



Royal College
of Physicians

Coleg Brenhinol
y Meddygon (Cymru)

The people who care

The Welsh health and care workforce at 75

July 2023



In partnership with the
Welsh royal colleges
and professional bodies
advisory group

The cracks are showing. Health and care staff are tired, demoralised and frustrated.

Since 5 July 1948, the people of Wales have received healthcare that is free at the point of clinical need and not dependent on an individual's ability to pay. The Welsh NHS employs over 88,000 staff, trains hundreds of health professionals and treats thousands of people every single day. But the cracks are showing, and hundreds of staff in Wales say they are likely to leave the NHS.

Years of underfunding, combined with widespread rota gaps, an ageing population, growing health inequalities and a fragmented and complex health and care system – all compounded by the effects of a global pandemic – are resulting in a perfect storm for the health and care workforce.

'Wales should aim to be a great place to train and work.'

In January 2018, the parliamentary review of health and social care in Wales called on health and care staff, volunteers and citizens to work together to deliver clear outcomes, improved health and wellbeing, a cared for workforce, and better value for money, within a seamless system of health and care that meets the needs of the population. The workforce should be aligned with new models of care, and staff should be well trained, supported and engaged to deliver and continually improve a high-quality service.

As our population grows older, the people of Wales deserve a multiprofessional health and care workforce capable of meeting future population needs, working flexibly across different settings and teams, empowered and enabled to provide person-centred care.

'Our staff are fundamental to a successful NHS and social care system.'

The Welsh government's long-term plan for health and social care, *A healthier Wales*, promised to deliver an inclusive, flexible, multiprofessional workforce that is able to work across sectors and traditional boundaries by ensuring a new workforce strategy for health and social care is implemented and underpinned by excellent workforce data and planning in order to attract, recruit and retain talented people to train, work and live in Wales.

Since the launch of the parliamentary review and the long-term plan in 2018, we have lived through a global pandemic that has highlighted and exacerbated health inequalities, increased rates of staff burnout and moral injury, and fundamentally changed the way we work and live in so many ways.

Five years on, it is time to take stock. Are we on track to achieve the ambitions set out in the parliamentary review? Has *A healthier Wales* been successful in changing the way we deliver health and care? And perhaps most importantly – what's next for the wider health and care system as we look ahead to the NHS at 100?

'Investment in the health and social care sector is critical for the health of the population and, as a direct consequence, the economic wellbeing of the country. A well-resourced workforce is central to enabling the NHS and local authorities to make best use of public money and provide taxpayers with access to high quality health and social care. It will also serve to safeguard the vital mental and physical wellbeing of those involved in the provision of health and social care.'

– Occupational therapy under pressure

The Welsh health and care workforce at 75

Between now and the next Senedd election in 2026, we call on the Welsh government to work with NHS Wales, local authorities, the third sector and other partner organisations to:

- > Deliver **existing strategies and action plans** in full, including A healthier Wales, the health and care workforce strategy, the programme for transforming and modernising planned care and the national workforce implementation plan, and report on the progress made. Publish progress against the recommendations of the parliamentary review, especially around multiprofessional workforce models and staff wellbeing. Refresh the national vision for the future of health and care in Wales and develop a collaborative, regional approach to service delivery where appropriate.

Around one-third of the anaesthetist workforce may decide to work less than full-time within five years, with many citing poor working conditions including perceived unrealistic expectations or lack of flexibility about rotas, lack of work–life balance and limited support for stress and trauma.

- > Strengthen **workforce data** collection and analysis, broken down by profession, specialty and career stage, including newly qualified staff. Ensure that data is reported regularly in an accessible and transparent format. Develop workforce plans that consider current and future demand across specialties and sites, recognise changing working practices, including flexible and less-than-full-time (LTFT) working, and take into account the growing number of specialty and associate specialist (SAS), locally employed (LE) doctors, and medical associate professionals in the multidisciplinary team. Develop, co-produce and publish a social care workforce implementation plan.

62% of consultant physicians in Wales report daily or weekly rota gaps. 45% say there is a substantive consultant vacancy in their department. Fewer than a third (29%) feel in control of their workload and almost half (49%) say they have an excessive workload, with 37% working excessive hours. 73% would like to work fewer hours in the future and almost half (44%) are expected to retire in the next decade.

The Royal College of Emergency Medicine recommends that there should be a consultant presence in emergency departments (ED) for at least 16 hours a day. In Wales, the average ED has a consultant on site for only 12 hours a day during the week, and 10 hours a day during the weekend. Overcrowding and long waiting times at the front door puts huge pressure on staff and contributes to workforce shortages.

- > Reaffirm an overarching commitment to the **prevention of ill health**. Develop a clear cross-government delivery plan for tackling health inequalities to reduce demand on the health and care system. Ensure that all health promotion initiatives (eg the children and young people’s plan, the healthy weight strategy, the tobacco control strategy and the Healthy Child Wales Programme) and national frameworks (eg the NEST framework and the whole-school approach to emotional and mental wellbeing) are accompanied by a funded workforce plan. Recognise and fund rehabilitation, recovery and self-management of health conditions as essential healthcare provision.

78% of occupational therapists in Wales say their multidisciplinary team isn’t large enough to meet rising patient demand.

For workforce wellbeing

The Royal Pharmaceutical Society reports a high level of burnout, high workloads and staff shortages among teams that are under immense pressure. This is having a serious impact on mental health and wellbeing.

- > Prioritise the **retention** of staff. Support flexible working and ring-fence protected time for non-clinical work, especially education and training. Introduce job planning for all professions that want it. Recognise the contribution and better support the career development of SAS and LE doctors as well as medical associate professionals within the multidisciplinary team. Demonstrate compassionate leadership. Encourage people to speak out about bullying and harassment and take a zero-tolerance approach to discrimination. Publish an update on plans to establish a social partnership group to consider staff welfare. Enable and support remote working as appropriate. Ensure staff have access to appropriate rest breaks and enhanced rest facilities, along with healthy, good quality hot food 24/7. Strengthen the provision of occupational health, wellbeing and mental health support. Invest in IT, facilities and estates to improve the working environment. Widen access to bursaries and apprenticeships. Consider hidden issues such as housing, childcare and transport. Work with the UK government to evaluate the impact of changes to pension tax rules. Support those who want to 'retire and return' and standardise these processes across the health and care system. Consider developing a register of retired emeritus consultants who can be brought in on a flexible contract to help reduce the planned care backlog.

75% of full-time UK doctors-in-training intend to work LTFT in future, with lifestyle choice being the most common reason. Audit Wales estimates that for every 10 full-time GPs needed in Wales, around 15 people need to be trained.

In the past ten years, the number of nursing staff in Wales who feel enthusiastic about their job has fallen by 19%. Those who feel they are too busy to provide the level of care they would like has increased by 9%.

- > Renew efforts to **recruit** more staff. Expand training places where possible, while recognising this is a long-term solution. Develop bursary proposals with the full involvement of all professions. Encourage teams to carry out local succession planning. Support and fund the expansion of new professional roles within the wider team while avoiding role substitution. Actively value and support NHS and social care staff from overseas. Work with the UK government to review immigration rules for international staff.

Only a very small proportion of paediatric consultants and SAS doctors in Wales have protected time for research, according to the Royal College of Paediatrics and Child Health.

Social work teams are experiencing high vacancies and staff turnover, which leads to excessive caseloads and an increased risk of burnout affecting work-life balance and wellbeing. This, in turn, has led to a decline in the number of students enrolling on social work university programmes. The British Association of Social Workers has found that over half of social workers in Wales feel unable to manage their current workload and most are unable to complete their work within their contracted hours.



For a highly skilled workforce

- Ensure all staff have **protected time** for education, teaching, research and quality improvement across all professional groups and career stages. Make maximum use of the skills of all team members. Invest in modern teaching spaces and innovative technologies including robotics, diagnostics and artificial intelligence. Support more staff to deliver health and social care using the Welsh language. Actively support and encourage people from a wider range of health and care professions to become clinical leaders. Offer structured mentoring and coaching programmes to more professions and career grades. Fund staff to undertake postgraduate qualifications and research degrees where appropriate. Consider offering enhanced study budgets or grants to ease the financial burden of professional exams.

In a 2021 survey, the Royal College of Nursing found that 35% of members had not managed to complete their mandatory training at the time of responding. Of those that had completed their mandatory training, just under a third (30%) were able to complete it solely during work time.

The Royal College of Pathologists has called for increased investment in the recruitment and training of pathologists and scientists to help meet the rising post-pandemic demand for cancer diagnosis. Pathology is key to prevention, screening, and early detection of cancer, but it's also important for clinical laboratory diagnostics, treatment pathways and (as shown during the pandemic) infection management and control.

For high-quality care closer to home

- Invest in **community models of care**. Support the delivery of safe staffing legislation and build on existing evidence to extend the legislation to other settings as appropriate. Roll out electronic patient records at scale and pace to all settings and professions. Develop ways to ensure that information travels with the patient. Invest in allied health professionals, especially in the community. Consider what role SAS doctors can play in supporting primary care teams. Support rural and remote teams to develop new ways of working that improve care quality and patient experience. Invest in multidisciplinary teams that focus on early intervention and prevention of hospital admission, especially for those living with chronic conditions.

The Royal College of Speech and Language Therapists has found that the average vacancy rate across the UK now stands at 23%. Almost all managers (96% in children's services and 90% in adult services) said that recruitment is more or much more challenging than at any time in the past three years.

The British Geriatrics Society has called for a UK-wide target of one consultant geriatrician per every 500 people aged 85 and over. Currently in Wales, there is only one consultant geriatrician per every 723 people aged 85 and over.

'Health and care workers in all parts of Europe are experiencing overwork, with high levels of burnout. They describe feeling undervalued and disaffected and are losing trust in the systems in which they work. Healthcare is becoming more complex due to changing patterns of diseases, such as the growth of multimorbidity in ageing populations ... the health workforce is ageing too [and] older workers are being joined by those with young families in questioning what can be an unhealthy work–life balance. [The way forward] places health and care workers at its heart, recognising that failing to engage them in the search for solutions is pointless ... the challenge ... is how to rebuild trust, by patients, health workers, and politicians, in health systems and transform services to make them truly person centred. This will only be possible with an engaged and motivated health and care workforce.'

– [Fixing the health workforce crisis](#)

10 quick wins: Helping staff to thrive, care, learn and feel valued

A workplace environment where staff can thrive

1. Improve **staff wellbeing** by providing facilities for rest, spaces to carry out non-clinical work, and easily accessible hot food and drink. Develop a resourced occupational health service and ramp up efforts to stamp out bullying and incivility.
2. Facilitate improved **work–life balance** through helping employees access flexible, affordable childcare and school holiday play schemes, and ensuring staff can take time off for significant life events, enabling the right to a planned private life.

3. Ensure all staff can access **clinical leadership** opportunities and are supported with a cohesive and inclusive team culture to become compassionate leaders who inspire others.

A workplace environment where staff can care

4. Alleviate pressures on staff and delays for patients by supporting **social care** to help reduce hospital admissions and speed up discharges.
5. Support the development of **multiprofessional teams**, accelerating steps for the regulation and recruitment of the medical associate professions.
6. Invest in **community** models of specialist care to help staff prioritise early intervention, prevent ill health and avoid hospital admission, especially for older people or those living with frailty.

A workplace environment where staff can learn

7. Ensure that job planning for all professions and at all levels facilitates flexible training and working, ensures **protected time** for non-clinical activity, and recognises professional activities such as education and training, clinical leadership, quality improvement, and governance. Consider offering enhanced study budgets or grants to ease the financial burden of professional exams.

A workplace environment where staff can feel valued

8. **Reduce administrative burdens** on staff by streamlining mandatory training processes, improving the single lead employer model, introducing staff passports and simplifying appraisal and revalidation.
9. Use **'stay' (not just exit) interviews** to identify staff at risk of leaving and find solutions which might encourage them to stay (such as mentoring, flexible or LTFT working).
10. Improve **retire and return** arrangements by ensuring clearer and more consistent policies and facilitating flexible approaches including access to remote working and portfolio job plans.

Welsh royal colleges and professional bodies advisory group

In July 2022, royal colleges, faculties, specialist societies and professional bodies in Wales established a multidisciplinary external advisory group on workforce planning, service transformation and other shared priorities.

Convened by the Royal College of Physicians, membership is made up of more than 30 membership organisations representing tens of thousands of doctors, nurses, allied health professionals, therapists, pharmacists, dentists, paramedics and social workers in Wales.

The group aims to work collaboratively with the Welsh government, NHS Wales, local authorities and other stakeholders to improve how we educate, attract, retain and redesign the health and care workforce while valuing, motivating and supporting staff to deliver high-quality patient care.

In this briefing paper, our organisations have come together to share ways of supporting the health and care staff who care for us when we need them most.

This paper is endorsed by:

- > British Association of Social Workers
- > British Dietetic Association
- > British Geriatrics Society
- > British Occupational Hygiene Society
- > British Psychological Society
- > Chartered Society of Physiotherapy
- > College of Paramedics
- > Faculty of Intensive Care Medicine
- > Faculty of Public Health
- > Royal College of Anaesthetists
- > Royal College of Emergency Medicine
- > Royal College of General Practitioners
- > Royal College of Nursing
- > Royal College of Occupational Therapists
- > Royal College of Ophthalmologists
- > Royal College of Paediatrics and Child Health
- > Royal College of Pathologists
- > Royal College of Physicians
- > Royal College of Physicians and Surgeons of Glasgow
- > Royal College of Physicians of Edinburgh
- > Royal College of Podiatry
- > Royal College of Psychiatrists
- > Royal College of Speech and Language Therapists
- > Royal College of Surgeons of Edinburgh
- > Royal College of Surgeons of England
- > Royal Pharmaceutical Society
- > Society of Radiographers
- > Welsh Academy of Medical Royal Colleges

Further reading

- [A dozen things the NHS could do tomorrow.](#) Academy of Medical Royal Colleges, 2021
- [A positive career choice: supporting SAS doctors in Wales.](#) Royal College of Physicians, 2022
- [Bucharest Declaration on the health and care workforce.](#) World Health Organisation, 2023
- [Doing things differently: Supporting junior doctors in Wales.](#) Royal College of Physicians, 2019
- [Facing workforce shortages and backlogs in the aftermath of COVID-19: The 2022 census of the ophthalmology consultant, trainee and SAS workforce.](#) Royal College of Ophthalmologists, 2022
- [Fit for the future: GP pressures 2023.](#) Royal College of General Practitioners, 2023
- [Flexible working in geriatric medicine.](#) British Geriatrics Society, 2021
- [Future of surgery.](#) Royal College of Surgeons of England, 2018
- [International retention toolkit.](#) NHS Employers, 2023
- [Key recommendations for retention and workforce wellbeing in emergency care.](#) Royal College of Emergency Medicine and University of Bath, funded by the UKRI, 2023
- [Later careers: Stemming the drain of expertise and skills from the profession.](#) Royal College of Physicians, 2018.
- [Less than full-time training, is this the new norm?](#) BMJ Open, 2022
- [Occupational therapy under pressure 2022–2023.](#) Royal College of Occupational Therapists, 2023
- [Parents in surgery.](#) Royal College of Surgeons of England, 2022
- [Protected learning time.](#) Royal Pharmaceutical Society, 2023
- [RCP view on the NHS workforce: short- and medium-term solutions.](#) Royal College of Physicians, 2022
- [Respected, valued, retained.](#) Royal College of Anaesthetists, 2021
- [Retaining nurses in the profession: What matters?](#) Royal College of Nursing, 2022
- [Strengthening the workforce to care for an ageing population.](#) British Geriatrics Society, 2023
- [The right track: Participation and progression in psychology career paths.](#) Nuffield Trust, commissioned and supported by the British Psychological Society, 2021
- [Valuing nursing in the UK.](#) Royal College of Nursing, 2023
- [Wales emergency medicine workforce census 2023.](#) Royal College of Emergency Medicine, 2023
- [Workforce and wellbeing survey 2022.](#) Royal Pharmaceutical Society, 2022
- [Workforce census 2022.](#) Royal College of Paediatrics and Child Health, 2022
- [Working differently in the shadow of COVID-19: the 2021 UK census of consultant, higher specialty trainee and SAS physicians.](#) UK royal colleges of physicians, 2022
- [Workforce: Improving capacity and culture.](#) Royal Pharmaceutical Society, 2021

Educating, improving, influencing

Through our work with patients and doctors, the Royal College of Physicians (RCP) is working to achieve real change across the health and social care sector in Wales. We represent 40,000 physicians and clinicians worldwide – educating, improving and influencing for better health and care. Over 1,600 members in Wales work in hospitals and the community across 30 different clinical specialties, diagnosing and treating millions of patients with a huge range of medical conditions. We campaign for improvements to healthcare, medical education and public health.

wales@rcp.ac.uk
 www.rcp.ac.uk/wales
 @RCPWales

