

fully involve all professional groups, including nursing and support staff. We believe that the availability of a highly skilled and motivated workforce is critical to any plans for delivering seven day care, however configured.

Achieving changes seven day care safely and fairly will come only through the better use of nursing staff, and by recognising the benefit and importance of supporting more nurses to take on system leadership roles. Employers should develop programmes to enable senior nurses to move into management roles, and create a culture that nurtures nurse-leaders.

3.0 Quality and Standards of Care for Patients

- 3.1 It is vital that people accessing primary care services feel confident in the quality and safety of the care that they receive. The RCN fully supports the drive to better understand how primary care outcomes and experience can be improved but these must include a measure of the contribution nurses' care makes to such outcomes.
- 3.2 The increase in the numbers of people living with long-term conditions is a major challenge for the NHS, and one that nurses working in primary care are uniquely placed to address. Across both acute and primary care it is vital that the NHS commits to investing both in overall staffing numbers, and establishing a career framework for primary care nurses, so that nursing staff are supported to improve their skills and knowledge in order to be able to deliver high-quality, safe, person-centred care and meet the care needs of the population.
- 3.3 The RCN is undertaking research into the development opportunities for Specialist Nurses (SNs) and ANPs², who play a vital role in delivering care for people living with specific health conditions, and who are integral in moving acute care into primary care settings. The development of and investment into these roles will be vital to ensuring that people with long-term conditions receive the care that they need, whilst also ensuring that it is delivered in a safe, effective, and cost-effective manner.

4.0 Demand and access (including out of hours access and proposals for 7 day access)

- 4.1 The lack of a single clear definition of a 'seven day NHS' remains problematic; the RCN stresses that fundamental to the NHS offer is that anyone in need of care is able to receive it when they need it, and in a setting and manner most appropriate to their need.
- 4.2 Whilst acknowledging the need to ensure that people have access to the right care, at the right time, and in the right place, we have concerns about the current debates regarding the provision of a 'seven day NHS'. In a time of scarce resources it is vital that any decisions about changes to the delivery of clinical care are based upon sound evidence and demonstrate clear benefits

² RCN (2008) RCN Competencies: Advanced nurse practitioners, an RCN guide to the advanced nurse practitioner role, competencies and programme accreditation available at: http://www.rcn.org.uk/__data/assets/pdf_file/0003/146478/003207.pdf

to patient care. This will ensure the best use of resources and effective system changes that can manage demand across a seven day period.

- 4.3 Greater consideration, then, must be given to the skill mix for the feasibility of seven day care; in particular, the capability of senior nurses at bands seven and eight, such as ANPs, to use their enhanced clinical decision making skills out of hours and across a seven day period.
- 4.4 The RCN is clear, however, that a greater focus on weekend and evening access must not come at the expense of access to services between Monday and Friday, or cause overall patient outcomes to deteriorate.
- 4.5 It is worth noting that, as the largest part of the healthcare workforce, many nurses and health care support workers are already working in services providing seven day care, or are working in a manner that will readily support an increase in the provision of care to a seven day model and will be called upon further as the workforce most able to effect any necessary changes.
- 4.6 As such, there must be a detailed consideration of the impact of seven day care on the work-life balance for nursing staff, many of whom have moved away from unsocial hours to the primary care sector in order to balance work and family commitments. Imposed changes during a time of acute recruitment difficulties in the NHS will simply lead to nurses choosing not to work unsocial hours and leaving the profession altogether.

5.0 Funding (including local and national distribution of resourcing)

- 5.1 The current financial context emphasises the need to use primary and community care resources in the most efficient way possible. It is clear that timely intervention from primary care and community staff prevents more costly care being required in the acute sector. Treatments that were once provided in hospital are being increasingly administered in the community, and within local health economies there is a renewed focus on delivering health care in the community, freeing hospitals to provide more specialised and emergency care.
- 5.2 However, funding a 's

strongly urge the Government to heed the evidence of public health experts and take a long term, strategic view on how services can be funded for the coming decades, not just for the next financial year.

6.0 Commissioning

- 6.1 The RCN would encourage greater consideration of how the regimes set in place by the 2012 Health and Social Care Act can sit more easily with the plans set out in the Five Year Forward View. These regimes should support the implementation of an integrated, collaborati

7.4 Primary care nurses are in a unique position to promote general wellness and enhance the public health interventions undertaken by public health nurses. Nursing and midwifery staff have always had an important health promotion role;

Pillars of the Community document⁶. Greater strides must also be made to prepare student nurses for primary care careers at undergraduate level, in preregistration and in the first year of nurse training.

- 9.2 Recruitment and retention for primary care nurses must also be seen in the context of individual local health economies. It is important to note that unlike acute or other community nurses there is no agreed pay scale for nurses working in general practice. This has led to a gap in terms and conditions between nurses working in general practice and those working in the wider NHS.
- 9.4 Primary care staff do not have the same access to the annual incremental rise under Agenda for Change (AfC) available to staff in acute care and independent practitioners pay remains at the discretion of the employing GPs. The RCN advocates the adoption of AfC terms and conditions for all nurses employed within primary care.
- 10.0 Current Skill Mix
- 10.1 *Key Challenges*
- 10.2 Currently, there is ambiguity around roles and responsibilities of certain nursing staff. For example, a task being undertaken by a Nurse Practitioner in one practice might be undertaken by a Practice Nurse in another. At present there is no nursing workforce model within primary care. Nursing roles are

health problems or specific long term conditions⁷. Practice nurses can also support more vulnerable people to access primary care, such as those with learning disabilities⁸.

12.0 *District Nursing*

12.1 The RCN believes that the pivotal role of district nurses and their teams must be acknowledged and developed if health services are to meet current and emerging demographic challenges. Their work in the community can play a crucial role in reducing hospital admissions and supporting early discharge. Significant resources must be found to maintain an expert district nursing workforce that is fit for the future, and it must include 'all community' nursing teams led by nurses with a specialist practice qualification in district nursing. Alarming, however, total district nurse numbers almost halved between 2003 and 2013 (6,656 down from 12,620). There were just 5,595 Full Time Employed district nurses⁹ as of July 2014. Stronger career frameworks for district nursing must be established to address this trend.

13.0 *Healthcare Support Workers*

13.1 The role of Health Care Support Workers (HCSWs) has grown considerably in recent years and HCSWs are seen as an integral part of the overall nursing team, enhancing access and patient satisfaction in many areas of primary care. The RCN supports the introduction of mandatory regulation for HCSWs in primary care to strengthen their role further. The RCN also believes there is a further need for learning resources to be made relevant for HCSWs working in general practice.

14.0 *Advanced Nurse Practitioner and Specialist Nursing*

**Royal College of Nursing
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