

Speech: My mission to make sure NHS staff feel safe and secure at work

There's a reason nurses are so close to the nation's heart: because you are there for us when we need you.

And there's a reason nurses are so close to my heart. My grandmother was a nurse. She was there when the NHS was born. And she remained a nurse until she died.

For we all know you never stop being a nurse. Not when you leave work. Not when you're at home. Not when you retire. You're the one who looks after your family's health.

You're a nurse because you have the commitment that has shaped this noblest of professions since Florence Nightingale: compassion, cool heads, caring for others no matter how bad the situation, no matter how bleak the prognosis.

Today, I want to talk about our support for nurses, how we need more nurses, and how we've got a plan to make that happen.

But as well as that, I want to address one question head on: how could anyone hit a nurse?

It beggars belief that anyone could even think of attacking a nurse, or a doctor, or paramedic, or emergency worker of any kind, as they go about their jobs of public service. Any attack on a nurse, or an emergency worker, is an attack too many.

And I know I am not alone. There is overwhelming public support for the Assaults on Emergency Workers Act we have brought into law.

It is absolutely right that anyone who assaults an emergency worker faces tougher penalties and longer prison sentences. Because an assault on you is an assault on us – and we will not tolerate it.

So, today I want to talk about how we can tackle violence against nurses and our NHS staff. But it's not the only thing I want to talk about. Because I believe that increasing violence, bullying and harassment against our NHS staff is just one symptom of a system in need of change. A system I am determined to improve.

So let us ask: how are we going to tackle violence against NHS staff?

Now, I must pay tribute to Chris Bryant for all his work on bringing about this new legislation. The support for his Private Members' Bill, from every part of the House of Commons, shows what an important and unifying issue this is.

And I must pay tribute to all the work the RCN has done in calling for this

legislation, and then helping us to shape it so that all nurses delivering NHS care, wherever they work and whoever they work for, are protected by this new law. It was the right thing to do. We listened to you, and we did it.

But legislation is just the start, so today I am launching the first ever NHS violence reduction strategy to protect our NHS workforce against deliberate violence and aggression from patients and the public.

I have made it my personal mission to ensure NHS staff feel safe and secure at work and the new strategy, created together with the Social Partnership Forum, will take a zero-tolerance approach to attacks and assaults against our staff.

I want my department to work with the NHS, police forces, the Crown Prosecution Service, the Social Partnership Forum and the RCN to ensure this strategy succeeds so the new law works for you. So you can easily report any incident, so every incident is taken seriously and investigated fully, and so the – often difficult – process of giving evidence doesn't create more work for you.

The NHS has a duty of care to its patients and its staff. So the CQC will scrutinise NHS trusts' violence reduction plans as part of their inspection regime. This isn't about penalising people, but identifying which trusts need support to reduce violence against staff, whether that's by better building design or improved procedures.

Along with more effective and quicker prosecutions, greater scrutiny and accountability, we're also looking at how we can get better data – and how we can make better use of that data to identify high-risk jobs and areas.

So, we're working with NHS providers to develop a new way of recording assaults and other incidents of abuse or harassment. That way we can better understand the scale of the problem and the solutions we need to devise, because a 'one size fits all' approach isn't going to solve this.

We know that while paramedics may face the greatest danger from drunk young men at kicking-out time on a Friday or Saturday night, that isn't true for a nurse in a mental health trust where most violent incidents occur between 10 and 11 in the morning. Or in the acute sector, where those most likely to be responsible for assaults are aged 75 or over.

We also know that many assaults are carried out by people with dementia, brain injuries or other mental health issues. So prosecution isn't always appropriate or in the best interests of patients or staff.

But together with more effective prosecution and better data, we also need to improve staff training and staff support. The current training in de-escalation and conflict resolution will be reviewed and revised.

And, we're listening to you about the type of support you need. Since launching the #TalkHealthCare public platform in September we have received many new ideas about how we can improve the work environment.

I would urge anyone who has not done so already to share your ideas: your voice will be heard and acted on.

We must work together to solve this, and make the NHS live up to the promise I know it can be: the best place to work in the world.

Tackling violence alone won't do that. That brings me to nursing numbers and morale, which we all know are inextricably linked, but let me take each in turn.

Numbers. Simply put: we need more. And that means more permanent nurses, not more agency workers.

We need a long-term solution that provides the full benefits of NHS employment and makes financial sense for NHS employers.

To create a steady stream of talent we increased the number of training places available for nurses and doctors. There are now more than 52,000 nurses in training, and we have made more funding available to increase the number of training places available to universities.

Now, I know some have been looking back to the old bursary model, but it was in effect a cap on the numbers of people who could enter the profession each year. The latest figures show there were more applications than available places this year.

But we know there is more work to do with universities to get the right people on to the right courses, and to open up the profession to people from all backgrounds, and ensure they get the support they need to complete their training so they can serve in our NHS.

That is something we will specifically address in the long-term plan for the NHS, but we are also taking action in the short term.

We're helping providers to recruit from abroad by removing doctors and nurses from the cap on tier 2 visas. That's good for the NHS and good for the country.

Health Education England's 'earn, learn, return' schemes are helping overseas nurses come to the UK, contribute to the NHS and take back what they've learned to help their communities.

And, this isn't just about recruiting more, it's about holding on to the excellent and experienced people we already have by making their working lives easier and more fulfilling.

Because we can't go back, we must go forward. I want to work with you on what measures we can take now to get more people into the wonderful profession of nursing.

So we will listen to you; we will work with you. This will involve new money, new ideas, and new ways of working.

The budget allocated £20 billion more each year to the NHS, and repairs and patching up the old system isn't going to cut it. Not if we're to meet the unprecedented challenge of an ageing society. Not if we're to harness the game-changing potential promised by artificial intelligence and genomics.

It's time to trade in the family car for a newer model – one that's got room for everyone. But one that's safer, better and more efficient.

I want you to come with me on this journey because out of my top 3 priorities – tech, prevention, workforce – workforce is the most important.

That means ensuring you feel recognised and valued. That your concerns are addressed and your voices heard.

Morale matters, which is the final thing I want to talk about.

It matters not only because it's better for you to feel happy and fulfilled at work. It matters because it's better for patients too. Both in terms of the treatment they receive and their outcomes.

So, it's not right that nearly 4 in 10 of you reported feeling unwell due to work-related stress last year. And it's not right that more than half of you said you came into work sick because you felt under pressure to do so.

I want this to change. As well as the numbers, it means getting the small things right:

- ensuring you have adequate time for rest and recovery
- that there's somewhere you can go to, someone you can talk to, if you need help
- that we have the best, most up-to-date technology available to cut your workload and make your lives easier

These are all things I am pushing for. And I want you to push me, and my department, if you feel we need to do more.

But, I also have a challenge for you. Something we have failed to address – something vital not just for morale, but that underpins the universal treatment principle on which the NHS was founded: we, must tackle racial inequality within the nursing profession.

Too many black and ethnic minority nurses find it too hard to progress in their careers. Too many black and ethnic minority nurses are paid less than their white counterparts. And too many nurses encounter bias or discrimination because of the colour of their skin, or where they come from.

This is indefensible. It runs counter to the values of the NHS we love, and it must change.

I believe in equality of opportunity and embracing diversity with every fibre of my being. I believe in it, not just because of fairness and because it's the right thing to do, but because of the benefits it brings.

And the data proves it. The Workforce Race Equality Standard numbers show that progress on tackling racial equality has a positive impact for all staff.

Research by Professor Michael West shows that the experience of black and ethnic minority ethnic staff is a good barometer of the climate of respect and care for all staff within the NHS.

We see it in some of the best trusts. By making continuous improvements for BME staff, trusts have seen similar improvements for their entire workforce.

Those are the benefits of racial equality, of embracing diversity rather than merely tolerating it. Those are the changes I want to see, and my challenge to you.

I will work with you to tackle violence. I will work with you to increase nursing numbers. I will work with you to improve morale and give you all the support that you need.

Let us work together to build a nursing profession, and an NHS in which we can all take pride.