

## RCN Wales Board Open Session Agenda

**Date:** 14 February 2025

**Time:** 09:00 - 13:00

**Venue:** Seminar rooms A & B - RCN Wales, Ty Maeth, King George V Drive East, Cardiff CF14 4XZ

Time	No.	Item	Information
09:00	1.	<b>Welcome</b>	(Verbal Report)
		1.1. Apologies for Absence	(Verbal Report)
		1.2. Declarations of Interest	(Verbal Report)
	2.	<b>Minutes and Actions from the Previous Meeting</b>	
09:05		2.1. To agree the accuracy of the minutes of the open meeting of the RCN Wales Board on 20 September 2025	(Pages 3 - 11)
09:15		2.2. To review the action list from the last meeting	(Page 12)
09:25		2.3. Matters arising not covered by the agenda - to raise.	(Verbal Report)
	3.	<b>OPERATIONAL UPDATES</b>	
09:30		3.1. RCN Wales Board Chair's Report - to note.	(Pages 13 - 20)
09:40		3.2. Executive Director, RCN Wales Report - to note.	(Pages 21 - 25)
09:50		3.3. Social Partnership Council	(Pages 26 - 29)
10:00		3.4. Correspondence - to note.	(Pages 30 - 33)

<b>10:05</b>		3.5. EDI Strategy	(Verbal Report)
<b>10:20</b>		3.6. Corridor Care Campaign	(Pages 34 - 38)
<b>10:40</b>		3.7. Policy & Public Affairs Impact Report - to note.	(Pages 39 - 91)

Page 1 of 2

RCN Wales Board Open Session 14 February 2025

**11:00 COFFEE**

	<b>4.</b>	<b>STRATEGIC UPDATES</b>	
<b>11:15</b>		4.1. NHS Wales Partnership Forum	(Pages 92 - 100)
<b>11:30</b>		4.2. RCN Wales Nurse of the Year	(Pages 101 - 109)
	<b>5.</b>	<b>ITEMS TO NOTE</b>	
<b>11:40</b>		5.1. Report from RCN Council meetings held on 30 & 31 October 2024	(Pages 110 - 112)
<b>11:45</b>		5.2. Report from Trade Union Committee meetings held on 11 July, 18 September and 19 November 2024.	(Pages 113 - 134)
<b>11:50</b>		5.3. Report from the Professional Nursing Committee held on 17 September and 19 November 2024	(Pages 135 - 147)
<b>11:55</b>		5.4. Report from the UK Reps Committees held on 8 October, 24 October and 29 October 2024	(Pages 148 - 155)
<b>12:00</b>		5.5. Report from the Students Committee	(Pages 156 - 158)
<b>12:05</b>		5.6. Education Commissioning numbers (HEIW to come)	
<b>12:25</b>		5.7. Tara Rees - NOTY	
<b>12:55</b>	<b>6.</b>	<b>Any Other Business</b>	(Verbal Report)
<b>13:00</b>		<b>Close of meeting</b>	

**Date of next meeting: 12/13 June 2025**

# **EXECUTIVE DIRECTOR, RCN WALES**

RCN Wales Board Open Session 14 February 2025

Page 2 of 2

## RCN Wales Board

---

### Minutes of the open meeting held on 20 September 2024

#### Present

Jackie Davies

Steve Watson

Dr Carolyn Middleton

Alison Magor

Catherine Jones

Gaynor Jones

Mark Crothers

Nicola Milligan

Rhian Smith

Richard Hughes

Suma John

Susan Williams

#### Position

Chair, RCN Wales Board / Wales member on the Trade Union Committee

Vice Chair / Council member for Wales

Wales member on Professional Nursing Committee

Board member

Board member

Board member

Board member

Board member

Board member

Board member

Board member

Board member

#### Apologies

Anne Stevenson

Euan Hails

Lynne Puckett

Sandy Harding

Board member

Board member

Board member

Associate Director of Nursing (Professional Practice)

#### In attendance

Helen Whyley

Nicky Hughes

Helen Carlyon

Katie Branch

Heather Searle

Executive Director, RCN Wales

Associate Director of Nursing (Employment Relations)

Finance & Business Continuity Manager

Quality & Events Manager

Executive Assistant to the Executive Director

#### Observers

Harriet Brimage

Kelly Andrews

RCN Officer – Job Evaluation Project

Wales Pay, Terms & Conditions Delivery Lead

## **1. WELCOME**

### **1.1. Apologies for Absence**

The Board Chair welcomed everyone to the Open session.

Apologies had been received from Board members, Anne Stevenson, Euan Hails and Lynne Puckett. The Associate Director of Nursing (Professional Practice) also gave apologies.

It was noted the Wales member on Professional Nursing Committee will need to leave the meeting early.

### **1.2. Declaration of Interests**

The Chair asked Board members to declare any possible interests with any items on the agenda.

Board member Richard Hughes declared he is a member of a group advising the Chief Nursing Officer.

## **2. MINUTES AND ACTIONS**

### **2.1 Minutes from the previous meeting**

Minutes of the Board meeting held on 10 May 2024 had been circulated and were approved as an accurate record of the meeting.

### **2.2 Review of Action Sheet**

All actions were either noted as completed or updated on the action sheet.

### **2.3 Matters Arising**

There were no further matters arising.

## **3. OPERATIONAL UPDATES**

### **3.1 RCN Wales Board Chair's Report**

A report had been received and was noted.

There were no questions or comments from the Board.

### **3.2 Executive Director, RCN Wales Report**

A report had been received and was noted.

The Executive Director took the Board through the report and highlighted the following:

- A meeting was held with the Executive Directors of Nursing (EDoNs) regarding the ratio campaign. Discussion was had around shared ideas to reflect the methodology in the Staffing Act. There are concerns from the EDoNs over setting numbers and context and deliverability need to be taken into account. A report will come to Board when there has been more discussion and output.
- A series of meetings have taken place with regards unscheduled care in inappropriate areas.
- The visit from the Canadian Federation of Nurses Unions (CFNU) was very well received. Visits were made to a number of settings in Wales and a report from the CFNU outlining shared learning will be produced. An invite to attend the CFNU Summit in Ottawa in November has been received.

The Board commented that it was very positive experience to meet and engage with colleagues from the CFNU.

### **3.3 Correspondence report**

A report had been received and was noted.

The Executive Director reminded the Board that correspondence is available to view by contacting the Executive Director's office.

The following correspondence was highlighted:

- There has now been a response from the Chief Nursing Officer regarding the sponsorship of a place on the leadership programme.
- The last letter to the Chief Nursing Officer attaching the RCN Report into investigations rising suicidal ideation amongst nursing staff is still outstanding but is recent.

### **3.4 Policy, Parliamentary & Public Affairs Impact Report A**

report had been received and was noted.

The Policy, Parliamentary & Public Affairs Manager, joined the meeting and highlighted the following:

- The Board are asked for any views on the planned activities, consultations and committee inquiries listed in the paper.
- The report outlines the main influencing activities and outcomes of RCN Wales in the period since the last Board and any relevant public, political and policy developments that have occurred. It also outlines the influencing priorities of the team for the immediate future.

- A relationship is being developed with the new Cabinet Secretary for Health and Social Care. There is around nine months to develop the RCN Wales manifesto and campaign in preparation for the 2026 Senedd election.
- The next Nursing in Numbers publication will be finished this year. Publications for learning disability and Consultant Nurses are also being finalised.
- Plans are underway regarding the corridor care campaign.
- The Policy, Parliamentary and Public Affairs Manager has recently been named as one of the most influential people for campaigning for change. Featuring in the 'Your Voice' exhibition to celebrate 25 years of the Senedd.

The Board enquired whether health boards are still compliant with the Staffing Act. It was confirmed that RCN Wales ensures scrutiny is maintained and a further Progress and Challenge report will be carried out next year. Following the recent parliamentary report into the Act, the Chief Nursing Officer and Health Minister have compiled reports with recommendations. One of these is to revise the guidance under section 25b considering the registered nursing role and the need to avoid substitution.

The Board congratulated the Policy, Parliamentary and Public Affairs Manager on the 'Your Voice' exhibition.

#### **4. NHS Executive**

Tracey Breheny, Director for Strategy and Corporate Business and Nick Wood, Deputy Chief Executive NHS Wales from the NHS Executive joined the meeting via Teams to present to the Board.

The presentation gave an overview of the NHS Executive and its governance, accountability, and operating models. It showed a description of the various Directorates and functions, the current areas of focus and planned work in 2024/25.

The Board enquired about the role of health boards in targeted interventions or special measures. It was confirmed that these decisions are taken on the advice of the Director General and Health Education Improvement Wales (HEIW). The NHS Executive has a role in gaining evidence to support the decision to escalate or deescalate.

The Board enquired whether the emphasis would change due to the First Minister announcing priorities for NHS planned care and waiting times. The Board were advised that these are already included in current workplans and progress is being made. The three main priorities for the group are women's health, access to social care and waiting times. There is work operationally to integrate social care at each level of governance.

The Board Chair thanked Tracey Breheny and Nick Wood for their presentation.

## **5. STRATEGIC UPDATES**

### **5.1 Congress Review**

The Executive Director for RCN England joined the meeting via Teams and gave a presentation. The presentation will be given to all Board and Committees to outline the review into RCN Congress.

- Council have approved a review into Congress to ensure it is financially and environmentally sustainable, inclusive and is seen as a valued event by the whole membership not just attendees.
- Currently around 3000 members attend which represents 0.5% of RCN membership. Congress 2024 cost around £3million.
- The Carr and KPMG reports recommended RCN develop proposals to amend the structure and reduce the duration of Congress to increase uptake.
- All Boards and Committees will be invited to complete a survey by the end of October to provide a collective view.
- Following the review, any changes will be implemented in 2027.

The Chair thanked the Executive Director for RCN England for joining the Board meeting.

**ACTION - A meeting will be arranged for Board members to complete the Congress survey.**

### **5.2 Equity, Diversity and Inclusion Strategy**

The Chief People Officer joined the meeting via Teams and gave a presentation regarding the new group strategy which includes RCNi and RCN Foundation.

- There are five themes to the strategy and 37 commitments that sit under the themes. The strategy lasts three years but will go beyond this to embed fully across all RCN work and become business as usual.
- The EDI Strategy Programme Board has been set up internally, to meet every two months. There are several workstreams set up to meet the commitments.
- The EDI Committee, chaired by the Chief People Officer has members representing various groups. RCN Wales Board Chair sits on this group which reports to Council. The group is advisory and will engage with the strategy and input into the deliverables.

### **5.3 NHS Wales Partnership Forum**

A report had been received and was noted.



The Associate Director (Employment Relations) took the Board through the paper and the following was highlighted:

- The Welsh Partnership Forum (WPF) is how unions, workforce directors and Welsh Government work together in social partnership. The Business Committee sits underneath the WPF to review and update policies. The agenda from the last meeting in July 2024 can be seen in Appendix A.
- The Education and Commissioning plan for 2025/26 was shared. The paper outlines the recommendations proposed.
- The occupational health work has moved to the next phase where the workforce model, planning and training will be considered. A governance structure will be developed for the Welsh Government to monitor progress and drive improvements.
- Disciplinary and Capability policies are under review. An overarching policy where these and the Respect and Resolution policy will sit under is being considered.
- The Speaking up Safely policy is under review and will be refreshed.
- A pregnancy loss policy has been developed for NHS Wales. This has been enhanced to 10 days paid leave and identifies the need for pregnancy loss champions.
- The next staff survey is due to go live next month. There was only a 20% uptake last time and the survey has been made more accessible.

The Board commented that the last staff survey had around 100 questions. The results were late being shared, not allowing enough time to make any changes before the next survey. The Board were advised this feedback has been provided.

The Board enquired whether the Respect and Resolution policy is under review. The Board were advised this policy is being reviewed as part of the wider policy. RCN Wales will be consulted and representatives will be asked for feedback.

The Board were reminded that Board members can observe Welsh Partnership Forum and if interested to contact the Associate Director of Nursing (Employment Relations).

#### **5.4 RCN Wales Nurse of the Year 2024**

The Quality and Events Manager spoke to the paper and the following was highlighted:

- An event was held in August for the Alumni network, a leadership masterclass from Chair of Council. The Alumni survey is still pending and will progress when the new Education and Lifelong Learning Adviser has started.
- All interview panels for 2024 have been completed. The overall nurse of the year judging panel will be held in early November.

- All award categories were fully sponsored. Additional sponsorship was secured and is detailed in the paper.
- Board members were reminded all are invited to the awards ceremony and to respond to the Quality and Events Manager.
- Confirmation has been received that City Hall will remain closed for events in 2025. There are two dates in the paper to consider for the 2025 event and the Mercure has availability.

The Board agreed for the Nurse of the Year team to decide on the date for 2025.

The Board commented that two candidates had been in contact as the interview date was not suitable and another date could not be accommodated. The Board were advised that the scheduling of panels and liaising with sponsors is a large undertaking, and the dates are announced well in advance. Candidates can join on Teams and are able to re-submit the nomination for the following year.

The Board commented on the high quality of the nominations this year.

### **5.5 Independent Health and Social Care Report**

A report had been received and noted. In the absence of the Associate Director of Nursing (Professional Practice), the Executive Director spoke to the paper and the following was highlighted:

- The library in a box initiative has been positively received and this will continue next year.
- A successful roundtable on workforce standards was well attended.
- Care Home week was a positive experience and well received.

### **5.6 Library report**

A report had been received and was noted. In the absence of the Associate Director of Nursing (Professional Practice), the Executive Director spoke to the paper and the following was highlighted:

- The library space has been redesigned and is more open.
- The museum cabinets are in place and the first exhibition opened yesterday.
- The paper outlines the work carried out this year and the plans to capture data moving forward, to inform future plans.

## **6. ITEMS TO NOTE**

### **6.1 Reports from RCN Council meetings held in January, April, May and July 2024**

The reports had been received and noted.

The Council member for Wales advised a large piece of work had been undertaken regarding the appointment process for the General Secretary and Chief Executive post.

Job descriptions and terms of reference have all been reviewed and updated in preparation for the new Council in 2025.

The Board had no questions or comments.

### **6.2 Report from Trade Union Committee meeting in March 2024**

The report had been received and noted.

The Wales member on the Trade Union Committee advised that Jenny Watts has been appointed as the National Officer for GP practices.

There are plans in place to improve the Case Management System (CMS) and the authentication process will be improved.

A new process will be in place to withdraw access to CMS and RCN systems for any representative not updating GDPR training within three months of the reminder.

### **6.3 Report from Professional Nursing Committee meetings held in March, May and July 2024**

The reports had been received and noted.

In the absence of the Professional Nursing Committee member for Wales, there were no comments from the Board.

### **6.4 Report from UK Reps Committee meetings held in June and July 2024**

The reports had been received and noted.

### **6.5 Report from Student Committee meeting held in April 2024**

The report had been received and noted.

## **7. ANY OTHER BUSINESS**

There was no other business to raise.

The Chair closed the open session at 1:10pm.



### OPEN SESSION ACTION LIST

Completed	
Item on the agenda	

Ref No	Meeting Date	Agenda No.	Action	Lead	Deadline	Update on Actions	Status	Date Action Closed
20	10.5.24	3.2	Board would like a development session in September on the NHS Executive.	HW	Sept 2024	This is on the agenda for September.	Closed	20.9.24
22	20.9.24	5.1	A meeting to be arranged for Board members to complete the Congress survey.	HS	Oct 2024	This has been scheduled for 7 October 2024.	To close	

## **RCN WALES BOARD OPEN SESSION**

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	Board Chair's Report
<b>Presenter/Accountable ET member/Author:</b>	<b>Presenter: Chair, RCN Wales Board</b> <b>ET: Executive Director, RCN Wales</b>
<b>Purpose &amp; confidentiality</b>	The report provides an update on the attendance of Board members at RCN Wales Board meetings and at various other meetings/events since the last Board meeting. It also lists the Board meeting schedule and development opportunities for Board members in 2025.
<b>Executive summary</b>	Board members are asked to note this report.
<b>Appendices</b>	Appendix 1 – shows the list of various Board subcommittees and sub-groups and shows the current vacancies for Board members.

### **1. Background**

- 1.1. The Board Chair monitors the attendance at RCN Wales Board meetings.
- 1.2. This report provides an overview of meetings/events attended by Board members on behalf of the Board since the last meeting.
- 1.3. Board members are reminded that if they fail to attend four consecutive meetings in any period in which six consecutive meetings are held, unless due to illness, they may be removed from Board.

### **2. Board member attendance at RCN Wales Board and its Sub Committee**

- 2.1. The table shows Board member attendance at Board meetings.

<b>Attendees</b>	22 Feb	23 Feb	09 May	10 May	19 Sep	20 Sep
	24	24	24	24	24	24
Jackie Davies, Board Chair/ Welsh member on TUC	Yes	Yes	No	No	Yes	Yes
Steve Watson, Vice Chair/ Council member for Wales	Yes	No	Yes	Yes	Yes	Yes
Anne Stevenson	Yes	Yes	Yes	Yes	No	No
Carolyn Middleton, Welsh member of PNC	No	No	Yes	Yes	Yes	Yes
Catherine Jones	Yes	Yes	Yes	Yes	Yes	Yes
Euan Hails	Yes	Yes	No	No	No	No
Gaynor Jones	Yes	Yes	Yes	No	Yes	Yes
Lynne Puckett	Yes	Yes	Yes	Yes	No	No
Nicola Milligan	Yes	Yes	Yes	No	Yes	Yes
Mark Crothers	Yes	Yes	Yes	Yes	Yes	Yes
Susan Williams	No	No	Yes	Yes	Yes	Yes
Neil Thomas	No	No	Yes	Yes	N/A	N/A
Richard Hughes	Yes	Yes	Yes	Yes	Yes	Yes
Kokila Swamynathan	No	No	Yes	No	N/A	N/A
Alison Magor	Yes	Yes	Yes	Yes	Yes	Yes

2.2. The table below shows Board member attendance at the Board Pay Scrutiny & Decision-Making Subcommittee meetings.

<b>Attendees</b>	7 Feb 24	20 Mar 24	02 Jul 24
Jackie Davies, Board Chair/ RCN Wales member on TUC	Yes	Yes	Yes
Steve Watson, Vice Chair/ Council member for Wales	Yes	Yes	Yes
Carolyn Middleton, RCN Wales member of PNC	No	No	Yes
Catherine Jones	No	Yes	Yes
Mark Crothers	No	Yes	Yes
Susan Williams	Yes	Yes	Yes

### 3. 2025 Board Meeting Schedule

- 3.1. Board members are asked to note the Board meeting schedule and development opportunities for 2025.

Date	Meeting	Venue
13.02.25 14.02.25	Wales Board meetings	Ty Maeth
12.06.25 13.06.25	Wales Board meetings	Ty Maeth
11.09.25 12.09.25	Wales Board meetings	Ty Maeth
05.12.25	Board Development	Ty Maeth

### 4. Board members attendance at additional and ad hoc meetings and events

- 4.1. Board members are asked to provide details of their activities on behalf of the Board to the Directorate office. Below are the activities that have been submitted:

BOARD MEMBER	DATE	ACTIVITY
Board Chair	02.10.24	Special Trade Union Committee
	08.10.24	RCN Equality Diversity and Inclusion Committee
	17.10.24	Executive Director meeting
	18.10.24	Carers Wales Awards
	23.10.24	RCN Wales Scholarship Fundraising group
	31.10.24	Executive Director meeting
	01.11.24	RCN Wales Nurse of the Year Panel
	05.11.24	Board Officers meeting
	08.11.24	Working group-diss accreditation criteria for Branches
	10.11.24	Remembrance service Wales War Memorial
	11.11.24	RCN Wales Nurse of the Year Project Group



	13.11.24	Senedd Corridor Care launch
	16.11.24	Welsh Labour Party Conference
	19.11.24	Quarterly Board Chair meeting

	20.11.24	Full Welsh Partnership Forum
	21.11.24	RCN Wales Nurse of the Year Awards
	04.12.24	RCN Equality Diversity and Inclusion Committee
	05.12.24	International Nurses Event
	06.12.24	RCN Wales Board Development
	11.12.24	RCN Wales Activism Conference
	16.12.24	HEIW Stakeholder reference group
	09.01.25	Board Officers meeting
	05.02.25	Joint TUC & PNC meeting
	06.02.25	Trade Union Committee
	07.02.25	EDI Interviews
<b>Vice Chair</b>	01.10.24	International nursing event
	06.12.24	RCN Wales Board development day
	09.01.25	Board officers meeting
<b>Suma John</b>	18.09.24	Nurse of the Year Interview Panel
	05.12.24	Global Nursing Conference
<b>Lyn Middleton</b>	22.10.24	PNC & TUC meeting
	23.10.24	Fundraising committee
	24.10.24	Special meeting of International Committee
	29.10.24	Congress resolution number 6 working group meeting
	05.11.24	Board Officers meeting
	12.11.24	Associate Director, NPPD, RCN Wales prior to PNC mtg on 19 November

	19.11.24	PNC
	19.11.24	International committee
	10.01.25	Congress resolution number 6 WG meeting
	16.01.25	PNC workshop / PNC & student joint committee meeting
	31.01.25	Wales Board Campaign Sub-Group meeting January 2025
	04.02.25	Congress resolution number 6 WG meeting
	04.02.25	PNC
<b>Catherine Jones</b>	14.11.24	RCN Reps and Branch Monthly Catch-up meeting
	28.11.24	Independent and Social Care Strategy meeting
	06.12.24	Welsh Board Development Day
	15.01.25	Branch CGC Engagement Event at Holywell Community Hospital.
	20.01.25	Introduced RCN library Box scheme to the Independent sector to Nightingale Hospice in Wrexham
<b>Sue Williams</b>	11.09.24	Panel for Nurse of the Year
	09.10.24	Annual local Branch Conference Dementia
	10.10.24	Safe & Effective Care Programme Board
	13.11.24	Corridor Care Trolley Stunt at the Senedd
	28.11.24	Safe & Effective Care Programme Board

## 5. Recommendations

- 5.1. The Board is asked to note this report on the various subcommittees and sub-groups of the Board as set out in Appendix 1.

<b>RCN Wales Succession Planning Committee</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Welsh member on PNC
	Board member - vacant
	Executive Director
	Anne Stevenson – Board member
	Richard Hughes – Board member
<b>RCN Wales Board Pay Scrutiny &amp; Decision Making Sub Committee</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Welsh member on PNC
	Catherine Jones – Board member
	Executive Director
	Board member - vacant
	Susan Williams – Board member
<b>Board Officers Meetings</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Council member for Wales - vacant
	Welsh member on PNC
	Executive Director
<b>Trustees of the Hettie C Hopkins Care of the Elderly Nursing Scholarship</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Executive Director
	Carolyn Middleton – Board member
	Finance & Business Continuity Manager

<b>Trustees of the Alun Islwyn Giles Nursing Scholarship</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Executive Director
	Julie Green – Board member
	Finance & Business Continuity Manager

<b>RCN Wales Scholarship Fundraising Group</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	RCN Wales member on PNC
	Board member - vacant
	Owain Jones, RCN Wales Member
	Board member - vacant
	Richard Jones RCN Wales member
	Finance & Business Continuity Manager
	Victoria Jones Admin Support Assistant

<b>The Wales Safe and Effective Care Programme Board</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	Vice Chair
	Board member - vacant
	Richard Hughes Board member
	Board member - vacant
	Sue Williams - Board member
	Alison Magor – Board member
	Lynne Puckett – Board member
	Policy, Parliamentary and Public Affairs Manager (Chair)

<b>Wales Independent &amp; Social Care Strategy Steering Group</b>	<b>Attendees</b>
	Independent Sector & Community Adviser (Chair)
	Vice Chair

	Associate Director of Nursing (Professional Practice)
	Associate Director of Nursing (Employment Relations)
	Policy, Parliamentary and Public Affairs Manager
	Board member - vacant
	Board member - vacant
	Independent Sector and Community Adviser

<b>RCN Wales Nurse of the Year Project Group</b>	<b>Attendees</b>
	Board Chair (Exception reporting)
	Quality & Events Manager

<b>RCN Wales Nurse of the Year Reference Group</b>	<b>Attendees</b>
	Quality & Events Manager
	Board member - vacant
	Board member - vacant
	Board member - vacant

<b>The Wales Board Campaign Subgroup</b>	<b>Attendees</b>
	Board Chair / Welsh member on TUC
	RCN Wales member on PNC
	Vice Chair
	Lynne Puckett – Board member
	Alison Magor – Board member
	Policy, Parliamentary and Public Affairs Manager

<b>Review of the RCN Wales Board Risk Register</b>	<b>Attendees</b>
	Finance & Business Continuity Manager
	Vice Chair

<b>Review of the RCN Wales Operational Plan</b>	<b>Attendees</b>
	Finance & Business Continuity Manager
	Richard Hughes - Board member

## RCN WALES BOARD

### OPEN SESSION

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	Executive Director's Report
<b>Presenter/Accountable ET member/Author:</b>	<b>Presenter: Executive Director, RCN Wales</b> <b>ET: Executive Director, RCN Wales</b> <b>Author: Executive Director, RCN Wales</b>
<b>Purpose &amp; confidentiality</b>	The purpose of this report is to inform the Board of the activities undertaken by the Executive Director, RCN Wales from 31 August 2024 – 31 January 2025.
<b>Executive summary</b>	N/A
<b>Recommendations</b>	The Board is asked to note this report.
<b>Appendices</b>	N/A

#### 1. Background

- 1.1. The Board is provided with an update on the meetings and events that the Executive Director has undertaken since the September 2025 Board meeting.

#### 2. Executive Director's Update

- 2.1. The Board's attention is drawn to the following meetings that have been held since the May Board:

#### 2.2. Government and Political Meetings & Events

02.08.24 Sue Tranka, Chief Nursing Officer for Wales.

04.09.24 Introductory meeting with Minister for Social Partnership.

- 04.09.24 Lisa Llewelyn, HEIW & Sue Tranka, Chief Nursing Officer for Wales.
- 30.09.24 Social Partnership Council.
- 03.10.24 EDI Task & Finish Group.
- 03.10.24 Judith Paget, Director General, NHS Wales.
- 13.11.24 Senedd Trolley Stunt.
- 18.11.24 Band 4/RNA Research and RCN Academy meeting.
- 04.12.24 Social Partnership Council pre-meeting.
- 05.12.24 Social Partnership Council.
- 17.12.24 Programme Board - Phase 2 Band 4 Project Meeting.
- 21.01.25 Cross Party Group on Nursing and Midwifery - Topic: 'Consultant Nurses: Expert Patient Care'.

### **2.3. Executive Director's bi-annual meetings with Directors of Nursing in Wales and Heads of Schools of Nursing**

- 04.10.24 Sharon Daniel, Executive Director of Nursing, Hywel Dda UHB.
- 10.10.24 Claire Birchall, Executive Director of Quality & Nursing Public Health Wales.
- 01.11.24 Liam Williams, Executive Director of Quality & Nursing, WAST.
- 13.11.24 Nicola Williams, Director of Nursing, Velindre NHS Trust.
- 19.11.24 Angela Wood, Executive Director BCUHB.
- 03.12.24 Claire Birchall, Executive Director of Quality & Nursing Public Health Wales.
- 03.12.24 Meeting with Jonathan Morgan, Chair, Cwm Taf Morgannwg UHB.
- 03.12.24 Claire Roche, Executive Director of Nursing, Powys Teaching HB.
- 04.12.24 Jason Roberts, Executive Director of Nursing, Cardiff & Vale UHB.
- 20.12.24 Executive Directors of Nursing Peer Group meeting.
- 22.01.24 Prof Julie Green, Head of School, School of Health Sciences Bangor.
- 23.01.25 Angela Wood, Executive Director BCUHB.
- 24.01.25 Executive Directors of Nursing Peer Group.

### **2.4. RCN Wales Board Meetings**

Board Chair - the Executive Director holds weekly meetings with the Board Chair.

- 13.09.24 Meeting with Board PNC member.
- 16.09.24 RCN Wales Board Pay, Scrutiny & Decision Making Sub-group.
- 19.09.24 RCN Wales Board Closed Session.
- 20.09.24 RCN Wales Board Open Session.
- 09.10.24 Council Election Hustings for Wales Candidates.
- 06.12.24 RCN Wales Board Development Day.
- 09.01.25 RCN Wales Board Officers meeting.
- 20.01.25 RCN Wales Scholarship Trustees meeting.

## **2.5. Other Meetings**

- 06.09.24 Alex Howells & Dr Chris Jones, Chief Executive & Chair, Health Education and Improvement Wales (HEIW) with Board Chair.
- 06.09.24 Julie Richards, Director RCM Wales.
- 09.09.24 Special Partnership Council pre-meet with First Minister.
- 17.09.24 Visit to Grange Hospital with Nicola Ranger, Chief Executive & General Secretary.
- 17.09.24 Visit to Princess of Wales Hospital with Nicola Ranger, Chief Executive & General Secretary.
- 18.09.24 RCN Wales Corridor Care Roundtable with Nicola Ranger, General Secretary and Chief Executive.
- 18.09.24 Visit to Llandough Hospital with Nicola Ranger, General Secretary and Chief Executive.
- 03.10.24 Briefing Session 2 - Social Care Workforce Survey 2024.
- 04.10.24 Member Engagement in Withybush Hospital.
- 04.10.24 Member Engagement in Singleton Hospital.
- 08.10.24 WPC Trade Union Side meeting.
- 10.10.24 Introductory meeting with Rhys Roberts, Head Of All Wales Nurse Staffing Programme. NHS Executive.
- 18.10.24 Member Engagement at Prince Charles Hospital.
- 21.10.24 HEIW Stakeholder Reference Group.
- 22.10.24 Alan Jones, Chief Executive, Health Inspectorate Wales (HIW) Annual Meeting.



- 23.10.24 Member Engagement at Glangwili Hospital.
- 23.10.24 Member Engagement at Prince Philip Hospital.
- 24.10.24 Member Engagement at Nevil Hall Hospital.
- 24.10.24 Member Engagement at Royal Glamorgan Hospital.
- 30.10.24 RCN Council Day 1. 31.10.24  
RCN Council Day 2.
- 05.11.24 Julie Richards, Director, RCM.
- 14.11.24 Nursing Workforce Plan Steering Group meeting.
- 21.11.24 National Primary Care Board.
- 25.11.24 A Fairer Wales: A Bevan Foundation Reception, House of Commons.
- 16.12.24 HEIW Stakeholder Reference Group.
- 17.12.24 Strategic Nursing Workforce Plan.
- 16.01.25 RCN Council Induction Day.
- 20.01.24 Strategic Nursing Workforce Plan Steering Group.
- 24.01.25 Chiquita Cusens National Lead Nurse for Primary & Community Care,  
Strategic Programme for Primary Care.
- 29.01.25 Day one of RCN Council.
- 30.01.25 Day two of RCN Council.

## **2.6. Conferences and Events**

- 04.09.24 Retired Members Webinar 05.11.24  
NHS Confed pre-Conference Dinner.
- 06.11.24 NHS Confed Annual Conference.
- 21.11.24 RCN Wales Nurse of the Year Awards 2024.
- 27/28.11.24 Canadian Federation of Nurses Union Ratio Summit, Ottawa Canada.
- 05.12.24 RCN Wales: One World, One Profession - Strengthening Global Nursing.
- 12.12.24 Director spoke at the Reps Conference Day 2.
- 22.01.25 Bangor Student Recruitment event.
- 27.01.25 Director spoke at the RCN Wales Leadership Event.

## **3. Recommendations**

**3.1.** The Board is asked to note this report.

# Agenda Item 3.3

## RCN WALES BOARD

### OPEN SESSION

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	Social Partnership Council
<b>Presenter/Accountable ET member/Author:</b>	<b>Presenter: Executive Director, RCN Wales</b> <b>ET: Executive Director, RCN Wales</b> <b>Author: Executive Director, RCN Wales</b>
<b>Purpose</b>	This paper provides an update and overview of the Social Partnership Council in Wales.
<b>Confidentiality</b>	Is the paper confidential? N
<b>Executive summary</b>	The paper outlines the background to the Social Partnership Council forming and the current areas of interest.
<b>Recommendations</b>	Board members are asked to note the report.
<b>Appendices</b>	Appendix A – list of membership.

**Note – the Paper should be no more than 5 pages in total**

#### **1. Background**

- 1.1. The Social Partnership Council was formed in December 2023 by the then First Minister, Mark Drakeford following [The Social Partnership and Public Procurement \(Wales\) Act 2023](#) becoming law.
- 1.2. The membership is made up of representatives of employers and workers from the public, private and third sectors in Wales – see Appendix A. The aim of the Council is to improve economic, environmental, social, and cultural well-being in Wales. The Council provides advice to Ministers on social partnership working, including in relation to the “A Prosperous Wales” well-being goal and socially responsible public procurement by public bodies in Wales.
- 1.3. The Council meets a minimum of three times a year, chaired by the First Minister.
- 1.4. The Executive Director, RCN Wales was nominated by the Wales Trade Unions Congress as one of the nine worker representative seats.

## **2. Areas for discussion**

- 2.1. The last SPC meeting was held on 5 December 2024. Currently, there are several ongoing items being explored:
  - Employment Rights Bill
  - Public Sector Reports
  - Artificial Intelligence (AI) and the Workforce
- 2.2. Each item may have further sub-groups or actions for the SPC members.
  - The Employment Rights Bill is currently progressing through Parliament and the SPC discussed the merits and areas of concern of the Bill. The SPC will be receiving regular updates on its progress.
    - Public Sector reports are analysed to establish compliance with the Social Partnership Duty.
    - The SPC will consider the risks and opportunities associated with AI skills and capability in the workplace. The SPC will develop advice for Ministers to assist them in adopting a policy position on the use of AI.
- 2.3. The next meeting will be held in March 2025. Any further relevant updates on the work of the SPC will be shared with RCN Wales Board.

## **3. Group Plan/Business Priorities**

- 3.1 Influencing policy and professional standards

## **4. Committees/Entities/Executive Team**

- 4.1 RCN Wales Board

## **5. Four Country**

- 5.1 The work of the Social Partnership Council relates to Wales only.

## **6. Implications:**

Core business of RCN Wales

### **Equality Impact**

- 6.1 This is not applicable **Risk and Assurance**

- 6.3 Not applicable

### **Members and Other Stakeholders**

- 6.4 Brief statement on whether members or other stakeholders will be impacted and how

### **Finance/Resources**

- 6.5 Brief statement on financial/resource implications

## **7. Recommendations**

- 7.1 The Board is asked to note the report.



## **Appendix A**

### **Membership of the Social Partnership Council**

#### **Worker Representatives**

Ruth Brady, GMB

Neil Butler, National Association of Schoolmasters Union of Women Teachers

Peter Hughes, Unite the Union

Gareth Lloyd, University and College Union

Shavanah Taj, Wales TUC Cymru

Jess Turner, UNISON

Mike Walker, Union of Shop, Distributive and Allied Workers

Helen Whyley, Royal College of Nursing

Siân Boyles, Public and Commercial Services Union

#### **Employer Representatives**

Pippa Britton, Voluntary Sector

Dame Elan Closs-Stephens, Public Leaders Forum

Ben Cottam, Federation of Small Businesses

Councillor Anthony Hunt, Welsh Local Government Association

Professor Wendy Lerner, Cardiff University

Russell Greenslade, Confederation of British Industry Wales

Nicola Prygodzicz, Aneurin Bevan University Health Board

Janis Richards, Make UK Ltd

Kathryn Robson, Adult Learning Wales

Board Item No	Board date	Date sent	From	To whom	Organisation	Subject	Response Received / Sent	Status
1	Feb-25	19.09.24	Executive Director	Albert Heaney CBE	Welsh Government	Letter regarding the Strategic Advisory Group for the National Office for Care & Support	Response received 23 Oct	Completed
2	Feb-25	20.09.24	Executive Director	Sam Rowlands MS	Welsh Government	Welsh Governments response to the Health & Social Care Committees Final report	N/A	Completed
3	Feb-25	20.09.24	Executive Director	Francesca Steyn		Letter of invitation to attend RCN Council Hustings on 9 October 2024	Yes	Completed
4	Feb-25	20.09.24	Executive Director	Nicola Milligan	RCN Wales Board	Letter of invitation to attend RCN Council Hustings on 9 October 2024	Yes	Completed
5	Feb-25	20.09.24	Executive Director	Rachael Jones-Morris		Letter of invitation to attend RCN Council Hustings on 9 October 2024	Yes	Completed
6	Feb-25	20.09.24	Executive Director	Rhian Smith	RCN Wales Board	Letter of invitation to attend RCN Council Hustings on 9 October 2024	Yes	Completed
7	Feb-25	20.09.24	Executive Director	Suma John	RCN Wales Board	Letter of invitation to attend RCN Council Hustings on 9 October 2024	Yes	Completed
8	Feb--25	23.09.24	Executive Director	Dr Richard Evans	Swansea Bay UHB	Freedom of Information request which RCN Wales made to Swansea Bay University Health Board this August, the response to which is now seven working days overdue.		
9	Feb-25	02.10.24	Executive Director & Board Chair	Nick Wood	NHS Executive	Letter of thanks for presenting to the RCN Wales Board	N/A	Completed
10	Feb-25	02.10.24	Executive Director & Board Chair	Tracey Breheny	NHS Executive	Letter of thanks for presenting to the RCN Wales Board	N/A	Completed
11	Feb-25	23.09.24	Executive Director	Greg Dix	Cwm Taf Morgannwg UHB	Letter of thanks for visit with Chief Exec and Gen Sec	N/A	Completed
12	Feb-25	23.09.24	Executive Director	Jennifer Winslade	Anueirn Bevan UHB	Letter of thanks for visit with Chief Exec and Gen Sec	N/A	Completed
13	Feb--25	09.10.24	Executive Director	Jason Roberts	Cardiff & Vale UHB	Letter of thanks for visit with Chief Exec and Gen Sec	N/A	Completed
14	Feb-25	26.09.24	Executive Director	Joanne Roche		Letter regarding Hettie C Hopkins Care of the Elderly Scholarship application	N/A	Completed
15	Feb-25	04.10.24	Executive Director	James Evans MS	Welsh Government	Letter in relation to the Mental Health Standards of Care (Wales) Bill	N/A	Completed
16	Feb-25	23.10.24	Linda Silas, Canadian Nurses	Executvie Director	RCN Wales	Letter inviting Executive Director to Address the Canadaian Nurse at their Conference in Canada	N/A	Completed
17	Feb-25	28.10.24	Jeremy Miles MS	Executive Director	Welsh Government	Letter of thanks for meeting on 17 October 2024	N/A	Completed

18	Feb-25	28.10.24	Executive Director	Joyce Watson MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
19	Feb-25	28.10.24	Executvie Director	Mabon ap Gwynfor MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
20	Feb--25	28.10.24	Executive Director	Sam Rowlands MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
21	Feb-25	28.10.24	Executvie Director	Jenny Rathbone MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
Board Item No	Board date	Date sent	From	To whom	Organisation	Subject	Response Received / Sent	Status
22	Feb-25	28.10.24	Executive Director	John Griffiths MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
23	Feb-25	28.10.24	Executvie Director	Delyth Jewell MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
24	Feb-25	28.10.24	Executive Director	Russell George MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
25	Feb-25	28.10.24	Executvie Director	Lesley Griffiths MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
26	Feb-25	28.10.24	Executive Director	Luke Fletcher MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	N/A	Completed
27	Feb-25	28.10.24	Executvie Director	Natasha Asghar MS	Welsh Government	Letter of invitation to attend Round Table event on 12 December on "Policy discussion with Members of Senedd'	Response received 29.10.24	Completed
28	Feb-25	29.11.24	Executive Director	Linda Silas, President	CFNU	Letter of thanks for invitation to attend CFNU Summit and sit on panel	N/A	Completed
29	Feb-25	04.11.24	Jeremy Miles MS	Executive Director	Welsh Government	Letter informing the Cabinet Secretary of results of the pay ballot with members	Response received on 19.11.24	Completed
30	Feb-25	20.11.24	Executive Director	Prof Sue Bale	RCN Fellow	Letter regarding recent surgery	N/A	Completed
31	Feb-25	20.11.24	Executive Director	Members of the Senedd	Welsh Government	Letter regarding Nursing Support Workers day on 23 Novemer 2024	N/A	Completed
32	Feb-25	21.11.24	Natalie Zara	Nicola Milligan	RCN Wales Board	Letter of congratulations to Nicola Milligan on election to RCN Council	N/A	Completed
33	Feb-25	25.11.24	Executive Director	Jeremy Miles MS, Cabinet Secretary	Welsh Government	Letter regarding the Ministerial Advisory Group NHS Performance and Productivity announced on 1 October 2024	Response received 06.02.25	Completed
34-45	Feb-25	25.11.24	Executive Director	All Executive Directors of Nursing	UHBs	Letters to each Director of Nursing of UHBs with an Advent Calendar	N/A	Completed
46-52	Feb--25	25.11.24	Executive Director	All Heads of Schools	Universities in Wales	Letters to each Head of Schools in Wales with an Advent Calendar	N/A	Completed
53	Feb-25	04.12.24	Executive Director	Sue Tranka, CNO Wales	Welsh Government	Letter regarding Independent Sector Leadership Programme	Response received 5.12.24	Completed
54	Feb-25	19.12.24	Albert Heaney	Executive Director	Welsh Government	Letter in response to Exec Directors letter on Strategic Advisory Group of the National Office for Care and Support.	N/A	Completed
55	Feb-25	19.12.24	Executive Director	Hannah Blythyn MS	Welsh Government	Letter regarding Senedd Standards of Conduct Committee's Cross-Party Group Monitoring Report 2024.	N/A	Completed



56	Feb-25	17.12.24	Nicola Williams Velindre NHS Trust	Executive Director	Velindre NHS Trust	Letter of thanks for RCN Wales Nurse of the Year 2024 and continuation of sponsorship for 2025 Awards.	N/A	Completed
57	Feb-25	13.12.24	Executive Director	Sir David Sloman	Chair, Ministerial Advisory Group	Letter regarding the Ministerial Advisory Group NHS Performance and Productivity, which the Welsh Government announced on 1 October 2024		
58	Feb--25	19.12.24	Executive Director	Lisa Llewelyn, Executive Director	HEIW	Letter regarding the Critical Care Workforce Model Guide		
59	Feb-25	19.12.24	Executive Director and Board Chair	Prof Euan Hails MBE	RCN Wales Board	Letter regarding end of office for RCN Wales Board on 31 December 2024	N/A	Completed
60	Feb-25	19.12.24	Executive Director and Board Chair	Gaynor Jones MBE	RCN Wales Board	Letter regarding end of office for RCN Wales Board on 31 December 2024	N/A	Completed

Board Item No	Board date	Date sent	From	To whom	Organisation	Subject	Response Received / Sent	Status
61	Feb-25	19.12.24	Executive Director and Board Chair	Steve Watson	RCN Wales Board	Letter regarding end of office for RCN Wales Board on 31 December 2024	N/A	Completed
62	Feb-25	19.12.24	Executive Director	Jackie Davies	RCN Wales Board	Letter of congratulations for being elected as RCN Wales Board Chair from 1 Jan 2025 to 31 Dec 2026	N/A	Completed
63	Feb-25	19.12.24	Executive Director	Mark Crothers	RCN Wales Board	Letter of congratulations for being elected as RCN Wales Board Vice Chair from 1 Jan 2025 to 31 Dec 2026	N/A	Completed
64	Feb-25	16.12.24	Executive Director	Nicola Williams Executive Director	Velindre NHS Trust	Letter regarding Betsi Cadwaladr Foundation Scholarship Awards		
65	Feb-25	06.01.25	Angela Wood BCUHB DoN	Executive Director	RCN Wales	Letter regarding Nurse of the Year Award and sponsoring again in 2025	N/A	Completed
66	Feb-25	18.12.24	Jason Warriner	All Board Chairs	RCN Boards	Letter regarding Congress Strategic Review	N/A	Completed
67	Feb-25	07.01.25	Executive Director & Board Chair	Professor Zaheer Raza Yousef OBE		Letter of congratulations on award of OBE in the New Years Honours List 2025.	Response received 24.01.25	Completed
68	Feb-25	07.01.25	Executive Director and Board Chair	Dr Tracey Anne Cooper OBE		Letter of congratulations on award of OBE in the New Years Honours List 2025.	N/A	Completed
69	Feb-25	07.01.25	Executive Director and Board Chair	Craig Adam Maxwell OBE		Letter of congratulations on award of OBE in the New Years Honours List 2025.	N/A	Completed
70	Feb-25	07.01.25	Executive Director and Board Chair	Prof Claire Elizabeth Wilkinson MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
71	Feb-25	07.01.25	Executive Director and Board Chair	Richard Huw Jones MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
72	Feb-25	07.01.25	Executive Director and Board Chair	Wendy Ansell MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
73	Feb-25	07.01.25	Executive Director and Board Chair	Dr Richard Arnold Charles Lea MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
74	Feb-25	07.01.25	Executive Director and Board Chair	Dr Rowena Christmas MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
75	Feb-25	07.01.25	Executive Director and Board Chair	Lee Wong MBE		Letter of congratulations on award of MBE in the New Years Honours List 2025.	N/A	Completed
76	Feb-25	07.01.25	Executive Director and Board Chair	Tristan Wyn Lewis BEM		Letter of congratulations on award of BEM in the New Years Honours List 2025.	N/A	Completed

77	Feb-25	07.01.25	Executive Director and Board Chair	Stephen Robert Merridew BEM		Letter of congratulations on award of BEM in the New Years Honours List 2025.	N/A	Completed
78	Feb-25	07.01.25	Executive Director and Board Chair	Janice Victoria Williams CBE		Letter of congratulations on award of CBE in the New Years Honours List 2025.	N/A	Completed

Board Item No	Board date	Date sent	From	To whom	Organisation	Subject	Response Received / Sent	Status
79	Feb-25	07.01.25	Executive Director and Board Chair	Professor Florence Susan Thim Peck Wong CBE		Letter of congratulations on award of CBE in the New Years Honours List 2025.	N/A	Completed
80	Feb-25	08.01.25	Executive Director	Lisa Llewelyn HEIW	HEIW	Letter in response o response to the newly released Version 8.4 of the Strategic Nursing Workforce Plan 2025–2030	email response received 28.01.25	Completed
81	Feb-25	12.01.25	Executive Director	Ruth Jones MP	Parliament	Letter regarding the opportunity to contribute to Welsh Affairs Select Committees' work into the provision of cross-border health care	N/A	Completed
82	Feb-25	14.01.25	Executive Director and Board Chair	Nicola Milligan		Letter in relation to stepping down from RCN Council	N/A	Completed
83	Feb-25	16.01.25	Executive Director	Albert Heaney CBE	Welsh Government	Letter regarding the Launch of the RCN Employment Standards for Independent Health and Social Care Sectors	N/A	Completed
84	Feb-25	16.01.25	Executive Director	Sarah McCarty	Social Care Wales	Letter regarding the Launch of the RCN Employment Standards for Independent Health and Social Care Sectors	N/A	Completed
85	Feb-25	16.01.25	Executive Director	Melanie Minty	Care Forum Wales	Letter regarding the Launch of the RCN Employment Standards for Independent Health and Social Care Sectors	N/A	Completed
86	Feb-25	20.01.25	Executive Directort	Mr Randerson		Letter of condolence on passing of Jenny Randerson	N/A	Completed
87	Feb-25	23.01.25	Angela Wood, Executive Director	Executive Director	BCUHB	Letter of thanks for attending the BCUHB Inaugural Nursing & Midwifery Conference	N/A	Completed
88	Feb-25	27.01.25	Executive Director	Lisa Llewelyn	HEIW	Letter regarding Corridor Care		
89	Feb-25	28.01.25	Executive Director	Angela Wood, Executive Director BCUHB	Council of Deans of Health Wales	Letter toam ke Director of Nursing aware of letter sent to HEIW in relation to the experiences of student nurses in clinical environments where corridor care is occurring.	N/A	Completed
90	Feb-25	29.01.25	Executive Director	Lisa Llewelyn	HEIW	Letter regarding email of 28 January with a copy of the Nursing Strategy Workforce Plan	N/A	Completed

# Agenda Item 3.6



## RCN WALES BOARD

### OPEN SESSION

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	Ending Corridor Care Campaign Paper
<b>Presenter/Accountable ET member/Author:</b>	Presenter: Nicky Hughes, Associate Director Employment relations /Lisa Turnbull Policy, Parliamentary and Public Affairs Manager  ET Member: Helen Whyley Executive Director  Authors: Lisa Turnbull, Policy, Parliamentary and Public Affairs Manager, Nicky Hughes, Associate Director Employment relations Kelly Andrews, Pay Terms and Conditions lead Nicola Davis- Job Acute Care and Leadership Advisor
<b>Purpose &amp; confidentiality</b>	To update board members on action taken and planned as part of the Ending Corridor Care Campaign.
<b>Executive summary</b>	Campaigning Actions will continue
<b>Recommendations</b>	The Board is asked to note this report.
<b>Appendices</b>	NIL

#### 1. **Background**

*Congress resolution 2023* - The term 'corridor care' is caring for patients in inappropriate places such as corridors and non-clinical areas, and not within a defined hospital bed space.

Sadly, our members report that corridor care has become the 'new norm' where emergency departments and hospitals continue to see an increase in demand for care. This forces patients into inappropriate places within the hospital such as corridors, the middle of bays and rooms that don't support safe patient care.

In Wales, the Welsh Government focus has changed its focus to a whole systems approach for unscheduled care with attention on transforming access to urgent and emergency care.

RCN UK has published a report on corridor care following a members survey named 'On the frontline of the UK's corridor care crisis (2025)' This is available on the RCN UK

website. <https://www.rcn.org.uk/Professional-Development/publications/rcnfrontline-of-the-uk-corridor-care-crisis-uk-pub-011-944>

RCN Wales have published a policy paper named 'Ending Corridor Care in Wales This can be found on the RCN Wales website.

<https://www.rcn.org.uk/ProfessionalDevelopment/publications/rcn-ending-corridor-care-in-wales-briefing-for-membersof-senedd-welsh-version-uk-pub-011-959>

## 2. Campaign Overview

After considerable discussion with members and communication experts RCN has taken the decision at the UK level to authorise the use of 'corridor care' as a public friendly shorthand for 'care in inappropriate places'. However, all campaign messaging will be used to explain and broaden the public's understanding of this issue.

In the absence of specific UK branding for this work, and before the launch in September 2025 of the RCN Wales election manifesto the corridor care work will fit into overall branding theme of our staffing for safe and effective care campaign (SSEC). This will allow a seamless transition into the Wales specific election campaign branding in September.

The actions described in this paper are listed as deliverables in the SSEC campaign. Scrutiny and progress tracking takes place in the SSEC Programme Board.

The objectives of this campaign are as follows:

- To express member views.
- To integrate and position the corridor care influencing within the wider context of staffing for safe and effective care.
- To increase political understanding of the issues around corridor care.
- To increase the political salience of corridor care ahead of the Senedd Election.
- To increase support for, and action on, specific policy goals by the Welsh Government, as outlined in the campaign.
- To establish the RCN as a champion of patient safety.
- To empower members to raise concerns and provide the tools in which to support them.
- To encourage members to challenge corridor care and not allow it to become normalized.

## **Campaign Activity 2024**

- 2.1. **A UK-wide RCN report on corridor care**, to which the RCN Wales Policy, Parliamentary and Public Affairs team contributed significantly, was launched at RCN Congress in June 2024 and has since been quoted in the Senedd.
- 2.2. **Member Survey on Datix** From the results of an RCN member survey to members on the non-pay agreement prior to Christmas, it was clear that safe and effective care was the main priority for RCN members. Discussions with RCN Health & Safety Representatives have highlighted concerns that Datix are not being completed, or, in worst cases, RCN members are telling RCN Wales that they are being advised not to complete a Datix form. Of those surveyed over 70% of RCN members had concerns about using the Datix system with over a third not receiving any training, and those that did submit a Datix around a third did not receive a response.
- 2.3. **Member E-mail Action to Members of the Senedd:**  
The first phase of the influencing plan is an online “e-action” that allows people to customize and send an email to their Members of the Senedd (MS) demanding change. At the time of writing, over 800 emails have been sent. The action is being promoted regularly on social media and is open to RCN members and the public at <https://www.rcn.org.uk/email-your-ms>.
- 2.4. **Influencing and educating MS:** This has taken place in 1:1 meetings, political party conference activity and events such as the December Activist Conference.
- 2.5. **Member Symposium.** A member discussion event was held on 2<sup>nd</sup> July 2024. To allow members to contribute their experience of corridor care. Members provided evidence of their own accounts of corridor care and what impact it had on them. Members were asked what they would like to stop, start and continue doing around corridor care which RCN used to support the later stakeholder conference in September.
- 2.6. **Stakeholder Conference:** A roundtable event was held in September 2024 with the aim of making the voice of all royal colleges and stakeholders stronger together when the issue of care in inappropriate places rises. The stakeholders all had their unique stories from their own members, but it was clear that the most vulnerable people were most at risk from being cared for in inappropriate places
- 2.7. **Senedd Trolley Action.** In November 2024 a highly visible action took place on the Senedd steps. The PPPA team sourced a ‘hospital trolley’ and gown from a theatrical props company and a photo shoot was held with a member of staff dressed as a patient in various inappropriate locations, such as a car park, layby and the Senedd steps. The photo imagery was used in social media highlighting the incongruity of a

patient being cared for in the wrong place with a serious message about patient safety underlying this.

- 2.8. The event attracted widespread media attention. Members accompanied the trolley and were interviewed on film about their passionate concern for patient safety. These videos and the photos can now be used for campaigning across 2025. In addition, Members of the Senedd were invited to show their support by being photographed with a placard.
- 2.9. **RCN UK:** RCN Wales worked with the UK Staffing for Safe and Effective Care workstream on eradicating corridor care and regularly informed this group of the issues faced in Wales. However, the decision has been made to bring this work to a close and the work will now focus on the communication aspect to members and the public.
- 2.10. **Steward activity:** A steward in Swansea Bay Health Board undertook a health and safety audit with the RCN Health, Safety and Wellbeing National Officer in the Morriston hospital A&E department. A report is being prepared which will ask for specific actions and this will be shared with the Health Boards Executive Director of Nursing; the Health and Safety Committee and the Patient Experience Lead.
- 2.11. **Media activity:** January 2025 the results of a survey saw a UK media focus on the issue of corridor care, this was mirrored in Wales bringing the focus to the lack of dignified care for people and the effect it was having on RCN members.

In Wales just like the rest of the UK it demonstrates just how widespread and normalised corridor care has become. Patients are routinely coming to harm, enduring unsafe and undignified care. More than six in ten staff told us that they deliver corridor care every single day. Whilst more than nine in ten say it is compromising patient safety.

### **3. Campaign Activity 2025 (Jan to Sept 2025)**

- 3.1. **Parliamentary Briefing.** The first public action of 2025 was the launch of the parliamentary briefing on corridor care. The policy work has been complex but has now resulted in clear recommendations from RCN Wales for action to the Welsh Government. This is extremely important as it allows the RCN to set the policy agenda and demonstrates our constructive approach. The launch of this briefing is likely to gain widespread media and parliamentary attention.
- 3.2. **Public Letters:** The launch was accompanied by the high-profile publication of a series of public letters RCN Wales sent to the health boards and Trusts setting them 'on notice' to take action immediately to safeguard patient safety. These letters were



accompanied by similar public letters seeking support from bodies such as HIW, Older People's Commissioner etc

**3.3. Member E-mail Action to Members of the Senedd:**

The online "e-action" that allows members to customise and send an email to their Members of the Senedd (MS) demanding change will continue to be promoted but a change in approach will see us publicizing how many e-mails have been sent and publicly challenging MS to respond.

**3.4. Ongoing Social Media:** The member interview videos, and the trolley photos will now be used for campaigning across 2025. In addition, the Members of the Senedd who showed their support by being photographed with a placard will be challenged for action.

**3.5. Influencing and Educating MS:** This will take place in 1:1 meetings and political party conference activity.

**3.6. Representative activity:** This will be discussed with representatives in the regular monthly meetings. A health and safety audit proforma has been sent to representatives to assist in auditing areas where corridor care is being undertaken, representatives will be encouraged to use this tool. Representatives are being asked to be visible out in clinical and escalate any issues both internally in the health board and to RCN Wales.

A representative continuous learning and development session will be held on 24 February 2025 and will focus on corridor care, sharing the toolkits available on the website for members to raise concerns. A key role that representatives will be asked to play is challenging corridor care at Local Partnership Forums.

## **4. Recommendations**

**4.1.** The Board is asked to note this report.



## RCN Wales Board

### Open Session

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	<b>Policy, Parliamentary and Public Affairs Impact Report</b>
<b>Presenter/Accountable ET member/Author:</b>	<p>Presenter: Lisa Turnbull, Policy, Parliamentary and Public Affairs Manager</p> <p>ET: Helen Whyley, Executive Director RCN Wales</p> <p>Author: Lisa Turnbull, Policy, Parliamentary and Public Affairs Manager</p>
<b>Purpose</b>	<p>To inform the RCN Wales Board of how the Policy, Parliamentary and Public Affairs (PPPA) team is working to ensure the concerns of RCN members, and the Board successfully influence health and social care policy. The report outlines the main influencing activities and outcomes of RCN Wales in the period since the last Board meeting and any relevant public, political and policy developments that have occurred. It also outlines the influencing priorities of the team for the immediate future.</p>
<b>Confidentiality</b>	<p><i>Is the paper confidential?</i></p> <p>This paper is in the open papers of the RCN Wales Board and as such the general information found within it can be shared <b>verbally</b> with branches and members in Wales (but the written paper itself should not be shared).</p> <p>The paper contains:</p> <ul style="list-style-type: none"> <li>• matters of a management, planning, strategy or forecasting nature <input checked="" type="checkbox"/></li> </ul>

<b>Executive summary</b>	Influencing success from September 2024 to February 2025 <ul style="list-style-type: none"> <li>• Launch of Nursing Numbers 2024</li> <li>• Launch of Consultant Nurse Policy Paper</li> </ul>
--------------------------	--

## Page 39

	<ul style="list-style-type: none"> <li>• Senedd Trolley Action and accompanying Member E-mail Action on Corridor Care</li> </ul> <p>Influencing Priorities for January 2025 to March 2025</p> <ul style="list-style-type: none"> <li>• Influencing on Corridor Care – Parliamentary Briefing, Public Letters and Member E-Mail Action</li> <li>• Launch of Learning Disability Nursing policy report</li> <li>• Consult, Develop and Agree Themes of our Election Manifesto</li> </ul>
<b>Recommendations</b>	<p><b>Action required:</b></p> <p><b>The Wales Board is asked for views on the planned activities, consultations and committee inquires listed herein.</b></p>
<b>Appendices</b>	Annex A – Welsh Parliamentary Impact Report

## 1. Summary

### 2.1 Influencing success from September 2024 to January 2025

- Launch of Nursing Numbers 2024
- Launch of Consultant Nurse Policy Paper
- Senedd Trolley Action and accompanying Member E-mail Action on Corridor Care.

### 2.2 Influencing Priorities for January 2025 to March 2025

- Influencing on Corridor Care – Parliamentary Briefing, Public Letters and Member E-Mail Action
- Launch of Learning Disability Nursing Policy Report
- Consult, develop and agree themes of our Election Manifesto.

## 2. Governance

- 2.1. This paper to Wales Board provides an account of how the Policy, Parliamentary and Public Affairs team is working to ensure the concerns of RCN members, and the Board successfully influence health and social care policy. The report outlines the main influencing activities and outcomes of RCN Wales in the period since the last Board and any relevant public, political and

policy developments that have occurred. It also outlines the influencing priorities of the team for the immediate future. The RCN Wales Board paper

2

on the Wales Election Campaign it is proposed to resume the monthly meeting of the Wales Board Campaign Sub-Group.

### **3. Welsh Government Consultations**

3.1. The following policy consultation responses have been submitted to the Welsh Government since the last RCN Wales Board:

- Draft Proposals to make the food environment healthier
- Adding Bodies to existing Welsh Language Standards
- Inspection ratings for care homes and domiciliary support
- HEIW - draft actions for Strategic Perinatal Workforce Plan
- Proposed changes to the Codes of Professional Practice for workers (Social Care Wales)
- Agreeing the parameters of practice for the registered nursing associate role in Wales

3.2. There are currently no public policy consultations open. Board members are urged to share the consultation alert e-mails they receive from the PPPA Team with colleagues and the wider membership.

3.3. Copies of previous consultation responses are available by emailing the Policy and Public Affairs Team [Aysima.harper@rcn.org.uk](mailto:Aysima.harper@rcn.org.uk)

3.4. All consultations are currently advertised on social media and the website. They are also circulated by e-mail to RCN Wales Board, Nurse of the Year Alumni and Nurse of the Year Fellows for their views.

### **4. Welsh Parliament Committee Inquires**

4.1. RCN Wales has responded with written evidence to the Welsh Affairs Select Committee of the UK Parliament on cross-border issues.

### **5. Legislation**

5.1. Policy, Parliamentary and Public Affairs monitors all legislation in Wales of relevance to members and ensures member's views are heard.

5.2. The **Health and Social Care (Wales) Bill** is intended to eliminate private profit from the care of children looked after, and to enable the introduction of direct

payments for Continuing NHS Healthcare. It will also make amendments to ensure that the Regulation and Inspection of Social Care (Wales) Act 2016 and Social Services and Well-being (Wales) Act 2014 are able to operate fully and effectively.

## Page 41

- 5.3. **Development of the Mental Health Standards of Care (Wales) Bill** This is a proposed member's Bill from James Evans MS. The purpose of the Bill is to replace outdated mental health legislation; improve the delivery of mental health plans for Child and Adolescent Mental Health Services and Adult Services in Wales; improve the accountability of Welsh public sector organisations; help to establish parity between the treatment of physical and mental health; and help to reduce the stigma of mental health in Wales. RCN Wales has met with James Evans MS to discuss this Bill and will be providing a response.

### 6. Influencing Meetings

- 6.1. The influencing meetings detailed below took place since the last Board and are in addition to the meetings laid out in the Executive Director's report:

Date	Meeting	RCN
09/09/24	Peredur Owen Griffiths MS	Sion Trewyn Nick Unwin
16/09/24	Cefin Campbell MS	Sion Trewyn Nick Unwin
02/12/24	Welsh Government Migration Forum	Nick Unwin
10/12/24	Sam Rowlands MS	Sion Trewyn Nick Unwin
13/12/24	Heledd Fychan MS	Sion Trewyn Nick Unwin
16/01/25	Mabon ap Gwynfor MS	Lisa Turnbull Sion Trewyn
29/01/25	James Evans MS	Lisa Turnbull Sion Trewyn
29/01/25	Welsh Government Social Care Fair Work Forum	Lisa Turnbull
30/01/25	Health Inspectorate Wales	Sandy Harding Lisa Turnbull
07/02/25	Sam Rowlands MS	Lisa Turnbull Sion Trewyn

### 7. Policy Development

- 7.1. In November 2024 RCN Wales launched its annual publication on the Nursing Workforce Nursing Numbers 2024 with a parliamentary drip-in session

4

attended by many MS. The well-known and anticipated publication also attracted media attention (please see separate media report for details).

- 7.2. Physical copies of Nursing Numbers 2024 may be requested from the PPPA team or a PDF downloaded from the RCN Wales website.

The Policy, Parliamentary and Public Affairs Team will be focusing in the first quarter of 2025 to consult, develop and finalise the themes of the RCN Election Manifesto. This process is detailed in the separate Board paper on the election.

- 7.3. RCN Wales will also shortly be launching two policy publications. One to showcase the value of learning disability nursing and the other a parliamentary briefing on Corridor Care with policy recommendations.

## **8. Campaigning on Corridor Care**

- 8.1. A separate paper on Corridor care has been submitted to the Welsh Board

## **9. Campaigning in the Wales 2026 Election**

Top facts from Nursing in Numbers 2024:

- The nursing and midwifery workforce is the largest occupational group in the NHS, making up over 41% of the entire NHS Wales workforce.
- In 2024 NHS Wales has 2,001 registered nurse vacancies.
- NHS Wales spent £142.3 million on agency nursing in 2023-24. This could pay the full-time salaries of 4,677 newly registered nurses.
- Between March 2018 and March 2023, the NHS nursing and midwifery workforce grew by just 10%, compared with 25% for medical and dental professionals and 31% for allied health professionals.
- Every week, nurses give NHS Wales an additional 73,651 hours of overtime. This is the equivalent of 1,964 full-time nurses.
- In the last ten years, the number of nursing staff who feel enthusiastic about their job has fallen by 21 percentage points – from 72% in 2013 to just 51% in 2023. Those who feel they are too busy to provide the level of care they would like have increased by 10 percentage points.

## Page 43

- 9.1. A separate paper on Election has been submitted to the Welsh Board. The campaign launch event at the Senedd will take place on the 24 September 2024.

### **10. Senedd Cross-Party Group on Nursing and Midwifery**

- 10.1. The Welsh Parliamentary Cross-Party Group on Nursing & Midwifery took place on 21 January 2025 with a focus on Consultant Nurses. Three expert RCN members were invited to the meeting; Nia Broughten, Neil James and Norman Young. Nia Broughten addressed the meeting, MS from all political parties were present and there was a lively discussion. Julie Richards, Director of the RCN also attended. This meeting allowed the RCN both to raise the specific issues of nursing policy in those fields, but also more generally showcase the value of nursing expertise.

### **11. Political Conferences**

- 11.1. RCN Wales attends the conferences of the main political parties in Wales with a view to gathering political intelligence and building relationships and influencing party policy development on behalf of our members.
- 11.2. In October 2024 RCN Wales attended the Plaid Cymru Conference in Cardiff. RCN Wales Board Vice Chair, Steve Watson, attended and spoke at the Plaid Cymru Dinner. A newsletter outlining RCN concerns on Corridor Care was distributed to all Plaid Cymru members.
- 11.3. In November 2024 RCN Wales attended the Labour Conference in Llandudno. RCN Wales Board Chair, Jackie Davies, Chaired the Policy Roundtable on Health Inequalities which RCN Wales sponsored. Jeremy Miles MS was the guest speaker.
- 11.4. In 2025 RCN Wales will be attending the Labour and Conservative party conference in the first half of the year and the Plaid Cymru conference in the Autumn.

### **12. Activist Conference**

- 12.1. In December 2024 RCN Wales held an Activist conference in RCN Wales, Ty Maeth. The PPPA team facilitated a Manifesto Development session with Activists which culminated in a policy 'speed dating' event whereby MS of all political parties circulated though tables of Activists primed to discuss with them the top policy concerns of RCN Wales. The event was an opportunity for RCN members to develop politically, influence politically and contribute to the development of the Manifesto.

12.2. Political guests were Jenny Rathbone MS, Sam Rowlands MS and Mabon ap Gwynfor MS.

6

### **13. Group Plan/Business Priorities**

**13.1.** The work of the PPP A team is aligned to Goal 1 of the RCN Strategic c Plan – The RCN as the Voice of Nursing.

### **14. Committees/Entities/Executive Team**

**14.1.** The RCN Wales Director is an ET Member. This paper is for the attention of the Wales Board.

### **15. Four Country**

**15.1.** The influencing of the RCN Wales is both a Wales level and as part of the wider RCN at a UK and international level.

### **16. Implications:**

#### **Equality Impact**

16.1. Specific campaigns and actions are evaluated.

#### **Risk and Assurance**

16.2. The RCN Wales Board maintains a risk register.

#### **Members and Other Stakeholders**

16.3. This detail is elaborated on in the paper content.

#### **Finance/Resources**

16.4. All activity is within RCN Wales allocated budget.

### **17. Recommendations**

17.1. The Wales Board is asked for views on the planned activities, consultations and committee inquires listed herein.



1. This annex provides RCN Wales Board members with supplementary evidence of how RCN Wales ensures that member's views and concerns are raised, discussed and responded to in the Senedd.
2. This report covers the period from the 26<sup>th</sup> Hune 2024 (where Annex A from the previous Welsh Board Meeting ran until) to the 19<sup>th</sup> December 2024 (the date this report was last updated).

### Plenary Breakdown

In chronological order.

<p>First Minister's Question's, 2 July 2024</p>	<p><b>Altat Hussain MS:</b> Will you outline the concrete steps you're taking to train and retain British citizens as doctors and nurses?</p> <p><b>First Minister:</b> If you look at nursing numbers, midwifery numbers, physiotherapists—a whole range of areas where we've deliberately increased our investment in training, and the health Secretary set that out last week—. That's in addition to what we're doing in the new medical school that will open in Bangor, and in addition to what we've successfully done in the last five-to-six years in sustainably increasing general practitioner trainee numbers as well.</p>
<p>Business statement, 02 July 2024</p>	<p><b>Mark Isherwood MS:</b> I ask for an urgent statement from the health and social care Secretary on care home fees. On 6 June, Betsi Cadwaladr University Health Board wrote to care providers in north Wales, setting out a care home fee uplift of just 3.71 per cent for 2024-25, failing to match local authority increases and lower even than Flintshire's average fee increase of 5.33 per cent, which was the lowest in Wales until then. It means that providers</p>

	<p>would receive less for providing continuing healthcare than funded nursing care, despite the continuing healthcare cases being higher in complexity and having additional nursing requirements.</p> <p>Last Friday, Gareth Davies MS and I met Care Forum Wales to discuss their concerns about this. We heard that north Wales now has the lowest care home fees in Wales, putting pressure on providers to stop accepting new continuing healthcare patients and to give notice to their current continuing healthcare-funded residents, a distressing outcome that nobody wants to see at the very time when need has never been greater and health boards so desperately need these care home beds. Urgent intervention is therefore required to ensure both a sustainable settlement and a national approach to fee setting to provide a baseline figure. I call for an urgent statement accordingly.</p> <p><b>Jane Hutt MS, the Trefnydd:</b> Thank you very much, Mark Isherwood, for that very important question, and I know that's something that the Cabinet Secretary for Health and Social Care is actively addressing, but it's also not a question for just the Cabinet Secretary for Health and Social Care; obviously, it's a question for the Minister for Social Care and it is a question for the Cabinet Secretary for Housing, Local Government and Planning. All of these cross-Government responsibilities, Cabinet responsibilities, are key to addressing this issue. And, indeed, the Minister for Social Care, Dawn Bowden, recently made a statement on social care. So, thank you for putting this again on the record in terms of giving me the opportunity to respond on the Government taking this responsibility very seriously.</p>
<p><a href="#">Statement by the Cabinet Secretary for Education: Progress on the rollout of curriculum reform and</a></p>	<p><b>Carolyn Thomas MS:</b> My daughter is a teacher across the border in England. She teaches a class of 30 four to five-year-olds; two are non-verbal, four she thinks need one-to-one, but she has one parttime classroom assistant. She sees what's happening over here and she thinks it's wonderful. Those pupils are taught in a sedate position. She would love to move over here. I have lots of teachers who are friends who are welcoming this new curriculum. I know teacher retention is a big issue right across the UK, with a 1 per</p>

<p><a href="#">next steps</a>, 2 July 2024</p>	<p>cent uplift for a long time for teachers, doctors and nurses—that's austerity happening, and we need to have a change in that.</p>
<p><a href="#">Welsh Conservatives Debate: NHS waiting lists</a>, 3 July 2024</p>	<p><b>Sam Rowlands MS:</b> I don't like to make comparisons across borders, but I think we need to be careful to not allow ourselves to get used to this level of service and these waiting lists and just accept that this is just the way that it is. It's been this way for too long in Wales, but it does not have to continue and does not have to be this way forever. We must again recognise that it must be at times an incredibly difficult work environment for NHS staff to be in, whether it's doctors, nurses, healthcare support workers or allied health professionals, and many others who are working hard and doing their best under incredible strain, thanks to the lack of investment and strategic thinking from Cardiff Labour.</p> <p><b>Altaf Hussain MS:</b> We have surgeons and consultants unable to treat patients because we don't have the theatre capacity. This is one of the most acute symptoms of the rot that the lack of leadership has allowed to set in. We have recruited more specialist consultants and surgeons without a thought given to where these people will actually treat the patients. We did not increase surgical capacity, beds or recruit additional nurses. No, the Government patted itself on the back and told the public, 'Look, we recruited more doctors in our NHS.' It is the disjointed thinking that has brought our NHS to its knees, demoralised its staff and left patients to go blind, lose their hearing and even lose their lives, because they were not treated in time.</p> <p><b>Carolyn Thomas MS:</b> NHS recruitment and retention is a priority, and I welcome that the Minister recently made a statement about offering flexibility to the workforce. When talking to nurses on the picket line, this was a huge issue. Job sharing, having childcarefriendly hours and set shifts were all raised as helpful possibilities. Investment in extra training places for recruitment is now being provided across north Wales at Wrexham University, Bangor—the north Wales medical school—and through Coleg Llandrillo.</p>

	<p><b>Joel James MS:</b> It's because you need to have clinical nurse specialists in place to do it who have had a proper science-backed education. Having these national screening programmes would save so much work for the NHS because it enables issues to be picked up early on, saving valuable resources by treating conditions in the primary stages, rather than trying to deal with more complex issues at a later stage.</p> <p><b>Eluned Morgan MS, Cabinet Secretary for Health and Social Care:</b> Since we launched our recovery plan in April 2022, the NHS has reduced long waits by 70 per cent. More than 2.5 million pathways have been closed at an average rate of 102,000 per month. And it pains me to correct you, Altaf, because I think you're a lovely man, but, actually, we are not the worst-performing part of the UK, and you and the BBC need to do a little fact-check on that. And also you suggested that we have fewer doctors and nurses; in fact, we've gone up by 17 per cent from 2019.</p>
<p><a href="#">Questions to the Cabinet Secretary for Health and Social Care</a>, 3 July 2024</p>	<p><b>Altaf Hussain MS:</b> Thank you very much, Presiding Officer. Cabinet Secretary, on Monday, the Royal College of Nursing in Wales revealed that less than a quarter of all shifts in Wales have sufficient registered nurses. The RCN's last shift survey, which asked nursing staff in Wales about their experiences on their most recent shift, uncovered alarming shortages that are impacting patient safety. Over three quarters of nurses in Wales who participated in the survey reported that the number of nursing staff was not sufficient to meet the needs of patients safely. Around eight in 10 respondents believe that the staffing level on their last shift of the day at work would have been made safer if there was a maximum patient-to-nurse ratio in their workplace. The RCN are calling for the 2016 Nurse Staffing Levels (Wales) Act to be amended to reduce the nurse-to-patient ratios in all settings, and to allow nurses time to care. Therefore, Cabinet Secretary, what steps are you taking to address these critical shortages, and to address the concerns of our nurses?</p>

**Eluned Morgan MS, Cabinet Secretary for Health and Social Care:**

Well, thank you very much, Altaf Hussain, and you'll know that we are taking this very seriously. The fact is we are training more nurses than ever before. We've put more money into it. We've got international recruitment exercises, including with India, and specifically Kerala, to get more excellent nurses from abroad. Also, we are making sure that there is flexibility by default allowed. So, people want to have that flexibility. What that means is that we're more likely to get them as substantive posts rather than agency nurses. And if you look at what's happening in relation to agency nurses, the amount that we're spending on agency has come down significantly as a result of that shift. So, I'm pleased to see that that's happening.

**Altaf Hussain MS:** Thank you, Cabinet Secretary. Of course, the main challenge is retaining nursing staff. There are currently around 2,700 registered nurse vacancies across NHS Wales. If we are to have any hope of filling those vacancies and retaining existing staff, then we have to, in the words of the executive director of the Royal College of Nursing Cymru, ensure: *'that nurses are valued and rewarded if there is to be a sustained supply to meet those staffing levels. This means delivering every promise made to our members that ended our industrial action. The solution to this crisis starts with valuing nursing staff and giving them the time to care.'*

Nurses have said they feel insulted by what was offered to them in comparison to NHS doctors. Sadly, this adds to the narrative that nurses are not valued. Cabinet Secretary, you made a number of commitments to nurses in order for them to abandon their industrial action. When will you deliver on those promises?

**Eluned Morgan MS, Cabinet Secretary for Health and Social Care:**

Thanks very much. Well, we're obviously waiting until the general election is over, and then we'll be waiting for the recommendations of the pay review board to be published, and then we will, obviously, need to enter a negotiation on where we

settle in relation to salaries this year. I do think it's probably worth looking at the fact that, actually, we've just come out of a very difficult negotiation with the doctors, as you say. Some of those junior doctors were actually paid less than nurses, and I do think that we do have to recognise that junior doctors in particular needed a significant uplift, and that is certainly what we've given them.

Can I just also say that you're quite right about retaining the existing staff, which is why we've built this flexibility in, which is why we've got a workforce implementation plan? Much of that is already being delivered. But you're quite right—I think one of the issues we've got to consider also—. You talked about getting the right ratio of nurses and, of course, we do have the Nurse Staffing Levels (Wales) Act 2016, but it's interesting that the health committee of the Senedd has recently written a report on this and they did not follow the recommendations outlined by the RCN, which suggested that we should have that ratio outside of certain hospital settings. I think that we've got to take this team approach, which is so crucial in the NHS. Let's keep nurses working to the top of their licence, and if we can get other people to take the strain off them, at perhaps different grades, then why is that a bad thing?

**Altaf Hussain MS:** Thank you again, Cabinet Secretary. Sadly, the direct consequences of the shortage of nurses is not only the impact on patient safety, but the number of people waiting in pain for treatment in our NHS. We have the longest waiting lists in the UK and over 21,000 people waiting longer than two years for treatment. This is shameful. Cabinet Secretary, Sir Keir Starmer is seeking to become the next occupant of No. 10. He has promised to treat 2 million more patients each year in order to tackle waiting lists in England. How are you planning to tackle Wales's ever-growing waiting lists? What is the Welsh Government plan?

**Eluned Morgan MS, Cabinet Secretary for Health and Social Care:** Thanks very much. As you will know, Altaf, the longest waits have fallen 70 per cent since their peak in March 2022, and I'm not going to apologise for the fact that we treat the most urgent cases

	<p>first. We, of course, also count waiting times very differently from England. We count, as you will know, diagnostics and therapies, and they don't do that in England, so I think we're more honest with the public. And I think it's probably worth emphasising as well that the average waiting time for treatment is 22 weeks. We're also, of course, living with a much older, sicker and poorer population than they do in England. Of course, if Labour is elected and that money goes into the NHS, then we will get a consequential from that and, obviously, it will be up to the Cabinet to determine how we spend that money. I will certainly be making the case, and I think I have managed to make the case, for a proportion of that, at least, if not all of it, to come to help us to tackle those waiting lists, which, of course, are the biggest headache, probably, for me at the moment.</p>
<p>Written question, 07 July</p>	<p><b>Mabon ap Gwynfor MS:</b> What assessment has the Welsh Government made of the latest figures on delayed hospital discharges across Wales?</p> <p>Answered by Cabinet Secretary for Health and Social Care:</p> <p>The Pathways of Care Delays (PoCD) framework has been in operation since April 2023. Monthly delays data are published at <a href="#">Pathway of Care Delays by reason for delay and date (gov.wales)</a> under an extensive set of reason codes, broken down to health board and local authority level, providing a clear oversight of the position across Wales.</p> <p>This is a vital tool for health and social care, providing a comprehensive and consistent dataset about regional discharge delays, enabling relevant interventions and actions to be targeted more appropriately.</p> <p>The most recently published data (June 2024) reports 1,652 total discharge delays. Overall, delay numbers have remained fairly static over recent months.</p> <p>From the monthly reports, the highest delays relate to assessment-related delays – both social care and healthcare-led. There has been an overall reduction in these assessment-related</p>

	<p>delays from June 2023 (716) to June 2024 (676), particularly for waits relating to the allocation of a social worker (from 162 to 104) and nursing/medical-related delays (220 to 159).</p> <p>We are addressing assessment-related delays through the increased uptake of trusted assessor roles within hospitals and we are now taking forward work with stakeholders in the care home and home care sectors to support improvements in these areas.</p> <p>While we have seen areas of improvements across regions and across certain delay reason codes, there is still more that needs to be done. Hospital discharge delays are also a key focus for winter preparedness.</p>
<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> How is the Welsh Government working to bolster the number of dental support staff in the Welsh NHS?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>Our National Workforce Implementation Plan sets out actions to improve retention, including improving staff wellbeing, and continued investment in education and training.</p> <p>The Welsh Government has and will continue to invest in the workforce required to support our health system in Wales and our investment will be maintained at £283.126 million for 2024-25. This will support education and training programmes for healthcare professionals in Wales.</p> <p>Undergraduate Dental Hygiene and Therapy and Dental Hygiene training places have increased in recent years. Existing training provision has been expanded at Cardiff University and in North Wales training is provided via Bangor University.</p> <p>A set of targeted workforce plans have been published or are in development as a result of priorities identified in A Healthier Wales: Our Workforce Strategy for Health and Social Care Workforce, which was published in 2020, setting a 10-year strategic direction and vision for workforce transformation. These</p>



	<p>specific workforce plans span mental health, pharmacy, dentistry nursing and primary care.</p>
<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> Will the Cabinet Secretary assist in the future expansion of the nursing degree scheme being offered by The Open University on behalf of HEIW, so that it may offer more than the current maximum of 130 spaces, if demand is high?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>Health Education and Improvement Wales (HEIW) is working with all commissioned Healthcare Education providers to maximise the number of applicants to programmes to meet the workforce needs of NHS Wales. The Open University, like all other contracted nurse education providers has seen an increase in the number of preregistered nurse education places commissioned over the last few years. Any future increases would depend on the funding available and demand.</p>
<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> How is the Welsh Government ensuring a high standard across all hospitals in Wales in the provision of care for patients with learning disabilities?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>All patients in Welsh hospitals receive the same high standard of care irrespective of their individual conditions or circumstances. These standards are monitored and evaluated regularly by health boards and the Welsh Government through our established reporting procedures.</p> <p>For people with learning disabilities accessing hospital services, the key approach is to make the appropriate reasonable adjustments necessary for individuals to receive equitable treatment that meets their personal needs. This is a key principle within the Equality Act.</p>

	<p>To help achieve this there are a number of specific additional processes and approaches in place. These include:</p> <ul style="list-style-type: none"> <li>• Learning Disability Annual Health checks – that ensures early identification, intervention and prevention which are available to all individuals with a learning disability.</li> <li>• A Once for Wales Health profile that enables people with a learning disability and their families to share relevant information and provide healthcare staff with key information to help them provide safe, and person-centred healthcare.</li> <li>• The Care bundle - a series of interventions to ensure the safety and quality of care of people with a learning disability.</li> </ul> <p>In addition, in April 2022 we introduced the Foundation Phase of the Paul Ridd Learning Disability Awareness Training Programme which provides all NHS staff in a public facing role with the training needed to understand, identify and make the reasonable adjustments necessary for people with learning disabilities to access these services.</p> <p>At the last count (December 2023) over 55,000 staff had undertaken this training which complements the existing learning disability champions training offered within health boards. Health boards and hospitals are employing a growing number of Learning Disability Acute Liaison Nurses with work currently underway to evaluate the impact and effectiveness of these roles.</p>
<p><a href="#">Stage 4 of The Local Government Finance (Wales) Bill</a>, 16 July 2024</p>	<p><b>Sam Rowlands MS:</b> Whilst I always acknowledge the incredible efforts made by so many in our health service, as the shadow health Minister, I'm far too regularly contacted by residents, health workers, charities and other organisations about the poor experience that too many people that we represent are facing. Sick people are languishing on waiting lists or waiting an age for an ambulance after they suffer a terrible fall. Doctors, nurses and others are operating in crumbling hospitals, and don't get the funding they need to deliver for patients. It's a laser-like focus on these issues that should be the priority of this Welsh Government.</p>

<p><a href="#">Debate: Welsh Government Annual Report— Delivering the government’s priorities and legislative programme,</a> 16 July 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> Meanwhile, the praise of cancer performance rings rather hollow when you consider that almost half of cancer patients in Wales do not receive the treatment that they need in time. Furthermore, the recruitment of 250 healthcare professionals from Kerala is a drop in the ocean compared to the glaring gaps across the workforce, particularly in areas such as nursing, GP services and oncology. Indeed, the fact that the Government is having to draw on the personnel of health services outside of Wales reflects poorly on existing retention strategies.</p>
<p>Written question, 14 August</p>	<p><b>Andrew RT Davies MS:</b> Will the Welsh Government accept the recommendations of the NHS Pay Review Body for nursing staff, as has been done by the UK Government for NHS England?</p> <p>Substantive response found <a href="#">here</a>.</p>
<p>Written question, 14 August 2024</p>	<p><b>Cefin Campbell MS:</b> What measures does the Welsh Government have in place to measure the effectiveness of the NHS Bursary in Wales?</p> <p>Answered by Cabinet Secretary for Health and Social Care:</p> <p>Bursary uptake for healthcare students requires a commitment to work in Wales, in a health or social care setting, for two years post-graduation.</p> <p>The table below provides a summary of the number of students who were bursary funded and secured posts in Wales at the end of the recruitment round in December 2023. This is the latest data available.</p>

	Area of study	2023 bursary graduate numbers	Available to work in Wales	% recruited of those available to work	Declared in employment in Wales (as of 7/12/2023)
	Allied health professional courses	310	288	80%	231
	Healthcare science courses	184	160	86%	137
	Nursing courses	962	869	91%	793

Officials regularly discuss the impact of the NHS bursary with key stakeholders, including students, and we intend to consult about the future of the NHS bursary to ensure it remains fit for purpose.

Written question, 28 August 2024	<p data-bbox="448 562 1355 680"><b>Rhys ab Owen MS:</b> Will the Welsh Government commit to increasing the number of district nurses back to, and potentially exceeding, the number of district nurses in 2010?</p> <p data-bbox="448 790 1355 824">Answered by Cabinet Secretary for Health and Social Care:</p> <p data-bbox="448 860 1355 1016">The number of staff in district nursing teams has increased thanks to Further Faster funding and this is a priority for the Care Action Committee, which brings together the Welsh Government, NHS and local authorities.</p>
----------------------------------	--

Written question, answered on 04 September 2024	<p data-bbox="448 1167 1355 1200"><a href="#">Mabon ap GwynforDwyfor Meirionnydd</a></p> <p data-bbox="448 1294 1355 1368"><a href="#">What is the Cabinet Secretary doing to stop the practice of corridor care in Welsh hospitals?</a></p>
---	--

<p>Written question, 11 September 2024</p>	<p><b>Darren Millar MS:</b> Will the Cabinet Secretary provide an update on the NHS pay award for nursing staff on agenda for change contracts in Wales?</p> <p>Answered by Cabinet Secretary for Health and Social Care:</p> <p>The First Minister announced an above-inflation pay award for NHS staff and many other staff working in the public sector on 10 September. More information can be found <a href="#">here</a>.</p>
--	---

19

## Page 57

<p><a href="#">Statement by the Cabinet Secretary for Finance and Welsh Language: Public sector pay</a>, 17 September 2024</p>	<p><b>Heledd Fychan MS:</b> There are limited opportunities for continuing professional development, which is also a bone of contention that arises time and time again for bodies such as the RCN, which has rightly noted how NHS nurses are at a disadvantage in this regard as compared to doctors. I would, therefore, urge the Welsh Government to look again at these wider issues with a renewed sense of purpose to ensure that the value we attribute to the work of our NHS staff and school teachers fully reflects their contribution to our nation's well-being. May I ask you how you will work with your fellow Cabinet members to ensure that the wider financial challenges will also be solved?</p>

First Minister's  
Questions, 17  
September 2024

**Eluned Morgan MS, First Minister of Wales:** Thanks very much. I obviously have to declare an interest in relation to this surgery, because it serves many members of my family. The decision on what happens in relation to how health is organised is one for the health board, and there are established procedures for handling proposals for changes to delivery of those local services. We know that the St David's Surgery notified Hywel Dda University Health Board in April of the intention to hand back that contract. Services are due to end in October. I know that the health board carried out engagement with residents about the future of services, because I was there. It is important, though, to know that Llais was engaged throughout that process.

It's not just about a building. Buying a building is not just what it's about. You've actually got to staff these places, and to attract people to work in those surgeries we need to put significant additional sums of money on the table. Part of the reason for handing back that contract was because it was difficult to get people to work in that surgery. I know that the plan is to establish and to keep in St David's a nurse-led service, and I think that will be important for, in particular, the elderly in that area.

20

<p>Business statement, 17 September 2024</p>	<p>Of course, although pay was a factor in the industrial action that we have seen, it is important that we also acknowledge that staff have also decided to take action because of their concerns about working conditions. That, of course, is related to the funding available for those additional things. So, while we welcome this long-awaited announcement on wages, it's important that we today remember and recognise that this alone will not solve all of the problems facing the workforce, nor will it resolve the difficulties that face us in terms of recruiting and retaining staff. For example, we need to introduce more flexible working patterns in the NHS, and this will be vitally important in terms of efforts to solve the problems that are deeply rooted when it comes to staff retention. The Welsh Government has tended to support that in principle, but has failed to a great extent to deliver in practice.</p> <p>There are limited opportunities for continuing professional development, which is also a bone of contention that arises time and time again for bodies such as the RCN, which has rightly noted how NHS nurses are at a disadvantage in this regard as compared to doctors. I would, therefore, urge the Welsh Government to look again at these wider issues with a renewed sense of purpose to ensure that the value we attribute to the work of our NHS staff and school teachers fully reflects their contribution to our nation's well-being. May I ask you how you will work with your fellow Cabinet members to ensure that the wider financial challenges will also be solved?</p>
<p><a href="#">Plaid Cymru Debate: NHS Waiting lists</a>, 18 September 2024</p>	<p><b>Jeremy Miles MS, Cabinet Secretary for Health and Social Care:</b> The majority of people seen by the health service will receive good-quality care in a timely manner. For the majority, that means primary care from their GP, a nurse, a pharmacist, physiotherapist, a dentist, or even an optician, perhaps. Some will need further treatment in hospital. At the moment, the average waiting time is 22 weeks for planned treatment. Unfortunately, many people wait longer than this, mainly as a result of the impact of the COVID-19</p>

	<p>pandemic. So soon after a decade of austerity, it's cast a long shadow over our health service.</p>
<p><a href="#">Plaid Cymru Debate: NHS Waiting lists</a>, 18 September 2024</p>	<p><b>Jenny Rathbone MS:</b> The reason this is so difficult is because we don't have the community health and social care services that we need, and that is the challenge that we absolutely have to crack. But it is not something that we're going to be able to do easily. I recently had a meeting with the the person in charge of the community nursing service— something that I'm absolutely passionate about—that I visited in Cwm Taf just before the lockdown. I've seen just how amazing it is and how efficient it is, using the latest technology to allocate people according to the needs of the individual. But we have hugely expanded the number of community nursing teams, hugely—particularly in North Wales, you'll be interested to know—but it is not nearly enough, and we still have lots and lots of people who don't need to be in hospital, some of whom are admitted because the services don't exist in the community to prevent them having to come into hospital. This is something I am personally dealing with at the moment, and I can tell you just how complicated it is.</p>
<p><a href="#">Questions to the Cabinet Secretary for Health and Social Care</a>, 25 September 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> The problems in the health service have been known for years, of course, with warnings given of a shortage of GPs and a shortage of nurses and others in the workforce for a decade and more. The lack of action on these warnings has a direct impact, therefore, on the health and well-being of people on a daily basis today.</p> <p>Consider the story of Rhythwyn Evans from Tregaron. Four years ago, having been inspired by Captain Tom, Rhythwyn raised £50,000 during the pandemic for the Hywel Dda health board by walking around his bungalow. Now, Rhythwyn is receiving care in a bed at Tregaron hospital, at the very time when the board is considering closing those beds there. This follows the closure of the Dyfi ward in Tywyn, closing the minor injury units in Llandrindod, Brecon and Prince Philip in Llanelli overnight, and considering closing</p>



	<p>the paediatric unit in Bronglais, all because of a shortage of nurses and an inability to staff these facilities, and quite contrary to your rhetoric of providing care closer to home. So, what will you do differently to ensure that we have the necessary workforce in place in order to ensure that these patients receive care in their community?</p> <p><b>Jeremy Miles MS, Cabinet Secretary for Health and Social Care:</b> Well, more people are employed by the health service now than ever before. The GP figures are consistent, after a significant increase. There are recruitment challenges in parts of the health and care service, as is the case across the United Kingdom The work that we've been doing to recruit is seeing success. We have more places now for nurse training than were filled last year. Everything isn't right. I have acknowledged that. I have acknowledged that there are specific needs. But we have seen successes in some of our work. We haven't reached where we want to and we've seen challenges in the system. But it's clear from the discussions that we've already had today what our commitment is as a Government in terms of training more doctors, training more nurses, recruiting more dentists and other healthcare professionals. There is work to do, but we do have plans in place for all of those things.</p>
<p><a href="#">Plaid Cymru Debate: Welsh Government priorities</a>, 25 September 2024</p>	<p><b>Jenny Rathbone MS:</b> By putting iechyd da first on the list of priorities, Eluned Morgan's Government has clearly recognised the importance of improving our performance in health, fully realising that this is the biggest challenge to reduce the waiting lists for procedures that can only occur in a hospital setting. Twenty three thousand waiting for more than two years is far too long, and we need to break this down by health board to understand where and for what procedure the problem lies. Many of these requests for secondary care are for diagnostic services, where GPs are not sure whether the issue the patient has brought to them is routine and easily addressed in primary care, or whether there is something more concerning going on. Clearly, in</p>

doctors' minds, there is always the possibility of cancer or some other really serious issue. Early identification is always the most important thing for a good outcome and for recovery.

Clearly, anyone who needs an operation that can only be done in a hospital requires them to have a bed to recuperate in, and that involves health and social services working together on speeding up the process for getting people out of hospital whose medical treatment no longer requires them to be in hospital. A great deal of work has been done on improving the number of community nursing teams that are available. We had three pilots just before COVID struck, and we've now got 62 district nursing teams operating in our communities. I've seen at first hand just how effective they are at ensuring that people can be assessed for ongoing health needs in their own home, which is much better and clearer on their needs than if you were trying to assess them in hospital.

This is a really complicated issue, and that is why it's absolutely right that we should be sharing good practice across our borders. We can't simply be blind to what's going in other parts of the country, and as long as we're working with people whose aim is to maintain a public health service, I'm very happy to do that. What we didn't want to do was work with the Tories whose only objective was to privatise the national health service, but, unless we improve our national health service, then we are going to be faced by people voting with their feet. And we have to work with individual people, all our staff, many of whom are exhausted as a result of COVID and drained of additional resources. We have a very challenging situation, but we need to recognise that situation and ensure that we're doing something about it, because otherwise people get very frustrated and will want an even more radical change than I know Plaid is assuming. We have to face down the anger and frustration that was expressed in the general election, with so many people in 13 constituencies voting Plaid as their second choice—excuse me, Reform as their second choice—because this indicates that there is a genuine frustration with the rationing that's been going on over the last 14 years, and

	<p>people need hope that there is going to be change. And I am positive that we are going to get rapid change. There's already been quite a lot of change from the UK Government, and we're going to see a lot more.</p>
<p>Finance Committee, 25 September 2024</p>	<p><b>Mark Drakeford MS, Cabinet Secretary for Finance and Welsh Language:</b> I remember a staff nurse in Bronglais hospital saying to me, after we opened the new accident and emergency department there, 'I've spent 10 years in a building that worked against me, and now I'm working in a building that works for me.' We have too many people in Wales who are still in buildings that work against them, and so, if we do, Chair—and, as I say, it's a big 'if'—have any capital available next year, I've started conversations with the health Minister about, 'How can we deploy capital to assist you with efficiency and get better return on the revenue investment that we make?'</p>
<p>Speech, 08 October 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> This, of course, is only a reflection of wider flaws in the system. The number of mental health beds has decreased from over 2,000 in 2010 to 1,271 this year, which is the lowest ever level of capacity; likewise the workforce, with only 7.2 mental health consultant nurses in Wales at the moment—the lowest number ever. As the RCN says, simply put, the size of the mental health workforce is inadequate for the demands there.</p> <p>Part of the problem, and I'm tired of having to repeat this, is the lack of specific data on staffing levels in the mental health sector. This information is vital in order to ensure a good service in the right places at the right time, and I was very pleased to hear the Minister emphasise the importance of the need for accurate data in her statement. So, I would like an update from the Minister in her response, please, about how the Government wants to address this very familiar problem.</p> <p>There are legislative gaps to be considered in this context as well. While the Nurse Staffing Levels (Wales) Act 2016 has been a success on the whole in terms of increasing the workforce, section 25B, as it's known, has not yet been</p>

	<p>extended to include mental health nurses. So, could I ask for an update from the Minister regarding a timetable for when this change will be implemented?</p>
<p>First Minister's Questions, 08 October 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> According to the nurse retention plan, which the First Minister announced when she was health Minister last year, organisations are expected to respond compassionately to flexible working requests in accordance with the needs of the service. But the Royal College of Nursing tells me that a number of nurses come to them saying that their requests to work flexibly have been rejected. Does the First Minister therefore believe that this policy that she introduced is working, and will she release the data to show the level of success of the measure?</p> <p><b>First Minister:</b> In terms of nurse retention and that ability to work flexibly, this is something relatively new, and obviously it's important that we look at how it's working in practice. We must ensure that the needs of the service are also taken into account, but the default is that permission to work flexibly should be granted, and I think that that is better than seeing people leaving to work for agencies. So, that's the concept underpinning it. We will have to look at how it's working on the ground. Perhaps it's working better in some areas than others, so I'm sure the Minister for health will want to assess how it's working on a practical level and will want to consider what needs to be done to improve the situation, if it isn't working in the way that we first anticipated.</p>
<p>Written Questions, 17 October 2024</p>	<p><b>Rhys ab Owen MS:</b> Will the Welsh Government publish the current number of vacancies for specialist palliative care nursing?</p> <p><b>Cabinet Secretary:</b> NHS vacancy statistics are currently <a href="#">published</a> for each Electronic Staff Record staff group (i.e. nursing and midwifery registered) and not by job role or areas of work. The statistics are classified as official</p>

	<p>statistics in development as data is collected from a relatively new source, with known data quality issues.</p>
<p>Written Questions, 18 October 2024</p>	<p><b>Rhys ab Owen MS:</b> What plans does the Welsh Government have to develop community and district nursing provision to support people with a terminal illness closer to home?</p> <p><b>Cabinet Secretary:</b> As part of Building Community Capacity Further Faster, we have prioritised the delivery of district nursing and specialist palliative care nursing at weekends through an This is an additional annual investment of £2.87m for district nursing services and £0.75m in specialist palliative care nursing.</p> <p>The National Palliative and End-of-Life Care programme provides national leadership and support and acts as a forum to drive forward change and oversee health boards' efforts to deliver the Welsh Government's vision for improving end of life care in Wales.</p>
<p>Topical Question, 06 November 2024 (not selected)</p>	<p><b>Gareth Davies MS:</b> Will the Cabinet Secretary make a statement on the Royal College of Nursing rejecting the Welsh Government's latest 5.5 per cent pay offer?</p>
<p>First Minister's Questions, 12 November 2024</p>	<p><b>Rhun ap Iorwerth MS:</b> Last week, nurses rejected the latest pay offer made by the Labour Government. The Royal College of Nursing said this: "this fails to match the safetycritical nature of their work and the extensive skills they bring to the NHS." Does the First Minister have a plan to resolve this? And if there is a plan, what is that plan?</p> <p><b>First Minister:</b> Well, we greatly value the work that our nurses do in Wales, in the NHS, and they do so much to help provide that life-saving and live-changing care for people in what you rightly say is a very pressurised environment, and that's why we were pleased that we were able to offer an</p>

above-inflation pay rise this financial year—a 5.5 per cent increase—which was the same thing as the other unions accepted in Wales. The 'Agenda for Change' staff were on that. And I think it is important that we look at how we've changed the number of people who are agency workers, so we're doing what the RCN asked us to do, to put more people into substantive roles, rather than paying agencies. So, all of that is improving, and, of course, we'll always be open to discuss, with the RCN, about how we can come to a conclusion with this very difficult issue. But, obviously, budgets are tight, 5.5 per cent is an above-inflation pay rise, and, of course, it is what we've offered to other people in the NHS.

**Rhun ap Iorwerth MS:** We've had a description of what the Government says it has done, but, clearly, no plan, and I can't overemphasise how important it is that there is a plan now on pay, and on elements such as training and recruitment. The nursing agency bill, whilst it has come down a little, was still at a staggering £142 million last year. The RCN's 'Nursing in Numbers' report, published last week, tells us that that could pay for 4,677 full-time, newly registered nurses, and, if Labour fail to tackle the staffing crisis, that agency bill can only grow.

Now, I'm pleased that the nursing bursary has been extended for the 2024-25 academic year, though nothing beyond that, but, in what can only be described as a backwards step, Welsh Government has cut places on all nursing undergraduate courses for the first time in a decade. The number of nursing degree places agreed to by Welsh Government this year represents only between 50 per cent and 69 per cent of what health boards requested. Why has Government decided to risk making the staffing crisis worse by cutting student places?

**First Minister:** Well, first of all, on the agency issue, the fact is that it's come down considerably—the amount of money we spend on agency—and the RCN have been very welcoming of the fact that that has definitely come down.

When it comes to nurse bursary, I think it is important to recognise that we have as many training places this year as were filled last year. So, if you think about how many came out last year, we're putting the same number in. So, you can have very ambitious targets. If you can't fill the number of people going in, because they're not applying for it, then, obviously, that becomes a problem. So, we're filling, we're providing, as many as were filled last year.

**Rhun ap Iorwerth MS:** Where's the plan to bring more people in? And why cap that number now, unless you feel that there's no hope in setting more ambitious targets for bringing new students in? Let me highlight more figures from the 'Nursing in Numbers' report. There are around 2,000 nursing vacancies in the Welsh NHS. That's why we need to bring more nurses in. Nurses in Wales are working more than 73,000 extra hours a week. No wonder the RCN say that workforce planning in Wales is under-researched and underresourced. For years, Welsh Government didn't even publish statistics for the vacancy numbers in Wales, and they have failed to put a comprehensive and sustainable workforce plan in place.

Now, the Nurse Staffing Levels (Wales) Act 2016 was pioneering, but we can and should go further. We're still waiting, aren't we, for the statutory guidance around the Act that the RCN has long argued for, setting out how health boards and trusts should fulfil all their responsibilities under it. So, will the First Minister commit to strengthening the law on safe nursing staffing levels in Wales, so that the NHS provides an environment that is safer for patients and fairer for staff?

**First Minister:** First of all, the number of vacancies in Wales in terms of nursing is down significantly on where it was before. We obviously have recruited hundreds of new international nurses, in part because of the memorandum of understanding that we had with Kerala, which I was very proud to sign, and I met many of those nurses in the Diwali event that I attended last week.

	<p>In relation to the nurse staffing level Act, a committee of this Senedd did a report into this—they took evidence from a number of people—and that committee report did not recommend extending the staffing level as was recommended by the RCN, and that was after hearing evidence from a number of sources, because we are keen to make sure that people work to the top of their licence. It is important that we use, perhaps, people who can help within the ward, who are not necessarily nurses, to do some of the work that releases nurses to do the work that only they can do. So, that is not something that was recommended by the committee and is not something that the Welsh Government is looking at at this point.</p>
<p>14 November 2024, Economy, Trade and Rural Affairs Committee</p>	<p><b>Sarah Simmonds - Executive director of workforce and organisational development at Aneurin Bevan University Health Board.</b> I have to mention work we're doing with the Royal College of Nursing, which is around RCN Healthcare Connect, and that's allowing people to go on to nurse training through a different route, and I think we're the first health board in Wales to pick that up.</p>
<p>Committee for the Scrutiny of the First Minister 13 December 2024</p>	<p><b>Jenny Rathbone MS:</b> “But one of the issues that came up yesterday in the Royal College of Nursing round-table, which I was at with two other Members, was absolutely clear in that health and social care are not working well together, and that's something that's going to need Welsh Government intervention. There've been the beginnings of change, with the pink army in Cardiff, et cetera. But other nurses from around Wales were saying that, actually, often, social care and health have contradictory aims and contradictory objectives, because health wants to get people out of hospital, keep them out of hospital and prevent them coming into hospital. Social care is managing a budget and is trying to find ways of avoiding paying for particular things for particular individuals. So, how are we going to deal with this, given that we don't have all the levers here, in the sense that this is, obviously, something that the UK Government needs to grapple with?</p> <p><b>First Minister:</b> Look, this is not new. We're not suddenly waking up and thinking that there's a relationship between health and social care; this is something that the Welsh</p>



	<p>Government has understood for a very long time, and, in fact, when we've got into trouble in the past, it's because we've said, 'We're going to put the money into social care', because there is a direct relationship. So, what we've done now is we've got this specific budget, called the RIF—I can't even remember what it's called—regional integration fund, and there's about £144 million in there and they're not allowed to use it unless they work together. That is an example of what—. We had the parliamentary review that looked into how we should organise the health services in Wales, and this was something that they recommended, and we've followed through and we've been getting them to work together. There's more we can do.</p> <p>We've put more money this financial year, for example, into reablement. One of the key things we need to do—. Now, reablement is, actually, for local government, as you know, Carolyn, and, for me, it's really important that we try and get people back on their feet to be independent, and the longer you leave them in hospital, the more they become deconditioned and the bigger the packages of care you have to give. So, that's an example of where, if you want to help the NHS out, you need to get reablement services sorted, and to do that you need to start recruiting more people in that space. All of that is happening, but it's how much more can you do all the time?</p>
--	---

**Appendix A – Senedd Impact Report**

1. This annex provides RCN Wales Board members with supplementary evidence of how RCN Wales ensures that member’s views and concerns are raised, discussed and responded to in the Senedd.
2. This report covers the period from the 26<sup>th</sup> Hune 2024 (where Annex A from the previous Welsh Board Meeting ran until) to the 19<sup>th</sup> December 2024 (the date this report was last updated).

**Plenary Breakdown**

In chronological order.

<p>First Minister’s Question’s, 2 July 2024</p>	<p><b>Altaf Hussain MS:</b> Will you outline the concrete steps you're taking to train and retain British citizens as doctors and nurses?</p> <p><b>First Minister:</b> If you look at nursing numbers, midwifery numbers, physiotherapists—a whole range of areas where we've deliberately increased our investment in training, and the health Secretary set that out last week—. That's in addition to what we're doing in the new medical school that will open in Bangor, and in addition to what we've successfully done in the last five-to-six years in sustainably increasing general practitioner trainee numbers as well.</p>
<p>Business statement, 02 July 2024</p>	<p><b>Mark Isherwood MS:</b> I ask for an urgent statement from the health and social care Secretary on care home fees. On 6 June, Betsi Cadwaladr University Health Board wrote to care providers in north Wales, setting out a care home fee uplift of just 3.71 per cent for 2024-25, failing to match local authority increases and lower even than Flintshire's average fee increase of 5.33 per cent, which was the lowest in Wales until then. It means that providers would receive less for providing continuing healthcare than funded nursing care, despite the continuing healthcare cases being higher in complexity and having additional nursing requirements.</p>

	<p>Last Friday, Gareth Davies MS and I met Care Forum Wales to discuss their concerns about this. We heard that north Wales now has the lowest care home fees in Wales, putting pressure on providers to stop accepting new continuing healthcare patients and to give notice to their current continuing healthcare-funded residents, a distressing outcome that nobody wants to see at the very time when need has never been greater and health boards so desperately need these care home beds. Urgent intervention is therefore required to ensure both a sustainable settlement and a national approach to fee setting to provide a baseline figure. I call for an urgent statement accordingly.</p> <p><b>Jane Hutt MS, the Trefnydd:</b> Thank you very much, Mark Isherwood, for that very important question, and I know that's something that the Cabinet Secretary for Health and Social Care is actively addressing, but it's also not a question for just the Cabinet Secretary for Health and Social Care; obviously, it's a question for the Minister for Social Care and it is a question for the Cabinet Secretary for Housing, Local Government and Planning. All of these crossGovernment responsibilities, Cabinet responsibilities, are key to addressing this issue. And, indeed, the Minister for Social Care, Dawn Bowden, recently made a statement on social care. So, thank you for putting this again on the record in terms of giving me the opportunity to respond on the Government taking this responsibility very seriously.</p>
<p><a href="#">Statement by the Cabinet Secretary for Education: Progress on the rollout of curriculum reform and next steps, 2 July 2024</a></p>	<p><b>Carolyn Thomas MS:</b> My daughter is a teacher across the border in England. She teaches a class of 30 four to five-year-olds; two are non-verbal, four she thinks need one-to-one, but she has one parttime classroom assistant. She sees what's happening over here and she thinks it's wonderful. Those pupils are taught in a sedate position. She would love to move over here. I have lots of teachers who are friends who are welcoming this new curriculum. I know teacher retention is a big issue right across the UK, with a 1 per cent uplift for a long time for teachers, doctors and nurses—that's austerity happening, and we need to have a change in that.</p>

[Welsh Conservatives Debate: NHS waiting lists](#), 3 July 2024

**Sam Rowlands MS:** I don't like to make comparisons across borders, but I think we need to be careful to not allow ourselves to get used to this level of service and these waiting lists and just accept that this is just the way that it is. It's been this way for too long in Wales, but it does not have to continue and does not have to be this way forever. We must again recognise that it must be at times an incredibly difficult work environment for NHS staff to be in, whether it's doctors, nurses, healthcare support workers or allied health professionals, and many others who are working hard and doing their best under incredible strain, thanks to the lack of investment and strategic thinking from Cardiff Labour.

**Altaf Hussain MS:** We have surgeons and consultants unable to treat patients because we don't have the theatre capacity. This is one of the most acute symptoms of the rot that the lack of leadership has allowed to set in. We have recruited more specialist consultants and surgeons without a thought given to where these people will actually treat the patients. We did not increase surgical capacity, beds or recruit additional nurses. No, the Government patted itself on the back and told the public, 'Look, we recruited more doctors in our NHS.' It is the disjointed thinking that has brought our NHS to its knees, demoralised its staff and left patients to go blind, lose their hearing and even lose their lives, because they were not treated in time.

**Carolyn Thomas MS:** NHS recruitment and retention is a priority, and I welcome that the Minister recently made a statement about offering flexibility to the workforce. When talking to nurses on the picket line, this was a huge issue. Job sharing, having childcarefriendly hours and set shifts were all raised as helpful possibilities. Investment in extra training places for recruitment is now being provided across north Wales at Wrexham University, Bangor—the north Wales medical school—and through Coleg Llandrillo.

**Joel James MS:** It's because you need to have clinical nurse specialists in place to do it who have had a proper science-backed education. Having these national screening programmes would save so much work for the NHS because it enables issues to be picked up

	<p>early on, saving valuable resources by treating conditions in the primary stages, rather than trying to deal with more complex issues at a later stage.</p> <p><b>Eluned Morgan MS, Cabinet Secretary for Health and Social Care:</b> Since we launched our recovery plan in April 2022, the NHS has reduced long waits by 70 per cent. More than 2.5 million pathways have been closed at an average rate of 102,000 per month. And it pains me to correct you, Altaf, because I think you're a lovely man, but, actually, we are not the worst-performing part of the UK, and you and the BBC need to do a little fact-check on that. And also you suggested that we have fewer doctors and nurses; in fact, we've gone up by 17 per cent from 2019.</p>
<p><a href="#">Questions to the Cabinet Secretary for Health and Social Care</a>, 3 July 2024</p>	<p><b>Altaf Hussain MS:</b> Thank you very much, Presiding Officer. Cabinet Secretary, on Monday, the Royal College of Nursing in Wales revealed that less than a quarter of all shifts in Wales have sufficient registered nurses. The RCN's last shift survey, which asked nursing staff in Wales about their experiences on their most recent shift, uncovered alarming shortages that are impacting patient safety. Over three quarters of nurses in Wales who participated in the survey reported that the number of nursing staff was not sufficient to meet the needs of patients safely. Around eight in 10 respondents believe that the staffing level on their last shift of the day at work would have been made safer if there was a maximum patient-to-nurse ratio in their workplace. The RCN are calling for the 2016 Nurse Staffing Levels (Wales) Act to be amended to reduce the nurse-to-patient ratios in all settings, and to allow nurses time to care. Therefore, Cabinet Secretary, what steps are you taking to address these critical shortages, and to address the concerns of our nurses?</p> <p><b>Eluned Morgan MS, Cabinet Secretary for Health and Social Care:</b> Well, thank you very much, Altaf Hussain, and you'll know that we are taking this very seriously. The fact is we are training more nurses than ever before. We've put more money into it. We've got international recruitment exercises, including with India, and</p>

specifically Kerala, to get more excellent nurses from abroad. Also, we are making sure that there is flexibility by default allowed. So, people want to have that flexibility. What that means is that we're more likely to get them as substantive posts rather than agency nurses. And if you look at what's happening in relation to agency nurses, the amount that we're spending on agency has come down significantly as a result of that shift. So, I'm pleased to see that that's happening.

**Altaf Hussain MS:** Thank you, Cabinet Secretary. Of course, the main challenge is retaining nursing staff. There are currently around 2,700 registered nurse vacancies across NHS Wales. If we are to have any hope of filling those vacancies and retaining existing staff, then we have to, in the words of the executive director of the Royal College of Nursing Cymru, ensure: *'that nurses are valued and rewarded if there is to be a sustained supply to meet those staffing levels. This means delivering every promise made to our members that ended our industrial action. The solution to this crisis starts with valuing nursing staff and giving them the time to care.'*

Nurses have said they feel insulted by what was offered to them in comparison to NHS doctors. Sadly, this adds to the narrative that nurses are not valued. Cabinet Secretary, you made a number of commitments to nurses in order for them to abandon their industrial action. When will you deliver on those promises?

**Eluned Morgan MS, Cabinet Secretary for Health and Social Care:**

Thanks very much. Well, we're obviously waiting until the general election is over, and then we'll be waiting for the recommendations of the pay review board to be published, and then we will, obviously, need to enter a negotiation on where we settle in relation to salaries this year. I do think it's probably worth looking at the fact that, actually, we've just come out of a very difficult negotiation with the doctors, as you say. Some of those junior doctors were actually paid less than nurses, and I do think that we do have to recognise that junior doctors in particular needed a significant uplift, and that is certainly what we've given them.

Can I just also say that you're quite right about retaining the existing staff, which is why we've built this flexibility in, which is why we've

got a workforce implementation plan? Much of that is already being delivered. But you're quite right—I think one of the issues we've got to consider also—. You talked about getting the right ratio of nurses and, of course, we do have the Nurse Staffing Levels (Wales) Act 2016, but it's interesting that the health committee of the Senedd has recently written a report on this and they did not follow the recommendations outlined by the RCN, which suggested that we should have that ratio outside of certain hospital settings. I think that we've got to take this team approach, which is so crucial in the NHS. Let's keep nurses working to the top of their licence, and if we can get other people to take the strain off them, at perhaps different grades, then why is that a bad thing?

**Altaf Hussain MS:** Thank you again, Cabinet Secretary. Sadly, the direct consequences of the shortage of nurses is not only the impact on patient safety, but the number of people waiting in pain for treatment in our NHS. We have the longest waiting lists in the UK and over 21,000 people waiting longer than two years for treatment. This is shameful. Cabinet Secretary, Sir Keir Starmer is seeking to become the next occupant of No. 10. He has promised to treat 2 million more patients each year in order to tackle waiting lists in England. How are you planning to tackle Wales's ever-growing waiting lists? What is the Welsh Government plan?

**Eluned Morgan MS, Cabinet Secretary for Health and Social Care:** Thanks very much. As you will know, Altaf, the longest waits have fallen 70 per cent since their peak in March 2022, and I'm not going to apologise for the fact that we treat the most urgent cases first. We, of course, also count waiting times very differently from England. We count, as you will know, diagnostics and therapies, and they don't do that in England, so I think we're more honest with the public. And I think it's probably worth emphasising as well that the average waiting time for treatment is 22 weeks. We're also, of course, living with a much older, sicker and poorer population than they do in England. Of course, if Labour is elected and that money goes into the NHS, then we will get a consequential from that and, obviously, it will be up to the Cabinet to determine how we spend that money. I will certainly be making the case, and I think I have managed to make the case, for a proportion of that, at least, if not all

	<p>of it, to come to help us to tackle those waiting lists, which, of course, are the biggest headache, probably, for me at the moment.</p>
<p>Written question, 07 July</p>	<p><b>Mabon ap Gwynfor MS:</b> What assessment has the Welsh Government made of the latest figures on delayed hospital discharges across Wales?</p> <p>Answered by Cabinet Secretary for Health and Social Care:</p> <p>The Pathways of Care Delays (PoCD) framework has been in operation since April 2023. Monthly delays data are published at <a href="https://gov.wales/pathway-of-care-delays-by-reason-for-delay-and-date">Pathway of Care Delays by reason for delay and date (gov.wales)</a> under an extensive set of reason codes, broken down to health board and local authority level, providing a clear oversight of the position across Wales.</p> <p>This is a vital tool for health and social care, providing a comprehensive and consistent dataset about regional discharge delays, enabling relevant interventions and actions to be targeted more appropriately.</p> <p>The most recently published data (June 2024) reports 1,652 total discharge delays. Overall, delay numbers have remained fairly static over recent months.</p> <p>From the monthly reports, the highest delays relate to assessment-related delays – both social care and healthcare-led. There has been an overall reduction in these assessment-related delays from June 2023 (716) to June 2024 (676), particularly for waits relating to the allocation of a social worker (from 162 to 104) and nursing/medical-related delays (220 to 159).</p> <p>We are addressing assessment-related delays through the increased uptake of trusted assessor roles within hospitals and we are now taking forward work with stakeholders in the care home and home care sectors to support improvements in these areas.</p> <p>While we have seen areas of improvements across regions and across certain delay reason codes, there is still more that needs to be done. Hospital discharge delays are also a key focus for winter preparedness.</p>



<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> How is the Welsh Government working to bolster the number of dental support staff in the Welsh NHS?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>Our National Workforce Implementation Plan sets out actions to improve retention, including improving staff wellbeing, and continued investment in education and training.</p> <p>The Welsh Government has and will continue to invest in the workforce required to support our health system in Wales and our investment will be maintained at £283.126 million for 2024-25. This will support education and training programmes for healthcare professionals in Wales.</p> <p>Undergraduate Dental Hygiene and Therapy and Dental Hygiene training places have increased in recent years. Existing training provision has been expanded at Cardiff University and in North Wales training is provided via Bangor University.</p> <p>A set of targeted workforce plans have been published or are in development as a result of priorities identified in A Healthier Wales: Our Workforce Strategy for Health and Social Care Workforce, which was published in 2020, setting a 10-year strategic direction and vision for workforce transformation. These specific workforce plans span mental health, pharmacy, dentistry nursing and primary care.</p>
<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> Will the Cabinet Secretary assist in the future expansion of the nursing degree scheme being offered by The Open University on behalf of HEIW, so that it may offer more than the current maximum of 130 spaces, if demand is high?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>Health Education and Improvement Wales (HEIW) is working with all commissioned Healthcare Education providers to maximise the number of applicants to programmes to meet the workforce needs of NHS Wales. The Open University, like all other contracted nurse</p>

	<p>education providers has seen an increase in the number of preregistered nurse education places commissioned over the last few years. Any future increases would depend on the funding available and demand.</p>
<p>Written question, 10 July 2024</p>	<p><b>Andrew RT Davies MS:</b> How is the Welsh Government ensuring a high standard across all hospitals in Wales in the provision of care for patients with learning disabilities?</p> <p>Answered by Cabinet Secretary for Health, Social Care and Welsh Language:</p> <p>All patients in Welsh hospitals receive the same high standard of care irrespective of their individual conditions or circumstances. These standards are monitored and evaluated regularly by health boards and the Welsh Government through our established reporting procedures.</p> <p>For people with learning disabilities accessing hospital services, the key approach is to make the appropriate reasonable adjustments necessary for individuals to receive equitable treatment that meets their personal needs. This is a key principle within the Equality Act. To help achieve this there are a number of specific additional processes and approaches in place. These include:</p> <ul style="list-style-type: none"> <li>• Learning Disability Annual Health checks – that ensures early identification, intervention and prevention which are available to all individuals with a learning disability.</li> <li>• A Once for Wales Health profile that enables people with a learning disability and their families to share relevant information and provide healthcare staff with key information to help them provide safe, and person-centred healthcare.</li> <li>• The Care bundle - a series of interventions to ensure the safety and quality of care of people with a learning disability.</li> </ul> <p>In addition, in April 2022 we introduced the Foundation Phase of the Paul Ridd Learning Disability Awareness Training Programme which provides all NHS staff in a public facing role with the training needed to understand, identify and make the reasonable adjustments</p>

	<p>necessary for people with learning disabilities to access these services.</p> <p>At the last count (December 2023) over 55,000 staff had undertaken this training which complements the existing learning disability champions training offered within health boards. Health boards and hospitals are employing a growing number of Learning Disability Acute Liaison Nurses with work currently underway to evaluate the impact and effectiveness of these roles.</p>
<p><a href="#">Stage 4 of The Local Government Finance (Wales) Bill</a>, 16 July 2024</p>	<p><b>Sam Rowlands MS:</b> Whilst I always acknowledge the incredible efforts made by so many in our health service, as the shadow health Minister, I'm far too regularly contacted by residents, health workers, charities and other organisations about the poor experience that too many people that we represent are facing. Sick people are languishing on waiting lists or waiting an age for an ambulance after they suffer a terrible fall. Doctors, nurses and others are operating in crumbling hospitals, and don't get the funding they need to deliver for patients. It's a laser-like focus on these issues that should be the priority of this Welsh Government.</p>
<p><a href="#">Debate: Welsh Government Annual Report— Delivering the government's priorities and legislative programme</a>, 16 July 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> Meanwhile, the praise of cancer performance rings rather hollow when you consider that almost half of cancer patients in Wales do not receive the treatment that they need in time. Furthermore, the recruitment of 250 healthcare professionals from Kerala is a drop in the ocean compared to the glaring gaps across the workforce, particularly in areas such as nursing, GP services and oncology. Indeed, the fact that the Government is having to draw on the personnel of health services outside of Wales reflects poorly on existing retention strategies.</p>
<p>Written question, 14 August</p>	<p><b>Andrew RT Davies MS:</b> Will the Welsh Government accept the recommendations of the NHS Pay Review Body for nursing staff, as has been done by the UK Government for NHS England?</p> <p>Substantive response found <a href="#">here</a>.</p>

Written question,  
14 August 2024

**Cefin Campbell MS:** What measures does the Welsh Government have in place to measure the effectiveness of the NHS Bursary in Wales?

Answered by Cabinet Secretary for Health and Social Care:

Bursary uptake for healthcare students requires a commitment to work in Wales, in a health or social care setting, for two years postgraduation.

The table below provides a summary of the number of students who were bursary funded and secured posts in Wales at the end of the recruitment round in December 2023. This is the latest data available.

Area of study	2023 bursary graduate numbers	Available to work in Wales	% recruited of those available to work	Declared in employment in Wales (as of 7/12/2023)
Allied health professional courses	310	288	80%	231
Healthcare science courses	184	160	86%	137
Nursing courses	962	869	91%	793

Officials regularly discuss the impact of the NHS bursary with key stakeholders, including students, and we intend to consult about the future of the NHS bursary to ensure it remains fit for purpose.

Written question,  
28 August 2024

**Rhys ab Owen MS:** Will the Welsh Government commit to increasing the number of district nurses back to, and potentially exceeding, the number of district nurses in 2010?

Answered by Cabinet Secretary for Health and Social Care:

The number of staff in district nursing teams has increased thanks to Further Faster funding and this is a priority for the Care Action Committee, which brings together the Welsh Government, NHS and local authorities.

Written question,  
answered on 04  
September 2024

**Mabon ap Gwynfor**Dwyfor Meirionnydd

	<p>What is the Cabinet Secretary doing to stop the practice of corridor care in Welsh hospitals?</p>
<p>Written question, 11 September 2024</p>	<p><b>Darren Millar MS:</b> Will the Cabinet Secretary provide an update on the NHS pay award for nursing staff on agenda for change contracts in Wales?</p> <p>Answered by Cabinet Secretary for Health and Social Care:</p> <p>The First Minister announced an above-inflation pay award for NHS staff and many other staff working in the public sector on 10 September. More information can be found <a href="#">here</a>.</p>
<p><a href="#">Statement by the Cabinet Secretary for Finance and Welsh Language: Public sector pay,</a> 17 September 2024</p>	<p><b>Heledd Fychan MS:</b> There are limited opportunities for continuing professional development, which is also a bone of contention that arises time and time again for bodies such as the RCN, which has rightly noted how NHS nurses are at a disadvantage in this regard as compared to doctors. I would, therefore, urge the Welsh Government to look again at these wider issues with a renewed sense of purpose to ensure that the value we attribute to the work of our NHS staff and school teachers fully reflects their contribution to our nation's well-being. May I ask you how you will work with your fellow Cabinet members to ensure that the wider financial challenges will also be solved?</p>
<p>First Minister's Questions, 17 September 2024</p>	<p><b>Eluned Morgan MS, First Minister of Wales:</b> Thanks very much. I obviously have to declare an interest in relation to this surgery, because it serves many members of my family. The decision on what happens in relation to how health is organised is one for the health board, and there are established procedures for handling proposals for changes to delivery of those local services. We know that the St David's Surgery notified Hywel Dda University Health Board in April of the intention to hand back that contract. Services are due to end in October. I know that the health board carried out engagement with residents about the future of services, because I</p>

	<p>was there. It is important, though, to know that Llais was engaged throughout that process.</p> <p>It's not just about a building. Buying a building is not just what it's about. You've actually got to staff these places, and to attract people to work in those surgeries we need to put significant additional sums of money on the table. Part of the reason for handing back that contract was because it was difficult to get people to work in that surgery. I know that the plan is to establish and to keep in St David's a nurse-led service, and I think that will be important for, in particular, the elderly in that area.</p>
<p>Business statement, 17 September 2024</p>	<p>Of course, although pay was a factor in the industrial action that we have seen, it is important that we also acknowledge that staff have also decided to take action because of their concerns about working conditions. That, of course, is related to the funding available for those additional things. So, while we welcome this long-awaited announcement on wages, it's important that we today remember and recognise that this alone will not solve all of the problems facing the workforce, nor will it resolve the difficulties that face us in terms of recruiting and retaining staff. For example, we need to introduce more flexible working patterns in the NHS, and this will be vitally important in terms of efforts to solve the problems that are deeply rooted when it comes to staff retention. The Welsh Government has tended to support that in principle, but has failed to a great extent to deliver in practice.</p> <p>There are limited opportunities for continuing professional development, which is also a bone of contention that arises time and time again for bodies such as the RCN, which has rightly noted how NHS nurses are at a disadvantage in this regard as compared to doctors. I would, therefore, urge the Welsh Government to look again at these wider issues with a renewed sense of purpose to ensure that the value we attribute to the work of our NHS staff and school teachers fully reflects their contribution to our nation's wellbeing. May I ask you how you will work with your fellow Cabinet members to ensure that the wider financial challenges will also be solved?</p>
<p><a href="#">Plaid Cymru</a> <a href="#">Debate: NHS</a></p>	<p><b>Jeremy Miles MS, Cabinet Secretary for Health and Social Care:</b> The majority of people seen by the health service will receive good-</p>

<p><a href="#">Waiting lists</a>, 18 September 2024</p>	<p>quality care in a timely manner. For the majority, that means primary care from their GP, a nurse, a pharmacist, physiotherapist, a dentist, or even an optician, perhaps. Some will need further treatment in hospital. At the moment, the average waiting time is 22 weeks for planned treatment. Unfortunately, many people wait longer than this, mainly as a result of the impact of the COVID-19 pandemic. So soon after a decade of austerity, it's cast a long shadow over our health service.</p>
<p><a href="#">Plaid Cymru Debate: NHS Waiting lists</a>, 18 September 2024</p>	<p><b>Jenny Rathbone MS:</b> The reason this is so difficult is because we don't have the community health and social care services that we need, and that is the challenge that we absolutely have to crack. But it is not something that we're going to be able to do easily. I recently had a meeting with the the person in charge of the community nursing service—something that I'm absolutely passionate about—that I visited in Cwm Taf just before the lockdown. I've seen just how amazing it is and how efficient it is, using the latest technology to allocate people according to the needs of the individual. But we have hugely expanded the number of community nursing teams, hugely—particularly in North Wales, you'll be interested to know—but it is not nearly enough, and we still have lots and lots of people who don't need to be in hospital, some of whom are admitted because the services don't exist in the community to prevent them having to come into hospital. This is something I am personally dealing with at the moment, and I can tell you just how complicated it is.</p>
<p><a href="#">Questions to the Cabinet Secretary for Health and Social Care</a>, 25 September 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> The problems in the health service have been known for years, of course, with warnings given of a shortage of GPs and a shortage of nurses and others in the workforce for a decade and more. The lack of action on these warnings has a direct impact, therefore, on the health and well-being of people on a daily basis today.</p> <p>Consider the story of Rhythwyn Evans from Tregaron. Four years ago, having been inspired by Captain Tom, Rhythwyn raised £50,000 during the pandemic for the Hywel Dda health board by walking around his bungalow. Now, Rhythwyn is receiving care in a bed at Tregaron hospital, at the very time when the board is</p>

	<p>considering closing those beds there. This follows the closure of the Dyfi ward in Tywyn, closing the minor injury units in Llandrindod, Brecon and Prince Philip in Llanelli overnight, and considering closing the paediatric unit in Bronglais, all because of a shortage of nurses and an inability to staff these facilities, and quite contrary to your rhetoric of providing care closer to home. So, what will you do differently to ensure that we have the necessary workforce in place in order to ensure that these patients receive care in their community?</p> <p><b>Jeremy Miles MS, Cabinet Secretary for Health and Social Care:</b> Well, more people are employed by the health service now than ever before. The GP figures are consistent, after a significant increase. There are recruitment challenges in parts of the health and care service, as is the case across the United Kingdom The work that we've been doing to recruit is seeing success. We have more places now for nurse training than were filled last year. Everything isn't right. I have acknowledged that. I have acknowledged that there are specific needs. But we have seen successes in some of our work. We haven't reached where we want to and we've seen challenges in the system. But it's clear from the discussions that we've already had today what our commitment is as a Government in terms of training more doctors, training more nurses, recruiting more dentists and other healthcare professionals. There is work to do, but we do have plans in place for all of those things.</p>
<p><a href="#">Plaid Cymru Debate: Welsh Government priorities</a>, 25 September 2024</p>	<p><b>Jenny Rathbone MS:</b> By putting iechyd da first on the list of priorities, Eluned Morgan's Government has clearly recognised the importance of improving our performance in health, fully realising that this is the biggest challenge to reduce the waiting lists for procedures that can only occur in a hospital setting. Twenty three thousand waiting for more than two years is far too long, and we need to break this down by health board to understand where and for what procedure the problem lies. Many of these requests for secondary care are for diagnostic services, where GPs are not sure whether the issue the patient has brought to them is routine and easily addressed in primary care, or whether there is something more concerning going on. Clearly, in doctors' minds, there is always the possibility of cancer or some other really serious issue.</p>



	<p>Early identification is always the most important thing for a good outcome and for recovery.</p> <p>Clearly, anyone who needs an operation that can only be done in a hospital requires them to have a bed to recuperate in, and that involves health and social services working together on speeding up the process for getting people out of hospital whose medical treatment no longer requires them to be in hospital. A great deal of work has been done on improving the number of community nursing teams that are available. We had three pilots just before COVID struck, and we've now got 62 district nursing teams operating in our communities. I've seen at first hand just how effective they are at ensuring that people can be assessed for ongoing health needs in their own home, which is much better and clearer on their needs than if you were trying to assess them in hospital.</p> <p>This is a really complicated issue, and that is why it's absolutely right that we should be sharing good practice across our borders. We can't simply be blind to what's going in other parts of the country, and as long as we're working with people whose aim is to maintain a public health service, I'm very happy to do that. What we didn't want to do was work with the Tories whose only objective was to privatise the national health service, but, unless we improve our national health service, then we are going to be faced by people voting with their feet. And we have to work with individual people, all our staff, many of whom are exhausted as a result of COVID and drained of additional resources. We have a very challenging situation, but we need to recognise that situation and ensure that we're doing something about it, because otherwise people get very frustrated and will want an even more radical change than I know Plaid is assuming. We have to face down the anger and frustration that was expressed in the general election, with so many people in 13 constituencies voting Plaid as their second choice—excuse me, Reform as their second choice—because this indicates that there is a genuine frustration with the rationing that's been going on over the last 14 years, and people need hope that there is going to be change. And I am positive that we are going to get rapid change. There's already been quite a lot of change from the UK Government, and we're going to see a lot more.</p>
--	---

--	--

<p>Finance Committee, 25 September 2024</p>	<p><b>Mark Drakeford MS, Cabinet Secretary for Finance and Welsh Language:</b> I remember a staff nurse in Bronglais hospital saying to me, after we opened the new accident and emergency department there, 'I've spent 10 years in a building that worked against me, and now I'm working in a building that works for me.' We have too many people in Wales who are still in buildings that work against them, and so, if we do, Chair—and, as I say, it's a big 'if'—have any capital available next year, I've started conversations with the health Minister about, 'How can we deploy capital to assist you with efficiency and get better return on the revenue investment that we make?'</p>
<p>Speech, 08 October 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> This, of course, is only a reflection of wider flaws in the system. The number of mental health beds has decreased from over 2,000 in 2010 to 1,271 this year, which is the lowest ever level of capacity; likewise the workforce, with only 7.2 mental health consultant nurses in Wales at the moment—the lowest number ever. As the RCN says, simply put, the size of the mental health workforce is inadequate for the demands there. Part of the problem, and I'm tired of having to repeat this, is the lack of specific data on staffing levels in the mental health sector. This information is vital in order to ensure a good service in the right places at the right time, and I was very pleased to hear the Minister emphasise the importance of the need for accurate data in her statement. So, I would like an update from the Minister in her response, please, about how the Government wants to address this very familiar problem.</p> <p>There are legislative gaps to be considered in this context as well. While the Nurse Staffing Levels (Wales) Act 2016 has been a success on the whole in terms of increasing the workforce, section 25B, as it's known, has not yet been extended to include mental health nurses. So, could I ask for an update from the Minister regarding a timetable for when this change will be implemented?</p>
<p>First Minister's Questions, 08 October 2024</p>	<p><b>Mabon ap Gwynfor MS:</b> According to the nurse retention plan, which the First Minister announced when she was health Minister last year, organisations are expected to respond compassionately to flexible working requests in accordance with the needs of the</p>

	<p>service. But the Royal College of Nursing tells me that a number of nurses come to them saying that their requests to work flexibly have been rejected. Does the First Minister therefore believe that this policy that she introduced is working, and will she release the data to show the level of success of the measure?</p> <p><b>First Minister:</b> In terms of nurse retention and that ability to work flexibly, this is something relatively new, and obviously it's important that we look at how it's working in practice. We must ensure that the needs of the service are also taken into account, but the default is that permission to work flexibly should be granted, and I think that that is better than seeing people leaving to work for agencies. So, that's the concept underpinning it. We will have to look at how it's working on the ground. Perhaps it's working better in some areas than others, so I'm sure the Minister for health will want to assess how it's working on a practical level and will want to consider what needs to be done to improve the situation, if it isn't working in the way that we first anticipated.</p>
<p>Written Questions, 17 October 2024</p>	<p><b>Rhys ab Owen MS:</b> Will the Welsh Government publish the current number of vacancies for specialist palliative care nursing?</p> <p><b>Cabinet Secretary:</b> NHS vacancy statistics are currently <a href="#">published</a> for each Electronic Staff Record staff group (i.e. nursing and midwifery registered) and not by job role or areas of work. The statistics are classified as official statistics in development as data is collected from a relatively new source, with known data quality issues.</p>
<p>Written Questions, 18 October 2024</p>	<p><b>Rhys ab Owen MS:</b> What plans does the Welsh Government have to develop community and district nursing provision to support people with a terminal illness closer to home?</p> <p><b>Cabinet Secretary:</b> As part of Building Community Capacity Further Faster, we have prioritised the delivery of district nursing and specialist palliative care nursing at weekends through an This is an</p>

	<p>additional annual investment of £2.87m for district nursing services and £0.75m in specialist palliative care nursing.</p> <p>The National Palliative and End-of-Life Care programme provides national leadership and support and acts as a forum to drive forward change and oversee health boards' efforts to deliver the Welsh Government's vision for improving end of life care in Wales.</p>
<p>Topical Question, 06 November 2024 (not selected)</p>	<p><b>Gareth Davies MS:</b> Will the Cabinet Secretary make a statement on the Royal College of Nursing rejecting the Welsh Government's latest 5.5 per cent pay offer?</p>
<p>First Minister's Questions, 12 November 2024</p>	<p><b>Rhun ap Iorwerth MS:</b> Last week, nurses rejected the latest pay offer made by the Labour Government. The Royal College of Nursing said this: "this fails to match the safety-critical nature of their work and the extensive skills they bring to the NHS." Does the First Minister have a plan to resolve this? And if there is a plan, what is that plan?</p> <p><b>First Minister:</b> Well, we greatly value the work that our nurses do in Wales, in the NHS, and they do so much to help provide that lifesaving and live-changing care for people in what you rightly say is a very pressurised environment, and that's why we were pleased that we were able to offer an above-inflation pay rise this financial year—a 5.5 per cent increase—which was the same thing as the other unions accepted in Wales. The 'Agenda for Change' staff were on that. And I think it is important that we look at how we've changed the number of people who are agency workers, so we're doing what the RCN asked us to do, to put more people into substantive roles, rather than paying agencies. So, all of that is improving, and, of course, we'll always be open to discuss, with the RCN, about how we can come to a conclusion with this very difficult issue. But, obviously, budgets are tight, 5.5 per cent is an aboveinflation pay rise, and, of course, it is what we've offered to other people in the NHS.</p> <p><b>Rhun ap Iorwerth MS:</b> We've had a description of what the Government says it has done, but, clearly, no plan, and I can't overemphasise how important it is that there is a plan now on pay,</p>

and on elements such as training and recruitment. The nursing agency bill, whilst it has come down a little, was still at a staggering £142 million last year. The RCN's 'Nursing in Numbers' report, published last week, tells us that that could pay for 4,677 full-time, newly registered nurses, and, if Labour fail to tackle the staffing crisis, that agency bill can only grow.

Now, I'm pleased that the nursing bursary has been extended for the 2024-25 academic year, though nothing beyond that, but, in what can only be described as a backwards step, Welsh Government has cut places on all nursing undergraduate courses for the first time in a decade. The number of nursing degree places agreed to by Welsh Government this year represents only between 50 per cent and 69 per cent of what health boards requested. Why has Government decided to risk making the staffing crisis worse by cutting student places?

**First Minister:** Well, first of all, on the agency issue, the fact is that it's come down considerably—the amount of money we spend on agency—and the RCN have been very welcoming of the fact that that has definitely come down.

When it comes to nurse bursary, I think it is important to recognise that we have as many training places this year as were filled last year. So, if you think about how many came out last year, we're putting the same number in. So, you can have very ambitious targets. If you can't fill the number of people going in, because they're not applying for it, then, obviously, that becomes a problem. So, we're filling, we're providing, as many as were filled last year.

**Rhun ap Iorwerth MS:** Where's the plan to bring more people in? And why cap that number now, unless you feel that there's no hope in setting more ambitious targets for bringing new students in? Let me highlight more figures from the 'Nursing in Numbers' report. There are around 2,000 nursing vacancies in the Welsh NHS. That's why we need to bring more nurses in. Nurses in Wales are working more than 73,000 extra hours a week. No wonder the RCN say that workforce planning in Wales is under-researched and under-resourced. For years, Welsh Government didn't even publish statistics for the vacancy numbers in Wales, and they have failed to put a comprehensive and sustainable workforce plan in place.

	<p>Now, the Nurse Staffing Levels (Wales) Act 2016 was pioneering, but we can and should go further. We're still waiting, aren't we, for the statutory guidance around the Act that the RCN has long argued for, setting out how health boards and trusts should fulfil all their responsibilities under it. So, will the First Minister commit to strengthening the law on safe nursing staffing levels in Wales, so that the NHS provides an environment that is safer for patients and fairer for staff?</p> <p><b>First Minister:</b> First of all, the number of vacancies in Wales in terms of nursing is down significantly on where it was before. We obviously have recruited hundreds of new international nurses, in part because of the memorandum of understanding that we had with Kerala, which I was very proud to sign, and I met many of those nurses in the Diwali event that I attended last week.</p> <p>In relation to the nurse staffing level Act, a committee of this Senedd did a report into this—they took evidence from a number of people—and that committee report did not recommend extending the staffing level as was recommended by the RCN, and that was after hearing evidence from a number of sources, because we are keen to make sure that people work to the top of their licence. It is important that we use, perhaps, people who can help within the ward, who are not necessarily nurses, to do some of the work that releases nurses to do the work that only they can do. So, that is not something that was recommended by the committee and is not something that the Welsh Government is looking at at this point.</p>
<p>14 November 2024, Economy, Trade and Rural Affairs Committee</p>	<p><b>Sarah Simmonds - Executive director of workforce and organisational development at Aneurin Bevan University Health Board.</b> I have to mention work we're doing with the Royal College of Nursing, which is around RCN Healthcare Connect, and that's allowing people to go on to nurse training through a different route, and I think we're the first health board in Wales to pick that up.</p>
<p>Committee for the Scrutiny of the First Minister  13 December 2024</p>	<p><b>Jenny Rathbone MS:</b> “But one of the issues that came up yesterday in the Royal College of Nursing round-table, which I was at with two other Members, was absolutely clear in that health and social care are not working well together, and that's something that's going to need Welsh Government intervention. There've been the beginnings of change, with the pink army in Cardiff, et cetera. But</p>

other nurses from around Wales were saying that, actually, often, social care and health have contradictory aims and contradictory objectives, because health wants to get people out of hospital, keep them out of hospital and prevent them coming into hospital. Social care is managing a budget and is trying to find ways of avoiding paying for particular things for particular individuals. So, how are we going to deal with this, given that we don't have all the levers here, in the sense that this is, obviously, something that the UK Government needs to grapple with?

**First Minister:** Look, this is not new. We're not suddenly waking up and thinking that there's a relationship between health and social care; this is something that the Welsh Government has understood for a very long time, and, in fact, when we've got into trouble in the past, it's because we've said, 'We're going to put the money into social care', because there is a direct relationship. So, what we've done now is we've got this specific budget, called the RIF—I can't even remember what it's called—regional integration fund, and there's about £144 million in there and they're not allowed to use it unless they work together. That is an example of what—. We had the parliamentary review that looked into how we should organise the health services in Wales, and this was something that they recommended, and we've followed through and we've been getting them to work together. There's more we can do.

We've put more money this financial year, for example, into reablement. One of the key things we need to do—. Now, reablement is, actually, for local government, as you know, Carolyn, and, for me, it's really important that we try and get people back on their feet to be independent, and the longer you leave them in hospital, the more they become deconditioned and the bigger the packages of care you have to give. So, that's an example of where, if you want to help the NHS out, you need to get reablement services sorted, and to do that you need to start recruiting more people in that space. All of that is happening, but it's how much more can you do all the time?

# Agenda Item 4.1



## RCN Wales Board

### Open Session

<b>Date of meeting</b>	14 February 2024
<b>Title of paper</b>	NHS Wales Partnership Forum Update
<b>Presenter/Accountable ET member/Author:</b>	<b>Presenter:</b> Associate Director of Nursing (Employment Relations), RCN Wales <b>ET:</b> Executive Director, RCN Wales <b>Author:</b> Associate Director of Nursing (Employment Relations), RCN Wales
<b>Purpose &amp; confidentiality</b>	The purpose of this paper is to update the Board on the NHS Wales Partnership Forum meeting held on the 20 November 2024.
<b>Executive summary</b>	This paper outlines the ongoing work being undertaken by the Welsh NHS Partnership Forum.
<b>Recommendations</b>	RCN Wales Board is asked to note the paper
<b>Appendices</b>	Appendix A – Welsh Partnership Forum Agenda

#### 1. Background

- 1.1. The full Welsh Partnership Forum met on 20 November 2024. The meeting was held in the Cardiff City Stadium, Cardiff and the 4 RCN Wales seats were filled.
- 1.2. The agenda is attached in Appendix 1.

#### 2. Report Content

Nicky Hughes, Chair of the Staff Side Group, chaired the meeting.

##### 2.1 Cabinet Secretary – Priority setting and Q&A session

Jeremy Miles Cabinet Secretary for Health and Social Services attended the meeting to provide an update and answer any questions.



He stated that he had written to the NHS Pay Review Body (NHSPRB) on 30 October 2024 to formally commence the 2025-26 pay round for NHS staff working on Agenda for Change terms and conditions. He said he had asked that the advice and recommendations be received as soon as possible to ensure that payment of any award is not unduly delayed past April 2025. He confirmed that the Welsh Government had submitted evidence to the NHSPRB.

He also stated that he is supportive of the commitment in the collective agreement to achieving pay restoration over time.

He talked about the recent listening exercise that had been undertaken by the First Minister and said that waiting times in the NHS is the top priority.

He updated the group on the creation of the Ministerial Advisory Group for Performance, and he is expecting a full report in the spring of 2025 on NHS performance and new solutions that can address the identified challenges. The NHS Executive will provide leadership and support to NHS organisations in the further development of regional working and will be holding them accountable for their performance.

Performance data on Health and Social care will be provided for local populations quarterly in order to provide services on a once for Wales basis to reduce variation in services between different areas in Wales.

## **2.2 Update from Judith Paget**

Judith updated the Welsh Partnership Forum (WPF) on the covid enquiry and said it was particularly looking at the impact on staff, inequalities, long covid and the provision of PPE. She agreed to share the report when it is published with the WPF.

She said that she was concerned about the uptake of the flu jab this year and asked trade unions to remind their members of the importance of getting vaccinated.

The health boards are still in financial difficulties.

A report on the recommended next steps for the Occupational Health workstream is going to be provided to Judith for agreement.

## **2.3 Six Goals programme Page 93**

A presentation was provided from the NHS Executive on the 6 goals programme. Information on the programme can be found here [Right care, right place, first time: Six Goals for Urgent and Emergency Care - A policy handbook 2021-2026](#).

They also noted the 50 day discharge challenge that the Minister for Health and Social Services has launched further information can be found at [Welsh Government 10-point Winter Resilience Plan for successful hospital discharge in 50 days - Resource Library - Resources - Housing LIN](#)

## **2.4 Feasibility studies**

A verbal update was provided regarding the feasibility studies that were requested as part of the collective agreement in relation to the 36-hour working week and protected time for CPD.

It was noted that there had not been agreement by all 3 parties of the Welsh Partnership Forum that these elements were a priority and that they were feasible and affordable. More information has been requested to be able to move both elements forward, however there was a view that the protected time for CPD may be more achievable.

Colleagues from Scotland will be asked to attend a Business Committee meeting to discuss their experiences of implementation of the 36 hour week.

## **2.5 National Leadership and Management Framework**

A presentation was provided by HEIW on the development of a national leadership and management framework and the work that has been undertaken with NHS England and the other UK nations. The key elements that are going to be developed are:

- **A Code of Practice** for all managers and leaders
- **Standards and competencies** at defined levels of management and leadership from entry level to executive level, (5 levels), setting out expectations at each level
- **Core curricula** for every level of management and leadership

This is a 3 year piece of work including the data analysis, development of the elements above and full implementation.

## **2.6 Band 4 Update**

Lyn Middleton attended the meeting and provided an update on the implementation of the Registered Nurse Associate. The Staff Side Group shared their concerns regarding the shift to having just one band 4 role in Wales and the disadvantages that would pose to certain groups of staff and the potential redundancies.

A formal response has been provided to the Welsh Government on the concerns raised.

## **2.7 Job Evaluation**

The job evaluation policy was shared with the Welsh Partnership Forum and was ratified. The following all Wales job descriptions were also agreed

- Maternity Healthcare Support Worker band 2
- Maternity Senior Healthcare Support Worker band 3
- Neonatal Senior Healthcare Support Worker band 3
- Healthcare Support Worker band 2
- Nursing Support Worker band 3
- Neonatal Ward Assistant band 2
- Maternity Neonatal Assistant Practitioner Nursery Nursing Band 4

## **3 Group Plan/Business Priorities**

### **3.1 Safe and effective care UK**

Pay strategy

Education strategy

Influencing policy and professional standards

## **4 Committees/Entities**

### **4.1 Nil.**

## **5 Four Country**

### **5.1 No this is Wales specific.**

## **6 Implications:**

This is part of core business for the Employment Relations team.

## **7 Equality Impact**

## **Page 95**

### **7.1 Have the recommendations in the report been equality impact assessed?**

No

### **Risk and Assurance**

### **7.2 There are no risks associated with this meeting.**

## **Members and Other Stakeholders**

7.3 Other trade unions, Welsh Government and NHS Employers.

### **Finance/Resources**

7.4 Nil

## **8 Recommendations**

8.1 The Board is asked to note this report.

Appendix A

# Fforwm Partneriaeth Cymru

---

## Welsh Partnership Forum

GIG Cymru yn  
Cweithio mewn Partneriaeth

NHS Wales  
Working in Partnership



Venue: Cardiff City Stadium, Leckwith Road, Cardiff, CF11 8AZ, 20<sup>th</sup> November 2024

Trade union pre-meeting: Fred Keenor Suite (10:00-11:00)

Employers and Welsh Government pre-meeting: Chairman's Suite (10:00-11:00)

Full meeting: Chairman's Suite (11:10-15:45)

Agenda Item No.	Agenda Item	Lead	Style of Report	Doc No.	Start Time	Time allocated
<b>Welcome and Apologies</b>						
WPF20/10-1	Nicky Hughes to chair – <i>(notes &amp; actions are covered later in the agenda)</i>	Chair	Verbal		11:10	05 mins
WPF20/10-2	Cabinet Secretary – Priority Setting and Q&A Session	Cabinet Secretary	Verbal		11:15	45 mins

WPF20/10-3	Identify any other business to be discussed	Chair	Verbal		12:00	05 mins
WPF20/10-4	Current Position	Judith Paget	Verbal		12:05	05 mins
<b>Strategic Items</b>						
WPF20/10-5	6 Goals / Winter resilience arrangements Update	Richard Bowen / Iain Hardcastle	Verbal		12:10	20 mins
WPF20/10-6	Bank Incentivisation Workshop	Caroline Hurley	Workshop		12:30	20 mins
WPF20/10-7	36 hour week/CPD Feasibility Studies Update	Martin Mansfield	Verbal		12:50	10 mins
<b>Lunch – 13:00-13:50</b>						
WPF20/10-8	National Leadership and Management Framework – Update	Helen Thomas	Paper (To follow)	01	13:50	10 mins
<b>Nursing Update</b>						

WPF20/10-9	<p>Band 2/3 Update All</p> <p>Wales JDs:</p> <ul style="list-style-type: none"> <li>- Maternity Healthcare Support Worker Band 2</li> <li>- Maternity Senior Healthcare Support Worker Band 3</li> <li>- Neonatal Senior Healthcare Support Worker Band 3</li> <li>- Health Care Support Worker Band 2 - Nursing Support Worker Band 3</li> </ul>	Sue Green	Paper (To follow)	02a 02b 02c 02d 02e 02f 02g 02h 02i 02j	14:00	15 mins
------------	---	-----------	-------------------	--	-------	---------

WPF20/10-10	Band 4 Update	Lyn Middleton / Rhi Jones / Gill Knight	Verbal		14:15	15 mins
WPF20/10-11	Band 5/6 Update	Nicky Hughes	Verbal		14:30	15 mins
<b>NHS Policies and Contracts</b>						
WPF20/10-12	Disciplinary Policy Update	Adam Morgan / Rhiannon Windsor	Verbal		14:45	10 mins
WPF20/10-13	Job Evaluation Policy	Sue Green	Paper	03a 03b	14:55	10 mins
WPF20/10-14	NHS Wales JDs for approval - Neonatal Ward Assistant Band 2 - Maternity Neonatal Assistant Practitioner Nursery Nursing Band 4	Sue Green	Paper (To follow)	04a 04b 04c 04d	15:05	10 mins
<b>For Information</b>						
WPF20/10-15	NHS Staff Council Update	Sue Green	Paper	05	15:15	05 mins
WPF20/10-16	Business Committee Update	Rachel Gidman	Paper	06	15:20	05 mins
WPF20/10-17	Medical & Dental Business Group Update	Sue Green	Paper (To follow)	07	15:25	05 mins



WPF20/10-18	Previous WPF Notes & Minutes (17/07/2024)	Chair	Paper	08	15:30	05 mins
-------------	---	-------	-------	----	-------	---------

Any other business						
WPF20/10-19	Any Other Business	Chair	Verbal		15.35	05 mins
WPF20/10-20	Date of Next Meeting –  <u><b>Full WPF</b></u> <ul style="list-style-type: none"> <li>- 19<sup>th</sup> March 2025 (Provisional date)</li> <li>- 16<sup>th</sup> July 2025 (Provisional date)</li> <li>- 19<sup>th</sup> November 2025 (Provisional date)</li> </ul> <u><b>Full Business Committee</b></u> <ul style="list-style-type: none"> <li>- 26<sup>th</sup> February 2025 (Provisional date)</li> <li>- 25<sup>th</sup> June 2025 (Provisional date)</li> <li>- 15<sup>th</sup> October 2025 (Provisional date)</li> </ul>	Chair	Verbal		15:40	05 mins

## RCN Wales Board

### Open Session

<b>Date of meeting</b>	14 February 2025
<b>Title of paper</b>	RCN Wales Nurse of the Year 2025 and Alumni Network Update
<b>Presenter/Accountable ET member/Author:</b>	Presenter: Katie Branch, Quality and Events Manager ET: Helen Whyley, Executive Director, RCN Wales Author: Katie Branch, Quality and Events Manager
<b>Purpose</b>	To update the Board on planning for the 2025 awards and an update on the recent activity of the alumni Network.
<b>Confidentiality</b>	Is the paper confidential? N  This paper is enclosed within the open papers of the RCN Wales Board.
<b>Executive summary</b>	To advise the RCN Wales Board on the launch of the RCN Wales Nurse of the Year Awards 2025 and to provide an update on the Nurse of the Year Alumni Network.
<b>Recommendations</b>	For the RCN Wales Board to: <ul style="list-style-type: none"> <li>• Note the information in this report</li> <li>• Seek nominations for up to three members to join the RCN Wales Nurse of the Year Reference Group</li> </ul>
<b>Appendices</b>	Appendix 1: Finalists 2024  Appendix 2: Summary of Compliments 2024

#### 1. Background

- 1.1. The Board is advised that the Royal College of Nursing in Wales will be holding the twelfth RCN Wales Nurse of the Year Awards on Thursday 20 November 2025 at the Mercure Cardiff Holland House Hotel & Spa.
- 1.2. In 2025, the RCN Wales headquarters – Tŷ Maeth will be celebrating its 60<sup>th</sup> Anniversary and this will be acknowledged as part of the RCN Wales Nurse of the Year ceremony.
- 1.3. These awards seek to recognise those who demonstrate a passion for their profession and exemplify distinction in care, leadership, service, and innovation.

## 2. Nurse of the Year 2024 Award Winners

The Board are formally advised of the results of the RCN Wales Nurse of the Year 2024 in Appendix 1. Information about each of the award winners is also available to view on the RCN Wales website:

<https://www.rcn.org.uk/wales/Get-Involved/Awards/Award-winners-2024>

## 3. Sponsorship

We seek to fund the direct costs for the Wales Nurse of the Year 2025 awards through sponsorship.

Event sponsors of the 2024 event will have the right of first refusal for sponsoring the 2025 awards, which is in accordance with the terms of the sponsorship contracts. The list of award sponsors is detailed in Appendix 1.

Further information about 'sponsorship opportunities' in 2025 is available on the RCN Wales website. <https://www.rcn.org.uk/wales/get-involved/awards/sponsorship-opportunities> The Board is reminded of the award categories for 2025:

Award Category
Chief Nursing Officer for Wales
Community & Primary Care Nursing
Health Care Support Worker
Improving Individual and Population Health Award
Lifetime Achievement
Nurse Education
Nursing Student
Registered Nurse - Adult
Registered Nurse - Child
Registered Nurse - Learning Disabilities
Registered Nurse - Mental Health
Research, Innovation and Digitalisation in Nursing
Specialist Nursing
Suzanne Goodall Independent Sector Nursing
Overall RCN Wales Nurse of the Year 2025

#### **4. Launch of the 2025 Awards**

The launch of the 2025 awards will take place in April 2024, after which on-line nominations will once again be sought for all awards categories via the RCN Wales website.

A guidance document / framework will be available to encourage nominations across all award categories, to promote a more diverse representation of nurses and nursing across all sectors in Wales.

The closing date for nominations will be the end of June 2025. Further details about how to nominate will be circulated after the official launch in April 2025.

All Wales Board members will be invited to sit on an award panel as a judge. Please note Board Members can still nominate individuals for an award but they will not be able to sit on that award panel as a judge.

#### **5. Planning for the 2025 event**

The project team have commenced planning for the 2025 event, which will be held on Thursday 20 November 2025 at the Mercure Cardiff Holland House Hotel & Spa.

The Board Chair and RCN Wales Nurse of the Year Board Reference Group will be engaged in key decisions regarding project planning. There are three places on the Board Reference Group, for which nominations are sought.

#### **6. Alumni Network Update**

The Executive Director of RCN Wales and senior management team has met with the newly awarded 2024 Nurse of the Year, Madelaine Watkins, to discuss the many opportunities available to her as our current nurse of the year.

The Alumni Network is made up of RCN Wales Nurse of the Year winners and runners up. There are approximately 303 Alumni Network members to date.

The 2024 alumni members have been invited to join the RCN Wales Alumni Facebook page and will be included in all Alumni activity going forward.

Alumni network members continue to be encouraged to actively engage in the consultation responses.

Alumni network members will continue to be invited to membership engagement events arranged by the RCN and planning is underway regarding ongoing events for 2025.

The Nurse of the Year Awards generate media interest throughout the year. This is free, positive media coverage which the RCN has received due to these annual awards. In addition, the RCN Wales communications team continually seek opportunities to promote our Alumni, recent examples include:

- Madelaine Watkins (Overall winner 2024) and Joanne Davies (winner of the Community and Primary Care Nursing Award 2024) were on the BBC Radio Wales Breakfast on the 22 November 2024.

- Joanne Davies (winner of the Community and Primary Care Nursing award) and Katie Moore (winner of the Registered Nurse – Child award 2024) were featured in the Wrexham Evening leader and on Wrexham.com on the 20 December 2025.
- Nia Broughton (winner of the Advanced and Specialist Nursing award 2021) spoke at the Cross Party Nursing and Midwifery Group Meeting on the 21 January 2025.

## **7. Group Plan/Business Priorities**

- 7.1. The activities associated with this paper are compliant with the RCN Group Action Plan's and Council priority to harness the engagement of our members to strengthen the RCN's voice and achieve our vision through working with others.

## **8. Committees/Entities/Executive Team**

- 8.1. N/A

## **9. Four Country**

- 9.1. The RCN Wales Nurse of the Year awards, and hence the Alumni Network are only open to those employed in Wales or studying in a Welsh University at the time of the award nomination process.

## **10. Implications:**

### **9.1 Equality Impact**

No

### **9.2 Risk and Assurance**

A risk register for the RCN Wales Nurse of the Year 2025 Event has been prepared and is regularly reviewed and updated.

### **9.3 Members and Other Stakeholders**

All registered nurses and midwives who practice in Wales, pre-registration nursing students and health care support workers can be nominated for an award and therefore become a member of the Alumni Network.

## **11. Finance/Resources**

- 11.1. The Board are advised that we seek to cover all direct costs for the Nurse of the Year Awards to be held in 2025 via sponsorship. An element of Alumni networking opportunities is included with this budget.

## **12. Recommendations**

The Board is asked to:

- Seek nominations for up to three members to join the RCN Wales Nurse of the Year Board Reference Group

- Note the information in this report

**Appendix 1:**

**RCN Wales Nurse of the Year Finalists 2024:**

<b>Award</b>	<b>Winner / Runner-Up</b>	<b>Name</b>	<b>Sponsor</b>
CHIEF NURSING OFFICER FOR WALES AWARD 2024	Winner	SHANE MILLS	Chief Nursing Officer for Wales, Welsh Government
	Runner-up	BIANCA OAKLEY	
COMMUNITY AND PRIMARY CARE NURSING AWARD 2024	Winner	JOANNE DAVIES	Hywel Dda University Health Board
	Runner-up	KIM BAKER	
HEALTH CARE SUPPORT WORKER AWARD 2024	Winner	SARAH BISP	NHS Wales Joint Commissioning Committee
	Runner-up	LOUISE GRAY	
IMPROVING INDIVIDUAL AND POPULATION HEALTH AWARD 2024	Winner	JULIA SOMERFORD	Public Health Wales
	Runner-up	CATHERINE WATTS	
NURSE EDUCATION AWARD 2024	Winner	LISA FRANKLIN	University of South Wales
	Runner-up	JILL BARNES	

NURSING STUDENT AWARD 2024	Winner	JOINT NOMINATION: AIMEE ROBINSON AND CLAIRE WELCH	Health Education and Improvement Wales
	Runner-up	EMILY HOSKINS	
REGISTERED NURSE - ADULT AWARD 2024	Winner	DONNA MAJOR	Powys Teaching Health Board
	Runner-up	JADE COLE	
REGISTERED NURSE - CHILD AWARD 2024	Winner	KATIE MOORE	Betsi Cadwaladr University Health Board
	Runner-up	JOINT NOMINATION: SHARON DRISCOLL AND REBECCA POWELL	
REGISTERED NURSE - LEARNING DISABILITIES AWARD 2024	Winner	CATHERINE DAVIES	Swansea Bay University Health Board
	Runner-up	KATRINA WIEGOLD	
REGISTERED NURSE - MENTAL HEALTH AWARD 2024	Winner	MADELAINE WATKINS	Aneurin Bevan University Health Board
	Runner-up	CORRINNA CULLEN	
RESEARCH, INNOVATION AND DIGITALISATION IN NURSING AWARD 2024	Winner	DR CLARE BENNETT	Cardiff University
	Runner-up	CATRIN CODD	
SPECIALIST NURSING AWARD 2024	Winner	TIM NICHOLLS	Cardiff and Vale University Health Board
	Runner-up	DIANA MEHREZ	
SUZANNE GOODALL INDEPENDENT SECTOR NURSING AWARD 2024	Winner	KIERA JONES	Tŷ Hafan
	Runner-up	ANGELA OWEN	
<b>LIFETIME ACHIEVEMENT AWARD 2024</b>		CLAIRE HURLIN	Cwm Taf Morganwg University Health Board
<b>RCN WALES NURSE OF THE YEAR 2024</b>		MADELAINE WATKINS	Velindre University NHS Trust



## Appendix 2 Summary of Compliments 2024

“Huge thanks to you both for generating such a wonderful event and thank you for inviting me.” **Guest**

“I just wanted to say a very big thank you for an excellent Nurse of the Year event on Thursday evening.

The venue and hotel staff were exceptional, and it flowed so well. Lots of attendees told me that they preferred holding the event in the same venue as the accommodation, because it was much more convenient and friendly. The rooms were excellent and a good size.

The event itself went brilliantly which is not an easy task to achieve and was managed so well by Katie and team. I know the nominees and their families were effusive with praise about the event. Well done to our brilliant RCN Wales team.”

**Guest**

“Thank you for a wonderful evening at the RCN Wales Nurse of the Year Awards 2024. It was a fantastic event that truly showcased the excellence and dedication of the nursing profession across Wales. We are honoured to have been a part of it.”

**Sponsor**

“It was a privilege to join you at The Royal College of Nursing in Wales Nurse of the Year Awards on Thursday and I was delighted to announce and present The Lifetime Achievement Award to Claire Hurlin, a most worthy recipient. It is humbling to read the citations of so many dedicated nurses in the brochure. I fully appreciate the wonderful care and skill of the nurses despite the enormous challenges the profession faces at this time and we are delighted to offer our support.

I thought that the new venue was a success. It was bright and welcoming and there was a great atmosphere. We were sorry not to have been able to stay for the entire event, on this occasion.”

**Guest**

“Thank you for organising such an amazing night.”

**Finalist**


“Thank you so much for such a memorable evening – I can’t believe it’s been a week already. It was a fantastically well organised event – you truly are an amazing team! Thank you all for your support and encouragement during the interviews, you made me feel at ease on the day.”

**Finalist**

“Thank you very much for your letter – it was an honour to be there. You all did a fantastic job.”

**Guest**

“My thanks to you all for putting g together a delightful evening with so many terrific people.” **Guest**

“It was a delight to be part of – well done on a fantastic event as ever”  **Sponsor**

“Thank you so much for all your hard work in making the awards ceremony a really lovely, slick and enjoyable evening for all. It was an amazing event, and I know it will have taken a huge amount of organising, so thank you. I have just about recovered!!”

**Finalist**

“We had a wonderful time and would like to personally thank RCN Wales and all staff, nominations and winners for a truly magical evening.”

**Sponsor**

“Thanks again for a wonderful night, it really was very special.”

**Finalist**

“It is such a privilege to be part of the judging panel. The NOTY team are always responsive to any queries relating to the online short-listing process and very supportive at the interview day. From the moment you enter the building and are greeted at reception to the moment you leave, I always feel very well cared for. I'm delighted that we had more entries than ever which reflects the high esteem in which the Awards are held. The evening itself is always excellent, and I would like to thank all those involved for all their hard work. It is very much appreciated.”

**Guest**

“Excellent night. Venue improved from previous venue.”

**Sponsor**

“Excellent event, well organised. A delightful event.”

**Sponsor**

“I would personally like to thank RCN Wales for a truly amazing event - thank you!” **Sponsor**

“On behalf of XX, Chief Executive we would like to thank you so very much for the complimentary booklet, we are happy to receive the booklet and remember the wonderful memories of the evening.”

# Agenda Item 5.1



## **Summary of the confidential Council meeting held on 30 and 31 October 2024**

1. *We held a two-day hybrid meeting on 30 and 31 October 2024. This was the last face-to-face Council meeting for 2024. As the tenure of all Council members concludes in December, we spent time together prior to the Council meeting reflecting on our terms on Council. All Council members are so grateful for the opportunity of being on Council to work with the RCN's Executive Team to improve the nursing profession and the College for the future, which we are all so passionate about. We wish all candidates in the forthcoming election our luck.*
2. *Council received an update from the Awards Committee, who revised the criteria for all RCN Awards to ensure the wording of the criteria was inclusive of all members eligible for the various awards and to focus the criteria on impact of the nominees activities and evidence of the impact. Council approved these revised awards criteria for the coming year.*
3. *In the afternoon, Council was delighted to welcome the Director of the Institute of Nursing Excellence, with the Associate Directors for the Nursing Practice and Leadership Academies. Collectively, they provided an update on the work and aims of the Institute and its five academies, both locally and internationally, underpinned by sound and visible nursing research. The purpose of the Institute is to support all nurses with every aspect of the professional life to ensure practice is up to date and members are able to lead change; that we use data and evidence to inform what we do; and that we champion nursing excellence. The importance of joining together what is already in place to achieve these aims and bringing our own brand of activism to the RCN was highlighted.*
4. *In the spirit of strengthening the RCN's working relationships with the RCN Foundation, Council approved changes to the RCN Foundation Articles of Association which represent a closer collaborative relationship between the RCN and RCN Foundation.*
5. *We continued our meeting with an update on pay across the UK and the continued pressure the RCN is putting on the four governments to progress their commitments and the strategic approach being applied. It was noted that the emphasis is not just on annual pay increases, but also on structural change to support pay progression for those working closest to the patient. . Council remains committed to a campaign to support a new pathway for nurses to progress from Band 5 to Band 6 in line with other newly registered professionals such as paramedics and midwives, it was emphasised that nursing is no longer band 5 profession.*

6. *We received the Management Accounts, a report from the Remuneration Committee and Group Audit Committee. We approved revised terms of reference for the Group Remuneration Committee. The Chair of the Group Audit Committee joined the meeting and provided assurance to Council that the systems and processes in place to mitigate risk and improve performance are in place and robustly monitored. For example, all regulatory and statutory returns have been submitted and the RCN is fully complaint.*
7. *Council approved an update to membership categories, definitions and the membership policy and process; which will be communicated to members.*
8. *On the second day, we noted the Governance Committee report and agreed to an additional External Adviser on that Committee, thereby agreeing a change to its terms of reference. Aligned to this, we received a presentation on the work undertaken to strengthen the role of the External Adviser, which was a recommendation arising from the Governance and Culture Reviews. External Advisers provide specialist advice and guidance on five of our committees (Finance and Investment, Group Audit, Group Remuneration, Governance and Equity, Diversity & Inclusion). Steps including enabling External Advisers a vote on the committees in which they sit, have been taken to fully embed their roles into the RCN governance structure.*
9. *Following the recommendations from the Governance and Cultures Reviews, Council approved generic role descriptors for Council Committee Chairs and Vice Chairs of all RCN committees, along with role descriptors for Committee members for the following Committees: Agenda, Professional Nursing, Trade Union, Students, EDI, International and NSW. In addition, role descriptors for External Advisers to the Group Audit and Governance Committees were approved as well as the terms of reference for Council.*
10. *We also approved a training and development programme for Council members, which was also a recommendation from the Reviews.*
11. *Council approved updates to two policies: Temporary period of absence requested by elected and appointed unpaid office holders and appointments policy and process. Council also approved, by special resolution of Council, the updated Regulation on Nursing Support Workers.*
12. *On the recommendation of the North West Regional Board, Council approved the merger of the Cheshire East and West Cheshire Branches which would be effective from 1 January 2025.*
13. *Prior to the Open Session of Council, we received an update from RCNi on their recent activities and financial statements. The success of Nursing Live last week, which attracted over 150 speakers and 6500 preregistered delegates, was noted.*
14. *During the Open Meeting of Council, we received an update on the RCN's 5-year strategy, the strategic review of Congress and an update from the General Secretary and Chief Executive regarding the Nursing and Midwifery Council and the assurances we are seeking from the NMC about their improvement plan.*
15. *We also received updates on the activities of the Chair and Vice Chair of Council, and the President and Deputy President. Highlighted particularly were the keynote speech delivered by the Chair of Council at the RCN Wales Leadership Masterclass in August, which received very positive feedback; the*

Vice-Chair's attendance at the Commonwealth Nurses & and Midwifery Federation 26<sup>th</sup> Biennial Meeting of Member in Malta in September at which the Vice-Chair co-delivered a presentation on 'Nursing through a humanitarian lens – Gaza' and supported discussions and debate; and, the delivery of a speech on 'The Importance of Immigration in Staffing the NHS' by the President at the Kingston University Big Read Book Club in August.

16. The General Secretary and Chief Executive, Professor Nicola Ranger, provided a summary of the activities across all RCN directorates. She spoke of her genuine desire to ensure that we meet other colleagues and forge strong stakeholder relationships. The report, which is very comprehensive, is available on the RCN website, along with all reports submitted for the Open Meeting of Council and the General Secretary and Chief Executive encouraged all members to read it. She note her meeting with Rachel Powers of the Patients Association which highlighted the need to harness the patient's voice to better understand nursing; the coming together of the CNOs and Black Minority Ethnic Strategic Advisory Group during the race riots as one powerful voice in a very difficult situation; the the need to be at the table and leading report at the CQC; the excellent work carried out by the Communications and Policy Teams on the pay consultation and our continued efforts to be heard with regards to pay; and, her recent visits to Northern Ireland and Wales.
17. The Open Meeting of Council also included updates on the continued work of:
  - the Trade Union Committee, whose report largely focussed on pay.
  - the Professional Nursing Committee, whose report highlighted the report on suicidal ideation among other key areas of work
  - the Equality, Diversity and Inclusion (EDI) Committee, whose report also covered the work on Anti-Racism
  - the International Committee-the President spoke about the working group that has been convened to progress the implementation of the Congress resolution on the policy for responding to humanitarian crises
  - the Students Committee–the difficulties faced by newly qualified student nurses accessing the profession was discussed.
  - the Nursing Support Workers Committee, whose report covered the attendance of two NSW Committee members at the EPSU 6<sup>th</sup> Healthcare Assistants Network Meeting In Madrid, highlighting the work to be done with regards to the status of NSW in the UK.
18. We welcomed colleagues from the RCN Foundation for updates on the Foundation's continued vital work to support members including the change of investment manager, fundraising activities and the appointment of a new Trustee Fiona Bickley, a charity lawyer.

**Paul Vaughan,**  
**Chair of RCN Council**

## Agenda Item 5.2

# **Trade Union Committee Report to Members – September 2024**

## **Special Trade Union Committee 11 July 2024**

### **NHS Job Evaluation profile consultation**

- 1. We held a special meeting to review the RCN response to the consultation on NHS national nursing profiles (band 4, 5 and 6) and which we unanimously agreed be submitted to NHS Staff Council Job Evaluation Group (JEG).**

**Apologies for the meeting were received from Ann-Marie Fredericks, Sharon Osbourne and Mike Travis.**

## **Trade Union Committee 18 July 2024**

### **Post General Election update briefing**

- 2. A presentation was received on the RCNs approach post General Election and the opportunities to engage with the new Government and MPs to push the nursing agenda forward.**
- 3. This included background work on potential Private Members' Bills, relationship building with the new Secretary of State for Health and Social Care and new members and chairs of relevant select committees to seek to lobby as widely as possible for policy change through all available parliamentary processes.**
- 4. The Labour manifesto commitment to introduce a fair pay agreement for social care could provide an exciting opportunity in terms of sectoral pay bargaining and it was vital that the voice of nursing was strongly represented.**
- 5. We flagged up the importance of the RCN lobbying around investment in nursing education and keeping a watching brief on the new Government's renewed devolution focus and how this could impact health and social care.**
- 6. We asked for regular updates from the Policy and Public Affairs team going forward.**

### **RCN brand campaign**

- 7. We received a presentation on the new RCN post General Election brand campaign for the next 3-5 years to build brand recognition over this Parliament and into the next General Election.**
- 8. We welcomed the concept behind the new RCN brand campaign of nursing without compromise to influence public and political opinion around issues impacting the nursing profession whilst affirming the RCN as the voice of nursing and the authority on issues facing the profession.**

9. The campaign had been informed by three member focus groups and public testing of proposed adverts, with additional testing planned with Labour MPs ahead of formal launch.
10. We welcomed that the campaign had flex built in to accommodate the different dynamics across the UK and to show that the RCN was fighting for nursing including the vital role it had to play going forward following the Government's declaration that the NHS was 'broken'.

#### **Update on pay across the UK**

11. We received our usual update on pay across the four countries and Crown Dependencies.
12. Disappointingly, confirmation remained outstanding on when the NHS Pay Review Body (PRB) report 2024 would be published and the details of the associated pay award; the RCN was prepared and ready to go however to consult members once an award was announced in line with the principle of RCN members taking decisions on their own pay.
13. We noted that negotiations for the 2024-25 NHS pay round in Scotland were due to start on 31 July 2024 following a delay.
14. Work was continuing in England and Wales to push for progress taking forward the non-pay elements of the 2022-23 pay awards and in Northern Ireland, implementation of the pay award uplift for 2023-24 had now been paid including arrears, although the one-off non-consolidated payment would not be processed for payment until August 2024.
15. Considerable work was continuing in relation to NHS Job Evaluation (JE) on a country focussed basis, sensitive to the context and priorities across the 4 UK nations including encouraging and supporting members to seek re-banding reviews, particularly on a group basis, to help make the case for automatic Band 5 to 6 run through for nursing staff.
16. We welcomed that a member facing version was being produced of the RCN response to the NHS Staff Council Job Evaluation Group (JEG) consultation on the draft revised national Bands 4, 5, 6; JEG were due to review the Band 7 and above national profiles in due course.
17. Campaign work was also continuing in relation to the furtherment of General Practice Nursing (GPN) pay, terms and conditions across the four countries which were at different phases of influencing.
18. We highlighted feedback from members of a slight communications void around NHS pay and safe staffing from the delayed release of the PRB report but noted that a focussed campaign would start during the summer to prepare members for consultation/s on NHS pay including ensuring the details the RCN held for them were up to date.

#### **Employment Relations workplan including highlight reports**

19. We reviewed the latest version of the Employment Relations workplan with accompanying highlight reports, although there had been no significant changes since last reported to us in May.
20. The workplan was due for annual review which would kick off at the next meeting.

## **Principal Operating Procedures for ballots and pay negotiations**

- 21. We received a presentation on the development of operating procedures to serve as a framework for future RCN pay ballots.**
- 22. The aim was to streamline and improve operational and governance processes with accompanying clear rules and accountabilities identified to provide assurance to Council and members around decision making.**
- 23. We gave our broad support and looked forward to giving our input as the review progressed.**

## **RCN Employment Standards update**

- 24. A progress update was given on the development of RCN Employment Standards for members working across independent health and social care (IHSC) sectors and settings.**
- 25. Member engagement was continuing on the draft standards throughout the summer following on from Congress, with a view to submission to our September meeting for final signoff ahead of launch in October 2024.**

## **RCN Country and Regional Board performance reports**

- 26. We received the first progress report from the Boards on the new patch level 2024 targets for recruitment and retention of reps for quarter 1. 27. Over the quarter, there had been some positive progress around Stewards, and Learning Reps was the only rep category where accredited reps had reduced.**
- 28. We reiterated a perception that regional/country offices remained focussed on the recruitment of Stewards and casework above the other 2 rep roles; there needed to be better understanding amongst staff of the value of all 3 rep roles.**

## **Remit of the Trade Union Committee and changes to their terms of reference**

- 29. We noted proposed changes to our Committee remit and proposed revisions to our terms of reference.**
- 30. This was following a review of the RCN Group Scheme of Delegation which identified that Council was operating as the final decision maker required to approve most decisions on matters that Trade Union (TUC) and Professional Nursing Committees (PNC) were established to deal with.**
- 31. The Chairs and Executive Team leads for TUC and PNC had revisited the current Committee terms of reference to ensure they clearly set out their remit and were explicit around which decisions laid with the Committee for approval, and which were for recommendation to Council for approval.**  
**Report from the Member Experience and Journey Strategy Board**
- 32. Our regular update report was received from MEJSB.**
- 33. Priority work was progressing on the Case Management System (CMS) to resolve longstanding system issues, especially those impacting caseholding Stewards, including general access problems, system**



conflict with NHS firewalls and improvements required to make the system more user-friendly.

34. It was noted that the number of member cases was rising with the increase in RCN membership, although the overall share of the caseload being managed by Stewards had increased again recently following a decline which started during the pandemic.

35. We were pleased that the number of RCN complaints remained very small on an overall caseload basis, the RCN had achieved an excellent Net Promoter Score within quarter 4 and that a survey of RCN leavers showed the number leaving membership due to dissatisfaction was very low.

36. We expressed concern that demand for RCN counselling services remained very high although some reduction had recently been seen in the rate of increase; routine waiting times were high at 37 but satisfaction with the service remained high at over 94%.

37. We welcomed that MEJSB would be drafting a written charter to set out the RCN's position and principals towards Facility Time; addressing issues around access to Facility Time were key going forward to encourage the recruitment of new accredited reps.

#### **June EPSU Conference feedback**

38. We received feedback from the RCN delegation, including our Chair and Vice Chair, who attended the June EPSU (European Federation of Public Service Unions) Congress conference in Bucharest, Romania of which the RCN was a major membership stakeholder.

39. The programme of Conference agenda items and fringe events debated by representatives from trade unions covering all sectors included the impact of Covid-19 on healthcare workers, the future of long-term care with growing elderly populations and the care crisis facing Europe without appropriate pay and conditions for staff.

40. Our Chair took part in a panel discussion on the attacks on trade union rights related to the Minimum Service Bill in the UK and there was a high level of awareness of the RCN's recent industrial action amongst the delegates, with other countries inspired and eager to learn lessons. Summer 2024 Reps Committee report

41. We received our regular report from the summer round of Reps Committee meetings.

#### **Congress 2024**

42. We provided our feedback on Congress 2024 including what worked well, what did not and areas for improvement for next year.

Apologies for the meeting were received from Ann-Marie Fredericks and Sharon Osbourne.

## **Special Trade Union Committee 30 July 2024**

**NHS pay award announcement for NHS England**

- 43. We convened a special meeting following the publication of the 37th report of the NHS Pay Review Body (PRB).**
- 44. The Chancellor had subsequently announced on 29 July that the UK government would accept in full the recommendations from the public sector Pay Review Bodies; the 2024-25 NHS pay award had then been announced by the Secretary of State for Health and Social Care.**
- 45. The key recommendations from the NHS PRB for 2024-25 were a consolidated 5.5% increase with effect from 1 April 2024 for all NHS Agenda for Change (AfC) staff and an intermediate pay point added at each of Bands 8a, 8b, 8c, 8d and 9, to which staff should progress after two years at the respective band.**
- 46. The UK government would also provide NHS Staff Council with a funded mandate to resolve outstanding concerns within the AfC pay structure, with recommendations to the Northern Ireland Executive and Welsh Government to issue a similar funded mandate to NHS Staff Council.**
- 47. The PRB had also welcomed the review of nursing and midwifery banding carried out by NHS Staff Council and that associated reviews should be planned and budgeted for.**
- 48. Full funding details for the pay award had yet to be published; the RCN would continue to call for full funding of the pay award including for organisations providing NHS services but not identified in the NHS Terms and Conditions Handbook (Annex 1) as NHS employer organisations.**
- 49. The RCN Pay Principles previously agreed by our Committee included engaging members and ensuring they had their say with regard to matters relating to their pay, terms and conditions.**
- 50. The recommendation before our Committee was therefore to engage eligible NHS England AfC members via a consultative process to identify whether members considered the NHS pay award announced for 2024-25 to be acceptable (or not acceptable).**
- 51. We were also asked to consider whether to also engage eligible members via a consultative indicative ballot process to identify whether members would be prepared to take strike action and/or action short of strike in relation to the 2024-25 NHS pay award if they believed it was an unacceptable award.**
- 52. A run through was provided of the pros and cons of an indicative ballot at this stage, including the benefit of gauging where members were at around pay and the levels of engagement.**
- 53. As part of our discussions, we recognised that asking a second indicative question around strike action had the potential to confuse members and set hares running; there was also uncertainty as to whether members were ready to consider industrial action again - the timing of the award so close to the recent announcement on junior doctors pay meant there was also a risk of a knee jerk reaction from some members.**
- 54. We also noted that, unlike previous years, this was an above inflation pay award and the different context in that there was a new Government in power who had accepted the PRB recommendations in full.**
- 55. The potential existed to reassess the options after consulting eligible members on the acceptability of the award, including whether to move to an indicative ballot should it be rejected.**

**56. Nicola Ranger, our General Secretary and Chief Executive also shared her views including the value of consulting widely with members to provide a sense check around where they currently were on pay and within the context of a new Government, the value of having a period of time to set out expectations around AfC reform and to test how seriously the RCN was being taken as the voice of nursing outside of the threat of industrial action.**

**57. Decision: the Committee unanimously agreed to engage relevant members via a consultative process to identify whether members consider the NHS pay award announced for 2024-25 to be acceptable or not acceptable.**

**Apologies for the meeting were received from Ann-Marie Fredericks.**

## **Special Trade Union Committee 21 August 2024**

**Agenda for Change pay negotiations; Scotland**

**58. We held a special meeting to consider the recommendations from RCN Scotland Board on the NHS Agenda for Change pay negotiations for NHS Scotland and the offer from Scottish Government of a 5.5% pay increase across all pay points for 2024/25.**

**59. The Scotland Board met on 20 August 2024 and, in line with the RCN pay principle that members take decisions on their pay, agreed to progress with a consultative ballot of eligible RCN members through an electronic ballot to close 12 noon on Friday 20 September 2024 to align with the consultations of the other unions.**

**60. The Board had agreed a neutral stance should be taken in terms of a recommendation to accept or reject the offer.**

**61. Decision: the Committee unanimously agreed to accept RCN Scotland Boards recommendations to consult members working in NHS Scotland on the pay offer and to take a neutral stance with no recommendation to members regarding the pay offer.**

**Apologies for the meeting were received from Mark Butler, Ann-Marie Fredericks and Helen Oatham.**

### **Committee Membership and attendance**

**Denise Kelly (Northern Ireland) (Chair)**

**Jackie Davies (Wales) (Vice Chair)**

**Usman Adeyemo (Student)**

**Mark Butler (West Midlands)**

**Ann-Marie Fredericks (South East)**

**Dennis Greer (Nursing Support Worker)**

**Toby Kunkel (Scotland)**

**Jane Matthews (South West)**

**Helen Oatham (Eastern)**

**Sharon Osbourne (East Midlands)**

**Karen Sanders (London)**

**Roaqah Shafer (Northern)**

**Mike Travis (North West)**

**Rhian Wheater (Yorkshire and Humber)**

## **Trade Union Committee Report to Members – October 2024**

### **Trade Union Committee 18 September 2024**

#### **Employment Relations workplan including highlight reports**

- 1. We reviewed the latest version of the Employment Relations (ER) workplan, with accompanying highlight reports for the key workstreams, and welcomed that these now incorporated details of planned activities for the next reporting period so we had a more rolling view of progress.**
- 2. An update was received on development of the RCN General Practice Nursing (GPN) Strategy and how best to drive forward campaigning on improving pay, terms and conditions for this important group of members.**
- 3. Work on the strategy was at early stage, although there had already been considerable work across the 4 countries especially around pay for GPNs; we would be kept updated as the strategy progressed.**

#### **Employment Relations risk register**

- 4. We undertook our quarterly review of the Employment Relations (ER) risk register which aligned with the ER workplan.**
- 5. An additional risk had been added since the last reporting period on pandemic preparedness, in response to recent advice from the WHO around the risks of future respiratory pathogens including coronaviruses, flu and Mpox.**
- 6. We noted that the Health, Safety and Wellbeing team had started scoping work around this risk and would be engaging the Health and Safety Reps Committee going forward.**
- 7. There remained two red risks on the register after mitigation: one in relation to independent health and social care (IHSC) pay, terms and conditions and the other in relation to NHS pay, terms and conditions; no significant change was expected in these two risks in the short to medium term.**

#### **RCN Employment Standards update and approval**

- 8. We received a presentation on the final RCN Employment Standards for members working across the IHSC sectors and settings; we had reviewed the draft at our July meeting.**
- 9. The Standards aimed to support members working in IHSC to selfadvocate for fair and appropriate pay, terms and conditions and provide underpinning principles for the RCN to lobby funding decisionmakers and governments for a level playing field for all members working in the nursing profession.**

10. Launch was planned at October Joint Reps Conference, at which a significant number of IHSC reps were booked to attend, alongside targeted comms to all members working in the IHSC sectors and a check-in with those employers with which the RCN had recognition agreements.
11. We noted the revisions to the content of the final draft employment standards and approved the Standards for official launch.

#### **Update on development of the Stewards case management system**

12. We received a demonstration of the new Stewards Case Management System (CMS) which had been rebuilt following feedback from Stewards on issues around the accessibility and useability of the system.
13. The aim was to extend these access and usability improvements across the wider system for the benefit of all reps including eventually enabling the recording of rep support and supervision as well as noncasework activities, particularly for Health and Safety and Learning Reps.
14. We welcomed the improvements made which would be launched in the new year but emphasised the importance of progressing the wider rebuild as soon as possible to all reps and to accurately capture the broad range of activities they undertook outside of casework.

#### **Completion of reps GDPR refresher training and next steps**

15. We received an update on the current position regarding Reps, Committee, Board and Branch members GDPR training status and the actions necessary to address this.
16. Although good progress had been made to improve the compliance rate, there remained a small cohort of Stewards and Branch officials out of compliance, despite considerable chasing by staff and making compliance a condition of attendance at RCN events.
17. This remained a considerable risk to the organisation and as such, it was proposed that non-compliant Stewards be removed from their casework.
18. For those Stewards, Board members and Committee members that failed to complete refresher training 6 months after their GDPR training expired, it was proposed that they be discredited with a *month's notice*.
19. We supported this approach but asked that the 6 month deadline to complete the training be halved to 3 months on the grounds of the risk, the extensive efforts already made to chase these individuals and the minor 30 minute time commitment to complete the refresher training.
20. We noted that reps would receive reminders to complete refresher training two months ahead of their GDPR training lapsing.
21. We agreed that;
  - the appropriate next step for reps who still remained noncomplaint with their GDPR training was to remove the stewards from case

work and request the local branch and region / country request this as an active priority for any outstanding individual.

- If a Steward had facilities time and still had not completed the training, that a report be made of those individuals and escalated to MEJSB.
- For those Stewards, Board members and Committee members that had not completed refresher training within 3 months after their GDPR training expiring, to move to discreditation with a month to complete the training before discreditation.

#### **Activism Academy**

- 22. We received an update presentation on progress of the Activism Academy including the support being provided to the pay campaign including through voting volunteers, promoting activism opportunities to members and improving the website.**
- 23. Development was continuing of the draft RCN Activism Strategy, focussed around a new definition of RCN activism and 5 key vision statements to steer the work of the Academy.**
- 24. We provided feedback in relation to the pay campaign, including how Committee members, particularly for the English regions, could have been better engaged and utilised and on the improvements needed around the sharing of information between activists in workplaces including identifying voting volunteers to lead reps in regions.**
- 25. We also flagged up concerns around member use of WhatsApp as a tool for organising within workplaces around pay and welcomed that a more rigorous RCN WhatsApp policy was currently in development to help manage the risks.**
- 26. We requested going forward to receive written updates on the Activism Academy to provide greater assurance around progress.**

#### **Update on pay across the UK**

- 27. We received our regular update on pay across the four countries and Crown Dependencies.**
- 28. A number of member pay consultations were underway at smaller IHSC employers, in line with the RCN Pay Principles of members being engaged and consulted in relation to their pay, terms and conditions.**
- 29. We were disappointed that there remained a stalemate in Northern Ireland in lieu of confirmation around 2024/25 Barnett consequentials funding; the RCN was continuing to push to ensure appropriate funding for implementation of the 2024-25 AfC pay award.**
- 30. We noted next steps in Scotland following the close next week of their consultation of eligible RCN members on the AfC pay offer for 2024/25 and that the similar consultation underway in England had been extended by a week to finish at the same time.**
- 31. We agreed to schedule a special committee meeting next week to discuss next steps.**
- 32. An update was provided on the situation in Wales following confirmation from the Welsh Government that the 2024/25 AfC pay**

award for NHS staff in Wales would be the same as the England award.

- 33.** *The Wales Board's pay sub-committee would be meeting early next week to recommend to the Wales Board moving to a consultative ballot of eligible Welsh members.*

### **New deal for working people and the Employment Bill**

- 34.** A presentation was received from the Policy and Public Affairs team on *the Government's new Employment Bill arising from the manifesto commitment for a 'new deal for working people'.*

- 35.** The RCN was developing a strategy for lobbying around this Bill and to secure a role at the heart of employment rights policy making, including submitting RCN amendments to ensure the Bill reflected the needs and contributions of nursing and to push the Government to promptly *introduce measures to bolster member's rights.*

- 36.** This would be informed by a prioritisation exercise undertaken around the RCNs employment rights wish-list to determine key themes for focus centred around member priorities and the feasibility of success.

- 37.** Work was also underway in Northern Ireland, which had different employment rights laws, including the RCN inputting into the ongoing *consultation on a 'good job' employment rights Bill.*

### **Congress 2024**

- 38.** We noted the list of Committee allocations and leads for the work arising from Congress 2024 for the 6 debates our Committee is overseeing as well as the timetable for development of the Congress 2024 report.

- 39.** Agenda item submissions for Congress 2025 would open early October until 8 January 2025 and we would need to consider debate ideas for putting forward.

### **Strategic review of Congress**

- 40.** A presentation was received on the review underway of RCN Congress with the aim of presenting to Council proposals on how the college could achieve the purpose of Congress as laid out in the Charter.

- 41.** It was also important that Congress was financially and environmentally sustainable, inclusive and seen as a valued event by the whole membership, not just those attending.

- 42.** We agreed to the scheduling of a special meeting within the next couple of weeks to draft and submit a survey response as part of the initial consultation phase of the review.

## **Special Trade Union Committee 25 September 2024**

### **Outcome of the consultative ballots**



- 43. We held a special meeting to receive the outcomes of the consultations of eligible RCN members in England and in Scotland regarding the pay award and pay offer respectively for nursing staff employed on AfC contracts for 2024-25.**
- 44. Although the pay offer was accepted by members in Scotland, a significant minority voted to reject, demonstrating continued frustration and concern about the nursing workforce crisis facing Scotland's NHS.**
- 45. The pay award in England had been strongly rejected.**
- 46. We noted that members in both England and Scotland would receive the 5.5% increase from October 2024, with backdated pay from 1 April 2024 paid in October in England or November in Scotland.**
- 47. We discussed the challenge of determining next steps, particularly within the context of a new Westminster Government in power, considerations over the likelihood of meeting the turnout threshold for a statutory ballot for industrial action, the pay position of the other health unions and the impact on currently high public support for nursing.**
- 48. Our General Secretary and Chief Executive, Nicola Ranger, shared her views in that she felt the College should put a warning shot out to remind the government that the RCN was large, represented nursing, a significant AfC staff group, needed to be listened to and would continue to strongly fight for pay, terms and conditions and structural change within the NHS.**
- 49. Nicola Ranger also emphasised that failure to achieve a mandate for industrial action would be detrimental to the RCN's position and that there remained a question over the member appetite for industrial action at this juncture.**
- 50. It was noted that Nicola Ranger would be meeting with the Secretary of State for Health, Wes Streeting, in the next fortnight and work would continue to progress with other trade unions the AfC reviews in both countries.**
- 51. We agreed that an approach of buying time, allowing the opportunity for Nicola Ranger to talk and negotiate with the Government, whilst also getting to a state of ballot readiness to increase voter turnout was pragmatic at this time.**
- 52. We stressed the importance of members being kept informed of the College's activities following the consultation to ensure they not only remained engaged but also had assurance the RCN was acting in response to the voice of nursing expressed during the consultation.**
- 53. Getting members ready and activated through the Activism Academy would be key to building the power of the membership and prepare to take a stronger stance if the Government failed to listen to the voice of the members.**
- 54. We also discussed taking the opportunity to review the Industrial Action Handbook, associated policies and industrial action strategies to ensure that the College was prepared.**

**55.It was agreed to prepare a confidential timeline with key goals to achieve to clearly identify points where the College might need to flex or take key decisions.**

**Committee Membership and attendance**

**Denise Kelly (Northern Ireland) (Chair)**

**Jackie Davies (Wales) (Vice Chair)**

**Usman Adeyemo (Student)**

**Mark Butler (West Midlands)**

**Ann-Marie Fredericks (South East)**

**Dennis Greer (Nursing Support Worker)**

**Toby Kunkel (Scotland)**

**Jane Matthews (South West)**

**Helen Oatham (Eastern)**

**Sharon Osbourne (East Midlands)**

**Karen Sanders (London)**

**Roaqah Shafer (Northern)**

**Mike Travis (North West)**

**Rhian Wheater (Yorkshire and Humber)**

## **Trade Union Committee Report to Members – November 2024**

### **Trade Union Committee workshop 19 November 2024**

- 1. We held a workshop on 19 November ahead of our Committee meeting to give us space to discuss our Trade Union Committee priorities moving into a new year as our workplan progressed.**
- 2. The workshop programme also included updates on NHS Job Evaluation and the current context around pay including key findings from the London Economics research.**
- 3. We gave feedback on what worked well and what needed improvement as part of a pay consultation debrief session in addition to our comments on the draft Activism Strategy.**
- 4. We had initial discussions on whether the RCN should submit evidence to the NHS pay review body (PRB) for 2025-26 ahead of formal decision making at our Committee meeting.**

### **Trade Union Committee 20 November 2024**

- 5. We noted that this was Elspeth Caithness, Chair of Health and Safety Reps Committees, last meeting ahead of her term of office ending in December 2024 and thanked her for her contribution including to the good working relationship between the Reps and Trade Union Committees.**
- 6. We noted the decision we had taken via email on 6 November 2024 in relation to the Manx Care pay offer for Manx Care staff for 2024-25: Decision: the Committee unanimously:**
  - Noted the position of the North West Regional Board as set out in the paper.**
  - Agreed to conduct a consultation of RCN members and with the position of the North West Regional Board to make no recommendation in the ballot.**
  - Agreed that the ballot ask the following question of members:**
  - Are you prepared to accept the offer of 4% for 2024-25 with no backpay for staff who have left since April 2024?**
  - If you are not prepared to accept this offer, would you accept if backpay was paid?**

### **Public Affairs update including Employment Bill**

- 7. We received an update on the Government's draft Employment Rights Bill and an outline of the RCNs associated positions on key proposals; this would inform the lobbying strategy going forward to ensure the RCN influenced and strengthened the Bill to the benefit of nursing as it progressed through the Parliamentary process.**

8. Elements of the Bill particularly welcomed included repealing elements of the Trade Union Act 2016, most pivotally removal of the current thresholds for strike action as well as potential extension of options around e-balloting.
9. We asked for updates from the Policy and Public Affairs team to be a regular standing item on our meeting agendas going forward as this vital Bill developed.

#### **RCN Trade Union Priorities/Employment Relations Workplan and risk register**

10. We reviewed the latest version of the Employment Relations Workplan with accompanying highlight reports for key workstreams.
11. We had the opportunity at our workshop held on 19 November 2024 to consider long-term thinking around each of the seven core priorities set out within the workplan; the feedback we provided would inform the next iteration of the workplan as it moved into 2025, alongside a number of other small changes.
12. Review was also undertaken of the latest version of the Employment Relations Risk Register; there were no new or amended risks since last reported at our September meeting although there remained 2 long standing red risks covering NHS and independent sector pay.
13. We sought further clarification around the improving the number and reach of reps and active members workstream and asked for review of the related section of the risk register to revisit whether it was pitched correctly or needed strengthening.

#### **Pay update**

14. We received our regular update on the pay positions across the 4 countries and the Crown Dependencies.
15. NHS Job Evaluation remained a priority focus to build momentum in encouraging Agenda for Change (AfC) members to seek banding reviews, especially on a group basis and at Band 5 level, to apply pressure on the AfC system which it was widely recognised was not currently working for nursing.
16. We were disappointed to hear that the RCN would likely need to rethink how best to continue to escalate the issues facing the profession, including pay, with the new Government in light of a current lack of engagement and progress including around delivery of the commitment to provide NHS Staff Council with a funded mandate to resolve outstanding concerns with AfC.
17. We welcomed to hear of recent positive movement in talks around the 2024-25 AfC pay award in Northern Ireland; the Northern Ireland Board would make recommendations to us on next steps once a pay offer was received.
18. An update was received on progress in Scotland with implementation of the non-pay elements of the current year's pay deal, as well as of the 2024-25 AfC pay offer: initial conversations had also started in relation to the direct negotiations planned for the 2025-26 AfC pay round.

19. AfC members in Wales had voted to reject the Welsh *Government's* announced pay offer for the 2024-25 pay round; RCN Wales had written to the Cabinet Secretary for Health and Social Care seeking urgent talks to address the current issues faced by nursing staff.
20. A number of pay consultations were underway in the independent health and social care sectors including at MacMillan and we would continue to be kept updated on progress.
21. We welcomed that work was underway to keep voting volunteers active and to prepare for future action around nursing pay.
22. We were updated on the 2025 pay offer for members employed by the States of Guernsey on AfC terms and conditions and the Southeast *Board's recommendations on next steps.*
23. A reminder was provided of the context on the island, including ongoing pay parity issues with nursing pay significantly below civil servant pay for roles of apparently lesser skill; although job evaluation work was in train around this, tangible outcomes had yet to be delivered.
24. We noted that although the negotiating team considered it unlikely that the *employer's* offer would be improved, there was an opportunity however for further meaningful conversations with the employer in the coming weeks.
25. Decision: the Committee unanimously agreed the recommendations from the Southeast Board that members in Guernsey be consulted on the pay offer for 2025 via an email electronic vote, administered by the RCN and that a neutral position be maintained on the consultation to members to allow individual members to make their own decision through asking the *question 'do you accept or reject this offer? The consultation would commence as soon as possible with a consultation time of 2 weeks.*
26. We received an update on the development of a project plan for ongoing RCN work to ensure nursing staff employed in General Practice (GP) across the UK were rewarded appropriately and fairly for their knowledge, skills, and responsibilities.
27. GPN staff across the 4 UK countries were employed by individual GP practices, leading to inconsistencies in pay, terms and conditions in the absence of national bargaining structures.
28. A review had been undertaken to bring together the considerable activity already undertaken by the RCN around GPNs and to inform the development of a clear project plan with identified short, medium and long-term strategic goals to be delivered at the lead of a new UK wide sub-group.
29. Immediate aims and objectives identified included securing as a minimum the equivalent of NHS AfC pay scales, terms and conditions for GPNs and ensuring equitable treatment in employment.
30. We gave our support to the proposed direction of travel for the project in boosting this important work to support and improve recognition for this very engaged cohort of the membership. NHS Pay Review Body (PRB) update
31. We considered whether the RCN should submit evidence to the NHS PRB for the 2025-26 pay round.

- 32.** We had had a run through at our 19 November workshop session of the pros and cons of the RCN making an individual PRB submission and which we had discussed at length.
- 33.** The position of the other NHS staffside unions around submissions was noted, as well as the reference within this year's remit letter issued by the Secretary of State specifically directing the NHS PRB to take account of the Government's budgetary restraints.
- 34.** We were also reminded that *the Government's commitment* to provide NHS Staff Council with a funded mandate to resolve outstanding concerns with the AfC pay structure had yet to materialise.
- 35.** We sought assurance that should the decision be taken not to make a submission, that there would still be efforts to promote the RCN's strong evidence on the considerable challenges facing the profession and clearly explaining the reason for not submitting; confirmation was received in response that a comprehensive comms plan focussed on communicating clearly with the membership, the media, and the public was in place.
- 36.** Decision: the Committee considered the pros and cons outlined in the report and agreed that the RCN should not submit evidence to the 202526 NHS Pay Review Body and to instead call for direct negotiations via NHS Staff Council.

#### Agenda for Change profiles review

- 37.** An update was received on the national AfC profile reviews being undertaken at the lead of the NHS Staff Council Job Evaluation Group (JEG), with an RCN response being developed for the consultation currently underway on proposed revisions to Band 7 and above national matching profiles.
- 38.** Further consultation was expected on the full suite of profiles in due course, although a timeline had yet to be confirmed for that or for publication of the final profiles.

#### Report from the Member Journey and Strategy Board

- 39.** We received our regular update report from the Board.
- 40.** We welcomed that progress continued to be made to make the rep's Case Management System easier to access and use and that the rebuilt Stewards portal would be rolled out in the new year ahead of extending the improvements to the rest of the system for the benefit of all reps.
- 41.** GDPR compliance of reps, committee, board and branch members remained above 80% and all Stewards with cases were now fully compliant.
- 42.** Since our last meeting, letters had been sent to those remaining out of compliance giving them 3 months to complete refresher training before being discredited or removed from office; this had already generated some success.

#### Branch disaccreditation process

- 43.**We reviewed a set of disaccreditation criteria for RCN branches which had been developed at the lead of a working group to meet one of the recommendations from an internal audit by BDO on the 'Benefit of Reps'.
- 44.** Limited criteria were currently in place, only requiring reps to work within the remit of the role and not to bring the RCN into disrepute; this had led to inconsistency between branches in how the rep disaccreditation process was applied.
- 45.**The new criteria intended to ensure that all reps were active on behalf of RCN members and all contributions valued.
- 46.**Decision: the Committee approved the branch rep disaccreditation criteria as set out within the report and which would be implemented and apply across all UK branches.

### **Activism Academy**

- 47.**An update was received on the work of the Academy to drive a transformation in the number and impact of RCN active members.
- 48.**Over the last year, the focus had been on establishing the Activism Academy as a brand, recruitment to and ways of working within the
- 3**
- Academy teams as well as improving the impact of activism during the pay consultations in England, Wales and Scotland in 2024 including the recruitment and support of RCN voting volunteers.
- 49.**Ambitious plans were in place for the Academy in 2025, including improving branch activism and developing a comprehensive plan for rep recruitment and retention.
- 50.**We welcomed plans to improve rep connectivity, including New Rep Connect, a pilot space for peer and group support but stressed the importance of this learning being extended to help all reps to connect at local workplace, regional and UK wide level.
- 51.**We were updated on plans to improve and better promote the rep learning and development offer.

### **Joint Unions In Prisons Alliance (JUPA) revised position statement and charter**

- 52.**An overview was received of refresh work to reinvigorate the Joint Unions in Prisons Alliance (JUPA), a group of 9 trade unions and professional organisations representing staff working to provide services in prisons which had been set up in response to concerns around staff safety and to improve their working conditions.
- 53.**A review had been undertaken of the JUPA Charter and Position Statement outlining JUPAs call for action for the UK government, regulators and employers and with the ultimate aim of getting HM Prison and Probation Service (HMPPS) to sign up to the Charter
- 54.**The revised JUPA Charter set out the principles of a positive health and safety culture, management arrangements and safe working practices, to protect the long-term physical health, safety and mental wellbeing of all workers in the sector.

**55.The Position Statement outlined the commitment of JUPA to work together to engage with other key stakeholders to lobby for improvements in the working conditions for members.**

**56.The JUPA unions were currently consulting their members on the revised Charter and Position Statement with a view to publication of the final versions in early 2025.**

**57.The Health and Safety Reps Committee and relevant professional lead had been consulted on the reviewed documents and provided their support.**

**58.Decision: the Committee reviewed and unanimously endorsed the work with JUPA including the Charter and Position Statement. RCN Country and Regional Board performance reports**

**59.We noted our regular performance update report from the RCN boards against the 2024 targets for the recruitment and retention of reps: the proposed 2025 reps targets would be submitted to our next meeting for approval.**

**60.We asked for a Joint Reps Conference options appraisal report to be submitted to our next meeting in reflection that they remained heavily oversubscribed.**

**Interim Congress 2024 report**

**61.We reviewed the draft interim report.**

**Committee Membership and attendance**

**Denise Kelly (Northern Ireland) (Chair)**

**Jackie Davies (Wales) (Vice Chair)**

**Usman Adeyemo (Student)**

**Mark Butler (West Midlands)**

**Ann-Marie Fredericks (South East)**

**Dennis Greer (Nursing Support Worker)**

**Toby Kunkel (Scotland)**

**Jane Matthews (South West)**

**Helen Oatham (Eastern)**

**Sharon Osbourne (East Midlands)**

**Karen Sanders (London)**

**Roaqah Shaher (Northern)**

**Mike Travis (North West)**

**Rhian Wheater (Yorkshire and Humber)**



## Agenda Item 5.3



### **Professional Nursing Committee Report to Members – September 2024**

1. This report reflects work done by the Professional Nursing Committee since the last report to Council and an update from our meeting on 17 September 2024.
2. I was unfortunately unable to attend PNC in September so the meeting was chaired by Colin Baker, Vice Chair.
3. Since we last met, the [RCN position statement on registered nurses and nursing associates working in maternity services](#) was published in early September.
4. The 17 September meeting began with a discussion on how the RCN can better raise the voice of its Nursing Support Worker members and how PNC might work more closely with the Nursing Support Workers Committee. We are considering this further outside our meeting.
5. The report of the September meeting follows below.

#### **Chair and Vice Chair's Update**

6. Colin updated PNC on my recent activity as Chair including attendance at the RCN International Nursing Research Conference in Newcastle the previous week.
7. I was delighted to also have been able to take part in the celebration event for our Nursing Workforce Standards Champions on 2 August. Following the PNC workshop to discuss the now 3year old Standards earlier in the year, we look forward to being involved in their formal review and expect an update on our agenda in the new year.
8. I am co-chairing the steering group overseeing the review of the Standards and collated further feedback from PNC to support this process.

## Acting Chief Nursing Officer's Update

9. The Committee received an update on the current key priorities of Lynn Woolsey, acting Chief Nursing Officer, and congratulated her on her new role.
10. PNC was briefed on the current status of the NHS pay consultation in England and heard that the deadline for members to vote had been extended. The Committee discussed the RCN's *activity to date* to ensure as many members as possible used their vote.
11. The Committee discussed the RCN's report launched on World Suicide Prevention Day 2024 '[understanding the factors underpinning suicidal ideation amongst the UK nursing workforce from 2022 - 2024](#)' and were briefed on the statistics showing a rise in nursing staff with suicidal thoughts contacting the RCN for support, with many citing workplace issues as a key factor in why they were seeking help.
12. Lynn informed the Committee that arrangements were in train for the learning disability nursing workforce summit taking place on 22 November and for Nursing Support Workers Day on 23 November.
13. The RCN has also been hosting listening events for nurse educators to hear their concerns regarding the drop in students applying to study nursing and the consequential impact on universities.
14. PNC noted the [RCN's response to Lord Darzi's report](#) on the state of the National Health Service in England and the [RCN's response to the Health Services Safety Investigations Body \(HSSIB\) workforce and patient safety report](#).

## RCN Scheme of Delegation

15. The Committee *received a presentation on the RCN's revised* Scheme of Delegation and noted its new terms of reference. Both of these will be published on the RCN website shortly.

## Forum Chairs Committee Terms of Reference

16. PNC agreed updated terms of reference for the Forum Chairs Committee. These will also be published on the RCN website shortly.

## RCN Institute of Nursing Excellence

17. The Committee was delighted to be joined again by Jane Ball, Director of the Institute, Marcus Wootton, Associate Director: International, and Trish Hughes, Associate Director; Nursing Practice to receive an update on establishment of the Institute of Nursing Excellence.

18. PNC received an informative presentation on the work plans for each of the academies and the business case being put together to set out the resources that will be needed going forward.

### **Professional Framework Update**

19. PNC received an update on the Professional Framework workstream on Nursing Support Workers and discussed the work involved in phases 1 and 2.
20. The first meeting of the working group took place on 10 October.

### **Congress 2024 Agenda Items**

21. We have now formally agreed the Committee leads for each of the items arising from Congress 2024 allocated to the PNC.
22. Committee members are already in contact with the staff leads for their items. Those who had already attended meetings provided progress updates on the status of the work.
23. We look forward to receiving the first reports on work arising from Congress 2024 at our November meeting.

### **Strategic Review of Congress**

24. Patricia Marquis, Executive Director of RCN England, joined the meeting to brief PNC on the strategic review of Congress.
25. We will be convening again on 28 October to consider our response to the Congress survey and feed in our views to the review.

### **Position Statement on Healthcare Provision for Autistic People**

26. Following discussion on an earlier draft at our meeting in July, PNC received a revised version of the position statement on healthcare provision for autistic people for approval.
27. After some further deliberation and subject to some further minor amendments, we signed off a final version of the position statement by email after the meeting. This will be published on the RCN website shortly.

### **UK Staffing for Safe and Effective Care (SSEC)**

28. As reported previously, the three key workstreams of the safe staffing programme, which sit within the Nursing Workforce Academy, are ratios, ending corridor care and the Nursing Workforce Standards. *Work continues to streamline the RCN's work under the programme.*

29. The Committee noted that the meeting of the SSEC UK Ratios Steering Group would take place in October. Ahead of that meeting, a smaller group will come together to map out next steps to present at the meeting.
30. The review of the Nursing Workforce Standards was discussed earlier in the meeting – PNC expects to receive a revised set of Standards in the new year for its consideration.
31. In relation to corridor care, the Committee noted that [NHS England issued guidance](#) in September to say care outside of a normal cubicle or ward environment should not be normalised. The RCN continues to take part in discussions with the new CNO for England and NHS England on improving staffing for safe and effective care and minimising corridor care.
32. A corridor care roundtable took place in Wales on 18 September and the RCN continues to engage in other roundtables taking place with the other Royal Colleges and the Care Quality Commission.

### **Next Meeting**

33. The next formal PNC meeting takes place at RCN HQ on 19 November 2024.
34. We have also scheduled a *'deep dive'* on Monday 28 October to consider our Committee response to the survey on the strategic review of Congress.

**Rachel Hollis FRCN Chair, Professional Nursing Committee** [rachel.hollis@reps.rcn.org.uk](mailto:rachel.hollis@reps.rcn.org.uk)

### **Committee Membership 2024**

Rachel Hollis (Yorkshire and the Humber – CHAIR)  
Colin Baker (South West – VICE CHAIR)  
Oladunni Akinbulumo (North West)  
Alisha Brown (Student)  
Aquiline Chivinge (East Midlands)  
Mary Codling (South East)  
Tracie Culpitt (Nursing Support Worker)  
Donna Gallagher (Northern Ireland)  
Martha Gill (Scotland)  
Tim Grace (Northern)  
Sonia Henry (London)  
Raymond McMorrow (West Midlands)  
Carolyn Middleton (Wales)  
Alison Paterson (Eastern)

**Apologies for the September meeting were received from Rachel Hollis, Alisha Brown, Aquiline Chivinge and Alison Paterson.**

**Staff Attendance**

**Lynn Woolsey (Acting Chief Nursing Officer)**

**Caroline Clinker (Governance Adviser)**

**Antonia Borneo (Head of Policy and Public Affairs – UK & International)**

**Patricia Marquis (Executive Director: RCN England)**

**Jane Ball (Director, RCN Institute of Nursing Excellence)**

**Patricia Hughes (Associate Director: Nursing Practice)**

**Marcus Wooton (Associate Director: International)**

**Maxine Nunn (Performance, Risk and Assurance Manager)**

**Jonathan Beebee (Professional Lead: Learning Disability Nursing)**

**Lena Johnson (Professional Lead: Nursing Workforce)**

## **Professional Nursing Committee Report to Members – November 2024**

1. This report reflects work done by the Professional Nursing Committee since the last report to Council and an update from our meeting on 19 November 2024.
2. We were delighted to be joined at our meeting by Lucy Muchina, acting Deputy Chief Nursing Officer, who took some time to introduce herself and speak about her priorities in her new role.
3. Since our last meeting where Patricia Marquis, Executive Director of RCN England, briefed PNC on the strategic review of Congress we have submitted our collective response to the survey and look forward to hearing next steps ahead of proposals on the future of Congress being presented to RCN Council in Spring 2025.
4. Following our sign off of the [RCN position statement on healthcare provision for autistic people](#), this was published on our website on 4 November.
5. The report of our November meeting follows below.

### **Chair and Vice Chair's Update**

6. Colin Baker and I updated PNC on our recent activity as Chair and Vice Chair including attendance at the Governance and Culture Reviews Joint Partnership Board. Colin provided an update on implementation of the recommendations arising from the reviews and we were pleased to note that 60% of the deliverables have already been completed.
7. We emphasised the importance of making this work more visible to Council and Committee members as well as the wider membership as there is a perception that little has been achieved. We think it is particularly important to promote this work to the new members of Council taking up post in January 2025.

### **Acting Chief Nursing Officer's Update**

8. The Committee received an update on the activities and current key priorities of Lynn Woolsey, acting Chief Nursing Officer.
9. We heard that Dr Kate Kirk has now taken up post as the Associate Director: Workforce Academy thus completing the senior

leadership team for the RCN Institute of Nursing Excellence. We are very much looking forward to meeting her at our next meeting in February.

10. We discussed developments at the NMC since publication of the independent culture review and shared concerns at the slow progress of improvement work in response to that review. Lynn briefed us on her participation in the oversight group established by the Professional Standards Authority to monitor the changes being implemented and assured us that the RCN will seek an early meeting with Paul Rees MBE when he takes up post as *the NMC's* interim Chief Executive & Registrar on 20 January. Later in our meeting we were joined by Sam Foster, Executive Nurse Director of Professional Practice at the NMC.
11. We were briefed on the current situation in relation to preregistration nursing which continues to worsen with a number of nurse educators leaving the profession and the number of people studying to become nurses falling dramatically in every region in England. We returned to this later on our agenda with an update on RCN activity in response to this situation.
12. We noted that the UK government has launched a consultation for people to share their experiences of the health service and that the responses received will *help to shape the government's 10-year health plan set to be published in Spring 2025*. We have been encouraging our members to share their expert views to put nursing at the heart of the plan.
13. We heard that the Executive Team will be working with the new members of RCN Council to review progress against the RCN's 5 year strategy given that 2025 marks the halfway point. We agree that it feels like a good time to take stock.
14. We noted that following recommendations made by the Industrial Injuries Advisory Council two years ago, the [RCN is urging the UK government to take action and recognise COVID complications as occupational](#).
15. We also noted that on 5 November, Rose Gallagher MBE, the RCN's professional lead on infection prevention and control during the pandemic, appeared as a [witness in module 3 of the COVID-19 Inquiry](#) to answer questions on her previously submitted witness statement. As a core participant of the Inquiry, on 21 November the RCN also had the opportunity to question [Matt Hancock, Secretary of State for Health and Social Care during the pandemic](#).
16. We heard that [recently released RCN analysis](#) shows that the number of UK-educated nursing staff leaving the NMC register

within the first 10 years of joining has increased by 43%, including a 67% rise in those leaving within the first 5 years.

17. **The RCN has *responded in the media to Wes Streeting's plan to publish a league table of the best and worst performing hospitals in England and sack persistently failing managers. We agree that this is not the solution and that tables and rankings without addressing root causes could undermine public confidence.***
18. **We noted that a number of events would be taking place in the weeks after our meeting including the Learning Disability Nursing Workforce Summit on 22 November and the Nursing Support Workers conference to celebrate Nursing Support Workers Day on 23 November. PNC was represented at both of these events.**
19. **Additionally, RCN Wales celebrated its 11th [RCN Wales Nurse of the Year Awards](#) in Cardiff on 21 November.**
20. **We noted that since the General Election progress in relation to regulatory reform has been slow. The timeline for when each professional regulator will be looked at has been pushed back and is currently unclear.**
21. **This has also had an impact on the campaign to protect the title 'nurse' in law and it was acknowledged that this is not being seen as a priority by the new government, but the RCN is working with members of the 'Protect Nurse' campaign team to look at alternative mechanisms for achieving this outcome. Alison Paterson continues as the PNC member lead for this work.**
22. **Finally *under this item, PNC was briefed on the RCN's decision to stop actively posting on X (formerly Twitter). We discussed the implications for elected members who hold personal accounts on X.***

### **UK Staffing for Safe and Effective Care (SSEC)**

23. **As reported previously, the three key workstreams of the safe staffing programme, which sit within the Nursing Workforce Academy, are the introduction of Registered Nurse: patient ratios, ending 'corridor' care and the revision of the Nursing Workforce Standards. *Work continues to streamline the RCN's work under this programme.***
24. **The Committee noted that I had chaired the meeting of the SSEC UK Ratios Steering Group that had taken place the previous week. Since that meeting a short pause in the work has been agreed to enable the new Associate Director of the Nursing Workforce Academy to review the workplan and timeline for the work. More detail will be brought to PNC in February, with a subsequent update to Council.**



25. In relation to corridor care, work continues to influence change and lobby for mandatory reporting of patients receiving care in inappropriate settings. We noted that a timeline for the England-focused work was shared with the acting Chief Nursing Officer for review on the morning of our meeting.
26. We heard that a joint partnership approach is being taken to the three-year review of the Nursing Workforce Standards. We discussed this in more detail at our workshop on 16 January.

### **Nursing and Midwifery Council (NMC)**

27. We were pleased to be joined by Sam Foster, Executive Nurse Director of Professional Practice at the NMC, to discuss the recent independent culture review and the steps taken by the NMC to date to address the failings identified.
28. Sam shared a comprehensive presentation on her work at the NMC where she plays a critical role as the most senior registrant within the organisation. She set out very clearly the challenges and led a wide-ranging discussion on the improvements needed. The Committee recognised that the NMC was in the very early stages of significant change and that there was still a long way to go to *establish the 'just and learning culture' required*. We confirmed how vital it was for the RCN to work closely with the NMC in order to achieve and gain assurance on the improvement work underway.

### **RCN Institute of Nursing Excellence: Activism Academy**

29. We received a presentation on the newly established Activism Academy and its priorities over the coming months.
30. We discussed plans to get more members engaged in the work of the RCN and heard about development of the RCN's activism strategy which we understand will be shared with RCN Council for sign off shortly.

### **RCN Employment Standards**

31. We received a presentation on *the* [RCN Employment Standards for Independent Health and Social Care Sectors](#) (IHSC) and discussed the importance of ensuring that they align with the Nursing Workforce Standards.
32. While the Employment Standards set out what the RCN expects employers to deliver for their nursing workforce in terms of pay, terms and conditions in the IHSC, the Nursing Workforce Standards explicitly set out what must happen within all workplaces and settings to ensure the delivery of safe and effective patient care.

33. We recognised that the Nursing Workforce Standards had gained a lot of traction since their launch almost 3 years ago and it is important that both sets of standards are not seen in isolation and are very explicitly aligned.

#### **Update on the EDI Strategy**

34. We were delighted to meet Patricia Mbasani, Chief People Officer, at our November meeting and receive a presentational update from her on the new RCN Group EDI Strategy.
35. We noted the election of Mehvish Shaffi-Ajibola, External Adviser, as Vice Chair of the [EDI Committee](#) and that an external Chair with demonstrable experience of developing and implementing EDI strategies would shortly be sought.
36. We heard that the EDI team were working to turn the 37 strategic commitments in the EDI Strategy into an implementation plan with clearly assigned accountabilities and a robust governance structure through a programme board. We were pleased to see that work is progressing.

#### **RCN Position Statement on the Decriminalisation of Abortion**

37. We agreed at our meeting to recommend to RCN Council approval of the draft [RCN position statement on the decriminalisation of abortion](#). Council has since signed this off and it was published on the website on 3 December.
38. We spent some time discussing the communications and wellbeing plan for the position statement given the controversial nature of abortion. We were keen to ensure no members or staff were left vulnerable.
39. We noted that in addition to the new position statement, the RCN was also due to add its name to a joint statement supporting decriminalisation of abortion, alongside organisations such as the Royal College of Obstetricians and Gynaecologists, the Royal College of General Practitioners, the British Medical Association, Unison and others. This was expected to be shared with a limited audience of MPs in early December.

#### **Nursing Higher Education (Supply and Retention)**

40. Guided by Charli Hadden, Policy Manager, we discussed the current challenges facing the higher education sector across all four UK countries, but particularly in England.
41. We heard that the RCN had been carrying out some investigative work on the impact on universities and its nurse educator members, the findings of which would shortly be published. We discussed the work to date to gather evidence and develop and test policy and received an *overview of the RCN's key policy recommendations* ahead of publication of the report.

42. We recognised the importance of widening access to nursing and supporting those who wish to join the profession but ordinarily would be unable to, perhaps due to poor exam grades. Additionally, we highlighted that there are Nursing Support Workers being prevented from following the Registered Nurse pathway due to the lack of funding available for employers to claim reimbursement for *Nursing Associates training to become a Registered Nurse (NA 'top up' programmes)*.

### **RCN Forums**

43. On the recommendation of the Forums Governance Group, PNC agreed to the disestablishment of the ENT-Maxillofacial Forum which had been struggling to recruit members to its steering committee for a number of years and had been inquorate since 2020.
44. Under this item, the Committee also agreed new terms of reference for Forum Steering Committees on the recommendation of the Forums Governance Group.
45. The key changes include moving the terms of reference into the *RCN's new standard format and making clear the route by which Forum Steering Committees should obtain clinical expert advice and expertise on particular topics without the need to formally establish sub-groups.*

### **PNC Risk Register**

46. A regular item on our agenda is to review the PNC risk register. At this meeting we noted an update on our two existing risks around the Forums and Networks Review and influencing political decisions. We also noted an update on delivery of the RCN Institute which sits on the RCN Group register.
47. An internal audit has just completed to review implementation of the recommendations arising from the Forums and Networks Review. We are receiving a presentation on the findings of that audit at our next meeting in February.

### **Congress 2024 Agenda Items – First Report**

48. We received the mid-term progress report on the 25 resolutions and matters for discussion arising from Congress 2024.
49. The majority of Committee members confirmed they were in contact with the staff leads for their items and had been involved in the work to date.
50. We look forward to receiving the final report on work arising from Congress 2024 in April.

## **Any Other Business**

### **Professional Framework**

51. We noted a possible delay to amendments to the new digital build *'This is Nursing'* planned on the RCN website to bring together the different elements of the Professional Framework and are being kept updated on progress through Alison Paterson, PNC lead for the programme.

### **Nursing Support Worker Award**

52. We noted an update on the proposal to introduce an NSW award as part of the suite of awards at Congress. This was not approved by RCN Council as it was recognised that with the exception of Fellowship, NSWs were already eligible for all of the other awards presented.
53. We are pleased that the Executive Team has committed to look at the possibility of introducing an England award as there is already an NSW award in Wales, Scotland and Northern Ireland given at their Nurse of the Year events.

### **Next Meeting**

54. The next formal PNC meeting takes place via MS Teams on 6 February 2025.
55. Two in-person workshops also took place on 16 January 2025. The first was for the Committee to discuss the review of the Nursing Workforce Standards, the Professional Framework workstream on assistive and supportive roles, and review progress against our 2024 work programme.
56. That afternoon, we held a workshop with the RCN UK Students Committee at which we briefed students on the role of PNC and demonstrated to them where being an active member of the College can take you. We also talked to them about the role of country/ regional Directors and how their offices work and spent some time building relationships between the relevant Students Committee and PNC members of each country/ region.

### **Rachel Hollis FRCN**

**Chair, Professional Nursing Committee [rachel.hollis@reps.rcn.org.uk](mailto:rachel.hollis@reps.rcn.org.uk) Committee Membership 2024**

**Rachel Hollis (Yorkshire and the Humber – CHAIR)**

**Colin Baker (South West – VICE CHAIR)**

**Oladunni Akinbulumo (North West)**

**Alisha Brown (Student)**

**Aquiline Chivinge (East Midlands)**

**Mary Codling (South East)**

**Tracie Culpitt (Nursing Support Worker)**  
**Donna Gallagher (Northern Ireland)**  
**Martha Gill (Scotland)**  
**Tim Grace (Northern)**  
**Sonia Henry (London)**  
**Raymond McMorrow (West Midlands)**  
**Carolyn Middleton (Wales)**  
**Alison Paterson (Eastern)**

**Apologies for the November meeting were received from Oladunni Akinbulumo and Martha Gill.**

**Staff Attendance**

**Lynn Woolsey (Acting Chief Nursing Officer)**  
**Lucy Muchina (Acting Deputy Chief Nursing Officer)**  
**Caroline Clinker (Governance Adviser)**  
**John Bryant (Head of Member Communications)**  
**Antonia Borneo (Head of Policy and Public Affairs – UK & International)**  
**Patricia Mbasani (Chief People Officer)**  
**Harry Eccles (Head of Activist Engagement)**  
**Stephanie Thornton (Employment Relations Officer)**  
**Carmel Bagness (Professional Lead for Midwifery and Women’s Health)**  
**Charli Hadden (Policy Manager)**  
**Natalie Zara (Executive Director of Governance)**  
**Maxine Nunn (Performance, Risk and Assurance Manager)**

# Agenda Item 5.4



## Country and Regional Boards

<b>Title of Paper:</b>	<b>Report of the UK Representative Committees</b>  <b>UK Learning Reps Committee – 8 October 2024</b> <b>UK Stewards Committee – 24 October 2024</b> <b>UK Health &amp; Safety Reps Committee – 29 October 2024</b>
------------------------	---

**UK Learning Reps Committee – 8 October 2024**

- 1. We welcomed that Murdo Macleod, Sue Mench and Tracey Risebrow had been re-elected unopposed to the Scotland, Northwest and Eastern seats on the Committee.**

- 2. We would also be welcoming new Committee members Janine Compston - Northern Ireland and Chris Starnes - Southwest seats next year.**
- 3. No eligible nominations had been received for the Wales and Yorkshire & Humber seats and which would be readvertised early in the new year, once the current year's Reps Committee elections and Chair and Vice Chair elections had concluded.**
- 4. We welcomed that work was progressing to create a learning pack for reps covering Partnership Learning Agreements (PLA) to promote and encourage greater understanding of PLAs and their value, especially to Learning Reps.**
- 5. The proposed online learning module would provide a background grounding on their role and purpose and the benefits they could bring to an organisation and to the RCN in terms of organising, especially in employers that did not currently have recognition.**
- 6. We received a run through of the programme for the October Joint Reps Conference and were reassured of the wrap-around support to be available for delegates, both those attending in person and virtually, in light of a number of sensitive topics on the agenda.**
- 7. Our regular update from the Member Experience and Journey Strategy Board was received.**
- 8. Good progress was being made in the vital work to improve the Case Management System (CMS) for reps to address long-standing access and usability issues.**
- 9. We welcomed that a more stringent approach was being taken for those reps who remained out of compliance with their GDPR training despite extensive chasing around refresher training and which included moving to disaccreditation.**
- 10. RCN complaints remained at a minimal level and analysis had been undertaken of member contacts to RCND to identify those hotspot employers to allow the RCN to work locally or nationally to try to resolve issues.**
- 11. We noted with concern ongoing high demand for RCN counselling services, including a considerable increase to 170 so far in 2024 in the number of high-risk referrals from members experiencing suicidal ideation.**
- 12. We discussed rep recruitment and in particular concerns about trying to stem the high attrition rates; we also asked that regions and countries be reminded when setting their rep recruitment targets for 2025 that they also needed to focus on the Independent Health and Social Care sectors where Learning Reps in particular could be especially powerful.**
- 13. An update was received on implementation of revised Agenda for Change (AfC) Band 2-3 national profiles in workplaces, part of work to ensure members felt valued and to support recruitment and retention.**
- 14. We noted that implementation of the new profiles across England remained patchy, with the RCN pushing for progress via regional**

- offices and the relevant partnership forum for those employers who had yet to undertake reviews.
15. Reps had a vital role to play in encouraging and supporting members to seek banding reviews and Learning Reps in particular in assisting members with how best to use their knowledge, qualifications and training in reviewing their job descriptions.
  16. We suggested that the suite of resources available to support members to review their job descriptions should include a number of case studies, in particular to demonstrate the financial reality of the relatively small salary bump in the move from Band 2 to 3.
  17. An overview was received of work underway with the Nursing Department, including with the establishment of the RCN Institute of Nursing Excellence, with a pipeline now in place for new areas of work, tenders and commercial activity.
  18. We were updated on new RCN member resources available including on trauma informed care and new courses on fitness for practice and psychosocial intervention.
  19. We discussed potential agenda submission ideas for Congress 2025 and agreed to schedule a special meeting on 5 November to draft our response to the survey as part of the strategic review of Congress project.
  20. We reviewed and updated our workplan and gave feedback on issues impacting Learning Reps in regions and countries.

#### Stewards Committee 24 October 2024

21. In relation to the recent elections, Phil Cole, Pete Davis, Bernie Miller, Billy Nichols and Des Osunde had been re-elected unopposed to the West Midlands, Yorkshire & Humber, Northwest, Wales and Scotland seats respectively.
22. Matthew Stewart would be joining us from January 2025 following his election to the Southwest seat and there would be a contest for the Northern Ireland seat.
23. We received an update from the Activist Learning and Development team who were now located within the Activism Academy and noted that the draft RCN Activism Strategy was currently with the Executive Team for review, with an accompanying business case.
24. We were provided with an update on the current pay positions across the 4 countries, building on the update provided at the recent Joint Reps Conference.
25. We noted that the NHS Pay Review Body (PRB) remit letter had now been received for the 2025-26 pay round and that the Trade Union Committee would be taking a decision on whether the RCN should submit evidence.
26. In England, members employed on Agenda for Change (AfC) terms and conditions had rejected in a recent consultation the *government's announced 2024-25* pay award; the RCN was continuing to look at

- how best to use the rejection vote to impact constructive discussions around next year's settlement.
27. In Scotland, implementation was underway of the 2024-25 AfC pay award, with the majority of RCN members voting in the recent pay consultation to accept; progress also continued to be made on the non-pay elements of the current years pay deal, including the phased reduction to the working week, a Band 5 review and protected learning time.
  28. The consultation with members in Wales employed on AfC contracts on the 2024-25 pay award had yet to close.
  29. We were disappointed that there remained a stalemate in Northern Ireland in lieu of confirmation around 2024-25 Barnett consequential funding; the RCN was continuing to push the Northern Ireland Government, with nursing pay perennially lagging behind the rest of the UK.
  30. We were updated on priority Job Evaluation (JE) work including trying to build momentum in encouraging AfC members to seek banding reviews where they felt their job description no longer reflected the responsibilities of their job, especially on a group basis and at Band 5 level.
  31. We discussed the important role Stewards could play in encouraging AfC members to submit regrading reviews to put pressure on employers and the AfC JE system and highlighted ICU nurses as a potential good cohort of AfC members to target around JE.
  32. Our Chair updated on the recent NHS Staff Council plenary AGM meeting which he attended alongside the Chair of Trade Union Committee as part of the RCN delegation.
  33. Flexible working and pay in particular had been identified as key priorities for NHS Staff Council going forward, including ensuring the NHS AfC pay rounds shifted back to a more appropriate timetable.
  34. We received an update report from the Member Experience and Journey Strategy Board.
  35. The new RCN Equity, Diversity and Inclusion (EDI) Strategy would have an impact on services provided to members and work was underway to develop training including around discrimination, for both reps and staff.
  36. We noted with concern a recent RCN data breach where a Steward had lost sensitive member personal data; the Information Commissioner had found against the RCN and had issued a warning but had the Steward been out of compliance in terms of GDPR training, a fine would likely have been imposed.
  37. We welcomed that all Stewards with cases were currently GDPR compliant which had been a key risk to the RCN and that the risk would be managed going forward as reps training lapsed.
  38. It was updated that there remained high demand for RCN counselling services, with the wait time currently standing at around 20 days, and a year-on-year doubling seen in the number of high-risk



referrals from members experiencing suicidal ideation. 39. We received a demonstration of the new Stewards Case

Management System (CMS) which had been rebuilt; we welcomed improvements made to simplify and speed up use of the system, including stripping out unneeded functions and steps.

40. It was proposed to move to authentication via email to avoid the conflict some reps experienced with their work accounts when using the Microsoft Authenticator app.

41. We also received an update on RCN IT equipment for reps, with a business case now approved to replace the current issued iPads, as they were not fit for purpose, with laptops in the new year.

42. RCN issued mobile phones were also available for those Stewards who needed them on a request basis.

43. The Public Affairs team updated us *on the Government's new Employment Bill* which was progressing through Parliament.

44. This was a very important opportunity for the RCN as a trade union and professional college to lobby to secure a role, and input the unique voice of nursing, at the heart of employment rights policy making and to ensure the Bill reflected the needs and contributions of nursing.

45. We welcomed that the current iteration of the Bill included repeal of ballot threshold requirements under the Trade Union Act 2016 as well as proposals around e-balloting for statutory ballots.

46. We flagged up the tenuous footing a lot of healthcare staff in the social care and independent sectors faced, especially internationally educated staff; we were pleased that the RCN would be lobbying as part of the Bill for a new negotiating body and legal duty to promote fairness and equality for the adult social care workforce as well as a single fair work enforcement body.

47. We discussed potential Congress 2025 agenda and Learning and Wellbeing programme submissions we could put in ahead of the 8 January 2025 deadline.

48. We also drafted our collective response to the strategic review of Congress survey which would feed into the development of an initial options appraisal Council would be considering in the spring. 49. We gave our overall positive feedback from the recent Joint Reps Conference in Leeds and undertook a review of our Committee workplan.

#### Health and Safety Reps Committee 29 October 2024

50. We welcomed Giles Loch, the new Southeast member of the Committee who had been elected since our last meeting via the casual vacancy process.

51. In terms of the other election results, Kirsty Craven and Helen Williams had both been re-elected unopposed to the Yorkshire & Humber and Wales seats respectively.

- 52. We would also be welcoming Vicky Brotherton-Southwest seat, Patrick Lawlor-Northern Ireland seat and Martin MacGregor - Scotland seat to our Committee in the new year.**
- 53. Voting would be underway shortly for the contested Northwest seat election and the Eastern seat election would be reopened in the new year.**
- 54. The Professional Lead for Public Health joined our meeting to discuss the issue of vaccine hesitancy and the RCNs ongoing efforts to increase uptake amongst health workers.**
- 55. The RCNs position remained to encourage and promote the benefits of vaccines as a key pillar in infection control and disease prevention and that all members of the nursing team should have vaccines deemed necessary to help protect themselves, colleagues, family members, patients and the wider community.**
- 56. The focus was on encouraging members to make informed decisions; key information was available via an updated flu landing page, winter wellbeing page, and via positive promotion of key messages on social media and in the media.**
- 57. We shared anecdotal feedback we were hearing from members in workplaces around a degree of vaccine hesitancy, some of which was a throwback to the pandemic and the vaccine mandates, a certain level of vaccine weariness and vaccine injury stories and vaccine misinformation circulating on social media.**
- 58. We recognised the key role Health and Safety Reps could play in working with employers to ensure vaccine programmes were rolled out properly in workplaces and serving as role models to encourage others; we made a range of suggestions to support this including a short key-facts leaflet which reps could hand out in workplaces.**
- 59. Our next item was an update on the RCNs work around Hazardous Medicinal Products (HMPs), pharmaceutical substances used predominantly for cancer treatment which had the potential to cause effects in nursing staff handling, administering and disposing of HMPs.**
- 60. There was currently no specific UK legislation or guidance for HMPs, a particular outlier following a recent strengthening of the law and accompanying guidance around HMPs in the EU.**
- 61. An RCN position statement had therefore been drafted to clearly outline the risk to nursing staff from exposure to HMPs, the specific issues that needed to be addressed and an accompanying call for action: discussions would be held with the Policy and Public Affairs team to look at how best to lobby the Government.**
- 62. We fully endorsed the draft RCN draft position statement on HMPs, recognising the potentially significant impact on nursing staff from exposure.**
- 63. We were updated on activities to celebrate 50 years of the Health and Safety at Work Act and to promote the RCN and the work of Health and Safety (H&S) reps.**
- 64. In particular, H&S reps were being encouraged to undertake H&S inspections in workplaces, a timeline was under development**

- showing key H&S achievements over the last decade and social media promotion.
65. We welcomed that an updated H&S inspection resource was now in place to serve as a refresher for all reps as well as encouraging those newly accredited who had yet to do an inspection.
  66. We received our regular update on the work of the NHS Staff Council Safety and Wellbeing Partnership Group.
  67. The group was drafting their next 3-year workplan, with discussions at a recent away day in September highlighting a number of common themes including mental health, stress and work-related suicide.
  68. The group was also doing work in relation to Artificial Intelligence (AI) and the associated H&S implications as well as building safety around managing asbestos, RAAC and legionella in the healthcare estate.
  69. We suggested other areas the group could focus on going forward including revisiting lone working, managing H&S risks associated with flexible working and looking at the support for members related to patient safety around ligatures.
  70. We were updated on work to improve the effectiveness of the Joint Unions in Prisons Alliance (JUPA); this included a revised Charter and position statement outlining JUPA's call for action for the UK government, regulators and employers.
  71. Specific calls to action included Government ringfenced funding to tackle maintenance backlogs and improve H&S infrastructure in the prison estate, the phased removal of all asbestos in HMPPS buildings and for the HSE to run a programme of proactive, themed inspections on violence and aggression, work related stress, psychoactive substances, asbestos and working conditions.
  72. We fully endorsed the draft JUPA Charter and position statement.
  73. An update was received on the review underway of the RCN Nursing Workforce Standards and the areas proposed to be revisited and strengthened going forward.
  74. We welcomed a related piece of work planned for next year to look at the opportunities for converting workplace standards champions to H&S reps.
  75. We reviewed the latest version of our Committee workplan for 2024.
  76. It was recognised that there was a waning of attention postpandemic in workplaces in relation to employers providing fit testing for members required to wear an FFP3 or FFP2 face mask at work; the reps briefing on fit testing and the risk assessment toolkit had now been updated and which now covered other respiratory illnesses.
  77. In relation to Congress, we were updated on work to take forward the crumbling buildings Congress 2024 resolution, including guidance for reps about how to escalate deteriorating conditions in their workplaces and production of a resource/crib sheet for care home managers around managing their estates.

78. We also discussed ideas for Congress 2025 agenda submissions as well as a shortlist of potential John Goodlad speakers.

79. We drafted our responses to the strategic review of Congress survey to feed into a future options appraisal.

80. We shared positive feedback on the recent Joint Reps Conference for feeding back to the planning group.

81. Lastly, we received our regular report from the Member Experience and Journey Strategy Board including an update from the Member Support Service (MSS) counselling service.

82. We welcomed the progress being made to improve the usability and functionality of the CMS and how this would ultimately be rolled out for the benefit of all reps.

83. We expressed our gratitude for the service provided by the Member Support Service in terms of counselling and their efforts to cope with the expanding demand with the resources available to them.

## Agenda Item 5.5

NOT CONFIDENTIAL



### **Students Committee Report to Members - December 2024**

---

1. The Committee met on 10 December 2024 and discussed the latest issues facing students and other matters.

#### **RCN Student Magazine**

2. The Committee was updated on recent and upcoming articles published in the RCN's online student [magazine](#). This included a wellbeing article titled '[10 ways to protect your mental health](#)' and a people article titled '[international students; rising above the challenges](#)' which stemmed from discussion at an earlier Students Committee meeting and featured an interview with Faith Aidamoisa, member for the Northern region.
3. The Committee agreed to discuss at its next meeting how it could better promote the work of the Students Committee via social media.

#### **Student Ambassador Resources**

4. The Committee reviewed the online learning resources available for Student Ambassadors (SAs). The Committee heard that while training for Student Ambassadors was not mandatory, new SAs were encouraged to work through the e-learning modules to assist them in their roles.
5. It was noted that the current training package, adapted from the reps

training with some specific sections relating to the SA role, would be reviewed in 2025 having originally been launched during the pandemic. It was recognised that a number of updates were now required.

6. The first step in this process would be to review the SA role description to ensure it accurately reflected current expectations before then looking at the knowledge, skills and resources needed to enable SAs to effectively carry out their roles.
7. It was agreed that the training should be interactive and in bitesize chunks to enable SAs to complete small sections as and when they had the capacity. It needed to be accessible on all devices, including mobile phones.
8. The Committee asked that consideration be given to having some kind of recognition scheme for those SAs who dedicated the most time to the role including perhaps inviting members to country/ regional offices and giving out certificates of achievement. It was noted that a similar scheme had recently been introduced for RCN reps which could potentially be expanded to cover SAs.

NOT CONFIDENTIAL

9. A review group would be established in the new year to fully explore Student Ambassador Resources. It would include two members of the Students Committee. Past and present Student Ambassadors would also be invited to participate.

### **Sharing Local Intelligence**

10. Committee members shared local updates and their recent activities.
11. It was noted that a series of 'inspiring conversations' webinars would be launched in February in collaboration with NHS England. The first 'conversation' would be with Duncan Barton, the new Chief Nursing Officer (CNO) for England, about his career journey so far. The webinars would be publicised nearer the time.
12. The Committee heard that arrangements were underway for a student 'festival' in June 2025. It was anticipated that this would take place in the East Midlands region. It would be open to all student members to attend. The aim of the festival would be to showcase what the RCN can do to support students and enable members to hear from some inspiring keynote speakers.
13. It was highlighted that Trainee Nursing Associates were now known as Student Nursing Associates (SNAs). They remained in the Nursing Support Worker membership category for the time being paying £10 a year membership, the same as student members.

### **Congress Resolution Update**

14. The Committee discussed potential items for the Education, Learning and Development Programme as possible for Congress 2025.
15. Members would work on the submissions discussed with assistance from the Professional Lead for Students.

## Multimorbidity Index Tool Project

16. The Committee was briefed on a proposed new project to develop a multimorbidity index tool (a student matrix system to support adult nursing training and understanding of the concept of multimorbidity and multiple long-term conditions across practice).
17. The Committee heard that students often struggled in many clinical settings to recognise multimorbidity and the key concepts/questions they could discuss with their mentor due to the complexity. The student matrix system would serve, therefore, to support students to recognise their key long-term conditions in practice, adapt their learning style and then provide key concepts/questions that could be discussed with their mentor to facilitate learning. This would be dependent on the clinical area and the main long-term conditions listed by students in an information gathering session. The aim was to develop this in an interactive format that could be easily updated with links to key areas to ensure it remained relevant and evidence based in practice.

NOT CONFIDENTIAL

18. The Committee agreed that while this was an ambitious project, it had a great deal of potential. The tool could potentially be expanded over time to also look at the links with mental health conditions and how different medicines interacted, for example.
19. It was explained that the tool was intended to prompt students thinking and not to replace their judgement. It was anticipated that it would be used clinically but not at the bedside.
20. The Committee recognised that not asking questions while on placement created a barrier to learning and that this tool would greatly assist students in knowing what to ask.
21. It was noted that first steps in development of the tool would involve collating feedback from the survey on the most common long-term conditions and pitching the idea to the Quality Assurance Panel to get their feedback on viability. An update would be provided to the Students Committee in due course.

### Committee Membership

Alisha Brown (Chair) - Professional Nursing Committee, Elisha Eady - Yorkshire & the Humber, Lauren Healan – Wales, Zaneta Sadauskaite – London, Amy Walker - East Midlands, Natasha Green – Eastern, Faith Aidamoisa – Northern, David Shaw - Northern Ireland, Emma Henry - Northern Ireland, Shivonne MacLean – Scotland, Marian-Florentin Zanfir - South East, Harry Hayes - South West, Mike Palmer – Wales, Usman Adeyemo - Trade Union Committee, Samuel Moffat – Council

*Apologies had been received from Zaneta Sadauskaite and Mike Palmer.*

RCN Staff

Lorna Mayles - Professional Lead for Students

Rachel Healy - Senior Writer and Digital Content Editor

Emily Davies - Lead for Trade Union Education Resources

Callum Metcalfe-O'Shea - Professional Lead for Long Term Conditions