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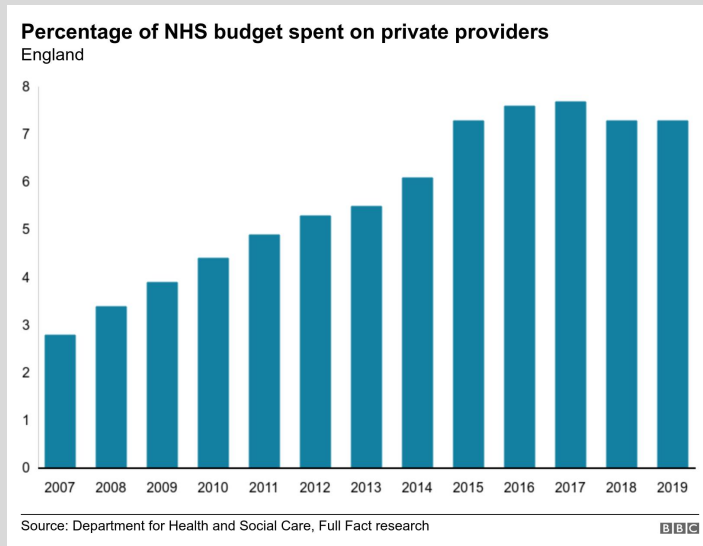
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1. Overview of the many problems in the health and social care system

There are numerous different serious problems facing health and social care today and directly having a massive negative impact on the health care system, not only affecting the stakeholders but leading to an extremely overwhelmingly poor service for the individuals in need of health care and in need of the usage of those services. From these multiple problems, an example which is quite vital and relevant today would be the health and social care

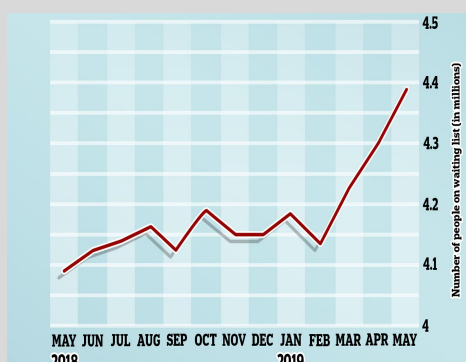


funding. Many statistics and studies show that the United Kingdom fundings of health and social care have not met the actual demand, spending only being increased by as low as 1.6% in the last 4 years. (shown in figure 1) This is critical as the population size increased massively, leading to a higher demand, needing more investment in this sector than what it is currently invested. This issue has led to significant hospital deficits meaning lots of resources are lacking and a direct shortage of staff is cause, an extremely massive maintenance backlog with many mandatory

Figure 1.

repairs needed to be done. Moreover, another issue facing the Healthcare system, more specifically in the NHS, is the performance as well as waiting time. Crucial parts of the NHS in England are shown to have the worst performance against waiting times targets since those targets were initially set. Not only including the enormous proportion of people waiting for over four hours when going to the A&E departments but also an extremely large proportion of people waiting for over 18 weeks for non-urgent (but essential) hospital treatment. An example of a disease treatment specifically being delayed is cancer. The target for treating cancer patients within 62 days of urgent GP referral has been unsuccessful for over 5 years, and statistics/surveys in studies provide evidence which suggests even more people are experiencing lengthening delays in getting GP appointments.

Figure 2.



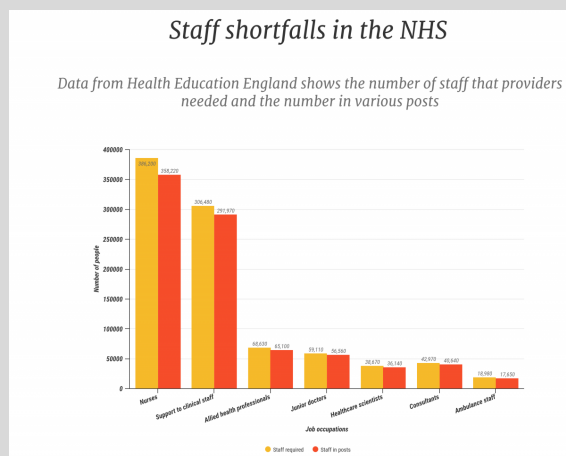
In addition, in figure 2, evidence is provided as a graph, showing a massive increase in the waiting list waiting time for patients in the United Kingdom. These are crucial as some diseases, if not treated on time, could lead to the death of a patient. The most common are those needing organ transplants, for example a patient in need of kidneys.



Another example of a critical issue facing the healthcare system is communication. Communication is exchanging information with the aid of various mediums, for example as speaking, writing or body language. It is of great importance in the field of health

and social care. Successful physician-patient communication is extremely important and the reason for this is directly related with positive and favourable health outcomes including not only increased patients satisfaction, compliance but overall better health status. Researches and statistics show that the clinician's capability to listen, explain as well as empathize verbally and physically (facial expressions/body language) can have an extremely profound effect on biological and functional health outcomes as well as patient satisfaction and experience of care. In order to achieve good communication, Clinicians and other members of the healthcare team undergo massive encounters with patient interactions during their career. Therefore, having Poor communication is one of the most vital issues facing the health system. Miss communication could potentially and possibly result in many different negative outcomes, such as decreased adherence to treatment, patients dissatisfaction, inefficient use of resources, reduction in the quality of care, poor patient outcomes, wastage of resources, and high healthcare costs. Communication failures very quite often have a negative effect on patient and staff satisfaction. This problem comes up when potential barriers in the patient-employer conversations intervene. These often include Abstract Competing demands, lack of privacy, and background noise. However, the Patients' ability to successfully communicate effectively could also be affected by their condition, medication, pain and/or state of mind(might experience anxiety).

Figure 3.



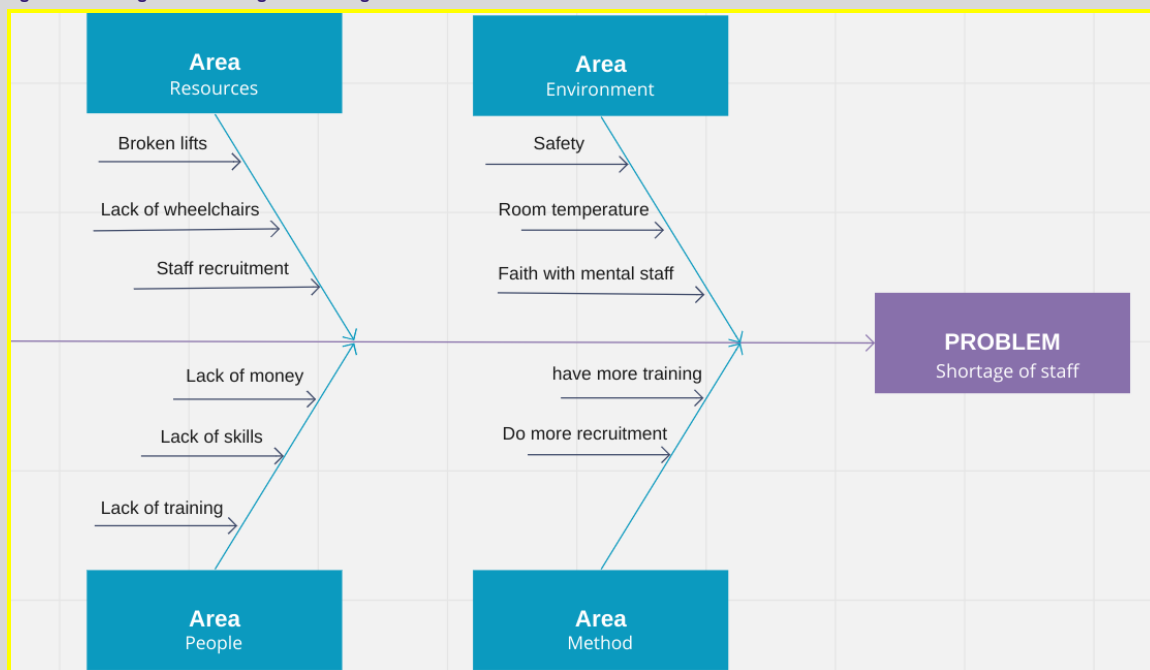
Finally, another problem facing the healthcare system and negatively impacting not only members of staff and patients but also the economy is shortages in staff. In figure 3 we can see in red the working staff vs orange the needed staff. As this issue impacts a lot of sectors, it will be discussed in more depth in this report.

2.Staff shortages in the health care system

Although there are many issues in the healthcare system as mentioned above, this report will mainly focus on 'Shortage of staff', the impact it has and the solutions, likely to improve this issue. This report will focus on this issue as it is the most major and difficult challenge for health systems world widely to secure a skilled workforce and avoid staff shortages as well as avoiding any negative impacts of those going wrong. The number of health care workers employed by the NHS providers in England in the present decade has increased by just half the rate of the 2000s, even though the demand is higher than ever and it is constantly growing. This therefore leads to the result that the health and social care system will have a workforce shortage of around 100,000 staff. The areas which are impacted by this problem include political, economical, social, technological and environmental sectors. The essential root cause of the shortages of staff in the UK is the failure to invest in the training of staff. Data on the specific number of graduating nurses per head shown by Organisation for Economic Co-operation and Development shows the UK was towards the bottom of the table meaning the situation is critical. Statistics show that without concerted policy action and dedicated investment, the health and social care system, the NHS shortages of staff could increase to up to 200,000 by 2023/24, followed by the minimum of 250,000 by 2030. The most concerning area being, Nursing with present shortages of more than 40,000, possibly doubling by the end of 2023/24 to exceeding 100,000 by 2028/29. Politics have been the biggest cause of this as the government is failing to invest in training of enough nurses. The solution which the government came up with in 2017, that of removal of nurse bursary and introducing the expansion of higher education did have a limited impact and caused a slight increase in staff but not a good enough one, meaning the politicians are failing to implement stronger and better ideas, and the government is failing to fund this sector. Furthermore, this creates another political issue which is that the failure to train, retain and provide new staff in the UK leads to the country being extremely heavily reliant on international recruitment. In order to actually make up the shortages, around 5000 nurse workers a year until 2024/2025 need to be recruited in order to fix the issue, also this applying to the other health and social care sectors. It is of big threat that politics will be of a larger cause to create shortages of staff in the coming years, this is mainly because of how reliant the country is on international recruitment. with 40% of the health and social care workers coming from abroad, with a quarter of a million people coming from beyond the UK to be employed in the health and social care system, BREXIT and an immigration policy could cause more damage to this sector than good. This therefore will be a big threat as the NHS is a public institution and the country's separation from the European Union would mean that large and extremely deep impacts will happen to its functional capacity. This concern has been shared and agreed on by many experts stating not only it would have a political effect but also an economic one. This will mainly be caused by the lack of personnel, causing the NHS to face a scarcity of staff. As politics is linked to economics, another economical cause of this shortage of staff is the 2008 economic crash in the United Kingdom. Since then, the health and social care system has been facing extreme difficulties and this financial fallout has led to lack of both resources and staff. Less

resources automatically means less equipment and so less personnel being able to work simultaneously leading to jobs being lost and staff being fired. The economic fallout also directly caused shortage of staff as the system was under extreme pressure to decrease the salaries of those working meaning a large number of staff have quit or resigned, followed by their replacement of less skilled new personnel. Even though this economic crash has happened over a decade ago, statistics show that the system is failing to recover ever since and is unable to operate at the same level as before. Moreover, environmentally speaking, staff shortages could also be because of the area the provider of care is in. To be more specific, a few studies have shown that a general lower supply of staff is associated with staff shortages meaning therefore, more rural areas where the qualified personnel is less, are faced with higher staff shortages than an urban, metropolitan area such as London. To add on this, society also has an impact and plays a role in staff shortages as social influence directly affects this matter. Hospitals which are larger and more modern directly face less staff shortages as more potential workers apply to these more attractive opportunities. This therefore means that the size and looks of the hospitals also play a role in staff shortages, with more attractive ones creating more attractive workplace hence less shortage problems.

Figure 4. Fish diagram illustrating staff shortages and its causes



In figure 4 it is illustrated and clearly stated what the causes from different areas for staff shortages are. Resources cause shortage of staff to be a problem as the less staff recruitment, the less new staff, meaning when old personnel leave not enough employees replace them. The lack of resources also causes staff shortages as when a hospital does not have enough equipment, it is less attractive in comparison to one that would have last generation machinery and equipment. People related causes include the lack of skills of the new health and social care graduates as well as lack of training and experience. Moreover, a major cause of shortage of staff, as illustrated above, is also the lack of

money, meaning lower wages provided and no bonuses/extra pay to increase job applicants. The main methods of overcoming this include doing more recruitment and more training of the personnel.

3.Impact of staff shortages problem on stakeholders

Statistics show that the overall average age of the United kingdom's population is constantly and rapidly increasing at a fast pace. This therefore means that there will be even more pressure on the stakeholders of those health and social care providers. This is mainly because with age, many health issues appear and the increase in certain diseases is unavoidable; levels of diabetes, cancers, coronary diseases, dental problems, mental health in dementia or Alzheimer's patients are scientifically known to increase with age. This added pressure together with the shortages in staff on the health and social care system, making it extremely hard for the stakeholders and those organizations to meet up the expectations and provide good quality services and treatments. Even further pressure is put upon the members of staff and owners of those organisations as patient knowledge has grown. This means that patients are now more than ever aware and informed about the nuances of the health and social care system as well as how it should operate meaning a lot of pressure is put as expectations of extreme quality of service is extremely high. Having shortage of staff in the health and social care system therefore deeply affects the service users, professionals as well as the stakeholders. Less staff will directly cause even further poor quality of service leading to patient frustration. Professionals could also start to perform poorly as more tension is placed upon them and they are expected to perform the workload of what two or more members of personnel should, which is extremely unrealistic. The owners of those organisations would be under constant stress and many complaints would be raised to them which creates a very controversial and poor environment to work in.

4.Analysis of decision making process including relevant legislation

Regular workforce planning plays a key role in the health and social care system, for example, the NHS, is the largest employer in the United kingdom in this sector and it aids in ensuring there are enough members of staff possessing the correct skills needed for the specific job at the right time. This involves a deep analysis of decision making done by the stakeholders and informs the commissioning of training places. The decisions include recruiting from overseas which is a part of a workforce strategy. This needs to be done by taking into consideration the organisation's own workforce data on vacancy and turnover and data on the country's situation, also as well as financial considerations of the health and social care system. When making a decision it is advised that rather than acting as individual employers, organisations should be collaborating with local and regional partners and discuss existing experience, as well as being enable the sharing of processes and/or costs associated with recruitment. An extremely specific example for a programme put in place for international recruitment would be the pan-London Capital Nurse programme, which was started in 2015 in order to develop a sustainable local nursing workforce,also known to develop

the best practice overseas recruitment guide. In this guide the decision making is employer focused, with them being advised to decide to recruit international staff in cohorts in order to support them efficiently through their induction and training. Due to the worldwide shortage of healthcare professionals employers need to recruit ethically and this is an extremely vital part of decision making. Employers are therefore strongly advised to stick to and respect the UK Code of Practice (CoP) for national as well as international recruitment.

5. Alternative solutions

There are numerous solutions that could solve the staff shortages in the health and social care system. Firstly, in order to avoid current shortages the fastest way would be the adoption of flexible working practices, such as not only overtime hours but also flexible part-time working as the flexible working could possibly aid retention. Moreover, raising wages as well as improving fringe benefits and/ or altering working conditions into better ones could lead to job places being more attractive to existing/ new workers decreasing staff shortages directly. Temporary solutions could also include persuading older workers to delay retirement as well as recruiting temporary labour to match the high peaks in demand. Also, respectfully advising existing staff to increase work effort and output as much as possible in order to help delay the need for additional workers while addressing shortages. In addition to that, addressing inequalities in career progression, pay and recruiting members of staff by tackling gender, race and other discriminatory inequalities, could potentially aid national workforce attraction and decrease shortage of staff. The government should also aid by investing more in training and education in order to improve the supply of skills available by considering the expansion of more training places as well as apprenticeships. A larger financial investment could also aid staff shortages through automation, as many machinery could replace manual work. In addition to that, offering financial help to health and social care students could also improve the number of yearly applicants as the cost of living while studying and training for such qualifications is a very significant barrier to many who cannot afford it and cannot work another job while completing these qualifications. This is extremely essential as most individuals who study for those qualifications are actually older people who have families and other responsibilities; a solution to decrease that could be also promoting these jobs to younger generations. The government should also strongly consider investing more in international recruitment as mentioned before in this report. Although there are many solutions and some might not be as possible as the others, something that can be done by the management and owners of those organisations would be contacting charities who recruit volunteers. An example of such charity is Royal free charity. Although volunteers most likely and most often lack essential skills they could help decrease the workload on the personnel by doing simple tasks, allowing the staff members that are actually hired to strain the use of their skills and use their potentials and unique qualifications as much as possible.

What also could be done by those organisations is promoting those job roles which the United Kingdom is short on, to the younger generations through social media and advertisement as well as through their places of education.

6. Conclusion

There are numerous problems facing the health and social care system and as this report focused on one, which is the shortage of staff, a conclusion that all of the problems are potentially interlinked could be presumed. This is mainly because when there is a shortage in staff automatically there will be problems in the communication between members of staff, colleagues and patients. This is mainly because when there is less personnel and extreme demand for work, the staff become rushed and stressed, possibly leading to mistreating the service users, possibly making mistakes in the service or miss communicating information; if these mistakes occur then many other problems arise. In addition, poorer quality of service would be generally provided and a more tensioned environment would be created making the service extremely unattractive to customers. A final point to be raised and which should emphasise the importance of this report is how relevant staff shortages are right now. COVID-19 has increased the number of patients in all of the health and social care services, with more patients needing hospitalisation. Moreover, more social workers are required to work as more elderly need aid to do basic daily tasks if infected with coronavirus. The workload and stress on current employees is as high as ever, not only by the demand of work but also for their vulnerability to the virus. COVID-19 has shown how vulnerable the United Kingdom's health and social care systems are as many employees have sadly gotten infected while working, forcing them to take days of work out, meaning even more staff shortage is currently being faced. In order to avoid more staff getting infected, more precaution should be taken however this pandemic should strongly raise red flags on the need to take action and cause change in this sector by actively coming up and applying solutions to the issue. Solving the shortage in staff in the health and social care system is a slow process and might be impossible to fix in the next few years however more should be done in order for this issue to potentially one day be solved as there are many options and possible solutions that could be applied and could be successful at repairing this issue.

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