Health and Care Bill | Commons’ consideration of Lords’ amendment 29B in lieu, 25 April 2022

Summary

- We urge MPs to support Amendment 29B in lieu on workforce planning. This amendment, revised from the last time MPs voted on the Health and Care Bill, seeks to address some of the government’s concerns:
  - it requires the Secretary of State to publish a workforce assessment every three years, rather than two,
  - it revises down the maximum length of projections to 15 years to align with government’s own plans
  - and also removes the requirement for assessments to be independently verified.

A dedicated briefing on this amendment, and list of the over 100 organisations supporting it, is available here.

- The Royal College of Physicians was more than disappointed that government disagreed with Lords’ amendment 29 on workforce planning. Amendment 29B in lieu is a chance to find a compromise. The government’s non-legislative plans for a 15-year framework and an NHS long term workforce plan do not cut it. Ministers have removed numbers from previous workforce plans and strategies, which is why we need these independent assessments of workforce numbers to be a legal requirement.

- Regular, independent workforce projection data will not solve the workforce crisis, but a national assessment of the health and care staff numbers needed now and in future to meet demand will provide strong foundations to begin putting the workforce back on a sustainable footing and support more strategic spending decisions. Without a demand-led numbers-based plan, the NHS cannot properly plan or make the best use of public money. We hope MPs will support and vote for Amendment 29B in lieu to find a compromise on this issue.

Health and care workforce

Throughout the passage of the Health and Care Bill, the RCP has been part of a coalition of over 100 health and care organisations calling for strengthened accountability and transparency on workforce planning in the bill. These 100 organisations wrote to the prime minister last month urging him to accept Lords amendment 29 and strengthen workforce planning in the bill, saying “recovery of our health and care services will be fatally undermined without a comprehensive workforce strategy that addresses endemic staff shortages by projecting future demand and supply.”

The RCP was disappointed that the government disagreed with Lords amendment 29 on workforce planning in March. Amendment 29B in lieu provides an opportunity to find a solution on this important issue. Amendment 29B in lieu seeks to address some of the government’s concerns:

- it requires the Secretary of State to publish a workforce assessment every three years, rather than two;
- revises down the maximum length of projections to 15 years to align with government’s own plans, and;
- removes the requirement for assessments to be independently verified.

For more information, please contact Louise Forsyth, public affairs manager | louise.forsyth@rcp.ac.uk.
As originally drafted, the duty for the Secretary of State to publish a report describing the system in place for assessing and meeting workforce needs does not go far enough. The non-legislative approach taken so far has not worked. We must put measures to adopt a sustainable long-term approach to workforce planning on a statutory footing. Without credible up to date numbers, the system cannot plan. **We hope government and MPs will support and vote for Lords amendment 29B in lieu to Clause 35.**

Workforce is the biggest limiting factor in the government’s ambitions on health and care. We recognise there are record numbers of staff currently working in the NHS, but as the RCP president set out in the Observer, ‘record numbers’ tell us very little about whether we have enough staff to match demand. The experience of the public, and of staff themselves, is that we do not. According to the NHS Staff Survey 2021, published on 30 March 2022, over half (52%) of NHS frontline staff said that they cannot do their jobs properly because of a shortage of staff. According to the RCP Census, 48% of advertised consultant posts went unfilled across the UK in 2020 – the highest proportion of unfilled posts in almost a decade, mostly due to a lack of any applicants at all.

Overstretched staff have significant implications both for safety and quality of care for the public and retention of staff. 31% of staff said in the NHS Staff Survey that they were considering leaving the NHS – up from 26% the previous year. A lack of staff is a key cause of burnout among healthcare workers, and will significantly impact the ability of the health service to bring down waiting lists.

Government continues to dismiss amendments on workforce planning on the basis that the Department of Health and Social Care (DHSC) has commissioned a ‘long-term strategic framework’ or ‘Framework 15’ – to look at the drivers of workforce supply and demand. It has also asked NHS England (NHSE) to produce a long-term workforce plan. But Framework 15 was first published in 2014, last updated in 2017, and yet there is no publicly available assessment of workforce numbers now nor into the future. And according to Baroness Harding, government blocked the inclusion of projected staff numbers in the last NHS workforce strategy the People Plan. **A workforce plan without numbers doesn’t add up.**

Without projections, there is no way to assess how changes in workforce trends, such as retirements or working part-time, will impact the delivery of healthcare. For example, the Royal College of Nursing expects 52,000 nurses to retire in the next few years and the RCP census revealed that 41% of physician consultants in the UK are expected to retire over the next decade (taking average retirement age of 62.4 years). At the same time, around 56% of medical trainees entering the NHS are interested in working part-time. These changes will have significant implications for workforce planning over the next 10 years. Regularly published workforce projections will allow government policy and planning to capture and plan for these shifts in a way that the current approach of ad hoc and infrequent publications does not.

The proposed assessments in Amendment 29B in lieu do not aim to provide false certainty but a reasonable assumption over 15 years, with check ins every 3 years to adjust as necessary. All large organisations undertake workforce planning exercises, and the NHS and social care system should be no exception.

**Amendment 29B in lieu is a vital opportunity to strengthen workforce planning so we know how many staff will be required now and in future to meet patient demand.**

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