. Government must also ensure monies are directed to improving the supply of new entrants into the workforce, as well as retaining nursing staff currently in service. There is sufficient evidence that nursing staffing levels are critical to delivering safe and effective services, across health and care settings, in terms of quality, experience, outcomes and mortality rates, as well as multi-disciplinary team productivity. For example, a recent Health Foundation report^{vi} found that hospitals with a higher proportion of nurses have higher consultant productivity. Increasing the proportion of nurses in a hospital by 4% was associated with 1% more activity per consultant.
8. It is also crucial to consider the impact of cuts to local authority funding, which have reduced the monies available for social care and public health provision, with the consequence of driving up need for healthcare, particularly for acute services, and which run counter to the policy direction set out within the Five Year Forward View.
9. In summary, funding decisions should be based on a genuine analysis of expected demand, what services will be provided, and how they will be delivered. We cannot go on with a top-down approach that then imposes service level requirements that fail to be reflected in funding settlements. This needs also to recognise that service transformation needs itself to be properly resourced if it is to be implemented effectively and deliver benefits, included efficiency savings where appropriate, in the longer term.

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About the Royal College of Nursing

The RCN is the voice of nursing across the UK and the largest professional union of nursing staff in the world.

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ⁱ <https://improvement.nhs.uk/resources/quarterly-performance-nhs-provider-sector-quarter-3-201718/>

ⁱⁱ <http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffspublicinquiry.com/>

ⁱⁱⁱ https://digital.nhs.uk/media/34470/NHS-Workforce-Statistics-September-2017-Staff-Group-Area-and-Level-xlsx/default/NHS_Workforce_Statistics_September_2017_Staff_Group_Area_and_Level

^{iv} See page 55 of *Next Steps on the Five Year Forward View* (<https://www.england.nhs.uk/five-year-forward-view/next-steps-on-the-nhs-five-year-forward-view/>)

^v See page 55 of *Next Steps on the Five Year Forward View* (<https://www.england.nhs.uk/five-year-forward-view/next-steps-on-the-nhs-five-year-forward-view/>)

^{vi} <http://www.health.org.uk/publication/year-of-plenty>