

Ms Amanda Pritchard Chief Executive Officer National Health Service England 22 London Road London SE1 6JW

cc. Mr Julian Kellv Chief Financial Officer National Health Service England 22 London Road London SE1 6JW

5 May 2022

## Dear Amanda,

I am writing to express our keenness to collaborate with NHS England and Improvement (NHSE/I) on the long-term workforce strategy that the Department of Health and Social Care (DHSC) has commissioned. We welcome this news and I believe there is an invaluable contribution that the Recruitment and Employment Confederation (REC) and our member agencies should make to this.

As part of this strategy, we would advocate for the equal treatment of contingent workers - who will always be needed to some degree by the NHS - and support a review into NHS workforce procurement. The aims of a revised system should be to create a public procurement framework that is fair, sustainable, provides value for taxpayers' money and prioritises improving patient safety and care. I believe these are our shared goals. If such a system can be achieved, this will work for all parties: the NHS, DHSC, agencies, patients and the public.

We have a large volume of data and market intelligence that we can share with NHSE/I to contribute towards the workforce strategy. Enclosed is a briefing pack that summarises some of this initial data. As has often been acknowledged by NHSE/I, NHS Employers and others, contingent labour and staffing solutions will always be needed within the NHS - whether that is through an agency, a bank, an insourcing supplier or any other model. As taxpayers, the REC and our members agree that there should be regulation and proper controls when public money is involved. To do this well means taking a holistic view of all the staffing models and seeking to find solutions together.

The workforce issues we currently see highlight why we need this review. The current set up of frameworks and price caps does not meet its original objective to control spending on the temporary workforce. Not only are there a significant number of off framework agencies and break glass requests in operation, but also other models that



020 7009 2100



are not seen as direct 'agency' spend have been created as a result of the current system.

On another note, the agency price card 2022-23 that was published on 29 March has led to some confusion and operational challenges, due to the late issuing and the implications of the National Insurance (NI) increase. This is particularly affecting SMEs despite one of government's clear policies being to improve SME participation in public procurement frameworks. The rate card does not provide for equal treatment either. Agency workers have not been rewarded with the 3% pay increase that their substantive counterparts received last year. The message this sends to agency workers is that their contribution is not fully valued by NHSE/I and DHSC. Agency workers are just as qualified and dedicated as substantive staff and they have proven their value, time and time again, no more so than in the last 24 months. We are here to support and facilitate communication to agencies supplying staff to the NHS - so we repeat our offer to work with us when considering rate changes. We work very effectively with other government regulators without there being any conflict of interest so we are confused about this being a message from NHSE/I.

Temporary workers fill 15,000 NHS vacancies every quarter, and three in four nursing vacancies. Both the demand for temporary workers and people's desire to work flexibly are increasing. Our data and qualitative evidence suggest that flexibility is the number one factor why so many healthcare staff make a conscious career choice to work fulltime via agencies. Most recently, this has been supported by an article in the HSJ stating more than 7,000 people are resigning from the NHS, seeking flexibility and a better work-life balance. We want to work with you to ensure that these workers don't leave the NHS all together.

We would be keen to discuss these issues in more detail with you and your senior team leading the review so we can actively contribute to improving our NHS. Natalie (Natalie.wright@rec.uk.com) in my office will be happy to arrange a meeting at a mutually convenient time.

Yours sincerely,

Kate Shoesmith

**Deputy Chief Executive** 

