

Survey of UK nurses exposes staff crisis in National Health Service

Ajanta Silva

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The National Health Service (NHS) is suffering from a staffing crisis that is resulting in staff being super-exploited and patients in wards being placed in a dangerous situation.

Addressing the Conservative conference this month, Secretary of State for Health, Jeremy Hunt—who has been presiding over the dismantling and privatization of the NHS since 2012—declared, “I can tell you we’ll increase the number of nurses we train by 25 percent—that’s a permanent increase of more than 5,000 nurse training places every single year.”

These claims were made despite Hunt’s scrapping of bursaries for nursing students and allied health professionals from September, which alone has contributed to a 23 percent decrease of applicants to study for these professions at university.

Just three days before Hunt made his speech, the Royal College of Nursing (RCN) published a survey of Nurses and Midwives in the UK, “*Safe and Effective Staffing: Nursing Against the Odds.*” It is a powerful indictment of successive Labour and Tory governments, which have deliberately crippled the NHS with a thousand cuts.

The RCN asked its members about their last shift or day worked in health or social care. Within two weeks, they received over 30,000 responses, which provide an accurate snapshot of workers’ experiences and the unprecedented decline in staffing levels.

Key findings of the survey are staggering, even though the survey was completed earlier in the year, when health services are not under the additional pressure they are during winter.

- Well above half of “respondents reported a shortfall in planned staffing of one or more registered nurses on their last shift,” while “41 percent of all shifts were short of one or more health care support workers.”

- One in five “registered nurses across the 30,000 shifts were temporary staff,” while more than a quarter of “health care support workers were temporary staff.”

- More than half of nurses, midwives and health care assistants said “care was compromised on their last shift,” and more than a third said that “due to a lack of time they had to leave necessary patient care undone.”

- More than 15,000 respondents “felt upset/sad that they could not provide the level of care they wanted,” and “44 percent of all respondents said no action was taken when they raised concerns about staffing levels.”

- More than two thirds of “all respondents said they worked additional time, on average almost one hour extra,” hence “93 percent of nursing staff who worked extra unplanned time for NHS providers were not paid for this.”

Based on their findings, the survey’s authors concluded that their “conservative estimate is that the additional unpaid time worked by registered nurses in the NHS across the UK equates to £396 million annually.” This is under conditions in which these and other health workers have been subjected to a seven-year pay freeze and pay caps by successive Tory-led governments.

Many frontline workers are concerned about the “dilution of the skill mix of the nursing workforce (proportion of registered to non-registered nurses) in acute settings over the past seven years.”

Along with the report, the RCN published the disturbing stories of the nurses and midwives they received.

One Accident and Emergency (A&E) nurse said, “Staffing levels, skill mix, sickness, unprecedented demands, patient numbers, lack of resources and capacity have left me fearing for a profession I once loved. I end a shift exhausted, stressed, dehydrated and

with little if any job satisfaction. I'm paid around £5,000 less than a comparable professional with a massive level of responsibility and accountability—for patients' lives. After 29 years I am considering leaving nursing due to lack of job satisfaction, being treated with utter contempt by managers and the government, and five years of pay restraint.”

A practice nurse said, “I always go above and beyond for my patients—we all do as nurses—but that is to the detriment of myself, minimal breaks, not drinking enough fluid, holding on for the toilet. Even doing this I don't feel I have enough time for my patients. I was trained to provide holistic care, and often, because of the pressures we face, we are not able to do that.”

A community nurse said, “We do this job because we care for people, but the Government does not care for us. We regularly miss breaks, go 14 hours without a drink—to the point where one of my colleagues has developed kidney stones. I stay late basically every night. I take work home with me and receive no emotional support for an extremely draining and impacting job. Something needs to change.”

A midwife said, “Staff are working late without pay or claiming time back ... Staff have become demoralised and have left to take up posts elsewhere. We don't feel our opinions count, even though we are on the frontline.”

This summer, the Nursing and Midwifery Council reported that more nurses were leaving the register than joining it for the first time in recent history, resulting in an overall downward trend. This takes place amid a broader shortage of 40,000 nurses in the UK and 3,500 midwives in England alone.

Further exposure of the scale of the staffing cuts devastating the NHS was provided by the *Health Service Journal* in an analysis of the official data for the period 2014/15-2016/17. In England, 96 percent or 214 out of 224 acute hospitals operated without an adequate level of nursing staff during day shifts last October, while 85 percent of them did not have the right staff levels on night shifts.

Many hospitals are struggling to recruit and retain nurses and midwives due to low wages and stressful working conditions. Some NHS providers are intentionally running without adequate level of staff due to financial pressures created by years of underfunding and government demands for

unmanageable “efficiency savings.”

In 2015, Hunt ordered the National Institute for Health and Care Excellence (NICE) not to determine safe staff levels, in order to continue the Tories' plans of year-on-year underfunding of the NHS so as to impose fully £26 billion “efficiency savings” by 2021.

NICE had begun to recommend safe staffing levels in hospitals in 2014, in the aftermath of the failings of Mid Staffordshire Hospital, revealed in the report of Sir Robert Francis the previous year.

Staff shortages are not confined to nurses and midwives. Nationwide, there are acute shortage of consultants, doctors, GPs and other clinical groups, thanks to the years of underfunding, the destruction of training opportunities and indifference to the health needs of working people.

The response of the government has been to further rationalise services by shutting down or downsizing A&E departments, maternity units, children units, heart units and closing down hospitals. At the same time the attacks on the pay, terms and conditions of workers are being escalated. Last year the government imposed an inferior contract on junior doctors, capitalising on the betrayals of the British Medical Association.

The RCN's response to the staffing crisis is to call “for new legislation across the UK that guarantees safe and effective nurse staffing,” as if the Tories—hell-bent on the privatisation of the jewel in the crown of the post-war welfare state—will heed these appeals.



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