Introduction:

Nurses are an integral part of our society and play an important role in the UK healthcare system. Under an increasing amount of pressure when performing their daily duties, it is important to consider how the time nurses get to care for each patient can have a huge impact on the experience those patients and their families have within the NHS. This report will look closely at the quality of our nurses, the importance of a nurse’s work, and how failures in the system can occur when nurses are over stretched.

Nursing includes a wide variety of responsibilities, covering care for the ill, disabled and dying, and also includes the promotion of health and the prevention of illness. “Nurses strive to achieve the best possible quality of life for their patients, regardless of disease or disability.”

While this is still true, an increase in workload coupled with a decrease in staffing levels has made the daily duties of a nurse increasingly difficult.

Nurses are not only based in hospital wards, but also operating theatres, clinics, doctors’ surgeries and patients’ homes. They act as the backbone of hospital treatment, giving patients their required medication, cleaning and washing patients, taking vital signs and making sure the doctors are aware of any changes in a patient’s status. The role is physically demanding due to the long shifts, which commonly last as much as 12 hours at a time, during which nurses will be on their feet for the duration. Yet almost nine in ten nurses said their shifts were so busy they could not even carry out at least one basic ‘care activity’, such as administering medication properly, pain management, documenting care, comforting patients or preparing them for discharge.

On top of these duties, nurses are legally required to keep paperwork up to date, and are now subject to increased scrutiny regarding their record keeping following legislation such as the Human Rights Act 1998 and the Data Protection Act 1998, which have increased the profile of, and access to, health records. All nurses must therefore stay abreast of legal requirements and best practice in record-keeping on top of the demands of their jobs, even when they are not in administrative roles. As a result, nursing staff spend around a fifth of their time on paperwork and completion of duplicate forms. This added responsibility of documentation can impede nurses’ ability to take time to talk to and care for their patients.

2. Report compiled by the Florence Nightingale School of Nursing and Midwifery and the University of Southampton [http://qualitysafety.bmi.com/content/early/2013/07/08/bmjqs-2012-001767.full](http://qualitysafety.bmi.com/content/early/2013/07/08/bmjqs-2012-001767.full)
3. Dennemeyer, 2000; Sainsbury Centre for Mental Health, 2002
The role of nurses in patient care

The role of a nurse is extremely complex, with hospital nurses providing round-the-clock patient care, monitoring vital signs such as temperature, BP and pulse, providing medications and injections as prescribed by the doctor and administering intravenous fluids and oxygen as and when required. Emergency nurses assess patients, provide interventions and evaluate care in a time-constrained and often highly-pressured environment. Nurses have a hugely important responsibility when working with A&E consultants to manage and care for trauma patients safely and efficiently – not only during the vital first hour following an injury, but for the duration of a patient’s stay in an emergency department.

Aside from working in hospitals, nurses may also practice in:
- clinics
- industry (occupational health settings)
- long-term care facilities
- military facilities
- pharmaceutical companies (for example, as researchers)
- physician offices
- private homes
- retirement homes
- schools
- universities

Nurses start their careers as registered nurses, which means they have passed a state board examination and are registered and licensed to practice nursing. Four of the main types of nursing include:
- paediatric nurses
- OB-GYN nurses
- learning disability nurses
- mental health nurses

Paediatric Nurses

Paediatric nurses work with children of all ages suffering from many different conditions. They play a key role in assessing children’s nursing needs, taking into account their medical, social, cultural and family circumstances. Paediatric nurses then plan and deliver care in a variety of settings, such as hospitals, homes and the community, as well as during transfers between these settings.

Despite the importance of this role, the NHS will face chronic shortages of paediatric nurses within the next three years, even though the demand for services is continuing to pile increasing amounts of pressure on existing paediatric nurses, a group already struggling to meet these extra demands.

OB-GYN Nurses

OB-GYN nurses provide nursing care related to all aspects of the female reproductive system. OB-GYN nurses work as staff nurses in hospitals, clinics and birthing centers, nurse practitioners and certified nurse midwives. Each has a different scope of practice, and their duties differ. For example, the duties of a staff nurse will include admitting patients, taking medical histories and assisting physicians during procedures, whilst an advanced practice nurse will perform duties that are essentially the same as those of a physician, which includes diagnosing pregnancy or reproductive problems, prescribing medications and performing diagnostic tests. Certified nurse midwives will often practice outside of a hospital and deliver babies at home or in birthing centers.

Learning Disability Nurses

Learning disability nurses aim to improve the well-being and social inclusion of people with learning disabilities. The work they do is extremely important; often they will be responsible for teaching someone the core skills they need to find work, which can then help them lead a more independent, healthy life and enable them to relate to others on equal terms. Even though there is an increase in the population of people with learning disabilities, the number of learning disability nurses has decreased significantly during the past ten years.

Learning disabilities can vary in severity, requiring different levels of support and care. Some people will have specific nursing needs, which require direct nursing intervention and practical support and, at times, medication to help them deal with particular challenges. Working with people who have a learning disability is extremely demanding and, at times, stressful. Progress can be very slow, as the patient may have difficulties in understanding information and learning new skills, making tackling everyday tasks more challenging. Those who choose to work with people with a learning disability have to display a high level of patience and possess highly developed communication skills.

Mental Health Nurses

As many as one in three people are thought to suffer from some form of mental health problem, meaning mental health nurses have never been in such high demand. Mental health nurses work with people suffering from various mental health conditions, as well as their family and carers, offering help and support in dealing with the condition. Mental health nursing is often very complex and demanding, as nurses will be required to empathise with the person they are dealing with, as well as show warmth and compassion. The work involves helping the patient to recover from their illness, or to come to terms with it in order to lead a positive life. Mental health nurses may specialise in working with children or older people, or in a specific area such as eating disorders, and will often work in multidisciplinary teams, liaising with psychiatrists, psychologists, occupational therapists, social workers and GPs.

[http://cno.dh.gov.uk/2013/02/28/modernising-learning-disabilities-nursing-progress-continues/]
General Practice Nurses

General Practice nurses are part of the primary healthcare team, which can include doctors, pharmacists and dieticians. The role of the nurse in this instance is to treat small injuries, help with minor operations completed under local anaesthetic, health screening, and running vaccination programmes. The overall aim of local doctors and walk-in centres is to improve access to high quality health care in a manner that is both efficient and supportive of other local NHS providers. Walk-in centres are led by nurses and offer health promotion, enabling nurses to use their key skills and become involved in most aspects of patient care. This helps to reduce a doctor’s workload, allowing them to concentrate on problems and ailments that require their specific skill set.

Adult Nurses

Adult nurses care for adult patients who are suffering from acute and long-term illnesses and diseases. They support recovery from illness or operation using care plans, carry out care procedures and assessments, and focus on the needs of the patient rather than the illness or condition. Adult nurses also play a significant role in palliative care, often going above and beyond conventional nursing duties by completing additional duties such as observing and recording symptoms and treatment, and providing emotional support to terminally ill patients and their families.

Emotional Support

Emotional support is one of the cornerstones of nursing practice and is often the reason a person chooses nursing as a career (McQueen, 2004). Despite this fact, the provision of emotional support can often be hindered by schedules for required treatments, nursing actions and charting. Palliative care includes 24-hour nursing, and nurses will assist patients with hygiene and grooming, as well as feeding, if the patient is unable to do so themselves. The role is extremely challenging emotionally, as often the nurses in palliative care are expected to inform patients and families of unfavourable diagnoses, as well as help the family cope with anticipated loss.

Nurses attempt to help each patient attain their highest level of holistic functioning, and emotional support is a component of holistic health. Hogan (2004) states that the “role of modern nursing has expanded to include a heightened emphasis on illness, prevention, health promotion and concern for the client’s holism.”

Holistic care as a method of promoting health and wellness is now at the forefront of healthcare. Despite this, a study in the UK discovered that nurses were aware that they were often unable to provide high quality care in some areas that are important to patients, including emotional support. This lack of care is a result of nurses being overworked and having too little time to accomplish basic nursing tasks.

6 http://library.cn.edu/HonorsPDFs_2009/Lee_Meredith_L.pdf
7 West, Barron and Reeves, 2005
Patients receiving hospice and palliative care have been shown to benefit from emotional support during the early stages of grief and whilst in the process of accepting that they will die. Yet with an increase in patient load, and a delay in providing basic care, nurses feel that they are less likely to spend time with patients on non-essential tasks and may have to limit holistic interventions. In addition to staffing issues, research has shown that providing emotional support is one of the most demanding nursing tasks, but with nurses having to cope with time constraints they often do not have enough time to provide the emotional support needed to help relieve the anxieties and fears of their patients.

The nursing shortage crisis and its effects

While a nurse’s main aim is to help the patient recover, over-stretched hospitals and fewer medically trained staff on wards can result in patients developing fatal complications and infections because they are not properly monitored. Researcher Jane Ball has said: “Nurses are being made to make judgments’ over what they cannot do and it often means they are not […] able to deliver the basic levels of compassion. We are not just talking about care being missed, but of patients being put at risk.”

Alarming staff shortages have been highlighted as the key cause of problems at the Royal Blackburn and Burnley General hospitals. A spokesman for the Royal College of Nursing said: “It is absolutely vital that we now have mandatory minimum staffing levels introduced, supported by strong clinical leadership.”

In recent months, there has been much debate surrounding the quality of nursing and who provides it. Today, with so many different treatments and technologies, the role of the qualified nurse has changed beyond recognition. Nurses often have to delegate some aspects of their role to assistants in order to ensure patients get the care they need. Health care assistants often look after the physical, mental and emotional needs of a patient, allowing the registered nurse to use their skills to carry out more multi-faceted tasks. Registered nurses are already in short supply, and with the increasing complexity of health care, they are now also required to be educated to a degree level.

Current research has found that on wards for the elderly, the average nurse is caring for at least eleven patients, when really wards should have seven patients or less per registered nurse to avoid missing vital care. In order to provide an excellent healthcare service, nurses must be provided with the opportunity to observe patients thoroughly.

The intimacy that develops between a nurse and a patient when a nurse has time to wash, comb a patient’s hair, and help them to eat, means that they are able to understand and assess a patient’s progress and well-being on a daily basis. There are already 5,733 fewer nurses employed in the NHS in England than in May 2010.

8 Santos & Guiradello, 2007
9 http://metro.co.uk/2013/07/29/almost-nine-in-ten-nurses-forced-to-ration-care-3903712/
10 http://www.lancashiretelegraph.co.uk/news/health/10565194.print/
According to England’s Chief Nursing Officer wards should not drop below a 60:40 ratio of registered nurses to unregistered staff. Yet a study of 46 NHS hospitals ordered by the European Commission found that unqualified healthcare assistants now outnumber nurses on wards at one in six of the trusts surveyed. The consequences of these shortfalls has meant that patients are left on trolleys for excessive periods of time, and already under-pressurse nurses have to handle issues they are not trained to deal with. A ratio of eight or more patients per registered nurse is associated with patient care on a hospital ward regularly being compromised by short staffing. This statistic indicates that there has been a rise in a nurse’s workload, which has an impact on patient safety. This is because a large part of the demands of patient care are centered on the nurses. When care falls short due to workforce shortages, nurses have to shoulder the responsibility, working longer hours, which impacts on their ability to work and make decisions safely.\(^\text{13}\)

Neonatal nurses working with sick and vulnerable infants often have to look after more than four infants at one time, as well as helping to support their families, which is double the amount they should be working with. A total of 71\% of 2,000 senior nurses surveyed said that they were not confident that staffing levels were always adequate, with more than a third saying they were unsafe on a weekly basis\(^\text{14}\).

Due to these staffing issues, patients are receiving varying levels of care quality when being treated by different teams, in different wards, or in the community. A report by 2020Health highlights the fact that the ward nurses, or charge nurse, set the tone and create the environment in which the team can thrive. This often means nurses have to fight the system if it holds them back from doing what they ought to be doing.\(^\text{15}\)

**Looking to the future of nursing**

Under new government plans to shake up NHS care in response to the Mid–Staffordshire scandal, which saw between 400 and 1,200 patients die as a result of poor care, trainee nurses will now have to spend a year helping patients eat, wash and get dressed, work which is usually done by healthcare assistants, before embarking on their three–year degree. David Cameron has acknowledged that this is a controversial step, but said “the NHS needed to focus on the level of care it provided.”\(^\text{16}\)

The Royal College of Nursing does not agree with the proposal and has branded it a waste of taxpayers’ money, highlighting the fact that qualified nurses are already over-stretched by low staffing levels, which will now be further reduced. The proposal has astounded nurses, who feel that that it will not benefit patients, and also pointed out that trainee nurses are already integrated in clinical areas attending to these basic duties when studying to become qualified nurses.

A key aspect of a nurse’s job is to show compassion for those they are caring for, yet in a report compiled by the Florence Nightingale School of Nursing and Midwifery, researchers found two-thirds of nurses admitted that comforting patients was the


\(^{14}\) [http://www.bbc.co.uk/news/health-22209634](http://www.bbc.co.uk/news/health-22209634)

\(^{15}\) [https://www.google.co.uk/webhp?source=search_app&gws_rd=cr&ei=VaslUt7kNYYO00wX76ICgDw#q=2020health.org+nurse+report](https://www.google.co.uk/webhp?source=search_app&gws_rd=cr&ei=VaslUt7kNYYO00wX76ICgDw#q=2020health.org+nurse+report)

\(^{16}\) [http://www.bbc.co.uk/news/health-22209634](http://www.bbc.co.uk/news/health-22209634)
task they were often forced to neglect, owing to time pressures. Dr Peter Carter from the RCN said: “Cutting nursing posts to save money is a false economy. It leads to poor care which, in turn, creates more strain on the system.”

Nurses enter into the profession to help people who are in need. The roles and responsibilities of nurses are growing within the health care system, and it is up to the hospitals to ensure that there are enough nurses to be able to do their job to an extremely high standard, without compromising the patient’s care. After all, the ultimate reason for a hospital’s existence is the provision of care.

The Keogh Report, which was commissioned in light of the failings at Stafford Hospital, blamed the shortages of nurses for the high death rates at 14 crisis hospitals. The report singled out dangerous staff shortages on nights and weekends. The revelations piled pressure on Health Secretary Jeremy Hunt to explain why, since his Government came to power in 2010, more than 1,000 nurses had been axed from the struggling trusts at the centre of the scandal. Due to the cuts hospital nurses are now being forced to “ration care” because there is not enough time to properly look after patients. Gail Adams, head of nursing at the union Unison, has said that there is “safety in numbers when it comes to caring for patients. The introduction of minimum staff to patient ratios would be a life-saving initiative – one that would dramatically change life on wards for patients and staff, providing a safer, more caring environment for all.”

The idea of setting minimum staffing quotas was put forward as an option by the Francis Inquiry when it published its final report into the failings at the Mid–Staffordshire Hospital. Stafford Hospital was the focus of a major public enquiry after it was found poor care and a lack of nurses may have led to the deaths of hundreds of patients as a result of maltreatment and neglect. Following on from this scandal, Robert Francis QC has come up with 290 recommendations which he believes would prevent a repeat of the appalling care given to patients at Stafford Hospital between 2005 and 2009. The practices described in the Stafford scandal went against everything nursing stands for, and as the profession of nursing comes under great scrutiny, despite increasing clinical pressures, it is important to remember that a nurse’s fundamental values for a patient are care and compassion.

The ageing population also has implications for healthcare, and nursing in particular. There are now more older people in society than even before. This means that caring for older people is a major part of the work of the NHS on most wards. Rather than just needing treatment for a simple condition, older people are more likely to have complex needs as a result of underlying long-term conditions combined with the effects of ageing.

The highly pressured nature of a nurse’s work means that they are at high risk for experiencing the emotional component of burnout. This is problematic as “the stress, danger, exhaustion and frustration that have become built into the normal daily routine of hospital nurses constitute (the) single biggest factor driving nurses out of

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18 [http://news.uk.msn.com/rushed-nurses-have-to-ration-care](http://news.uk.msn.com/rushed-nurses-have-to-ration-care)
Conclusion

There can be no doubt that nursing is a vital, life-saving and sustaining therapy which all of us will need at one time or another in our lives. A nurse’s job role involves more than nurturing; it also includes assessing, surveying for risks, identifying client goals, planning independent actions and providing care. Nurses save lives, prevent complications and to help prevent suffering for patients while also providing emotional support to patients and their families.

The challenge that the health service faces is that the simple principles that are so important to nursing are hidden amongst a deluge of standards and regulations, which have grown over the past decade, particularly recently in response to the Mid-Staffordshire scandal. As nurses are required to provide evidence of compliance to these standards, they are taken away from patients.

Nurses play a pivotal role in the delivery of health care. This report includes many examples of good quality care in which nurses engage positively with patients by providing encouragement, reassurance, and by being attentive to individual needs. However as we have also seen, there are many factors that can influence and affect the quality and safety of nursing care, including issues around leadership, staffing levels, education and training. Having insufficient numbers of nurses with the right training on duty can and will lead to poor care. Where there are not enough nurses to deliver the level of care required, nurses have to prioritise care, and they may not have time to talk to the patient or their family on the emotional level needed.

No other healthcare profession is expected to hit the ground running in the way that is expected of newly qualified nurses. Midwives for example have a required period of supervised practice immediately following registration. In today’s health care environment, nursing is much more than the application of clinical skills and knowledge; it requires caring and compassionate practitioners to deliver safe and dignified care, all the while making decisions in increasingly complex situations. Many of the criticisms directed at nursing reflect other changes in society. Patient turnover is faster, patients may have more complex illnesses, and tests and treatments are more readily available. The drive to discharge patients within as short a time as possible means throughput has increased and therefore the demands on nurses have also increased. Yet despite these criticisms, as this report has highlighted, nurses remain the 24-hour workforce in hospitals and the wider community. Nurses, as both advocates and pragmatists, are well placed to provide a high level of care for patients, but leaders at a local level need to ensure that work environments are properly resourced, training time for nurses is facilitated and safe staff levels are maintained.