Chapter Four sets out how current workforce pressures will be tackled, and staff supported. The NHS is the biggest employer in Europe, and the world's largest employer of highly skilled professionals. But our staff are feeling the strain […] This Long Term Plan therefore sets out a number of specific workforce actions which will be overseen by NHS Improvement that can have a positive impact now. It also sets out wider reforms which will be finalised in 2019 when the workforce education and training budget for HEE is set by government. These will be included in the comprehensive NHS workforce implementation plan published later this year, overseen by the new cross-sector national workforce group, and underpinned by a new compact between frontline NHS leaders and the national NHS leadership bodies.” (p.8)
Chapter 4: NHS staff will get the backing they need

This short brief summarises the key points from the workforce specific section of the NHS Long Term plan.

The plan discusses 8 areas:

1. A comprehensive new workforce implementation plan
2. Expanding the number of nurses, midwives, AHPs and other staff
3. Growing the medical workforce
4. International Recruitment
5. Supporting our current NHS staff
6. Enabling productive working
7. Leadership and talent management
8. Volunteers

The report recognises that:

- The performance of any healthcare system ultimately depends on its people – the NHS is no exception
- Our staff are feeling the strain due, in part, to the number of vacancies across many roles and in many parts of England
- To make the Long Term Plan a reality, the NHS will need more staff, working in rewarding jobs and a more supportive culture
- New NHS roles and careers will be shaped to reflect the future needs and priorities set out in the rest of the Plan
- More people want to train to join the NHS than are currently in education or training. Many of those leaving the NHS would remain if they were offered improved development opportunities and more control over their working lives

The plan sets out specific workforce actions developed by NHS Improvement and others that can have a positive impact now. It also sets out wider reforms for the NHS workforce which will be finalised by NHS Improvement and the Department of Health and Social Care when the education and training budget for HEE is set in 2019.

1. A comprehensive new workforce implementation plan

Workforce plans need to work locally and add up nationally – they need to be adaptive and attentive to detail and wider context.

“Our aim is to ensure a sustainable overall balance between supply and demand across all staff groups. For doctors, we will focus on reducing geographical and specialty imbalances. For the wider workforce, we aim to ensure sufficient supply of nurses and to address specific shortages for AHPs and other key groups”

A workforce implementation plan will be published later in 2019. NHS Improvement, HEE and NHS England will establish a national workforce group to ensure workforce actions agreed are delivered quickly. This will include the new Chief People Officer, the NHS National Medical Director and the Chief Nursing Officers, and other Chief Professions Officers. This group will also include the first ever Chief Midwifery Officer.

2. Expanding the number of nurses, midwives, AHPs and other staff

Nurses play a key role in delivering person-centred care in all parts of the NHS but we are not yet training sufficient nurses to meet demand. The NHS Improvement-led workforce group will agree action to improve supply over the course of the Long Term Plan with the aim of improving nursing vacancy rate to 5% by 2028.

22,200 applicants were accepted onto English nursing courses in 2018, a higher number than in seven of the last ten years, however, 14,000 applicants to nursing were not accepted. To facilitate the Department of Health and Social Care’s intended 25% increase in nurse undergraduate places, clinical placements for an

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extra 5,000 places will be funded from 2019/20, a 25% increase. From 2020/21 funding will be provided for clinical placements for as many places as universities fill, up to a 50% increase. Every nurse or midwife graduating will be offered a five-year NHS job guarantee within the region where they qualify.

Training needs to be more accessible. We will establish a new online nursing degree for the NHS, linked to guaranteed placements at NHS trusts and primary care, with the aim of widening participation.

Investment in the growth of nursing apprenticeships will continue and we will seek to grow wider apprenticeships in clinical and non-clinical jobs in the NHS.

The national workforce group will build on the support AHPs already offer for patient flow. The funding for new Primary Care Networks will be used to substantially expand the number of clinical placements. More national campaigns will be developed in conjunction with Royal Colleges and trade unions for those roles the NHS most urgently needs.

3. Growing the medical workforce

Medical school places are growing from 6,000 to 7,500 per year and the way doctors are trained and they way they work will be a key component of the workforce implementation plan. The shift from a dominance of highly specialised roles to a better balance with more generalist roles will be accelerated. The workforce implementation plan will build on the General Practice Forward View to increase the number of doctors working in general practice.

Newly qualified doctors and nurses will be offered a two-year fellowship offering a secure contract alongside a portfolio role. The government has also committed to a new state-backed GP indemnity scheme from April 2019. Working with the BMA, medical Royal Colleges and the General Medical Councils and providers switching specialties, credentialing, generalist skills and matching speciality and geographical needs will also be addressed.

4. International recruitment

We want staff from the EEA that are currently working across the NHS to stay after the UK exits the European Union and many trusts are now meeting the cost of applying for settled status for their staff from the EEA. NHSE and NHSI will directly monitor NHS staffing flows post-Brexit to advise the government. In the long-term, we need to ensure we are training more of the people we need domestically and in the short-term we must continue to ensure that high-skilled people from other countries from whom it is ethical to recruit are able to join the NHS. The workforce implementation plan will set new national arrangements to support NHS organisations in recruiting overseas.

It is critical that individuals looking to register to work in the UK can move through regulatory processes quickly, while upholding the high standards the public expects.

5. Supporting our current NHS staff

Growing the NHS workforce will partly depend on retaining the staff we have as training lead-times mean new investment in staff will not deliver additional supply for at least three years. NHS Improvement’s Retention Collaborative has already delivered measurable improvements (this will be extended to support all NHS employers). NHSI is committed to improving staff retention by at least 2% by 2025, the equivalent of 12,400 additional nurses.

One of the top reasons for people leaving is that they do not receive the development and career progression that they need (i.e. CPD and workforce development).

“HEE has committed to increase the proportion of its total budget spent on workforce development in the short-term, with a focus on primary care and community settings. Support from employers is also key – in particular ensuring that staff are given the time out to develop their skills.”

Multi-professional credentialing will be expanded to enable clinicians to develop new capabilities formally recognised in specific areas of competence. A modern employment culture will be shaped for the NHS promoting flexibility, wellbeing and career development and
redoubling efforts to address discrimination, violence, bullying and harassment. Respect, equality and diversity will be central to changing the culture and will be at the heart of the workforce implementation plan.

An expanded Practitioner Health Programme will help all NHS doctors access specialist mental health support meaning the **NHS will have the most comprehensive national mental health support offer to doctors of any health system in the world.**

6. Enabling productive working

Ensuring staff are making the most of their skills and expertise will form a critical component of the NHS workforce implementation plan. The rapid development of technology is a key opportunity to free up staff time – Professor Eric Topol is currently leading work to consider what education and training changes may be needed to maximise opportunities of technology, artificial intelligence and genomics in the NHS. His conclusions will inform the workforce implementation plan. By 2021, NHSI will support NHS trusts and foundation trusts to deploy electronic rosters or e-job plans. A review of NHS workforce data will also be commissioned to inform the work of the national workforce group.

7. Leadership and talent management

Great quality care needs great leadership at all levels – leadership cultures are not yet commonplace and there is not the sufficient pipeline of highly skilled and readily deployable senior leaders. There will be a new compact with our most senior leaders and more work to nurture the next generation of leaders by more systematically identifying, developing and supporting those with the capability and ambition to reach the most senior levels of the service. The national workforce group will look at options for improving the NHS leadership pipeline. More will also be done to develop and embed cultures of compassion, inclusion and collaboration e.g. programmes and interventions to ensure a more diverse leadership cadre; leadership development offers for staff at all levels and development the knowledge of improvement skills and their application to leadership.

8. Volunteers

Staff, patients and volunteers benefit from well-designed volunteering initiatives. NHS organisations will be encouraged to give greater access for younger volunteers through programmes such as #iWill and programmes in deprived areas. The Helpforce programme will be backed with at least £2.3million of NHS England funding to scale successful volunteering programmes across the country, part of our work to double the number of NHS volunteers over the next three years.

Useful Links

- Download the full Long Term Plan
- Download the Long Term Plan Summary
- Visit the Long Term Plan website
- View the Long Term Plan Case Studies

Produced by the HEE Knowledge Management (KM) team.

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Please note this summary is for information purposes only; it does not include validation or critical appraisal of any content.