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A Plan for Nursing

Alison Machin and Fleur Nielsen

As the NHS grapples to fill its 41,000 nurse vacancies, all eyes are on the Full People Plan, which is expected to be published at the end of this year. The Council of Deans of Health, which represents the 84 universities delivering education and research for nursing, midwifery and the allied health professions, is one of many stakeholder organisations participating in the development of this plan.

Though January's *NHS Long Term Plan* had little to say about recruitment, June's *Interim People Plan* set out a framework for tackling workforce challenges. Nursing was the only profession to be given a dedicated chapter and remains the top priority for groups working on the full plan.

The framework for workforce growth set out in the Interim People Plan is a helpful one. It will be necessary to look at every avenue to grow the workforce, including international recruitment, retention and return to practice. The Council has welcomed the £150m funding increase for continuing professional development recently announced as part of the 2019 Spending Round. After several years of dramatic funding cuts, this investment is absolutely vital to support retention and skills development.

Universities play a role in international recruitment, return to practice and retention through post-registration education but domestic recruitment into the professions is the Council's primary focus. To get recruitment right we need to start by attracting students. So many factors influence the appeal of nursing as a career, many of which are difficult to influence in the short term. What we must do however is ensure that people appreciate the varied and rewarding opportunities available and have a clear understanding of the various routes in. This year's #WearetheNHS campaign is a welcome intervention including an inspiring TV commercial supported by targeted communications to university applicants.

We need to ensure that students feel able to enter and complete nursing degrees. Having evaluated the impact of the 2017 and 2018 healthcare student funding reforms, the Council is calling for the introduction of non-means tested maintenance grants for all healthcare students to recognise that the length and intensity of healthcare degree courses limit opportunities for part-time work. This would also reflect healthcare student demographics and encourage mature student participation. Recruitment and retention could be bolstered by the introduction of tuition loan repayment schemes linked to service and by dedicated support for students entering nursing degrees at postgraduate level. At a more basic level, work is urgently needed to ensure that the existing mechanisms of student support are fit for purpose, including for example improving timely access to support for placement costs, childcare and hardship.

The Interim People Plan reiterated the NHS' intention to increase clinical placement capacity for nursing students. Since its publication, NHS England/Improvement appear to have succeeded in increasing placement availability quite significantly by taking a strategic and targeted approach to new investment, ensuring that funding reaches those

working with students on placement. The number of students starting nursing courses in England this September is 4% up on last year and we believe there is a strong case for continuing this type of investment in placements next year.

The People Plan will almost certainly continue to emphasise the contribution of multiple routes into the professions including apprenticeships, distance learning and postgraduate entry, as well as the newer roles such as nursing associates. As a Council we view these new routes as complementary approaches to recruitment, which may help to widen participation, but they are certainly not a panacea for recruitment challenges. Employers will need to continue to make a judgement call about levy use and skill mix based on local demography, affordability and workforce need.

Employers and universities are shaping not just entry routes to the professions but also the education and contribution of the most highly educated healthcare professionals. Encouraged by national policy changes, universities are currently reviewing their provision of advanced practice courses and working to respond to an NHS more interested than ever in multi-professional working and the formal credentialing of clinical skills. Universities and healthcare systems need to work together to ensure that students' exposure to clinical placements during their time at university reflects the care settings of the future; this means more placements in the community and general practice.

A large staffing census recently conducted by the Council reveals that universities often find it difficult to recruit academic staff. This will make programme expansion more challenging and is a concern for development of the research that informs high-quality, evidence-based care. Succession planning for the academic workforce is vital for every university but must also become a national task undertaken in partnership with healthcare providers.

Workforce is a truly complex policy space but we are encouraged by the coordinated approach demonstrated so far in development of the People Plan. These inclusive conversations must be replicated regionally and locally to do justice to ambitious national workforce aspirations. Without a doubt, universities must remain central to these discussions.