Workforce Planning –
November 2017


Yet again, RCN congress 2017 highlighted that the workforce crisis is affecting all areas of healthcare, and with 50% of general practice nurses (GPNs) due to retire shortly, GPNs are not immune. The shift towards delivering more healthcare at home must be supported by a primary care nursing workforce fit for purpose.

(2) High-achieving graduates from outside nursing offered 'fast track' career scheme. Nursing standard (Royal College of Nursing (Great Britain) : 1987) 2017;31(32):8

A two-year fast-track programme to recruit high-achieving graduates to a career in nursing and address the workforce crisis has been announced by NHS England.


(4) Are millennial GPs shunning full time working? BMJ : British Medical Journal (Online) 2017;357

Even if more GPs are part time, the newspapers are wrong to suggest that they are sidestepping their duties, finds Anne Gulland.

(5) 'Politics first, strategy later' fails in workforce planning. Nursing standard (Royal College of Nursing (Great Britain) : 1987) 2017;31(52):3

The government’s shambolic approach to planning the nursing workforce in England has been laid bare again, although this time a positive spin can be put on its ham-fisted attempt to address the crisis.

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(6) Addicott R. **Workforce planning in the NHS.** London: London : The King's Fund; 2015

Explores experiences with workforce planning in the NHS and how they align with strategic policy in mental health, general practice and community nursing all of which are key areas if the development of integrated care - as outlined in the NHS five year forward view - is to take place.

(7) Audit Scotland. **Scotland’s NHS Workforce.** : Edinburgh : Audit Scotland; 2017

Gives a breakdown of the Scottish NHS workforce. Covers costs and spending, demographics, geographic differences, turnover, sickness absence and vacancies.


First part of a two-part audit of Scotland's NHS workforce in hospitals and secondary care. Finds that spending on staff is increasing and that staff numbers are at their highest ever level, but also finds there are urgent challenges facing the workforce and the Scottish Government and health boards have not planned effectively for the long term.

(9) Baird B. **Understanding pressures in general practice.** : London : The King's Fund; 2016

Detailed examination on the state of general practice and the pressures that are affecting it. These include: an increasing workload, no growth in funding and increasingly complicated work which is leading to increased stress for employees and is having an impact on provision of services.


This research aimed to understand the pressures facing pathology services across the United Kingdom. Makes recommendations that will help to ensure that laboratory services are maximising efficiency, optimising their workforce and that future changes in technology, research and molecular diagnostics are foreseen and acted on.


The National Health Service in England is currently halfway through the most austere decade in its history. Finding ways to improve health care efficiency is crucial to ensure the sustainability of the health system. While evidence of supply-induced demand (SID) has often been used as an economic argument to restrict labour supply, in the UK the risks of SID may be much less than in health care systems with more deregulated entry into the market post-qualification and with fee-for-service payment systems. This article focuses on the problem of staff shortages in nursing. We argue that, although an oversupply of some types of labour can add to cost pressures by increasing demand for health care services and that the cost of training staff is high, undersupply and poor labour planning lead to...
unintended consequences such as poor labour productivity. As a result there is a case for public policy to target an oversupply of nurses in the future. If government reforms to nurse funding help, they are to be welcomed.

(12) Christie B. Action is needed to avoid NHS staffing crisis in Scotland, audit finds. BMJ 2017;358

Urgent action is needed to improve workforce planning in Scotland to ensure that the health service has enough staff to meet future demands, auditors have warned.


Glasper discusses the Nursing and Midwifery Council’s (NMC) announcement that it will regulate the new nursing associate role. The NMC described the role as a new care role in the nursing family. The NMC was a logical and inevitable choice for regulating this new grade of nurse. Nursing associates will be able to administer medication, and the role requires robust quality assurance for the safety and effectiveness of clinical practice.


Emeritus Professor Alan Glasper, from the University of Southampton, discusses the recently launched curriculum for nursing associates and what this might mean for the delivery of care.


Emeritus Professor Alan Glasper, from the University of Southampton, discusses a report revealing that hospital doctors are concerned about their ability to deliver safe patient care over the next 12 months.


Are the doom laden headlines that warn of imminent NHS collapse justified, asks Nigel Hawkes-and are we making progress on plans to prevent it?.


This document offers a workforce plan to help local systems deliver the Five Year Forward View for Mental Health to 2021. Discusses the current state of the NHS mental health
workforce, where the workforce should be in terms of numbers and skills and what is required to bring the numbers and skills up to requirements.


In this paper we apply robust optimization techniques to the shift generation problem in workforce planning. At the time that the shifts are generated, there is often much uncertainty in the workload predictions. We propose a model to generate shifts that are robust against this uncertainty. An adversarial approach is used to solve the resulting robust optimization model. In each iteration an integer nonlinear knapsack problem is solved to calculate the worst case workload scenario. We apply the approach to generate shifts in a real-life Air Traffic Controller workforce planning problem. The numerical results show the value of our approach.

(20) Iacobucci G. **Consultant productivity drops as result of poor workforce planning.** BMJ 2017;356

The productivity of consultants working in NHS acute care hospitals in England has fallen by an average of 2.3% over the past six years, new research has shown.1.

(21) Iacobucci G. **Future gaps in workforce pose an impending crisis for the NHS, report warns.** BMJ : British Medical Journal 2013;347

The NHS is facing a workforce crisis unless urgent action is taken to tackle impending staff shortages and shift the deployment of training resources, health policy experts have warned.

(22) Imison C. **Reshaping the workforce to deliver the care patients need.** : London : The Nuffield Trust; 2016

There is a growing gap between the needs of patients and the skills and knowledge that the health workforce has. Goives practical advice and guidance to those who wish to redesign their workforce.


Looks at factors affecting the nursing and consultant workforce in NHS England. Covers increasing demand, lack of and oversupply in labour, agency workers, improvements in productivity and NHS Improvement's plans to help NHS Employers respond to workforce issues.

(24) Jones T. **How will the nursing associate role fit within the neonatal workforce?** Journal of Neonatal Nursing 2017;23(3):109-111
Concern about the effect of Brexit on the UK nursing workforce could intensify, with new figures showing fewer EU nurses in post at certain NHS trusts and fewer registering to work in the UK.


England could see a shortfall of 42,000 nurses by 2020, equivalent to 12% of the workforce, according to a new report.


To determine if there had been changes in the size of the UK paediatric workforce and working patterns between 1999 and 2013.

(29) McKew M. *'Poor workforce planning' behind Scottish pressures*. Nursing standard (Royal College of Nursing (Great Britain) : 1987) 2017;31(49):10

Nurses and other NHS staff in Scotland are facing increasing workload pressures due to a lack of workforce planning by government, according to a new report.

(30) Middleton J. *'Time for some honesty on the nursing associate role.'*. Nurs.Times 2017;113(1)

In its Council meeting on 31st January 2017, the Nursing and Midwifery Council debated whether it would accept the invitation to regulate the new nursing associate role.

(31) Modi N. *Brexit is bad for health, and doctors should say so*. BMJ : British Medical Journal (Online) 2017;357

Neena Modi argues that leaving the EU will have wide ranging effects on health in the UK and that the medical and scientific professions should not hold back from saying this.


This short guide is intended to help NHS services plan their approach to international recruitment of staff. Covers dealing with employment agencies, immigration rules relating to workers from within and outside the European Economic Area, language skills and
pastoral support. Includes checklists covering planning, the recruitment process and induction and retention.

(33) Osborne S. **Only mandated ratios will enable proper workforce planning.** Nursing standard (Royal College of Nursing (Great Britain) : 1987) 2017;31(29):30

On 7 February, NHS staff were asked by Unison to record nurse-to-patient ratios as part of the union’s sixth annual safe staffing survey.

(34) Payne L. **Nursing associate role is a better than spending on agency nurses.** Nursing standard (Royal College of Nursing (Great Britain) : 1987) 2017;31(23):30

I'm training on the new nursing associate scheme. It is a pilot scheme, therefore it is trial and error, but as nursing associates we could go on to become trained nurses.


(36) Policy research unit in commissioning and the,healthcare system. **General Practitioner recruitment and retention : an evidence synthesis.** : Kent : University of Kent; 2016.

(37) Rimmer A. **BMA urges more career flexibility and better occupational support to fight workforce crisis.** BMJ : British Medical Journal (Online) 2017;358

Doctors' career flexibility must be increased, such as more options to work part time, and their health and wellbeing services improved to stop the staff shortage worsening, the BMA has said in a new briefing on the state of medical recruitment. 1 To tackle what it described as a workforce crisis in medicine, the BMA also said that after Brexit the immigration system should enable the UK to recruit and retain the numbers of doctors it required if it couldn't find enough in the country. Chaand Nagpaul, the BMA's chair of council, warned that if the government didn't get to grips with the workforce crisis the NHS would struggle to attract and retain highly trained staff and care of patients would suffer as a result.

(38) Royal College of Nursing and National Council of Nurses of the,United Kingdom. **Unheeded warnings : healthcare in crisis : The UK nursing labour market review 2016.** : London England : Royal College of Nursing; 2016

The UK wide nursing labour market review discusses nursing workforce trends in the UK using the latest data. Covers: immigration, the UK nursing workforce, graduate and non-graduate earnings and other areas. Takes a detailed look at workforce numbers and characteristics in all four countries of the UK.

(39) Sales S. **Our staff are falling out over Brexit.** People Management 2016:48

A question on staff falling out over Brexit is answered. Remind your workforce how important everyone is to the collective cause, and that nothing has changed (or will change for the foreseeable future) as a result of the vote. Follow it up by speaking to managers and
asking them to be vigilant. Given that -- alarmingly -- it was supervisors who were responsible for the initial incident in your factory, you may need to reiterate what acceptable behaviour looks like and what could happen to those who fall short of your standards. It isn't something you should need to mention, but sometimes laying down the law is the only way to draw a line under an escalating problem.

(40) Sandy L. **Workforce planning-going beyond the count**, Israel Journal of Health Policy Research 2017;6

Future studies should not only look at the numbers of physicians, but also at how they are deployed, how efficient the care delivery systems they work in are, and whether both process improvement and new technologies such as telehealth can get more out of the available workforce.


This report aims to help show the complexity of creating and maintaining caseloads within the District Nursing service, and to discuss the main elements that should be taken into consideration when attempting to plan safe caseloads.


This publication outlines the Royal College of Midwives'views on how maternity services should be organised, funded and staffed. Outlines the midwife’s role and approaches for services that promote safe and effective care. Key messages include: the need for better continuity of care, no extension of the midwife’s role into obstetric, nursing or any other areas of practice. The document argues against a new advanced practitioner role in midwifery, stressing that consultant midwives already fill this type of role. The idea of a nationally agreed framework for support workers (normally called maternity support workers), along with a national training programme for them is recommended. The report also highlights the shortage of midwives in England as a problem, and how other countries (including Scotland) may be affected by large number of midwives coming up for retirement age.


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