

BMA

NHS Long Term Plan – Interim people plan

June 2019



British Medical Association
bma.org.uk

BMA summary and commentary

On 7th January 2019, NHS England published their [Long Term Plan](#) for the NHS. The plan sets out the strategic direction for the NHS in England for the next 10 years, but it was relatively light on information when it came to workforce, with much of the detail postponed until the publication of a 'workforce implementation plan' later in the year.

Baroness Harding, the Chair of NHS Improvement, was asked to lead on the development of the plan which involved establishing a steering group with broad stakeholder representation and a series of consultative working groups. The BMA was represented on the steering group at many of the working group sessions by senior officers, committee representatives and staff.

The interim workforce implementation plan, now called the '[Interim People Plan](#)' (published on June 3rd), moves the plan on a little from the original long-term plan document, but not significantly. This is not surprising given the very short amount of time given to developing this interim plan originally expected to be published at the end of March. The document makes positive noises around improving the NHS' working culture and expanding the workforce, but the next stage of stakeholder collaboration will be crucial to ensuring that the interim plan's fairly high-level priorities are developed into clear commitments and that funding is allocated to make these happen as part of the Spending Review.

This document summarises the major commitments in each of the Plan's chapters and our assessment of these. This is not an exhaustive list. A table including all of the 'actions' is included at the end of the plan itself and [annexed](#) to this document.

1. Making the NHS the best place to work

The main commitments set out in the interim plan:

- The final plan will include a 'new offer' to be developed 'with our people'. It will set out 'explicitly the support they can expect from the NHS as a modern employer'. This will be framed around the broad themes of creating a healthy, inclusive and compassionate culture, enabling great development and fulfilling careers, and ensuring everyone feels they have voice, control and influence. It will be the product of widespread engagement with our people, staff representatives and employers at a local level, led by the new NHS Chief People Officer nationally, resulting in an overarching national framework. The new offer will be developed over the summer of 2019 and published as part of the full People Plan.
- The process of engagement will be led by the new NHS Chief People Officer
- The new offer will form the basis of a 'balanced scorecard' that will incorporate the new offer, existing national standards and local priorities. It will become a central part of the NHS Oversight Framework and will inform future CQC assessment processes. It will be the first item on the agenda for all meetings of NHS England/NHS Improvement with NHS Providers, commissioners and systems
- An independent review of Human Resources and Organisational Development practice in the NHS with recommendations on how to bring them in line with the best of the public and private sectors
- A consultation on pension flexibility for senior clinicians, including an option to halve the rate at which their pension grows in exchange for halving their contributions to the scheme
- Action to improve equality will run through all elements of the work, including further action to embed the Workforce Race Equality Standard and Workforce Disability Equality Standard and action to close the gender pay gap and promote equality for women in the NHS.

BMA commentary

This section provides an outline of the processes that will be involved in 'making the NHS the best place to work'. We welcome the emphasis on the need for change, but the crucial element will be the detail of the 'new offer' which will be developed before publication of the final plan. While there is welcome recognition of the need to deal with bullying and harassment in the NHS and create a more positive and inclusive culture, more detail is needed on the specific measures planned to deliver this.

We welcome the acknowledgement of that fact that the current pension taxation system is leading to experienced doctors leaving the NHS and it is a positive step that the Secretary of State is willing to talk to the BMA about possible models for pension flexibility. From the modelling we have carried out, it is clear that the proposed 50:50 scheme alone is not enough to counter the disincentives for experienced doctors to continue providing NHS services, so wider reforms will be needed if retention is to be improved.

2. Improving the leadership culture

The main commitments set out in the interim plan:

- NHS England and NHS Improvement will develop a 'new compact' between leaders that will establish the cultural values and leadership behaviours expected from NHS leaders and the support and development NHS leaders need in return
- Develop a professional registration scheme for managers
- Develop an agreed set of competencies for holding senior positions in the NHS
- Support NHS boards to set targets for BME representation across their workforce, including at senior levels, and develop robust implementation plans.

BMA commentary

This section is short on new information, re-stating commitments from the long-term plan, including that the 'new compact' will take into account the recommendations from the recent [Kerr](#) and [Kark](#) reports, and that professional registration of non-clinical managers will be developed. These are positive proposals but clearly more work is required.

It is great to see that the interim plan commits to and recognises the need for a compassionate, inclusive and person-centred leadership culture. This has been a clear ask by BMA members at the recent undertaken as part of our Caring, Supportive and Collaborative flagship project. The challenge will be to make this a reality.

3. Tackling the nursing challenge

The main commitments set out in the interim plan:

- Grow the nursing workforce by over 40k by 2024 to keep pace with demand and make initial progress towards bringing down vacancy levels
- Aim to reduce the currently about 40k vacancies to 5% of this by 2028
- Expand the '[direct support programme](#)' to all trusts and into GP to boost retention. NHS Improvement and NHS Employers have been working with 110 NHS Trusts since 2008 to help them develop retention improvement strategies
- Expand clinical placement capacity by 25% – an increase of 5k

- Expand ambassador network and target 15 -17-year olds. The network has currently has 2,000 nurses and midwives across England actively promoting the profession in our schools and communities.
- Increase international recruitment and develop a new national recruitment framework
- Expand pilot programme for nursing associates who wish to continue their studies to Registered Nurse level

BMA commentary

This is one of the more developed parts of the interim plan, with many actions to inform the full people plan. It includes recognition that the changes to student nursing funding have been disastrous (a 31% decrease in applicants between 2016 and 2018) and notes the potentially negative impact of recent reductions in CPD funding (from £205m to £120m between 2013/14 and 2018/19).

4. Delivering 21st Century Care

The main commitments set out in the interim plan:

- Review later in 2019 possible further increases in medical school places
- Increase generalist training through the ‘internal medicine’ curriculum with medical schools prioritising and supporting generalist careers
- A national consultation on what is needed from the doctors of the future
- Work with the GMC to roll out medical credentialing
- A reformed associate specialist grade to be re-opened
- More structured career progression
- By 2023, employ 5k more physios and 2.5k more paramedics
- A national programme board will be set-up to address geographical and specialty shortages for doctors
- A consultation on prescribing rights for PAs (physician associates) will be launched within 2 years of regulation being introduced
- Develop ‘team design and organisational development’ principles to underpin the development of MDTs (multi-disciplinary teams). Current MDT models of working will be reviewed to ensure they are in line with long-term plan principles
- Develop healthcare science workforce programme to address urgent challenge
This will ensure workforce development activities are fully aligned with service requirements, and it will help fully embed the scientific knowledge and technology-enabled skills of healthcare scientists in multidisciplinary teams. As part of this workforce programme, more flexible entry routes and career pathways will be introduced,
- The full people plan will describe how 5k more doctors will be recruited to work in general practice

BMA commentary

This section covers a lot of ground with a range of high-level aims. Much of the detail of how these commitments will be achieved is lacking and will have to be filled in prior to the publication of the final plan, if genuine progress is to be made. It is good to see ‘step out, step in’ training, flexible careers and junior doctor wellbeing mentioned in the plan, but no further detail is provided.

The promise to launch a consultation on prescribing rights for PAs ‘within 24 months’ of regulation being introduced, while positive in principle, means that we are still a long way from PAs reaching their potential level of usefulness.

5. A new operating model for workforce

The main commitments set out in the interim plan:

- The interim plan describes principles for deciding at which level of the NHS structure decisions will be made on workforce activities, i.e. nationally, regionally, ICS (Integrated Care System), local employing organisations
- Develop an ICS 'maturity framework', with NHS regional teams and ICSs to agree respective roles and responsibilities. ICSs will be increasingly asked to take on responsibility for people planning and transformation activities, and for some workforce and people functions that have traditionally been carried out at regional or national level.
- A system-wide approach to international recruitment and apprenticeships will be developed

BMA commentary

In keeping with the common theme in this document, this section provides a range of commitments to do more planning and decision making. However, it does provide some idea of how decisions will be made about where responsibility lies for workforce planning.

6. Developing the full people plan

The final plan will be published on completion of the government's Comprehensive Spending Review and will:

- Set out how they will embed the culture changes and develop the leadership capability needed to make the NHS the best place to work over the next five years.
- Set out in more detail the changes to multi-professional education and training, career paths, skill mix and ways of working needed to deliver 21st century care
- Quantify in more detail the full range of additional staff needed for each of the NHS Long Term Plan service priorities
- Aggregate the people plans developed by local systems to build a more detailed national picture of demand and supply by skill sets
- Iterate local and national workforce requirements with the five-year digital transformation and efficiency plans

Annex

Table of actions

Action	Owner	Timescale
2019/20 actions		
<i>Making the NHS the best place to work</i>		
Develop a new offer for all NHS staff, through widespread engagement with our people and staff representatives, over the summer of 2019 for publication as part of the full People Plan.	NHS England/ NHS Improvement	By publication of the full People Plan
Develop a 'balanced scorecard' to become a central part of the NHS Oversight Framework and work with the Care Quality Commission (CQC) so that this balanced scorecard can inform the future development of the CQC's Well-led assessment.	NHS England/ NHS Improvement	By March 2020
All local NHS systems and organisations to set out plans to make the NHS the best place to work as part of their <i>NHS Long Term Plan</i> implementation plans, to be updated to reflect the people offer published as part of the full People Plan.	STPs/ICSs	By November 2019
Include more metrics on staff engagement in the NHS Oversight Framework to improve oversight of NHS trusts, commissioners and systems.	NHS England/ NHS Improvement	By March 2020
<i>Improving the leadership culture</i>		
Undertake system-wide engagement on a new 'NHS leadership compact' that will establish the cultural values and leadership behaviours NHS we expect from NHS leaders together with the support and development leaders should expect in return.	NHS England/ NHS Improvement	By September 2019
Develop competency, values and behaviour frameworks for senior leadership roles.	NHS England/ NHS Improvement	By September 2019
Review our regulatory and oversight frameworks, starting with the NHS Oversight Framework and (with CQC) the Well-led Framework to ensure there is a greater focus on leadership, culture, improvement and people management.	NHS England/ NHS Improvement	By March 2020
Support NHS boards to set targets for Black and Minority Ethnic (BME) representation across their workforce and develop robust implementation plans, as part of their <i>NHS Long Term Plan</i> implementation five-year plans.	NHS England/ NHS Improvement	By November 2019

Roll out talent boards to every region, co-ordinated and overseen by a national talent board.	NHS England/ NHS Improvement	By October 2019
Expand the NHS Graduate Management Training Scheme from 200 to 500 participants.	NHS England/ NHS Improvement	By October 2019
Engage widely on options for improving assurance of leadership in the NHS. Start to develop a central database of directors holding information about qualifications and history.	NHS England/ NHS Improvement	During 2019/20
<i>Tackling the nursing challenge</i>		
Significantly expand our Direct Support Programme to all trusts to improve retention, with a focus on supporting early years retention and reviewing best practice in preceptorship arrangements.	NHS England/ NHS Improvement	Immediately
Work with primary care to extend the retention programme into general practice, in addition to incentives to support entry to and return to general practice nursing.	NHS England/ NHS Improvement	By March 2020
Provide additional support in specialised areas where the need is greatest, including high secure hospitals and emergency departments.	NHS England/ NHS Improvement	By March 2020
Deliver a rapid expansion programme to increase clinical placement capacity by 5,000 for September 2019 intakes. Work directly with trust directors of nursing to assess organisational readiness and provide targeted support and resource to develop the infrastructure required to increase placement capacity.	NHS England/ NHS Improvement, Health Education England	By September 2019
Undertake a more comprehensive review of current clinical placement activity, identify outliers and provide support to remove barriers to expansion for future intakes. This will include options for expanding the provision of placements in primary and social care and explore how innovative approaches and best practice can support expansion.	NHS England/ NHS Improvement, Health Education England	By March 2020

Work with national partners to consolidate the current recruitment and perception campaigns run by different national bodies, to develop a single campaign that reflects the realities of a career in modern nursing at the cutting edge of clinical practice. This will focus on those branches of nursing with the greatest vacancies, address demographic issues, and support those local health systems with the biggest challenges by linking national and local initiatives.	NHS England/ NHS Improvement	Campaign developed by June 2019; campaign run through to March 2020.
Work with the Office for Students to agree a standard definition of attrition for all healthcare programmes and ensure this is recorded and reported in a way that enables better workforce planning.	Health Education England	By March 2020
Work collaboratively with higher education institutions (HEIs) to ensure every learner is well prepared for each practice placement and that every learner reports a meaningful placement experience	Health Education England	Ongoing
Develop a toolkit for supervisors and assessors to enable them to support the wide diversity of learners.	Health Education England	By March 2020
Develop a new procurement framework of approved international recruitment agencies for 'lead recruiters' to draw on, ensuring consistent operational and ethical standards.	NHS England/ NHS Improvement	By publication of the full People Plan
Develop a best practice toolkit for international recruitment, with NHS Employers and other national partners, to support employers by highlighting good practice in terms of practical and pastoral support to improve experience and ultimately retention.	NHS England/ NHS Improvement, Health Education England	By publication of the full People Plan
Work with the Department of Health and Social Care (DHSC) and professional regulators to support improvements to regulatory processes in relation to international recruitment, exploring where changes may help facilitate streamlining of registration processes and reduction of recruitment timelines.	NHS England/ NHS Improvement	Ongoing

Delivering 21st century care

Support local health systems (STPs/ICSs) to develop five-year workforce plans, as an integral part of service and financial plans, enabling us to understand better the number and mix of roles needed to deliver the <i>NHS Long Term Plan</i> and inform national workforce planning.	Health Education England, NHS England/NHS Improvement	By November 2019
Develop plans for further expansion of undergraduate medical placements.	Health Education England, DHSC	By March 2020
Implement post-foundation Internal Medicine Training to expand the number of doctors with generalist skills.	NHS England/ NHS Improvement, Health Education England	By March 2020
Launch national consultation to establish what the NHS, patients and the public require from 21 st century medical graduates to inform ongoing review of undergraduate and postgraduate medical education and training and support the General Medical Council in shaping curricular outcomes.	Health Education England	By November 2019
Establish a national programme board to address geographical and specialty shortages in doctors, including staffing models for rural and coastal hospitals and general practice.	NHS England/ NHS Improvement, Health Education England	By March 2020
Publish recommendations for effective supervision of doctors in training, and tools and supporting materials to deliver a measurable improvement in the capacity and quality of supervision across the NHS.	Health Education England, NHS England/NHS Improvement	By December 2019
Begin to implement the conclusions of the <i>Maximising the potential</i> report for specialty and associate specialist doctors; re-open and reform the associate specialist grade and ensure alignment with flexible training arrangements.	NHS England/ NHS Improvement, Health Education England	By March 2020
Roll out a voluntary two-year Primary Care Fellowship programme for newly qualified GPs and nurses entering general practice.	NHS England/ NHS Improvement, Health Education England	By March 2020
Provide training for an additional 7,500 nursing associates.	NHS England/ NHS Improvement, Health Education England	By December 2019

Develop a pipeline of AHPs by increasing applications to undergraduate AHP education and identifying how to expand clinical placement capacity, while supporting continuing education and training of AHPs in current practice including the development of advanced practice roles	NHS England/ NHS Improvement/ Health Education England	By March 2020
Establish a healthcare science workforce development programme to address urgent challenges, including improving data and analytics	NHS England/ NHS Improvement	By September 2019
Identify further ways to integrate volunteering within the NHS.	NHS England/ NHS Improvement	By March 2020
Establish a portfolio of free online learning modules for carers.	Health Education England	By March 2020
Begin work to review current models of multidisciplinary working within and across primary and secondary care.	NHS England/ NHS Improvement, Health Education England	By March 2020
Develop nationally accredited education and training standards for advanced clinical practice programmes for HEIs.	Health Education England, NHS England/NHS Improvement	By March 2020
Develop accredited multidisciplinary credentials for mental health, cardiovascular disease and older people's services, with a focus on multidisciplinary training in primary care.	Health Education England, NHS England/NHS Improvement	By March 2020
Update the Electronic Staff Record to reflect advanced roles.	NHS England/ NHS Improvement	By March 2020
Support every STP/ICS to put in place a collaborative approach to apprenticeships and provide further tools and practical resources to help them maximise the use of the Apprenticeship Levy.	NHS England/ NHS Improvement, Health Education England	By March 2020
Work with a cohort of providers to deliver youth volunteering opportunities in partnership with #iwill and the Pears Foundation.	NHS England/ NHS Improvement	By March 2020
Identify further ways to integrate volunteering within the NHS.	NHS England/ NHS Improvement	By March 2020
Deliver intensive training for boards and senior leaders to build tech and data awareness and capability.	Health Education England	By March 2020

Provide an accreditation/credentialing framework for digital leaders working at regional, system and local levels.	Health Education England	By March 2020
Start to develop a library of education, learning, knowledge and best practice resources to support the current workforce in expanding their digital skills (generic and specialist technology).	Health Education England	By December 2019
Work to develop and integrate digital education and learning resources into academic and professional curricula.	Health Education England	Throughout 2019/20 and beyond
Building on the Topol Review, carry out an audit to assess and plan for future digital roles and skills required.	Health Education England	By March 2020
Set out plans for an expanded NHS Digital Academy to develop digital leadership capability.	Health Education England	By December 2019
Establish the Topol Programme for Digital Fellowships in Healthcare.	Health Education England	By September 2019
Develop flexible career pathways, particularly for scarce roles, and establish early pathway initiatives for the future digital talent.	Health Education England	By March 2020
Continue roll-out of education and training interventions and multiprofessional workforce development programmes to support the NHS Genomic Medicine Service.	Health Education England, NHS England/NHS Improvement	Throughout 2019/20 and beyond
<i>A new operating model for workforce</i>		
Co-produce an ICS maturity framework that benchmarks workforce activities in STPs/ICSs, informs the support that STPs/ICSs can expect from NHS England/NHS Improvement and Health Education England regional teams and informs decisions on the pace and scale at which ICSs take on workforce and people activities.	NHS England/ NHS Improvement, Health Education England	By May 2019
Regional teams and ICSs to agree respective roles and responsibilities, associated resources, governance and ways of working.	NHS England/ NHS Improvement, Health Education England	By March 2020
Implement a collaborative system-level approach to delivery of international recruitment and apprenticeships.	NHS England/ NHS Improvement, Health Education England	By March 2020

Agree development plans to improve STP/ICS workforce planning capability and capacity.

NHS England/
NHS Improvement,
Health Education
England, STPs/ICSs

By April 2020

Actions to inform the full People Plan

Making the NHS the best place to work

Review the Health Careers website to ensure it is an attractive advertisement for a wide range of roles, entry points and benefits of working in the 21st century NHS and enables us to compete with other large national employers.

Health Education
England, NHS
England/NHS
Improvement

By March 2020

Commission an independent review of HR and OD practice in the NHS with recommendations about how to bring it in line with the best of the public and private sectors.

NHS England/
NHS Improvement

By March 2020

Improving the leadership culture

Develop resources to support the leadership teams of STPs/ICSs and primary care networks to enable them to create high-performing multiprofessional teams that collaborate across traditional boundaries.

NHS England/
NHS Improvement

By December 2020

Consider actions to encourage more clinicians and people from outside the NHS to take up senior leadership positions.

NHS England/
NHS Improvement,
Health Education
England

By March 2020

Review the support provided to NHS organisations by NHS England/NHS Improvement regional teams to ensure it is promoting genuine improvement and staff engagement. Implement annual 360 degree feedback from providers, commissioners and STPs/ICSs on the support they receive from both regional and national teams.

NHS England/
NHS Improvement

By December 2019

Tackling the nursing challenge

Develop a clear model that sets out the different entry routes into nursing, highlighting the different approaches and benefits, to inform employer and entrant decisions.

NHS England/
NHS Improvement,
Health Education
England

By September 2019

Expand the pilot programme for nursing associates wishing to continue their studies to registered nurse level.	Health Education England	Ongoing
Develop proposals for a blended learning nursing degree programme that maximises the opportunities to provide a fully interactive and innovative programme through a digital approach.	Health Education England	Ongoing
Consider options for how local health systems and employers can use job guarantee approaches, learning from and further developing existing local models.	NHS England/ NHS Improvement	By September 2019
Work with DHSC to review and identify how to improve the financial support programmes currently available through the Learning Support Fund (LSF), as well as considering how to streamline the process between applications for and awards of LSF payments.	NHS England/ NHS Improvement	In line with Spending Review
Work with government and the HEI sector to improve awareness of the overall financial support package, so that all undergraduate and postgraduate students are aware of the support available when studying and how it can be accessed.	NHS England/ NHS Improvement, DHSC	By September 2019
Undertake a detailed review of mental health and learning disability nursing to support growth in these areas.	Health Education England, NHS England/NHS Improvement	By September 2019 to inform Spending Review
Work with partners to consider the needs of the primary and community workforce (including district nursing, general practice nursing, health visitors and school nursing) to understand how we can support growth in these areas of practice.	Health Education England, NHS England/NHS Improvement	By September 2019, to inform Spending Review
Review how to increase both national and local investment in continuing professional development (CPD) and workforce development with the aim of achieving a phased restoration, over the next five years, of previous funding levels for CPD.	Health Education England, NHS England/NHS Improvement	In line with Spending Review
<i>Delivering 21st century care</i>		
Develop, with relevant partners, a range of options for expanding accelerated degree programmes and part-time study, to widen access to medical careers.	Health Education England	By March 2022

Evaluate flexible training programmes, including less-than-full-time and 'step out, step in' postgraduate medical training as part of the managed roll-out of these flexible arrangements.	Health Education England, NHS England/NHS Improvement	By 2024
Work with colleagues in the devolved administrations on this programme of work to create 21 st century medical education and training, and careers.	Health Education England	Ongoing
Explore development of a foundation training programme for pharmacists to help enhance the future clinical workforce for primary care networks.	Health Education England, NHS England/NHS Improvement	By March 2020
Explore new versatile roles for healthcare scientists in primary care and community health services.	NHS England/ NHS Improvement, Health Education England	By March 2020
Explore development of more flexible and alternative dental training pathways.	Health Education England	By March 2021
Progress reforms to the dental contract and support further integration of the profession into primary care networks.	NHS England/ NHS Improvement	Ongoing
Establish a Releasing Time to Care programme to set out a comprehensive and sustained programme of work to spread good practice and support continuous improvement	NHS England/ NHS Improvement	Immediate
<i>A new operating model for workforce</i>		
Develop an action plan to ensure more comprehensive and timely workforce data, available across national, regional, system and organisations.	DHSC, NHS England/ NHS Improvement, Health Education England	By publication of the full People Plan

