

The Future of NHS HR and OD

March Update

NHS England and NHS Improvement



Building the future with you



- 1** Patient and carers voice workshop
- 21** Sessions with regional HRDs (April 2021) and their customers
- 14** HRD Advisory / CEO Advisory / Chiefs of Professions sessions
- 7** Regional People Board Discussions and SPFs
- 3** National CPO webinars conversations
- 15** Dedicated sessions to discuss the ICS landscape
- 2500** Individuals involved in the first Big Conversation
- 2718** Opinions gathered on Menti to inform key outputs
- 30,000** Data/Information points



- Leading the Big Conversation #1 (Feb–Mar 2021)
- 30,000+ data points
- Voice of the profession and **customer**



Input validated by checking against People Plan / People Promise / National People Board

The Future

- Multiple conversations with HRDs regionally and nationally (see Cascades / Quarters)
- Professional insight on future of HR / Work / Health
- Best practice models and approach
- Bringing together all data points



Lancaster University
Management School

Academic perspective on the future of health and work, human capital and long term value



Evidence based insights and best practice from the Professional standards

What we know about today



Set up of People Services reflects the previous competitive service landscape with high variability of performance, funding, capabilities and in the experience of staff. Joint working across organisations has been accelerated by the pandemic although this is inconsistent across the service. People Plan understood and gaining traction



Process, policy, data and information landscape is highly fragmented with significant focus and effort on ensuring compliance, risk mitigation, work arounds and competition for resources. Ability of people services to focus on key strategic priorities (org change etc) is materially impacted by the current lack of standardisation and digital enablement



Digital spend, interoperability and standardisation are significantly below industry standards and resulting in difficulty in cross organisational join up and information to drive decision making at ICS/regional/national level. No single view of people and talent across the service



Lack of standardisation or consistent approach to line management development and accountability. Variable capability of leaders and manager resulting in significant differences in staff experience between organisations. No cross organisational view of talent and holistic workforce planning is underdeveloped



Costs of the people function are average against international comparisons. People are required to bridge gaps that digital could support and improve the experience of staff. Spend on professional development is low compared to comparators



HR and OD professions and their services are above average in terms capabilities and performance (against international bench on a individual org basis) and customers value their contribution greater than they do themselves as a profession, which is unusual. Value and contribution during pandemic amplified their vital role in the future



Excellence and leading edge thinking in people practices exists in many places across the service although not uniformly. This practice often becomes scaled 'by chance' as opposed to design even when the evidence of outcomes are well established. This variety is also linked to the scale and financial stability of organisations.

The changing world of work...



The NHS of 2030 will be fundamentally different from the service we work in today, caring for an additional three million people, and a greater number of those over the age of 65. Existing ways of working, models of care and organisational boundaries will be transformed as the NHS adapts to the changing needs – and expectations – of our population. The NHS People Profession has been tasked with shaping and leading what working in the NHS of the future needs to look like if to ensure we are successful.

Our experience during Covid-19 highlighted the importance, capability and impact of our People Profession. Over the last 18 months, we worked together to meet the challenge of the pandemic, successfully:



Redeploying our people and significantly increasing ICU capacity



Rapidly expanding our workforce, bringing back many who had left the service, while supporting those in training to work on the front-line



Managing our resources across care settings – sometimes on an hour-to-hour basis



Leading the hugely effective national vaccine roll-out, leveraging thousands of volunteers at centres across the country



Managing the health and wellbeing agenda for a workforce coping with significant Covid-related sickness, stress and trauma

Looking after our people

Our experience during the pandemic showed how important it is for our people to feel valued and recognised for the care that they provide.

The workforce will become increasingly diverse, with multiple groups of people and talents, speaking different emotional languages, valuing different things, and possessing highly diverse needs

We will need to build on and sustain the teamwork and creativity established in COVID19 response in developing the NHS of 2030.

Inclusive and transparent people practices, enabling all team members' contributions to be encapsulated in world-leading healthcare, where a culture of coaching, mentoring and high integrity feedback ensures continuous improvement is the norm, aided by new tools and processes

New flexible approaches to the where, what, when and how people work can potentially transform the working and patient experience of millions, underpinned by new and transparent governance procedures carefully gauged to remove, not entrench, long-standing inequalities between the experience of delivering and receiving health care.

Belonging in the NHS

The relationship between people and their employers is being transformed. Recent events have accelerated the pursuit for greater meaning – or purpose – from work.

Competition to secure and retain talent will turn on the extent to which organisations differentiate themselves through a distinctive psychological contract – or employee value proposition – they offer employees.

Many employees – including those in healthcare – will trade job security for shorter-term opportunities that more closely align to their values.

In a decade where less than one in ten employees are projected to be in secure employment, employers who offer a working community to which people they feel they belong, where their personal differences are equally recognised, and united in values with their colleagues and leaders, will attract and retain the best talent

New ways of working

In 2030, we will require a workforce that is comfortable with digital models of care, and on using the insights we can draw from big data

Despite future estimations pegging the potential for remote work in health to just 6% (compared to education's 30%), the increase in digital health services has been substantial

The response to Covid-19 demonstrated how we can remove barriers to joint working, and how we can leverage skills and experience across a whole healthcare system.

People will increasingly demand seamless user-driven support where human resources will anticipate their diverse needs speeding up decision-making, problem solving, service execution, and contributing directly to health outcome improvements.

People professionals need developing as they integrate talent management and organisational development into the strategic and financial dynamics and planning of the organisations and regions they serve.

A new compact between the People Profession and People Managers will emerge enabling decision-makers at all levels to ensure all employees are appropriately equipped and enabled to do their jobs to the best of their collective abilities

Growing for the future

Attracting and retaining talent will be enormously challenging. Work will increasingly involve higher level skills, with the highest paid rewarded as much for their collaborative and emotional capabilities as for their technological and cognitive abilities.

Offering new career trajectories will help the NHS meet growing demand, while offering meaningful work opportunities to experienced and skilled workers capable of rising to a new challenge.

Agile, evidence-based and responsive systems will be required to ensure greatest flexibility in hiring, onboarding and ongoing development. New skill profiles of existing employees will smooth redeployment, upskilling and career enhancement trajectories, retaining employees who would otherwise leave when faced with obstacles to their aspirations or preferred ways of working

If people are the health sector's most important asset, it requires a profession appropriately resourced. Outstanding health care requires an exceptional talent base supported by leading-edge learning and development that enables individuals and systems to flourish.