

Strategies to future-proof and enhance the nursing workforce

Emeritus Professor **Alan Glasper**, University of Southampton, discusses a new initiative by Health Education England to address staffing challenges facing the health service



In December 2017 Health Education England (HEE), in collaboration with NHS England, NHS Improvement, Public Health England, and the Department of Health published a draft workforce strategy consultation document (Public Health England (PHE) et al, 2017): *Facing the Facts, Shaping the Future. A draft Health and Care Workforce Strategy for England to 2027*.

The aim of this consultation is to try to future-proof the NHS care workforce for a decade. Following the consultation, a concrete workforce strategy will be published in July 2018 to coincide with the NHS's 70th birthday.

At 142 pages, this is a comprehensive and imposing document that endeavours to develop a workforce strategy for the health and social care labour force. This workforce is the largest in the country, comprising 13% of all available jobs. Professional bodies such as the Royal College of Nursing (RCN) have been invited to comment on this draft strategy (RCN, 2017a).

HEE is a non-departmental public body established under the provisions of the Care Act 2014. The primary role of HEE is to assist in the delivery of optimum health care by ensuring that the workforce is of sufficient magnitude to meet skill-mix ratios as defined by, among others, royal colleges, and ensuring

that staff are in possession of the appropriate skills, values and behaviours, and are available at the right time and in the right place (<https://hee.nhs.uk/>). In the report, HEE et al believe that the NHS needs to fundamentally improve working conditions, increase training and improve retention if it is to tackle the staffing crisis (PHE et al, 2017).

The draft strategy conduct a critical examination of the challenges that face today's NHS workforce and endeavours to highlight the future trials and tribulations that will have an impact on NHS staff over the next decade.

Background

Although the consultation covers the whole of the workforce, this column will focus on nursing. There have been major concerns about the ability of the nursing profession to meet patient demand and acuity for many years, in fact since the inauguration of the profession itself in December 1919. Capacity issues rumbled through the intervening years and indeed by 1923, only 12 097 nurses were on the General Nursing Council register, which was totally inadequate to meet patient need. This in turn led indirectly to the introduction of the enrolled nurse just prior to the founding of the NHS (Baly, 1995; Glasper, 2018).

Despite the arrival of the enrolled nurse, staffing issues continued to plague the NHS and one of the unrecognised threats to nursing was retirement. It was concerns about nurses retiring that led the RCN in 2011 to launch an initiative to enhance opportunities for older nurses to continue to work (RCN, 2011).

This initiative from the RCN alarmingly pointed out that some 180 000 nurses were scheduled to retire by 2021 and its stance was more should be done to help older and more experienced nurses make positive decisions to stay working in the profession beyond the age at which they could retire. The reality of an ageing nursing workforce has been recognised for some years and Buerhaus et

al (2000) reported that the problems of an ageing nursing workforce in the USA were partially attributable to a decline in younger people choosing nursing as a career. They argued that unless the trend was reversed, the registered nursing workforce in the USA would continue to age, and eventually decline in number. The American policy makers called this phenomenon the 'nursing age-quake' (Hatcher et al, 2006) and predicted a public health catastrophe unless serious efforts were made to retain the valuable and experienced but ageing nursing workforce. The main problem is that when experienced nurses retire, the experience and clinical or academic knowledge gained over many years is lost to the organisation. It is important to stress that this 'age-quake' is now having an impact on both clinical practice and academia in the UK. The problems facing nursing are similar to the USA and the changing demographics of patient care demand a radical shift in workforce planning. (Glasper, 2011)

Inevitably, as older nurses retire without sufficient numbers entering the profession to replace them (exacerbated by cuts in commissions of student nurses), there will be a shortage of nurses in the future, especially in community settings. However, in addition to retirement there are other factors at play, and in too many areas and specialties the nursing workforce is overstretched and struggling to cope with demand. HEE et al revealed that the impact of these pressures is affecting morale, retention, and standards of care for patients (PHE et al, 2017).

Over the last 2 years there have been significant changes made to the routes into nursing. Some of these have been as a result of Camilla Cavendish's (2013) work.

Cavendish had been asked to undertake an independent review of the steps that should be taken to ensure that unregistered carers such as healthcare assistants (HCAs) within the NHS and social care treat all patients and clients with respect, care and compassion.

She urged HEE to develop a clear implementation plan to widen participation in recruitment to NHS-funded courses and to develop innovative funding routes for non-traditional staff to progress into nursing. Her work was instrumental in the development of nursing apprenticeships and indirectly led to the development of the nursing associate, perhaps the enrolled nurse of the 21st century (Glasper, 2013).

Assertions about nursing

Although not apportioning blame, it should be stressed that HEE as an organisation has contributed to the NHS staffing crisis by cutting commissions of undergraduate student nurses in many universities. The impact of reduced investment in the education and development of the nursing workforce across the UK was discussed at the RCN Congress, in 2017. During one of the debates, it was revealed that investment in education and training has been subject to reductions of up to 45% in England in 2016–17 (RCN, 2017b).

Nonetheless the report suggests that insufficient consideration has been given to promoting the retention of existing staff in the NHS. It is not only retirement that is contributing to the shortfalls in the workforce. There are other causes including workload pressures, the impact of Brexit and the introduction of language testing, and a lack of investment in continuing professional development (CPD) (PHE et al, 2017).

In this consultation, HEE et al are adamant that access to CPD has been a major issue in the workforce debate and are recommending that the cuts to training budgets should be reversed. The Care Quality Commission (CQC) now routinely seek evidence of CPD for nurses when conducting hospital inspections. CQC Regulation 18 states that nurses should:

‘Receive such appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform.’

CQC, 2017

HEE has helped develop new avenues into the nursing profession including apprenticeships and the fast track Nurse First programme as well as the new nursing associate role. The Nurse First programme has been

designed to attract high-achieving graduates into nursing and the first 40 of these graduates commenced their shortened 2-year courses in 2017 (RCN, 2017c).

As a caveat to the welcome given to the Nurse First programme, the report also gives a warning to the Government about the introduction of tuition fees for nursing students which has given rise to a 23% drop in the number of applications to nursing and midwifery courses at British universities (PHE et al, 2017).

It could be argued that the introduction of tuition fees for nursing students and the ensuing student debt is having a negative impact on the number of mature students who are applying for full-time university nursing courses, especially the smaller learning disability and mental health fields of nursing practice. However it may ensue that mature students begin to embrace the slower but less financially painful route of the HCA, the nursing associate and the apprenticeship schemes to nursing.

There is also concern about overseas nurses both from within and outside the EU. This is because the NHS is dependent on overseas nurses in a range of clinical settings and will continue to do so for the foreseeable future. HEE is making the case to add nurses to the Shortage Occupation List to allow the NHS to continue to recruit the nurses it needs to function optimally (HEE, 2017a).

Measures suggested for improving training and retention

HEE has made a number of specific recommendations about nursing including:

- Targeted retention schemes to encourage staff to continue working in health care
- Making the NHS a more inclusive, ‘family-friendly’ employer because HEE acknowledges the changing shape and expectations of the NHS workforce and recognises that more people, especially nurses, will want more flexible working practices to enable them to balance work and family life. (HEE, 2017b)

Conclusion

This draft document will now undergo consultation before the final strategy is published in July 2018. All nurses in the NHS understand that the nursing workforce must be increased because a failure to do so will lead to nurses continuing to experience unacceptable pressures. This in turn will

KEY POINTS

- A draft workforce strategy consultation document has been published to future-proof the NHS care workforce
- The health and social care workforce is the largest in the country comprising 13% of all jobs
- The NHS needs to improve working conditions, increase training and improve retention if it is to tackle the staffing crisis
- More should be done to help older and experienced nurses make positive decisions to stay working in their profession beyond retirement age

cause them to leave the profession and, if this happens, their skills will continue to be lost to patients across the NHS. **BJN**

Baly M. Nursing and social change. 3rd edn. London: Routledge; 1995

Buerhaus PJ, Staiger DO, Auerbach DI. Implications of an aging registered nurse workforce. *JAMA* 2000; 283(22): 2948–2954

Care Quality Commission. Regulation 18: staffing. 2017. <https://tinyurl.com/y76jaml2> (accessed 13 February 2018)

Cavendish C. The Cavendish review. An independent review into healthcare assistants and support workers in the NHS and social care settings. 2013. <https://tinyurl.com/m3zr7pe> (accessed 13 February 2018)

Glasper A. Can older nurses still provide care? *Br J Nurs*. 2011; 20(18):1206–1207

Glasper A. Making caring a career: the role of the healthcare assistant. *Br J Nurs*. 2013; 22(17):1028–1029

Glasper A. The regulation of the nursing associate profession: an overview. *British Journal of Healthcare Assistants*. 2018; 12(1):38–41

Hatcher B, Bleich MR, Connolly C et al. Wisdom at work: the importance of the older and experienced nurse in the workplace. Princeton: Robert Wood Johnson Foundation, 2006

Health Education England. Workforce plan for England. 2017a. <https://tinyurl.com/y8fint2j> (accessed 13 February 2018)

Health Education England. Health Education England launches plan to ‘future-proof’ NHS and care workforce. 2017b. <https://tinyurl.com/ybhwqrqs> (accessed 13 February 2018)

Public Health England, Health Education England, NHS England, NHS Improvement, Department of Health. Facing the facts, shaping the future. A draft health and care workforce strategy for England to 2027. For consultation. 2017. <https://tinyurl.com/y7hzw2bw> (accessed 13 February 2018)

Royal College of Nursing. Who will care? Protecting employment for older nurses. 2011. <https://tinyurl.com/y8e3o9n6> (accessed 13 February 2018)

Royal College of Nursing. RCN welcomes workforce strategy consultation. 2017a. <https://tinyurl.com/ya2o42tg> (accessed 13 February 2018)

Royal College of Nursing. Debate: education and development. 2017b. <http://tinyurl.com/yan7vls7> (accessed 13 February 2018)

Royal College of Nursing. RCN welcomes Nurse First programme. 2017c. <https://tinyurl.com/y74drqrf> (accessed 13 February 2018)