

## The NHS People Plan: how is the workforce changing to address evolving clinical needs?

### Background

The long-awaited [NHS People Plan](#) has recently been published by NHS England and NHS Improvement. It outlines the future transformation and growth of the NHS workforce in England. Building on last year's *Interim People Plan*, it is centred around '[Our NHS People Promise](#)', which outlines a number of actions to improve staff experience. It also focuses on addressing new challenges for the workforce presented by the COVID-19 pandemic.

While the plan provides a clear blueprint of the future NHS workforce, it is not backed by the funding or concrete detail needed to implement it. We find the plan has omitted pay and digital upskilling, two key factors for the development and retention of the NHS workforce in England. Nevertheless, it is a positive step forward in its attempts to build more inclusive leadership, shared decision-making, and encourage a culture of life-long learning.

Actions in the People Plan fall under four themes, with specific actions for each:

- Looking after our people
- Belonging in the NHS
- New ways of working and delivering care
- Growing the workforce



### Summary

The Plan makes a number of commitments and recommendations for systems, employers and staff. We summarise here some of the key ideas intended to alter the future delivery of services and care, and then offer some analytical thoughts on them.

**Upskilling current staff:**

- The future workforce will be less specialist; upskilling and education will be focused on developing generalist skills in accordance with Health Education England's (HEE's) [Future Doctor Report](#).
- Employers must focus on continual workforce upskilling, expand e-learning, and work in partnership with local higher education institutions.
- Primary care capacity will be expanded and play a greater role in the overall delivery of care. HEE pledges to expand multidisciplinary teams in primary care to ensure they can respond to local population need. This will be done through the full roll out of primary care training hubs.

**Training the future workforce:**

- HEE is focusing on improving the training of nurses, midwives and allied health professionals. A £10m fund will lead to an increase of over 5,000 undergraduate places for these healthcare professionals.
- Training the future mental health workforce is also prioritised. There will be expanded access to psychological therapies for young people and an increase in the number of advanced clinical practitioners, psychiatrists and mental health nurses.

**Expanding shortage specialties:**

- The Plan acknowledges gaps in the NHS workforce across various roles, professional groups and geographies. In 2020/21, HEE is investing in various foundation year 2 posts to address these gaps.
- HEE is developing a clinical practice qualification in oncology and investing in training across a number of oncological specialties.
- There will be increased supply of prescribing pharmacists with enhanced clinical and consultation skills. This will be facilitated by replacing the current pre-registration year with a foundation year, and enhancing clinical experience in initial education and training.

**Workforce planning:**

- The Plan acknowledges a need to improve workforce planning, transformation and data collection. One of the proposed ideas to address this is for HEE and NHSE/I regional teams to work with local systems to develop competency-based workforce modelling and planning for the remainder of 2020/21, including assessing any existing skill gap and agreeing system-wide actions to address it.

**Inclusion and Diversity:**

- The Plan acknowledges racial inequality in the NHS and will introduce new diversity targets across all seniority levels.

- Employers ought to adjust recruitment and promotion practices to ensure that staffing reflects diversity of community, and national labour markets.
- New resources will be put in place to encourage productive conversations about race and inclusion of staff.

### Recruitment

- With support from HEE, healthcare employers are asked to bolster international recruitment by building international recruitment hubs. Employers are also expected to offer more apprenticeships and expand its primary care workforce.

## Analysis

The NHS People Plan was long overdue as many NHS posts remain unfilled. There has been an overreliance on expensive locums and a number of medical specialities are over-stretched and unable consistently to offer timely specialist care. The Plan unfortunately lacks both the concrete detail to rectify these issues and the long-term funding needed to secure implementation. Not only does the plan fail to increase training numbers in the majority of over-stretched specialities, but it also omits pay – a key factor in recruitment and retention of staff. Recent [analysis](#) by the Nuffield Trust suggests that NHS staff have seen a real-term pay decrease since 2010, even after the 2.8% post-COVID pay rise announced in July. This Autumn's Comprehensive Spending Review will be an important opportunity for the Government to secure the commitments made in the NHS People Plan, address low wages and ensure health and social care staff feel truly valued.

The Plan does however, provide a clear blueprint on the future travel and makeup of the NHS workforce in England. Medical specialities will have to adapt to playing a supporting role in the delivery of care, as generalist doctors will be expected to provide the bulk of care.

The People Plan also continues the long list of policy documents from Government and non-departmental public bodies, including the 2019 NHS Long Term Plan, that focuses on joined-up care in a local or community setting. Positive moves towards shared and localised decision-making should mean that staff will be able to respond to health needs more flexibly, and be distributed according to their skills, rather than their roles.

Whereas training and technology-enhanced education are featured strongly, there are remarkably few mentions of digital upskilling and the delivery of the ongoing digital transformation. This is particularly surprising given HEE's recommendations in [The Topol Review](#), which highlights an urgent need to train the workforce to deliver the digital future.

Aside from digital transformation, the Plan rightly addresses lessons learnt from the NHS response to COVID-19 and consolidates new ways of working. However, as is often the case with national strategies, its success relies on appropriate funding and concrete steps towards implementation.

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