



Department
of Health &
Social Care

Steve Barclay MP
Minister of State for Health

39 Victoria Street
London
SW1H 0EU

020 7210 4850

Dr Sarah Wollaston MP
Chair, Health and Social Care Select Committee
By email: hsccom@parliament.uk

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I am writing to apologise for the late publication of the Government's response to the Health and Social Care Select Committee's report on the nursing workforce. I welcome the Committee's inquiry and report into the nursing workforce, am grateful for the comments and recommendations provided, and aim to respond shortly.

The Committee raised many vital points on a number of important, but also complex issues. I want to assure you that robust and constructive dialogue has taken place, and continues to take place, between the Department and its arm's length bodies in the context of longer-term plans for the health and care system

I would briefly like to outline our approach to some of the specific recommendations of the report. Firstly, the Chief Nursing Officer is establishing a Health and Wellbeing Group. The group will be chaired by Caroline Alexander, Chief Nurse at Barts Health NHS Trust and will seek engagement from a range of nurses. The group will align to the wider programmes on healthy workforce and sickness absence management across NHS England and NHS Improvement to ensure that the needs of nurses are understood and supported, including the points you raised about handovers, breaks and food and drink on wards.

We recognise the Committee's correct focus on the importance of Continuing Professional Development. Given that different organisations have different roles in the provision of training, we want to explore this issue in further detail and are looking at how we may be able to do this, in line with longer term plans for the NHS workforce including our Workforce Strategy and a multi-year pay deal for NHS staff employed under the Agenda for Change Pay contract.

As you are aware, in summer 2017 the Nursing and Midwifery Council (NMC) began a review of its approach to language testing in order to ensure that it is both proportionate and sufficient to protect the public. Departmental officials will continue to closely monitor the impact of language testing on the nursing workforce

by working with the NMC, participating in stakeholder meetings and reviewing the information contained within NMC Register publications.

With regard to the Nursing Associates (NAs) role, we are planning to develop a range of materials, including for patients and the public, for when the first NAs qualify from training in January 2019.

I would like to assure you that we have listened to the Committee's concerns about pre-registration training, in particular applications from more mature students and those undertaking postgraduate courses.

As you know, on 9 May I announced £10million funding for incentives for postgraduate students who go on to work in mental health and learning disability fields, as well as those postgraduates who go on to work in community nursing roles. I have asked my officials to work closely with stakeholders on the roll out of the scheme.

Lastly, as you will be aware, nurses remain on the Home Office national shortage occupation list to facilitate the recruitment of nurses from outside the European Economic Area in instances where trusts wish to do so. We have also reached agreement with the European Union guaranteeing the rights of the 157,000 EU nationals working in our health and care system who will be able to stay and enjoy broadly the same rights and benefits as they do now.

I would like to apologise again for the delay and reiterate that we look forward to publishing our response shortly.



STEVE BARCLAY