Health and Wellbeing of the Nursing and Midwifery Workforce in Wales

Health and Wellbeing

- **71%** reported good health
- **14%** reported low mental well-being
- **39%** are physically inactive
- **9%** smoke
- **70%** do not eat 5 fruit or veg daily
- **10%** binge drink

Working Environment

- **62%** reported workplace stress
- **51%** reported regularly missing breaks
- **41%** do not feel adequately hydrated
- **27%** do not have access to drinking water
- **30%** did not have flu vaccination in winter 2018/19
- **89%** reported barriers to health appointments
- **61%** attended work when unwell

Feelings towards Career and Perceptions of Value

- **75%** feel career is rewarding
- **55%** would recommend career
- **69%** enthusiastic about their job
- **80%** patients
- **70%** families of patients
- **43%** senior staff

- **50%** considered leaving profession
- **38%** considered decreasing hours
- **29%** considered retirement

*Exercise 1 day or less per week

*Drink 6 or more alcoholic beverages in one session weekly or daily

*Over past 12 months preceding survey (2018/19)
Financial Pressures

- 51% took action to meet living expenses
  - e.g. working overtime or borrowing money
- 38% experienced financial difficulties
  - e.g. cutting back on food or travel costs and struggling with utility bills
- 42% experienced impacts of financial worries
  - e.g. losing sleep and reporting a negative impact on their wider family unit

Popular Solutions

These were the top three choices to be implemented in the workplace that could help to improve health and wellbeing:

- 49% time to exercise
- 44% financial incentives
- 34% time to prepare meals

Considerations for Action

1. Address mental wellbeing in the workplace
2. Strengthen prevention of ill-health
3. Recognise and value the workforce
4. Understand the root cause of financial pressures
5. Focus on supporting ‘at risk’ populations
   a) Younger workforce (18-39 years old)
   b) NHS Pay Bands 5 and 6

* over past 12 months preceding survey (2018/19)

Overall, a total of 1,642 valid responses were received and of these, 89.5% were nurses, 5.4% were midwives and 5.1% were healthcare support workers. It should be noted that as it was not possible to select a representative sample of the nursing and midwifery workforce in Wales from a sampling framework, the study design was cross-sectional. Therefore, a key limitation is that the findings are unadjusted (to workforce distribution in Wales), and therefore descriptive and not generalisable to the entire nursing and midwifery workforce in Wales.