

HUMAN CAPITAL MANAGEMENT

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What are important issues to consider in estimating the internal and external supply of human resources, focusing primarily on the shortage of nurses?

Introduction

Assessing the internal and external supply of human resources and more to a point the factor that relates to the shortage of nurses, entails factors considered in the availability as well as distribution of the nursing staff. The focus areas entail demographics, educational pipeline, turnover rates, polity, UE, tech, migration, and pandemics and public health emergencies. With this background, this paper will discuss factors contributing to the aforementioned issue in order to establish a clear picture of the nursing shortage and ways of addressing them.

Demographic Trends

Aging Population: This is due to the fact that with advancing age, people's necessity for health care escalates (Sleeman et al., 2019). This is even more valid in developed nations, as is evidenced by the swift increase in the elderly population. Patients of geriatric age are usually more prone to have more medical needs, frequent illnesses, more chronic conditions, and therefore, more demand for long-term care, and consequently, more nurses (Boyd et al., 2019). Therefore, to forecast the demand for nurses in the future, one has to research certain characteristics and tendencies of the population, especially regarding factors such as age.

Nurse Retirement: The nursing staff itself is aging, implying many of its members are close to retirement age. The absence of experienced nurses in the workforce can cause a loss as they were to offer experience to other young nurses. The main reason for estimating the nurses who will retire within the next coming years is crucial in the development of the workforce and production of enough nurses to replace the retired ones.

Educational Pipeline

Nursing School Enrolment: The enrolment of students who take nursing programs determine the future supply of the nurses (Williams et al., 2018). Some of the influential components that determine enrolment levels include perception that the nursing profession is appealing, availability of nursing programmes, and enrolment capacity of learning institutions. It would

help to include raising awareness about the profession to get more students, raising more capacity for incoming students, and giving scholarships as well as grants to the students.

Accreditation and Licensing: Policies relating to nursing education and practice standards can affect the population of qualified nurses (Drennan and Ross, 2019). Other important factors to occur in estimating the future supply include accreditation standards, licensing exams, and continuing education. In order for their capacity to maintain a steady supply of nurses to be effective, educational programs must be of the highest quality and at the same time affordable.

Faculty Shortages: There is a scarcity of qualified nursing faculty which hinders the abilities of the nursing education programs to admit and prepare more students (AlThiga et al., 2017). This can be resolved by providing incentives for nurses going back to school and entering into academia and research, better employment conditions and pay for nursing faculty and using distance learning and technology enhanced learning teaching strategies like online courses and use of simulators.

Attrition Rates

Burnout and Job Satisfaction: Factors such as stress and burnout, often associated with low job satisfaction are some of the leading causes of high turnover within the nurses' fraternity. Knowledge of the stressors at work, resulting in burnout, is also very important when it comes to formulating a strategy for employee retention. These might include working conditions, stressing on mental health and promoting a good working environment.

Career Mobility: Nurses have job opportunities in various clinical and non-clinical areas and in and out of the health care facilities like advanced practice roles, administrative and others. Although career mobility is an advantage for individual nurses, it has the disadvantage of decreasing the number of staff in direct patient care (Donley, 2019). Approximating how break-even career mobility will affect the number of nurses requires showing trends that exist concerning career pathways of nurses and then finding out how to match career ladder circulation with the need for sufficient staffing levels.

Policy Changes

Healthcare Policy: Various policies made by the government and the changes in the healthcare system can affect the demand and supply of the nurses. There are broad consequences when it comes to health policy decisions regarding health funding, staffing of nurses, scope of practice and immigration. For instance, such policies that make the actions of nurse practitioners more independent may help to change the dynamic of demand within the nursing profession. It is imperative to monitor policies in relation to the nursing workforce and engage in policy campaigns meant to solve issues of shortage of nurses.

Workforce Planning Initiatives: Workforce development on national as well as regional levels should focus on nurse shortages in an area and strive to mitigate it through strategic planning procedures (Drennan and Ross, 2019). Such programmes have been universal and are normally conducted in collaboration with the government, schools and care facilities. Workforce planning is not just a data gathering process, but it involves data analysis and modelling as well as a collaborative process in attempting to ensure that there will be enough nurses to meet demand.

Economic Factors

Wages and Benefits: Wages and remunerations should also be competitive since they are some of the vital factors that determine the ability of health institutions to retain their nurses. They also attributed the use of wage stagnation or cuts, common in economic difficulties or in organizations' financial situation, as negative aspects for the occupation. It is also very relevant to ensure that the nurses are compensated fairly in accordance with the level of skills and the type of contribution they offer to the field.

Cost of Education: Another challenge of nursing education is cost which hinders potential students from pursuing the course. For this to be solved the government needs to come up with means of paying the amount through scholarships, grants, and loan forgiveness. The importance of decreasing the cost incurred by nursing students is to call more people to the nursing profession and to contribute to the growth in the number of nurses.

Technological Advancements

Healthcare Technology: EHRs, telemedicine and other technology-based practices that are emerging in the nursing care delivery system and communication between care providers can influence the nature of work done by the nurses, where it is likely to reduce the demand for some types of the nursing tasks while at the same time enhance the importance of technology competent nurses (Shen et al., 2021). It is for this reason that ANA stresses the need to understand how technology will affect the various roles in nursing workforce planning.

Migration and International Workforce

International Recruitment: One of the ways through which there could be an attempt to solve domestic shortages is through recruiting nurses from other countries. However, it is affected by the immigration policies, certification of foreign qualifications and ethical issues in the source countries. It is vital to recognize that these internationally recruited nurses require adequate support and assimilation into the county's healthcare system in order to benefit from their services.

Global Mobility: Global mobility makes the relocation of qualified nurses from one country to another possible (Kingma, 2018). Knowledge of pull and push factors likely to attract and compel nurses to migrate with regard to economic opportunities, working condition remunerations, and political instabilities are so vital in strategic planning for the future. In this statement, the use of foreign recruitment and agreement procedures is seen as a way to build and retain ethical trained foreign nurses.

Effects of Pandemic and public crisis

COVID-19 Pandemic: In this paper, the current and future effects of the COVID-19 pandemic on nurse staffing are explored which reveals that it has illuminated and aggravated existing issues regarding nurse scarcity. The fluctuations in demand have led to new cases and worsening of existing cases and at the same time the morale and retention of the workers have been affected thus leading to burnout and attrition. Pandemic experiences and how organizations can prepare and encourage nurses' retention during similar situations is an essential topic to reflect on.

Preparedness for Future Crises: Preparing for future public health emergencies entails making provisions for adequate personnel so that nurses especially, can be well trained and ready to combat the situations (Boyce and Katz, 2019). This needs the facilitation of funds and training for emergency preparedness; developing sound workforce plans; the establishment of policies for the health, strength, and sustenance of the nursing workforce.

Strategies for addressing nursing shortage

Retention Programs: Work on satisfying committed staff in terms of jobs; satisfying the emotional health of these people, and supporting trained personnel and creating viable careers for them will help retain nurses. Several studies show how horrified worker's levels of burnout and turnover rates are negated when a positive work environment is fostered.

Expanding Educational Capacity: Efforts to expand enrolment and raise the training capability of faculties through curriculum development, staff improvement and technological enhancement of the learning systems is achievable in nursing colleges which are solutions to the flow constraint. Working more closely with schools to enhance program sizes and develop routes for learners who started in other fields may help raise production of nurses.

Policy Advocacy: To sustain the nursing workforce, the policies that will require support include funding for nursing education, working conditions, and appropriate number of patients per nurse (Buchan et al., 2022). This paper argues that one way of solving some of the factors that lead to lack of nurses is by partnering with political leaders and other players in the formulation of supportive policies.

Technological Integration: Using technology to perform and reduce those tasks that can be delegated to other individuals or technology, increase overall productivity, and manage patients' care can lessen the effects of having fewer nurses. Telehealth, tele monitoring and automatic documentation are some of the technological interventions which can enhance the work of nurses and minimize their bureaucratic tasks.

Using available information from newspapers, the NHS website, and other government websites, conduct a position analysis for doctors working in the NHS

Job description

The National Health Service in the United Kingdom is one of the biggest public health services globally, which utilises a great variety of health care professionals, including doctors (Graham-Clarke et al., 2019). In a position analysis of doctors in the NHS, it is necessary to analyse factors like the doctors' population data, the environment, person specification and opportunities. The newspaper articles along with the NHS official website and other government related websites have been used to carry out this analysis and offer a summary.

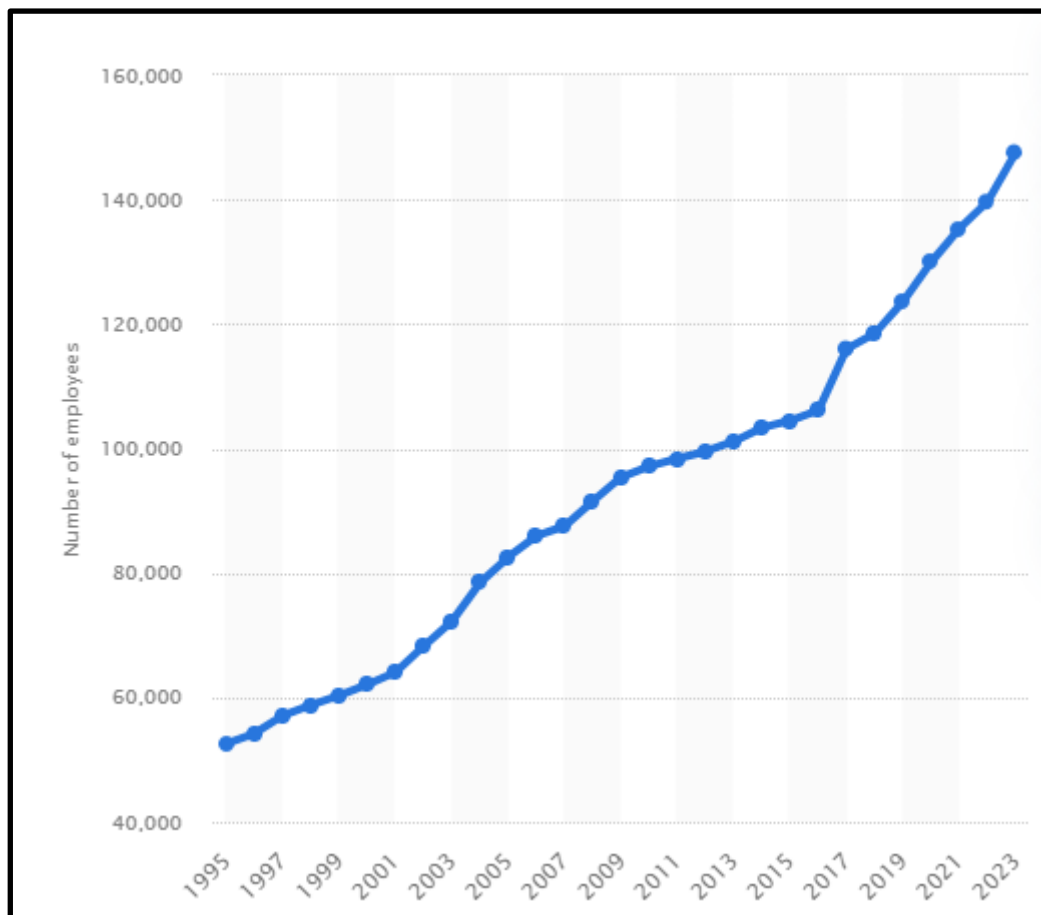


Figure 1: Number of doctors in the NHS Hospitals and Community Health Service (HCHS) workforce England from 1995 to 2023

(Sources: Statista, 2023)

NHS currently hosts around 147,622 number of doctors serving in different specialties and different ranks by the year 2023. Also, it has 669,873 Professionally qualified clinical staff which includes all HCHS doctors, qualified nurses and health visitors, midwives, qualified scientific, therapeutic and technical staff and qualified ambulance staff (Digital, 2023). Current lists of doctors show that female personnel have increased its percentage to almost 50% in the NHS. A significant data shows the age distribution of the employed NHS doctors; many of them are relatively old and approach the retirement age.

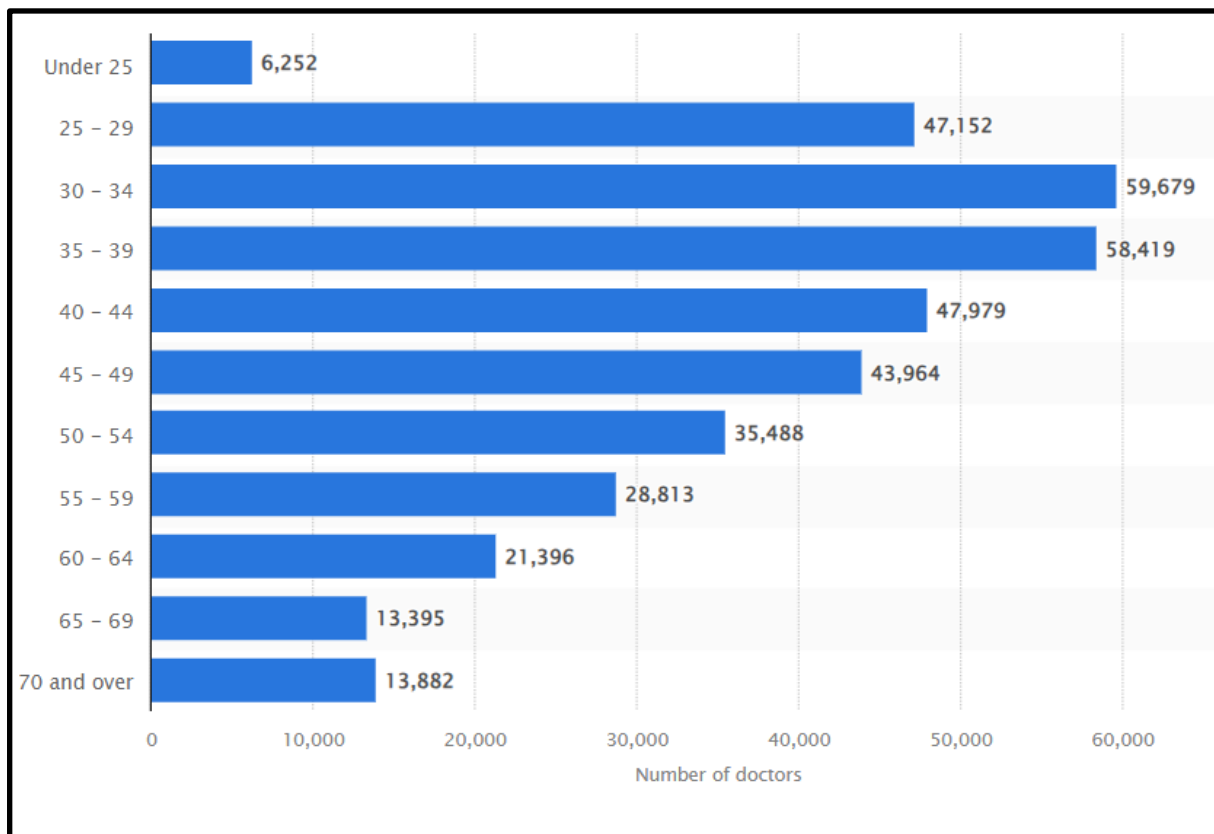


Figure 2: Number of registered doctors in the United Kingdom (UK) in 2022, by age

(Sources: Statista, 2023)

The above graph clearly demonstrates that there are more than 45,000 doctors who are near or above 65 which means that they are eligible to take their pension.

Person Specification

The person specification for the position of NHS doctors has significant qualifications like registration in the GMC and credible degree of MBBS with sufficient training after graduation. The essential experience for any individual applying for this position needs to have strong communication skills, clinical practice in a speciality and good collaborative skills to work with

a team. Also, it is essential that the principles related to the safety of patients and guidelines followed in NHS are properly understood by the individual.

Working Conditions

Workload and Hours: Working in the NHS are challenging for the doctors as they must work for long hours and deal with a large number of patients. Current junior doctors have complained about long working hours coupled with its negative repercussions as far as their health and that of the patient is concerned. The working time directive deals with reduction of working hours in Europe, but implementation and enforcement differ.

Pay and Benefits: NHS doctors' remuneration system consists of a base salary with spine and supplement for weekend and overtime working, and for private practice. As is common with larger organizations and government institutions, the NHS offers job security and excellent benefits such as pensions and paid annual leave; however, there have been constant struggles over the terms of service and pay specifically for junior doctors and general practitioners.

Staff Shortages: The NHS has a severe problem of staffing shortage in many different fields of medicine (Lordslibrary, 2024). Brexit is also an area of concern as it created an ambiguous working status of EU employees in the NHS; the COVID-19 crisis has also contributed to workforce turnover.

Burnout and Mental Health: Stress and burnout present themselves in NHS doctors, and are fairly widespread. The BMA says more should be done to support workers' mental health, as well as addressing sources of pressure at the workplace (BMA, 2024). Some interventions that are taken to deal with this issue are availing of counselling services and encouraging work-life separation.

Training and Career Progression: Doctors pursuing their training in the NHS take a long time to complete their training and entails over ten years in training. Career mobility can, however, be rigorous, in aspects such as competition in attaining specialty training posts, or clinching a place as a consultant. There are also fears arising from training changes that include the Medical Training Initiative and the change in the junior doctor's contract.

Opportunities

Career Development: The career progression and career development possibilities in the NHS are enormous besides the numerous specialties. Thus, the opportunities for doctors include specialization, research, and leadership. An emphasis placed on continual professional development is made with programs for training, conferences, and grants for advanced learning made available.

Innovation and Research: The NHS takes central position in terms of research and development in the medical field as well as in Britain (Pandya-Wood et al., 2017). This implies that doctors practicing in the NHS can engage in research, trials and development of recommending treatments. Working with universities and participation in schemes like the National Institute for Health Research (NIHR) improves the prospects.

Public Health Impact: This means that by working for the NHS doctors will be able to extend their impact on people, and in extension be able to serve a much larger population. Some of the components of the NHS's strategic plan, namely, increase in focus on preventive care, Community Health, and reduction of health inequalities are supported by key professional values.

Government and Policy Initiatives

NHS Long Term Plan: The solutions described in the document include measures for resolving HR issues, revising patient experience, and facilitating the integration of NHS. Some important objectives include the need to produce more doctors, developing and upgrading training initiatives and offering better personnel conditions. As a critique of the plan, it focuses on the following major areas: prevention, digital, and precision medicine.

Workforce Development Programs: To increase available healthcare staff, the government has recently started numerous campaigns to strengthen the NHS workforce (Buchan et al., 2019). These are as follows; increasing the number of medical schools, offering inducements for doctors to practice in shortage areas, and participating in the process of attracting doctors from other countries. For instance, the GP Retention Scheme and the International GP Recruitment Programme are some of the strategies meant for certain workforce deficits.

Conclusion

In context of the position analysis of doctors working at the NHS, it is identified that the environment is quite complex and challenging. On the side of the benefits the NHS provides ample opportunities to advance in one's career, foster innovation, and contribute to the wellbeing of the general population, there are several threats which include staff deficits, burn out, and work-related stress. These issues can only be solved through a multifaceted approach that includes the actions of the government, strategies with respect to the workforce, and support that is provided to organizations.

Measures to address working conditions, training and career development, and staff mental health are vital for sustaining the efficiency of the NHS. Thus, supporting the representatives of this profession and their personal development, the NHS can maintain the quality of services and address epidemiological challenges that affect the population.

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