

NHS Providers briefing: NHS People Plan 2020/21

Since the publication of the [interim NHS People Plan](#) in June 2019, which set the national strategic framework for the NHS workforce over five years, the healthcare landscape has shifted significantly due to the global COVID-19 pandemic. In response, NHS England and NHS Improvement have developed the [NHS People Plan 2020/21](#) (the plan) together with Health Education England (HEE), under the direction of Prerana Issar, NHS England and NHS Improvement's Chief People Officer. The plan is intended to capture and build on the NHS response to the pandemic, and to set out an NHS workforce strategy for the coming year and a half – as well as to signal a clear intention to support cultural change within the NHS for many years beyond.

NHS Providers has been engaged in several working groups underpinning the development of the plan. We are now working with NHS England and NHS Improvement's Beneficial Changes Network, which is tasked with progressing most of the actions in the plan.

This briefing provides an overview of the key points of the plan, a summary of each of its sections, and updates on key areas from the 2019 interim NHS People Plan.

Key points

- The overarching message of the plan is that the NHS needs more people, working differently, in a compassionate and inclusive culture.
- Positive changes to the NHS workforce brought about by the COVID-19 pandemic should be viewed as a "springboard", for further change and innovation.
- There is acceptance that implementation of the plan's various elements will differ across settings, and a call for partners within local systems to work together to determine how they will deliver the plan's principles.
- The plan calls for systems to develop local People Plans, building on work initiated under the 2019 interim People Plan and encourages individual organisations to do the same. Although the national plan is NHS focussed, there is a sustained call for close partnership between the NHS and social care at local levels, and a request for all systems to review their local workforce position to increase resilience and capability.

- The focus of the plan on inclusive and compassionate leadership, and its acknowledgement of the contribution NHS staff is very welcome. We are however mindful that the plan covers a shorter timeframe than initially intended and is not underpinned by clear financial commitments to ensure its full implementation. For example, key proposals around education and training come with the caveat that more detailed plans are to follow the autumn spending review.

Responding to new challenges and opportunities

The first section of the plan captures headline changes which have resulted from the COVID-19 pandemic so far, and notes that the learning from the pandemic is only just beginning. It applauds areas where the NHS has made rapid and significant change and raises the importance of measuring their impact and effectiveness before embedding them systematically. To achieve this, NHS England and NHS Improvement will develop metrics by the end of September 2020, to be used “at all levels of the system” alongside the continued tracking of progress on workforce issues via the [NHS Oversight Framework](#). The changes explored in the plan are:

- Greater focus on staff health and wellbeing.
- Greater focus on reducing health inequalities and addressing the [disproportionate impact of COVID-19 on people from Black, Asian, and minority ethnicity groups](#).
- Flexible and remote working in the NHS, including remote consultations
- Staff returning to clinical activity from academia and retirement, and students who have stepped out of training to undertake clinical work. Staff have also been redeployed to areas of pressure, and the role of NHS 111 has been expanded.
- Innovative use of roles resulting in upskilling existing staff, applying skills to new settings and work, and increasing multidisciplinary team working.
- The NHS clinical support package for care homes resulting in a clinical lead for every care home, alongside wider support.
- Volunteer numbers which have increased exponentially, but have not been fully utilised, partly due to the challenges of safe and effective deployment.
- Research on COVID-19 which has been supported by the recruitment of research nurses and clinical trial assistants.

Looking after our people

The second section of the plan recognises the ongoing impact of the COVID-19 pandemic on NHS staff wellbeing. In response to this, and building on the interim People Plan’s intention to build a new

offer for staff, the section covers four areas: the NHS People Promise; staff safety; staff physical and mental wellbeing; and flexible working.

People Promise

The **People Promise**, published alongside the plan, is structured around seven principles aimed to make the NHS “the best place to work”. The purpose of the People Promise is to encourage both unity within the NHS workforce, and cooperation to make the promise’s principles a reality by 2024. The annual NHS staff survey will be redesigned to align with the People Promise, so that progress made against each of the seven principles can be measured.



Staff safety

The points around staff safety are focussed primarily on protecting staff for the duration of the pandemic. Infection control prevention, PPE, flu vaccinations, and **risk assessments** are all flagged as requirements for employers to provide for staff. The plan also encourages employers to support staff who are home working (for example, with appropriate equipment), and to ensure staff take breaks and annual leave. Wider work around bullying and harassment is also cited, including a toolkit due to be developed by NHS England and NHS Improvement by March 2021. The plan also details measures to address violence against staff: a **joint agreement** with government, and NHS violence reduction standard is due for launch by December 2020.

Staff physical and mental wellbeing

From September 2020, every member of the NHS should have a health and wellbeing conversation and develop a personalised plan. These conversations may fit within an appraisal, job plan or one-to-one line management discussion, and should be reviewed at least annually. As part of this conversation, line managers will be expected to discuss the individual's health and wellbeing, and any flexible working requirements, as well as equality, diversity and inclusion. From October 2020, employers should ensure that all new starters have a health and wellbeing induction.

Specific proposals to improve staff wellbeing include:

- Appointing a wellbeing guardian in every NHS organisation (responsibility will still lie with Chief Executives / Accountable Officers).
- Supporting staff to get to work: NHS organisations should continue to give their people free car parking at their place of work for the duration of the pandemic, and should support other modes of transport. For example, hospitals should identify a cycle-to-work lead.
- Ensuring there are safe spaces for rest and recuperation.
- Psychological support and treatment: the NHS England and NHS Improvement health and wellbeing programme will continue, and NHS England and NHS Improvement will pilot "resilience hubs" in partnership with occupational health programmes.
- Support for people through sickness and helping staff return to work.
- Maintaining physically healthy work environments: employers should enable access to physical activity for those in sedentary roles.
- Support switching-off from work, such as encouraging staff to take breaks and book annual leave.

Flexible working

The plan emphasises that flexible working is vital to ensure staff retention. Making flexible working a reality for the NHS workforce requires open conversations between employers and staff representatives. NHS England and NHS Improvement will establish a diverse steering group, of senior NHS leaders and experts from a range of sectors, to support the Chief People Officer's review of HR and organisational development. This will report by the end of 2020/21.

Employers have been encouraged to offer 'flexibility by default'. From January 2021, all NHS England and NHS Improvement and HEE jobs will be advertised as available for flexible working patterns. Employers should normalise conversations about flexible working, including in discussions throughout inductions and appraisals – no justification for requesting flexible work should be required from staff.

NHS England and NHS Improvement will support and, where possible, accelerate the roll out of e-rostering. NHS England and NHS Improvement and NHS Staff Council are planning to issue online guidance and training by December 2020. Role modelling from the top is also critical, and support will be needed from boards.

The plan highlights the importance of flexibility in general practice. GP practices and primary care networks to offer more flexible roles to salaried GPs and support the establishment of banks of GPs working flexibly in local systems. There are also proposals to ensure a full roll out of flexibility in medical training programmes from HEE by 2022/23. The plan notes that people with caring responsibilities will be supported, and there plans to issue a working carers passport.

Belonging in the NHS

The plan's third section acknowledges that COVID-19 has intensified social and health inequalities, with a disproportionate impact on people from BAME groups, older people, men, people with obesity, and disabled people. The NHS Race and Health Observatory, hosted by the NHS Confederation, will bring together experts to provide analysis and policy recommendations to improve health outcomes, and to empower staff to speak up.

The plan suggests a variety of approaches to promoting inclusivity, ensuring staff can speak up, and establishing compassionate and inclusive leadership.

Promoting inclusivity

Recruitment and promotion: Practices are to be overhauled by employers in partnership with staff representatives by October 2020, "to make sure that staffing reflects the diversity of their community, and regional and national labour markets". Work will take place on ensuring accountability for outcomes, agreeing diversity targets, and addressing bias in systems and processes.

Leadership diversity: All trusts and CCGs are to publish progress against Model Employer goals to ensure that at every level, the workforce is representative of the overall BAME workforce. From September 2020, NHS England and NHS Improvement will refresh the evidence base for action.

Tackling the disciplinary gap

By the end of 2020, 51% of organisations are expected to have eliminated the ethnicity gap in relative likelihood of entry into the disciplinary process. As set out in [A Fair Experience for All](#), NHS England

and NHS Improvement will support organisations in taking practical steps to achieving this. Decision tree checklists, post action audits and pre-formal action checks are recommended.

Governance

By December 2021, NHS organisations must review governance arrangements to ensure contribution from staff networks. These Networks should be cross-organisational.

Accountability

NHS England and NHS Improvement competency frameworks for board-level positions will be developed by March 2021. It will be the responsibility of the chief executive to lead on equality, diversity and inclusion.

Ensuring staff have a voice

To empower staff to speak up, the 2020 NHS staff survey will be adapted to reflect the current context, and NHS England and NHS Improvement will explore options to implement this survey in primary care in the autumn. A new quarterly staff survey to track people's morale in the first quarter of 2021/22 will also be launched, following the results of the 2020/21 National staff survey.

NHS England and NHS Improvement will also encourage employers to complete the free online 'just and learning culture' training and accredited learning packages, and work with the National Guardian's Office to support leaders and managers to foster a listening, speaking up culture.

Compassionate and inclusive leadership

NHS England and NHS Improvement will hold seminars and learning sets for leaders on leadership development from September 2020. By March 2021, NHS England and NHS Improvement will work with the Faculty of Medical Leadership and Management to expand the number of clinical leadership placements based in systems, and launch NHS leadership observatory, which will focus on highlighting best practice and commissioning research.

NHS England and NHS Improvement has also committed to: updating the talent management process by December 2020; delivering digital line management training and launching a management apprenticeship pathway by January 2021; and making all leadership programmes available digitally by April 2021, with the curriculum updated to include practical resources on inclusion.

The consultation on a set of competency frameworks for board positions will be launched in October 2020. The plan also confirms the government's engagement exercise on the Kark Review is complete and its response is being finalised.

New ways for working and delivering care

The plan states in its fourth section that new ways of working during COVID-19 were made possible by: good communication, high levels of trust, distributed leadership, greater collaboration with social care and rapid decision-making as bureaucracy fell away and people felt empowered to do what was needed. A number of areas where support was provided by key partners during the pandemic so far are highlighted, including: [guidance](#) on safe and legal deployment of staff; the [review of staffing ratios in critical care](#); infection prevention and control training in social care; and solutions to enable mass testing, technological advances and widescale remote working.

Making the most of skills in teams

The plan sets out the following areas where staff should expect organisations and employers to focus on going forwards in order to make the most of skills in teams: supporting deployment and redeployment; focusing on upskilling staff; providing technology-enhanced learning for staff; developing generalist skills; and expanding multidisciplinary teams in primary care with HEE support.

Making the most of skills and energy in wider workforce

Organisations and systems are encouraged to focus on the following to make the most of skills and current 'energy' in the wider workforce: training volunteers using HEE's [National Learning Hub for Volunteering](#); developing routes into employment for volunteers; and inspiring the next generation using the [NHS Ambassadors](#) programme.

Educating and training people for the future

To educate and train people for the future, the plan expects efforts to be focused on: maintaining education to grow the future workforce; continuing professional development via new funding equivalent to £1,000 per person over three years; and supporting clinical placements – HEE is establishing a £10m fund for nurses, midwives and allied health professionals to drive increased placement capacity.

The plan also sets out the expectation that e-learning will be expanded – HEE will develop materials, including simulation, in 2020/21; and investment in online education for nurses, commissioned by HEE and delivered from January 2021.

Growing for the future

The plan highlights the scale of public support for the NHS expressed during the pandemic and the importance of building on this momentum moving forwards. Evidence of an increase in interest in NHS careers include nursing-related courses seeing a 17% rise in applicants, and the overall number of page visitors looking for information on training to be a nurse rising by 138% between March and June, and a 103% increase in people seeking information on becoming a paramedic. There was also a 152% increase in interest in diagnostic radiography and a 218% rise in interest on becoming a high-intensity therapist.

Expanding and developing our workforce

The plan states that HEE will make progress through 2020/21 in addressing the most pressing workforce shortages in service areas they have identified have the highest demand and professions that require urgent focus, including:

- **Mental health:** HEE are prioritising investment to support expansion in psychological therapies for children and young people. In 2020/21 this will include expanding education and training posts: over 100 additional responsible clinicians, 50 community-based specialist mental health pharmacists, nearly 3,000 adult IAPT practitioners, 245 children and young people’s psychological wellbeing practitioners and 300 children and young people’s IAPT practitioners. There will also be a focus on increasing the number of training places for clinical psychology and child and adolescent psychotherapy by 25%.
- **Cancer:** in 2021, HEE is prioritising the training of 400 clinical endoscopists and 450 reporting radiographers; training grants for 350 nurses.
- **Advanced clinical practice:** HEE will fund 400 more entrants, to support multidisciplinary team working.
- **Expanding shortage specialties:** HEE will fund 250 extra foundation year 2 posts for priority areas.
- **Increasing undergraduate places:** HEE and universities will work towards 5,000 additional undergraduate places from September 2020 in nursing, midwifery, allied health professions, and dental therapy and hygienist courses.
- **Developing clinical pharmacists:** a new approach will be taken from Summer 2021, replacing the current pre-registration year with a foundation year, and enhancing clinical experience in initial education and training.

Focus on recruitment

The plan states the NHS needs to also renew efforts to rapidly recruit across all roles and professions with a focus on domestic recruitment, international recruitment and encouraging staff to return to practice.

Local recruitment: Employers must increase their recruitment to roles such as clinical support workers, offer more apprenticeships from entry-level jobs through to senior clinical, scientific and managerial roles, and take immediate action to recruit additional roles funded by [the Additional Roles Reimbursement Scheme](#), which will fund 26,000 additional staff until 2023/24.

International recruitment: NHS England and NHS Improvement will incentivise trusts to develop lead-recruiter and system-level models of international recruitment. Work will be undertaken with government to increase ethnical international recruitment, remove barriers and increase capacity for induction and support. In 2020/21, HEE will pilot English language programmes and NHS England and NHS Improvement and government will work to deliver a co-ordinated international marketing campaign. The plan reconfirms that the health and care visa will launch August 2020; applicants are exempt from immigration health surcharge, entitled to a 50% visa fee reduction, and a decision will be made on applications within 3 weeks.

Return to practice: employers and systems should encourage staff to return to the NHS, and NHS England and NHS Improvement and HEE will continue to work with professional regulators to support revalidation, and in partnership with social care. HEE is also exploring the development of a return to practice scheme for other doctors in the remainder of 2020/21, creating a route from temporary professional registration back to full registration.

Staff retention

The plan states that the NHS needs to be bold and commit to offering more flexible, varied roles and opportunities for remote working. It sets out that staff should be able to expect their employers to focus on the following:

- designing roles which make the greatest use of people's skills and experience and fit with their needs and preferences;
- retaining people approaching retirement, through line managers conducting career conversations with staff who are aged 55 years and over, as well as those who are mid-career (around 40 years) to discuss adjustments needed and financial advice;

- facilitating opportunities to retire and return, including making people aware of pension flexibilities;
- retaining people in primary care by making use of GP retention initiatives in the GP contract launching summer 2020;
- making the NHS a better place to work via NHS England and NHS Improvement's People Plan delivery programme, which is launching in summer 2020 and will comprise of a new online portal of resources, masterclasses and support for systems and organisations.

Alignment and collaboration across health and care systems

The plan places systems at the centre of designing new models of care and major service changes, working with HEE regional teams to deliver better population health outcomes. Partnership working across health and social care settings during the pandemic is applauded by the plan and leads into suggestions for workforce innovation which spans different organisations.

Workforce planning and transformation: The plan encourages systems to integrate workforce planning with service, clinical, and financial strategies, and to review these plans in-year. Systems are also expected to develop competency-based workforce modelling and planning for the remainder of 2020/21 which will address any existing skill gaps. HEE will develop online package to support this in 2020/21.

NHS England and NHS Improvement and HEE are to work on improving data collection at employer, system, and national levels in 2020/21 to aid workforce planning, and they will refresh tools to support workforce planning and transformation in the same time period.

Recruiting and deploying staff across organisations and geographies: The plan encourages greater utilisation of: non-traditional routes into NHS careers; recruitment to non-clinical roles; secondments; and rotational roles across primary and secondary care. Systems are encouraged to work with local education bodies to achieve this.

Calls for trusts to use staff banks before agencies or locums are repeated in the plan, as well as calls for systems to develop local workforce sharing agreements. Due to the pandemic, NHS England and NHS Improvement has already developed [guidelines](#) to aid this, with processes for sharing HR records and statutory and mandatory training. Similarly, the digital staff passport which has been widely rolled out during the COVID-19 outbreak is to be trialled for use in winter 2020 too.

Supporting our NHS people for the long term

The final section of the plan notes how different the global setting is, and will be, after the COVID-19 pandemic. It reaffirms the central themes of the interim plan, with the key focus aim for “more staff, working differently, in a compassionate and inclusive culture”.

NHS England and NHS Improvement and HEE have a programme of engagement planned across 2020 and beyond, to develop and implement the topics covered in this plan. Details for involvement can be found at www.england.nhs.uk/ournhspeople.

Updates on key areas since the interim People Plan

Our [briefing](#) on the 2019 interim NHS People Plan (the interim plan) detailed four key areas, all of which have been furthered by the NHS People Plan 2020/21 (the plan):

NHS – the best place to work

The interim plan’s promise of a new offer for staff is not explicitly mentioned but is arguably furthered by section two of the plan, “Looking after our people”. The section’s focus the principles underpinning the new NHS People Promise, staff safety, staff physical and mental wellbeing, and flexible working all map onto the interim plan’s intentions for the new offer.

Existing proposals for a leadership compact are not realised in the plan, but there is brief mention that a “new approach to NHS leadership will be codified in a leadership compact that will be published shortly”. Indications as to what this could contain are in section three, “Belonging in the NHS”, under the explorations of “compassionate and inclusive leadership”.

Since publication of the interim plan, there has been significant **movement** on pensions. As a result, the plan simply notes that employers should ensure their staff are aware of the changes to the annual allowance threshold, and that flexibilities around “retire and return” arrangements are still in place.

Tackling nursing shortages

There is optimism in the plan, given the 17% rise in applications to nursing-related courses and continued investment, such as training grants for 350 cancer specialist nurses. However, the issue is far from resolved. Whilst section five, “Growing for the future”, takes the view that there is opportunity for trusts to capitalise on current public interest in working for the NHS, given training requirements, this will require a long lead-in time. The interim plan’s aspirations to increase workforce supply generally, and nursing supply specifically, through undergraduate training, international recruitment, retention and return to practice, continuing professional development and flexible working options

are all reiterated in the plan. However, the potential impacts of the UK's new immigration system are not considered.

Workforce devolution

The interim plan's proposals for a "new operating model" of workforce management being devolved from the centre is not explicitly mentioned in the plan, but is visible in its allocation of action – in particular, the requirement for systems to develop local People Plans. The call for improved data collection at all levels in section five, "Growing for the future", also furthers the interim plan's calls for consistent and timely data to enhance workforce planning.

Transformation and skills mix

The interim plan's calls for generalist expertise and cross-team and cross-organisational working have persisted in the plan, with progress noted in light of the changes which the workforce has undergone during the COVID-19 outbreak (outlined in section one, "Responding to new challenges and opportunities"). Section four, "New ways of working and delivering care" also repeats these calls, and notes that HEE's educational offer for generalist training is to be developed across 2020/21.

NHS Providers view

Commenting on the publication of the plan, Saffron Cordery, NHS Providers deputy chief executive said:

The publication of the NHS People Plan 2020/21 puts much needed momentum behind steps to create more inclusive and compassionate cultures within the NHS. We strongly support the commitment to prioritise staff health and wellbeing and to making the NHS a great place to work, but more investment is needed to make it a reality.

The workforce is the backbone of the NHS, evident in its remarkable response to COVID-19. Staff deserve a supportive national framework and local working culture, and the People Promise clarifies what overarching principles NHS England and NHS Improvement are working towards on this front. In addition to health and wellbeing, this plan has important themes that will help staff to feel valued, such as more flexible working patterns.

The pandemic has also highlighted that more work is urgently needed to create equality and diversity in the NHS, and to ensure that staff from Black, Asian and minority ethnic communities feel supported, safe, and valued. There are some welcome commitments in the plan, and this will be a key priority for trusts.

We have long been calling for more investment in the mental health workforce and are pleased to see that there will be a specific drive to recruit more mental health nurses. However, although the plan has some investment attached to it, which is welcome, last year the Government made a number of manifesto commitments on workforce that will not be deliverable without significant funding.

Growing the workforce takes time and international recruitment may also be problematic in the current climate. As part of the forthcoming Comprehensive Spending Review (CSR), the Government has to provide certainty that the workforce commitments can be met through a multi-year funding package. Without that, the manifesto commitments and the People Plan cannot be fully delivered.

We also note that the People Plan 2020/21 focusses on the NHS workforce as expected, and there remains a need for national policy makers to align their thinking on a coherent approach for health and social care together, reflecting the work now underway by local systems.

We welcomed the inclusive approach NHS England took to developing this plan and ensuring that trusts' views are reflected, and we will now work with trusts to support them to implement it."