

Queen's Nursing Institute Scotland

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QNIS is a small charity that provides a range of high-quality professional development opportunities for Scotland's community nurses and midwives, encouraging them to tackle health and care inequalities in collaboration with the people they care for. Our outstanding leadership programme leads to the Queens Nurse title and there are currently more than 170 Queen's Nurses working in Scotland. Queen's Nurses work in many different community settings including care homes, prisons, GP practices, community mental health teams, in schools, as health visitors and midwives, and in community learning disability teams.

We all want to see a health and social care system that promotes health, prevents illness, protects the population, treats those who need healthcare in a timely manner, minimises harm, ensures a continuing supply of competent and compassionate staff, and contributes effectively to a flourishing economy.

There is broad recognition that the current system of delivering health and social care in Scotland is not working effectively and is not sustainable. However, there are strong foundations that must be acknowledged, including committed staff, robust policy ambitions, longstanding public support, powerful strategy documents, and strong foundational values.

We believe that building an effective and sustainable health and social care system requires the following:

1. **Long term planning and vision that transcends party political disagreements and can handle the complex challenges we face.** Improving health equity must be at the core of this vision: the CMO notes in his annual report (2024) that, "The core drivers of health inequalities are inequalities in income, wealth and power. People with lower incomes, or who are socially disadvantaged in other ways, can consistently expect to be in worse health than those with greater socioeconomic power in society." Audit Scotland (2024) describes an unrelenting landscape: the health inequality gap is widening and highly likely to worsen as the impact of wider societal issues deepen existing pressures, the workforce is under immense pressure, and the financial outlook is extremely challenging especially for Integration Joint Boards (IJBs) who are also struggling with complex commissioning, procurement and governance arrangements.

Scotland needs its leadership to commit to a long-term approach to implementing solutions to the core issues that are driving inequalities.

2. **A serious and properly funded focus on ensuring community and primary care services are enabled to prevent ill health.** The Institute for Fiscal Studies reported last

year that despite large increases in hospital staffing and funding, hospital productivity continues to fall. The reasons are not well understood but Audit Scotland says it has not seen significant evidence of the shift in the balance of care from hospitals to communities intended by the creation of Integrated Joint Boards (IJBs). The aim of integration is to ensure that people receive the care they need at the right time and in the right setting, with a focus on community-based, preventative care; improving the outcomes for patients, people who use services, carers and their families. But continued reductions in funding combined with increased demand for services, growing unmet need, and increasing complexity of need, means more people with multiple conditions, more people struggling with the health-related impact of poverty, more people struggling to access social care. It is estimated that currently general practice receives a 6-8% share of health spending, down from 10% twenty years ago. Whilst this is only a proportion of the spend on community health and social care, it illustrates the problem clearly. Well-functioning community and primary care services are an efficient and effective way to improve population health, reduce ill health, reduce avoidable mortality and reduce pressure on hospital services.

3. **Meaningful support for career development and progression in the nursing and midwifery workforce.** Nurses and midwives comprise more than 40% of the NHS workforce and because they are overwhelmingly employed in roles where they provide direct clinical care, they make a significant contribution to patient experiences. RCN Scotland has previously warned that too many nursing staff are leaving the profession “across all career stages”, especially among newly qualified nurses and older nurses who are choosing to retire early. Additionally, the RCN has highlighted that a disproportionate number of experienced nurses and midwives are stuck in lower pay bands that are entry points to the profession, when compared to other workforce groups. There are limited opportunities for adequately resourced professional development within the profession. Universities are seeing continuing reductions in the numbers of applicants for pre-registration nursing and midwifery programmes. If we want to attract and retain nurses and midwives, we need accessible and aspirational career pathways that allow them to flourish and contribute to the best of their ability.

References:

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