



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

Assignment Title:

COMPONENT 1 - INDIVIDUAL REPORT

Programme: MBA - Master of Business
Administration

Module: HUMAN CAPITAL
MANAGEMENT

Module code: LCMB7023

Lecturer: Nishi Ramsurrun

Student Name: Delower Hussain

ID Number: 2334957

Session: June 2024 Term

Human Resource Planning in the NHS: Addressing Workforce Shortages and Position Analysis

Introduction

Human resource planning is critical for the NHS, where human capital is essential for both operational efficiency and patient care. The NHS faces ongoing challenges, including staffing shortages and high burnout rates, making effective HR management and succession planning vital. This report examines key issues in estimating the internal and external supply of human resources in the NHS, focusing on the nurse shortage, and provides a position analysis for doctors, offering a comprehensive overview of their current situation. Addressing these challenges is crucial for sustaining the NHS workforce and ensuring high-quality healthcare delivery.

Task 1: Estimating the Internal and External Supply of Human Resources with a Focus on the Shortage of Nurses

The shortage of nurses in the NHS has become one of the most pressing issues in healthcare management today. It is a multifaceted problem influenced by both internal and external factors, including workforce demographics, retention issues, policy impacts, and socio-economic conditions. This section critically discusses these factors to provide a comprehensive understanding of the key issues that need to be considered when estimating the internal and external supply of nurses.

1. Internal Supply of Nurses

1.1 Workforce Demographics and Aging

A significant challenge in the internal supply of nurses is the aging workforce. Data from NHS Workforce Statistics indicates that a large portion of the nursing workforce is approaching retirement age, with nearly one-third of nurses aged 50 or over (NHS Digital, 2023). This demographic trend suggests that the NHS will face an increasing number of retirements in the coming years, which could exacerbate the existing shortage unless adequately addressed through strategic HR planning. The loss of experienced nurses not only creates gaps in staffing but also results in the depletion of institutional knowledge, which is crucial for maintaining high standards of patient care (Buchan et al., 2019).

1.2 Retention and Burnout

Retention of nursing staff is a critical issue that significantly impacts the internal supply. The high levels of stress and burnout among nurses, particularly those working in high-pressure environments like emergency departments, lead to increased turnover rates. According to a report by the Royal College of Nursing (2022), burnout is a significant factor driving nurses out of the profession, with many citing unmanageable workloads, insufficient staffing, and lack of support as primary reasons for leaving. The impact of burnout is further compounded by the emotional and physical toll of the COVID-19 pandemic, which has seen many nurses exit the profession or reduce their working hours (House of Commons Health and Social Care Committee, 2021).

1.3 Training and Development

Another critical aspect of internal supply is the effectiveness of training and development programs within the NHS. The quality and availability of training directly affect the pipeline of new nurses entering the workforce. However, there have been concerns regarding the capacity of educational institutions to produce sufficient numbers of qualified nurses to meet demand. Moreover, budget constraints and cuts to funding for nursing education have led to fewer training places, which directly impacts the internal supply (Health Education England, 2021). Ensuring that training programs are adequately funded and aligned with the future needs of the NHS is essential for sustaining the internal supply of nurses (King's Fund, 2022).

1.4 Workforce Planning and Succession

Succession planning is a vital HR activity that ensures the continuous supply of skilled nurses. The NHS needs to implement robust succession planning strategies to identify potential gaps in the workforce and develop internal talent to fill those gaps. However, succession planning in the NHS is often challenged by short-term planning horizons, limited resources, and competing priorities. To address these challenges, the NHS must adopt a more strategic approach to workforce planning, focusing on long-term goals and the development of a flexible and resilient nursing workforce (NHS England, 2022).

2. External Supply of Nurses

2.1 Recruitment from Overseas

The external supply of nurses to the NHS has traditionally relied on international recruitment to fill gaps left by domestic shortages. Nurses from the European Union (EU) and other countries have played a crucial role in sustaining the NHS workforce. However, Brexit has significantly impacted the flow of nurses from the EU, with a marked decrease in the number of EU nurses registering to work in the UK (Nursing and Midwifery Council, 2022). This decline has exacerbated the existing shortage, as the NHS struggles to attract and retain nurses from abroad amidst changing immigration policies and increased competition from other countries facing similar shortages (Dayan, 2021).

2.2 Immigration Policies and the Impact of Brexit

Brexit has had profound implications for the external supply of nurses, primarily due to changes in immigration policies. The introduction of stricter immigration rules and the uncertainty surrounding the status of EU nationals in the UK have made it more difficult for the NHS to recruit nurses from the EU (Gov.uk, 2021). Additionally, the depreciation of the British pound and the perception of a less welcoming environment have deterred many potential recruits. The post-Brexit immigration system prioritizes high-skilled workers, which, while beneficial in some respects, does not fully address the specific needs of the NHS, particularly in nursing roles that are not classified as highly skilled under the new system (Migration Advisory Committee, 2021).

2.3 Global Competition for Nurses

The global shortage of nurses means that the NHS is not only competing with other sectors within the UK but also with healthcare systems worldwide. Countries like Australia, Canada, and the United States offer attractive packages, including higher salaries and better working

conditions, which can lure potential recruits away from the NHS (Buchan et al., 2022). This global competition exacerbates the challenges of sustaining an external supply of nurses and highlights the need for the NHS to improve its attractiveness as an employer on the international stage (World Health Organization, 2020).

2.4 Ethical Considerations in International Recruitment

The reliance on international recruitment also raises ethical concerns, particularly when recruiting from low-income countries that are themselves facing nursing shortages. The World Health Organization (WHO) has guidelines on ethical recruitment, emphasizing the importance of not undermining the healthcare systems of source countries (World Health Organization, 2020). The NHS must balance its need for nurses with the ethical implications of its recruitment practices, ensuring that it does not contribute to global health inequalities (All-Party Parliamentary Group on Global Health, 2021).

2.5 The Role of Government Policy

Government policy plays a crucial role in shaping the external supply of nurses. Policies related to education, immigration, and healthcare funding all impact the ability of the NHS to attract and retain nurses. Recent government initiatives, such as the introduction of the NHS People Plan, aim to address some of these challenges by focusing on workforce growth, improving working conditions, and enhancing training and development opportunities (NHS England, 2021). However, the success of these policies depends on their effective implementation and the allocation of sufficient resources to support their objectives (House of Commons Health and Social Care Committee, 2022).

3. Strategic Responses and Future Directions

Given the challenges outlined above, the NHS must adopt a multifaceted approach to human resource planning to address the shortage of nurses. This includes:

- **Enhancing Retention Strategies:** Improving working conditions, providing better support for mental health, and offering career development opportunities can help reduce turnover and retain existing staff.
- **Investing in Training and Education:** Increasing funding for nursing education and expanding training programs will help build a sustainable internal pipeline of new nurses.
- **Developing a Robust Succession Plan:** Implementing strategic workforce planning and succession planning will ensure that the NHS is prepared for future retirements and workforce changes.
- **Reforming Immigration Policies:** Advocating for immigration policies that support the recruitment of international nurses while balancing ethical considerations is crucial for maintaining the external supply.
- **Competing on a Global Scale:** To attract international talent, the NHS must enhance its reputation as a desirable employer, offering competitive salaries, benefits, and a supportive work environment.

In short, the shortage of nurses in the NHS is a complex issue that requires careful consideration of both internal and external factors. By understanding and addressing the demographic trends, retention challenges, training needs, and global competition, the NHS can better estimate and manage the supply of nurses. Strategic HR planning, supported by government policies and ethical recruitment practices, is essential for ensuring that the NHS can meet its staffing needs and continue to provide high-quality care to patients. The future of the NHS workforce depends on its ability to adapt to these challenges and implement effective solutions that address the root causes of the nursing shortage.

Task 2: Position Analysis for Doctors Working in the NHS

The position of doctors within the NHS has been a focal point of discussion, especially considering workforce shortages, increased service demands, and the additional pressures brought about by the COVID-19 pandemic. This section provides an in-depth position analysis of doctors working in the NHS, utilizing data from various sources including NHS Digital, the British Medical Association (BMA), and government publications.

1. Workforce Demographics and Distribution

The distribution and demographics of doctors across different regions and specialties present significant challenges. According to NHS Digital (2023), there is a marked variation in the distribution of doctors, with rural and remote areas facing more acute shortages. Specialties such as general practice, psychiatry, and emergency medicine are particularly affected by these shortages (NHS England, 2022). Additionally, the aging workforce, with over 20% of GPs being over 55 years old, signals an impending wave of retirements that could further strain the NHS (BMA, 2022).

2. Recruitment and Retention Challenges

The NHS has long struggled with the recruitment and retention of doctors. High stress levels, burnout, and dissatisfaction with working conditions contribute to increased turnover and challenges in attracting new recruits. A 2021 BMA survey revealed that nearly 50% of doctors considered leaving the NHS due to unsustainable workloads and poor work-life balance (BMA, 2021). This has led to a decline in medical training applicants and an increased reliance on locum doctors to fill staffing gaps (House of Commons Health and Social Care Committee, 2022).

3. Position Analysis

The role of doctors within the NHS is crucial to the effective functioning of the healthcare system. This section provides a detailed position analysis, focusing on the Job Description (JD), Person Specification (PS), and Working Conditions that apply to doctors within the NHS.

3.1 Job Description (JD)

The Job Description for doctors in the NHS varies depending on the specialty, level of experience, and the specific demands of the healthcare facility. However, some general elements are consistent across most roles:

- **Patient Care:** The primary responsibility of NHS doctors is to provide high-quality care to patients. This includes diagnosing illnesses, developing treatment plans, performing surgeries (if applicable), and offering follow-up care. Doctors must ensure that all patient interactions are conducted with the highest level of professionalism and compassion.
- **Clinical Management:** Doctors are often involved in the management of clinical teams, ensuring that healthcare services are delivered efficiently and effectively. This includes supervising junior doctors, coordinating with nursing staff, and ensuring that all treatments adhere to current clinical guidelines.
- **Research and Development:** Many doctors in the NHS contribute to clinical research and the development of new medical treatments. This aspect of the job is particularly prominent in teaching hospitals and research institutions.
- **Administration:** In addition to clinical duties, doctors are responsible for maintaining patient records, completing reports, and ensuring compliance with regulatory standards. Administrative tasks also include participating in meetings and contributing to hospital policies.
- **Training and Education:** Doctors in the NHS play a role in the education and training of medical students and junior doctors, providing mentorship, guidance, and formal teaching to ensure the next generation of doctors is well-prepared.

3.2 Person Specification (PS)

The Person Specification outlines the skills, qualifications, and personal attributes required for doctors in the NHS. The NHS seeks doctors who meet the following criteria:

- **Qualifications:**
 - A recognized medical degree (MBBS or equivalent).
 - Registration with the General Medical Council (GMC).
 - Completion of Foundation Training (for junior doctors) and Specialty Training (for senior roles).
- **Skills:**
 - **Clinical Competence:** Proficiency in diagnosing and treating medical conditions within their specialty.
 - **Decision-Making Abilities:** The capacity to make informed and timely decisions, particularly in high-pressure environments.
 - **Communication Skills:** Strong verbal and written communication skills, with the ability to explain complex medical information to patients and colleagues.
 - **Empathy:** Sensitivity and understanding towards patients' needs and concerns.
 - **Teamwork:** Ability to work effectively within multidisciplinary teams.
- **Attributes:**
 - **Commitment to Continuous Professional Development:** A dedication to ongoing learning and staying updated with the latest medical advancements.
 - **Adaptability:** Flexibility to adapt to new challenges, technologies, and changes within the healthcare system.
 - **Patient-Centered Approach:** A focus on providing care that is respectful of and responsive to individual patient preferences, needs, and values.

3.3 Working Conditions

The working conditions for doctors in the NHS significantly influence job satisfaction, recruitment, and retention:

- **Work Hours:** NHS doctors often work long hours, including nights, weekends, and holidays. Junior doctors, in particular, may work shifts extending to 48 hours per week or more, which can lead to physical and mental fatigue.
- **Workload and Stress:** High patient demand and staff shortages contribute to increased workloads and stress. The pressure to manage large patient numbers and meet clinical targets creates a challenging work environment.
- **Support and Resources:** The availability of support and resources varies across NHS facilities. While some doctors have access to state-of-the-art equipment and full support staff, others may face resource constraints that limit their ability to provide optimal care.
- **Remuneration and Benefits:** NHS doctors receive competitive salaries, which increase with experience and specialization. Additional compensation is provided for unsocial hours, on-call duties, and additional responsibilities. NHS doctors also benefit from a comprehensive pension scheme, paid annual leave, and other benefits such as maternity and paternity leave.
- **Job Security and Career Progression:** The NHS offers high job security, especially for those in permanent positions.
- **Work-Life Balance:** Achieving a work-life balance is challenging for many NHS doctors due to long hours, high workloads, and the emotional toll of the job. Initiatives such as flexible working arrangements and mental health support services are in place to help doctors manage these challenges.

4. Strategic Recommendations

To address the challenges identified in this position analysis, the following strategic recommendations are proposed:

- **Enhancing Workforce Planning:** Implementing robust workforce planning strategies that account for demographic trends and the distribution of doctors is essential. This includes targeted recruitment and retention initiatives for underrepresented specialties and regions.
- **Improving Working Conditions:** Addressing the root causes of job dissatisfaction, such as workload, staffing levels, and work-life balance, is critical for retaining doctors in the NHS.
- **Supporting International Recruitment:** The NHS should continue to recruit doctors from overseas while ensuring that immigration policies are supportive of this process.
- **Investing in Technology and Innovation:** Prioritizing investment in digital health tools and technologies can improve efficiency and reduce the burden on doctors.

In summary, the position of doctors within the NHS is shaped by a range of factors, including workforce demographics, recruitment and retention challenges, the impact of Brexit, working conditions, and the role of technology. Addressing these issues requires a comprehensive and strategic approach to workforce planning, supported by government policies and investment in innovation. By implementing the recommendations outlined in this report, the NHS can better support its doctors and ensure the sustainability of its workforce.

Conclusion

Human resource planning in the NHS is crucial to address the shortage of nurses and the challenges faced by doctors. Key issues include an aging nursing workforce, high attrition rates, and Brexit's impact, while doctors face long hours, burnout, and dependence on

international recruits. Strategic HR interventions, such as improving working conditions, enhancing training, and effective succession planning, are essential for maintaining healthcare quality and meeting future demands. Addressing these challenges through targeted recruitment and retention efforts will help build a resilient NHS workforce.

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