Response of the Royal College of Nursing (RCN) to the Global Health Workforce Alliance (GHWA) consultation on human resources for health

Paper Seven: ‘Improving productivity and performance: the roles of regulation, professional associations and standards’

Introduction

With a membership of over 415,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

Structure of this response

The RCN welcomes GHWA’s focus on the role which professional associations have in improving productivity and performance among health workers. However, it is notable that the main text of paper seven gives little practical focus to this role. This risks overlooking the very significant contribution which professional associations make towards facilitating greater productivity across health systems.

Additionally, while the paper makes strong top-level arguments in the context of health workers in general, it misses the very significant contribution of nursing and the unique challenges that nurses face across a large variety of care settings. To address these concerns, this response consists of two parts:

Part One looks at the role of professional associations, using the RCN as a case study, in advancing health worker productivity, good patient outcomes and the sustainability of health systems through activities undertaken in the following key areas:

- **Promoting excellence in practice** – including: the production of guidance and standards based on firm evidence, supporting employers and clinicians in improving workplace environments, and supporting senior staff to utilise resources and manage their staff effectively

- **Shaping health policies** – including: designing and lobbying for policies that recognise the interconnected nature of care, that recognise and provision for long-term changes in the evolution of patient needs, and which understand the importance of sustained investment in key fundamentals, such as staffing levels, career development and education
Representing nurses and nursing – including: advocating for better working and remunerative conditions to aid recruitment and retention, highlighting the need for continued investment and support for skills development to meet ever-changing patient needs, monitoring the sustainability of the health professions and using evidence-based findings to recommend improvements.

It is important to note that the three areas identified above should not be taken in isolation. There is a high degree of interconnectedness between them and this is evidenced in the examples provided below.

Part Two looks at the role of nursing in advancing productivity within national health systems. This section builds on the findings in the first section of the response, highlighting how nurses, beyond being the largest segment of the global health workforce, act in a huge variety of settings and roles: including as providers of front line care, co-ordinators, leaders and innovators of better patient care. This section examines some practical examples of these areas and highlights the links between these respective areas and the work of the RCN.

Part One: The role of professional associations in improving productivity and performance

Promoting excellence in practice

The RCN promotes good nursing practice and disseminates new and better ways of working. This helps facilitate nurses in their delivery of effective patient care, which in turn secures better patient outcomes. Below are a few examples of the work which the RCN does in this area:

- The RCN supports nurses in promoting better health for individuals, families and communities through various strategic initiatives. One example of this - the RCN’s eHealth Strategic Plan - focuses on new Information and Communication Technology. This has helped nurses embrace eHealth as an integral part of managing information in a way that supports the delivery of evidence-based practice.

- The RCN supports and facilitates nurse leaders – enabling experienced practitioners across specialties and backgrounds to share new ideas and best practice. The RCN’s Executive Nurse Network (ENN) provides a forum to share ideas for improved resource and team management. The first stated objective of the ENN is “to offer support and a safe environment for sharing and developing ideas or solutions”.

- The RCN champions the importance of skills development and lifelong learning in delivering better patient outcomes. The organisation recognises that delivering

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1 RCN, Executive Nurse Network, [http://www.rcn.org.uk/development/rcn_executive_nurse_network](http://www.rcn.org.uk/development/rcn_executive_nurse_network)
this requires strong engagement by educators, employers and staff and so the RCN provides support and resources to all three sides on this issue.

- For educators: The RCN runs a voluntary accreditation scheme for post-registration learning materials and courses. This service assesses the relevance of learning content, delivery and structure so that the learning outcomes are the best they can be.²

- For employers: The RCN advocates strongly that nurses should have protected time for continuing professional development/learning and that employers should have the resources and staff available to realise this need.³

- For staff: The RCN is also closely involved in supporting nurses and healthcare workers in keeping their skills up-to-date and in line with regulatory requirements. The RCN does this by training and supporting its own team of learning representatives across care settings in the UK. These individuals help to keep members up to date with the latest developments in nursing and in the various fields of practice, meet post-registration education and practice (PREP) requirements, and help staff to plan career development.

Shaping health policies

The RCN designs and lobbies for health policies that advances a productive, efficient health system, that prioritises patient needs, and which ensures that the staff who work in the health system have the resources and support they need to deliver good care outcomes. This work occurs at several levels: country/local level (within the four UK countries), UK level and the European (EU) level. Below are a few examples of the work which the RCN does in this area:

- Following the recommendations of the Francis Inquiry into care failings at a Mid-Staffordshire hospital between 2007 and 2010, the RCN hosted a UK-wide commission (the Willis Commission) which looked at what the form and content of education and preparation should be in order to produce a nursing workforce that is fit for future health and social care services.⁴ This proactive, constructive approach to addressing legitimate public concern over the provision of quality care has given policy-makers access to objective, independent evidence which, if used correctly, can advance patient care, improve the long-term sustainability of health services and bolster productivity among nurses and other health workers.


The RCN develops and champions health policies which acknowledge the rapidly changing needs of patients. In the UK as well as many other developed countries, this has focused particularly on the reorientation of care towards the community level. In order to better inform its policy positions, the RCN has undertaken and published international comparative research which analyses a number of national models where this shift has happened. This research found that in order to effectively shift care out of hospitals and re-provide these services in the community - a whole-system approach is needed, alongside bolstered investment.5

The RCN recognises that the UK has much to learn from developments across the world. As a result, its evidence base for recommendations on policy takes into account research from overseas and the links that we have with partner nursing associations in other countries.

The RCN is active in compiling objective data and analysing this to identify short, medium and long term challenges and opportunities for improving care outcomes in the nursing profession. RCN policy positions also recognise the joined-up nature of the challenges facing the sustainability of the nursing profession, as well as the wider health workforce. Key challenges such as: poor skills mix, an ageing workforce, safe staffing levels and sufficient staff numbers for example all impact on one another. District/community nursing is a recent example, where the RCN has flagged that the need for sustainable incentives packages and sense-led workforce planning as being key necessities for the delivery of good patient services.6 The RCN has also championed this approach through its Frontline First report series, the most recent of which analysed the impacts of staffing cuts – particularly at more senior levels.7

The RCN develops policies which reflect and respond to the fiscal challenges facing the UK health system. As an example, our advocacy for increased investment on the integration of health and social care recognises the potential that a well-planned approach could have in providing better and more cost-effective services, while also highlighting that significant challenges to this ambition also exist.8

• Finally, the RCN recognises that in the UK, health policy is shaped at a number of different levels. As a result, we are a proactive partner with policy-makers both at the UK and EU level. To take one example of this, the 2014 EU Directive on the marketing of tobacco products was one in which the RCN prioritised public health concerns, working with the European Parliament, Council, and UK ministers in relation to the content of the directive. The RCN also worked closely with the European Public Health Alliance (which it is a member of) to support lobbying in Brussels. Similar EU initiatives which we have worked on include: legislation on needle-stick injuries, the development of common competencies for nurses and effective regulation and education for healthcare support workers.

Representing nurses and nursing

As well as being a professional association, the RCN is also a trade union for nurses, midwives and healthcare support staff. There is a significant and direct link between these two competencies. The RCN recognises that advocating best practice and effective health policies (as outlined above) is also dependent on having safe and positive working conditions in place. These enable senior health staff to focus on implementing better ways of working, for junior staff to deliver better patient care - and it assists employers in ensuring that their staff are productive, skilled and are likely to remain with them for longer. Below are a few examples of the work which the RCN does in this area:

• The RCN promotes employer-friendly practices which improve staff morale and output. The ‘Working Well’ initiative for example supports RCN representatives and healthcare managers to develop a workplace culture in which colleagues are treated with dignity and respect, and where all steps are taken to minimise the occurrence of bullying and harassment for example.

• Another key area where the RCN promotes best practice is on equality and diversity – enabling staff and employers to maximise the provision of care and meet national legislative requirements surrounding discrimination. The RCN Employment Relations Department develops publications to support representatives and members on equality and diversity issues, supporting and recruiting international nurses, and building positive team relationships in across health care settings.

• The RCN has a network of over 900 safety representatives working in a variety of sectors. These individuals play a valuable role in improving health and safety

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standards in health care by helping staff and employers tackle work-related stress, unsafe staffing levels and bullying and harassment.\textsuperscript{12}

- In terms of remuneration, it is well-established that fair pay is a key driver in the sustainable recruitment and retention of staff. The RCN has advocated that while efficiencies to health spending are necessary, there should be a longer term delivery mechanism which does not focus excessively on reducing salary levels. As a result, in 2014, the RCN launched the ‘What If…?’ pay campaign after the UK government refused to implement a one percent pay rise for nursing staff.\textsuperscript{13} This rise had been suggested by an independent pay review body and had been deemed as affordable. The RCN recognises that the refusal to award this pay rise risks undermining staff morale and productivity, which can ultimately impact on patient care.

- The RCN recognises the importance of maintaining a robust, evidenced-led focus on key trends, opportunities and challenges within the nursing workforce. To do this, the RCN publishes an annual Labour Market Review which analyses key events within nursing that could have deep and far-reaching implications for patient care. The latest available edition for example (2013) highlighted the urgent need to address both the national security of the supply of nurses, and the local ability to determine evidence-based nurse staffing levels.\textsuperscript{14}

- The RCN works with key organisations, particularly the nursing regulator (the Nursing & Midwifery Council – NMC) to ensure that regulation of nursing staff is effective in protecting the public but also manageable for the profession. This is another important factor in affecting recruitment and retention of staff, but also for addressing challenges around continuing professional development for example.

To take a recent example, in 2013, the NMC launched a public consultation to review how nurses maintain their registration and re-register. Having consulted with the NMC, the RCN’s own members and having looked at international best practice on this issue, the RCN publically stated its support for the underlying intentions of revalidation, while recognising the challenges involved in designing a system which will be both effective and proportionate, given the size of the NMC register. To this end, the RCN is committed to supporting the NMC to develop a system which meets these requirements.\textsuperscript{15}

**Conclusion and recommendations**

\textsuperscript{12}RCN, Workplace representatives, \url{http://www.rcn.org.uk/support/the_working_environment/health_and_safety/safety_representatives}

\textsuperscript{13}RCN, What If…?, \url{http://www.rcn.org.uk/aboutus/england/northwest/rcn_pay_campaign}


\textsuperscript{15}RCN, Response to revalidation, \url{http://www.rcn.org.uk/__data/assets/pdf_file/0004/568336/7.14_RCN_response_Revalidation.pdf} (July 2014)
• Professional associations play a key role in promoting excellence in practice, including the formulation of robust guidance, standards and better ways of working. This role should be clearly understood and recognised in this paper.

• Health policies are enhanced by the insights provided by professional associations, since health professionals have deep and relevant insights regarding the interconnectedness of health challenges and the need for joined-up approaches to care.

• Ensuring that the right working conditions are in place and that staff feel respected and supported is a critical interest for employers, patients and regulators alike. Professional associations such as the RCN play a key role in advancing these priorities.

• The most important elements of the RCN’s work are: the integration of evidence, a holistic understanding of health challenges and the building and utilisation of external partnerships. Professional nursing associations in many countries adopt this approach also and this should be recognised and advocated for in this paper.

Part Two: The role of nursing in supporting productive health systems

Over the last few decades, nursing has changed rapidly in terms of its composition, competence and breadth. This section looks at how nurses advance good care outcomes both within their own profession and more widely in four key capacities. It is hoped that this will help to inform the paper’s recommendations going forward as little attention has been paid to the nursing angle.

Nurses as providers of front line care: Nurses and nursing play an absolutely critical role in the delivery of good care as generalists and specialists in areas as diverse as chronic conditions and cancer care. This versatility is particularly evidenced in the shift from acute to community care. As well as improving system efficiency and reducing costs, contemporary district nurses have a significant leadership and management role, and are well placed to lead service and practice development in order to meet the needs of their particular populations. These findings were also evidenced by RCN international research into community nursing systems in Australia, Canada and Denmark.16

However, there are concerns, as demonstrated by the findings of the RCN 2011 survey on district nursing.\(^\text{17}\) These reveal that the current workforce profiles of district nursing services, in terms of their preparation for the role and skill mix in teams, are clearly insufficient to meet political imperatives. The RCN believes that, through a well-planned and concerted programme of development in district nursing and better integrated care, UK can achieve its stated intentions to ensure a reduction in acute care.

**Nurses as co-ordinators:** In the UK and elsewhere, nurses are at the forefront of efforts to connect different strands of practice. In the arena of public health for example nurses have successfully connected different health professions and teams to move national health systems away from a state of managing disease to preventing it in the first instance through the promotion of healthier lifestyles. Nursing staff are also vital to delivering integrated care. As care coordinators they often work at the interface of health and social care systems and services.\(^\text{18}\)

**Nurses as innovators:** In the UK, recognition for nurse prescribing was attained in 1998. This role, which allows nurses to prescribe medications within their area of practise, has been proven to increase nurses’ autonomy, job satisfaction and independence. The expansion of this position has seen prescribing become a mainstream qualification in the UK while initial objections from medical health professionals have been abated as evidence of improvements in access, patient safety and patient-centred care continue to strengthen the foundations underpinning nurse prescribing.

This is especially pertinent for those district nurses and health visitors who work in isolation in low resource settings where General Practitioner (GP) surgeries are located some distance away. Evidence shows that nurse prescribing improves patient care by ensuring timely access to medicines and treatment, and increasing flexibility for patients who would otherwise need to wait to see a doctor. Nurse prescribing also increases service efficiency by freeing up doctors’ time to care for patients with more complex health care needs.\(^\text{19}\)

**Nurses as leaders:** Good leadership is vital at every level of nursing, from hands-on patient care at ward level right through to Directors of Nursing at board level. Recognising this is vitally important because effective leaders pioneer and integrate new, innovative practices and this in turn is picked up and followed by those who observe them. The RCN’s Executive Nurse Network is further proof that innovation and leadership go hand-in-hand. The first stated objective of the ENN is “to offer


support and a safe environment for sharing and developing ideas or solutions”. RCN research, on top of a large number of recent reports in the UK – including Francis and Keogh among others – have recognised the vital role of ward leaders especially in ensuring that good patient care is delivered and resources are managed effectively. The RCN’s international research has also uncovered similar findings in other countries with findings showing that patient care is improved when leaders are empowered to develop new solutions to team management and resource utilisation – such as the Nurse Unit Manager role in Australia. The RCN has a history of investing in clinical leadership programmes to support nurses in these key positions.

**Conclusion and recommendations:**

- Nursing and nurses need to be recognised as a central part of global health systems – delivering good patient care but also facilitating change and improvements across care settings. This is key if sustainable, transformative universal health coverage is to be realised on a global level.

- In its current form, this paper does not recognise the unique contribution of nursing to the productivity of the health workforce. This risks undermining the effectiveness of other recommendations.

- Professional associations play a key role in developing and supporting nursing. Greater recognition is needed that health systems benefit when nursing is represented by organisations, such as the RCN, which advocate for evidence-based excellence in practice and develop policies to support this.

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**November 2014**