Devolution and Nursing Workforce Policy and Planning in the Four Countries of the United Kingdom

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This poster is the summary of a completed PhD thesis, which examines how political devolution in the UK impacted upon nursing workforce policy and planning. The study investigated two research questions: What has been the impact of devolution on nursing workforce policy and planning across the four countries of the UK? How and why have approaches to nursing workforce policy and planning changed across the four countries of the UK?

The research methodology used was a mixed methods approach which included semi-structured interviews with 30 stakeholders from the fields of nursing, healthcare policy or workforce planning across the UK. A purposive sampling strategy was adopted and the distribution of interviewees was England (11), Scotland (7), Wales (6) and Northern Ireland (6).

A realist review approach to inquiry was taken which involved establishing what works for who, in what circumstances and why? The qualitative data from the interviews was supplemented by analysis of quantitative data on nursing workforce trends and the synthesis of key themes from health policies from each of the four countries.

The key findings include: changing patterns of power and influence in the devolved administrations; continued cycles of ‘boom and bust’ in nursing workforce supply; variable growth in the nursing workforce across the UK; the unwillingness of England to ‘let go’ and the perception by some interviewees that some national policies were unimportant.

The conclusions were that although devolution enabled greater freedoms in terms of policy and workforce flexibility, just under half of the interviewees reported that devolution had a positive impact upon nursing. There was reluctance from senior nursing leaders to share and learn from good practice across countries and despite the rhetoric from numerous reports around the need to improve nursing workforce planning, there was little evidence of lessons being learned which would have improved the effectiveness of planning the future nursing workforce.

This research has provided new knowledge and insight into the impact of devolution on nursing workforce policy and planning in the UK. It has highlighted that although devolution has resulted in increased local flexibilities, this has not had a significant sustained impact on the overall profile or importance of nursing workforce planning. Devolution has created increased opportunities for each of the four countries to ‘try out’ different approaches in relation to nursing workforce policy and planning, however the failure to learn lessons and adopt good practice has led to duplication of effort and an overall lack of progress.

A new approach is required to deliver real improvements in nursing workforce policy and planning to prevent a recurrence of ‘boom and bust’ cycles of and the associated cost to the healthcare system, individual nurses and patients. In order to address these deficiencies there is the need first and foremost for nursing leaders both nationally and locally to have a clear responsibility for nursing workforce policy and planning decisions as these decisions are of critical importance to the future sustainability of the profession.