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MANPOWER AND EFFICIENCY IN THE NATIONAL HEALTH SERVICE

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I attach a draft PQ and answer which summarises the provisional estimates for September 1981 for all the main staff groups in the National Health Service. The figures are provisional because they have been derived from the payroll computer tapes of the fourteen Regional Health Authorities under new arrangements to secure more timely statistics. As teething troubles in the new arrangements are corrected we will be much better placed to answer questions on changes in the numbers of health service staff.

As you will see between 1979 and 1981 the numbers of staff increased by about 47,000 overall and nurses and midwives accounted for about 34,000 of this increase. It seems to me that it is only right for us to take credit for this as it is our policy that the real growth provided for the health service should be concentrated on those directly providing services to patients. On the other hand it has to be said that the reduction in the working week for nurses and midwives from 40 hours to $37\frac{1}{2}$ hours as part of the 1979/80 pay deal will have accounted for a substantial part of this increase. (The note enclosed details the calculations). Both the draft PQ and the table explicitly refer to this change but I do not think it detracts from the overall message that the bulk of the increased resources have gone to those providing services for patients.

These provisional figures show quite rapid increases in other groups of staff including those not directly concerned with patients (though in some cases such as works staff the numbers involved are relatively small). I will want to look at these closely in the reviews I am initiating with health regions to

establish what these changes actually mean in terms of more services to patients, better care and treatment and efficient use of resources. The figures for staff groups not directly concerned with services to patients deserve even closer scrutiny and I underlined this in a meeting with the Chairman of Regional Health Authorities last week which was attended also by Sir Derek Rayner.

If you are content I will arrange for these figures to be tabled shortly - perhaps through a question from Peter Hordern who is taking a close interest. Meantime I have suggested a more general reply to his letter to you of 4 March.

NF

22 March 1982

SC

To ask the Secretary of State for Social Services whether he has yet received figures of NHS Staffing in England in September 1981; if so, whether he will publish them in a table showing how numbers have increased since 1979; and if he will make a statement.

REPLY

The table below gives the numbers, in whole-time equivalent terms, for all the main National Health Service staff groups for 1979 and 1980 with provisional figures for September 1981. As explained in the footnotes to the table the differences between the figures for the three years shown are partly accounted for by reductions in the working week and increases in annual leave entitlement.

The provisional overall increase in staff over the period was just over 47,000. Nurses and midwives accounted for about 34,000 of this increase. This reflects Government policy to improve our health services and in particular to increase expenditure on direct services to patients.

NHS DIRECTLY EMPLOYED STAFF: ENGLAND, 30 SEPTEMBER

Thousand Whole-time Equivalents

	1979 wte	change 1979-80 wte percentage		1980 wte	provisional change 1980-81 wte percentage		1981 provisional wte	provisional change 1979-81 wte percentage	
	1000	1000	%	1000	1000	%	1000	1000	%
Medical and Dental Staff (1)	37.1	1.2	3.1	38.2	0.7	2.0	39.0	1.9	5.1
Professional and Technical	60.1	1.8	2.9	61.9	1.4	2.3	63.3	3.2	5.3
Works	5.6	0.3	5.7	5.9	0.1	2.3	6.1	0.5	8.1
Maintenance	20.1	0.5	2.3	20.6	0.4	2.0	21.0	0.9	4.4
Administrative and Clerical	103.0	2.5	2.4	105.4	3.1	3.0	108.6	5.6	5.4
Ambulance (inc Officers)	17.1	0.6	3.7	17.8	0.5	2.7	18.2	1.1	6.5
Ancillary	171.9	0.1	-	172.0	0.4	0.2	172.4	0.5	0.3
Total excluding Nursing and midwifery staff	414.9	6.9	1.7	421.8	6.7	. 1.6	428.5	13.6	3.3
Nursing and Midwifery (2)	-						1993 - 25		
(1979: 40 hour week 1980 and 1981: 37½ hour week)	358.4	11.6	3.2	370.1	22.1	6.0	392.2	33.8	9.4
(1979 converted to 37½ hour week (3) basis in order to be comparable with 1980 and 1981)	(382.3)	(-12.3)	(-3.2)	370.1	22.1	6.0	392.2	9.9	2.6
All staff including nursing and midwifery	713.4	18.5	2.4	791.8	28.9	3.6	820.7	3 47.A	6.1
All staff including nursing and (4) midwifery	(797.2)	(-5.4)	(-0.7)	791.8	28.9	3.6	820.7	23.5	2.9

adjusted to take account of change to 372 hour week

NOTES

- 1. Includes locums; excludes hospital practitioners, part-time medical officers (clinical assistants), general medical practitioners participating in Hospital Staff Funds and occasional Sessional Staff in the Community Health Services. The number of general medical practitioners also increased by 1,400 general practitioners do not appear in this table which deals only with employed staff.
- 2. Includes agency nurses and midwives and health visitor students.
- 3. The line above shows that nursing and midwifery staffs (including unqualified as well as qualified staff) rose by about 33,800 whole-time equivalent on a straight comparison between 1979 figures based on a 40 hour working week and the estimated whole-time equivalent figures for 1981. In 1980 the working week was reduced to $37\frac{1}{2}$ hours and in this line the figures for 1979 have been adjusted to take account of this change.
- 4. As explained in 3 the line above which shows the change in all staff, including nurses and midwives, compares 1979 figures when the working week for nurses 40 hours with 1980 and 1981 when their working week was reduced to 37½ hours. This line shows the change when the 1979 figures have been adjusted to take account of the reduction in the nurses working week. Some other groups of staff also have had reductions in the working week or changes in leave entitlement over the period.

NURSING AND MIDWIFERY STAFF: THE EFFECT OF THE REDUCTION IN WORKING HOURS

- 1. The effect of the change in the hours of nursing and midwifery staff from $40 \text{ to } 37\frac{1}{2}$ hours a week, which took place over a period between April 1980 and 1981, was to reduce the contribution of each full-time nurse or midwife by $2\frac{1}{2}$ hours, or $6\frac{1}{4}$ per cent.
- 2. When they introduced the $37\frac{1}{2}$ hour week health authorities had to make up this deficiency, in one of a number of ways:
 - by absorbing part of the change through more efficient rostering, where this was possible (an efficiency saving)
 - by temporary use of overtime, until more staff could be recruited (overtime does not appear in the whole-time equivalent figures)
 - by recruiting more staff.

The great majority of the deficiency had to be made up in this last way, by extra recruitment.

- 3. The hours of the very large number of part-time nursing and midwifery staff also had to be recalculated on the basis of a $37\frac{1}{2}$ hour week, producing a notional increase in part-time working, in terms of whole-time equivalents. For example a nurse working 20 hours, who appeared as half-time under the 40 hour week, would now appear in the statistics, and be paid, as working more than half time.
- 4. The Department's published nursing figures for 1980 gave two figures of whole-time equivalent staffing, one on the basis of a 37½ hour week, and one (in brackets) in which the effect of the notional increase in part-time working between 1979 and 1980 was eliminated by basing the 1980 part-time figures on a 40 hour week, but not the extra recruitment made necessary by the change in the working hours of full-time staff.
- 5. It now seems clearer, and more defensible to present the change in broader terms, offsetting against the change in working hours the whole of the extra recruitment needed to make up the deficiency it created in contractual hours.

- 6. Over a two year period the whole-time equivalent of nursing staff rose from 358,000 in September 1979 (based on the 40 hour week) to 392,000 in September 1981 (based on the 37½ hour week) an increase of around 9½ per cent. These are historically 'correct' manpower figures, and real in the sense that they represent the contractual hours the NHS is paying for.
- 7. However, for purposes of comparison, if the September 1979 figure is recalculated on the basis of a nominal 37½ hour week, ie increased by a factor of 40/37.5 or 6.7 per cent, it becomes 382,000 instead of 358,000. We then have a service increase, in terms of contract hours worked, of 2.6 per cent over the two year period, leaving about 6.7 per cent of the 9.5 per cent increase mentioned above as due in one way or another to the change in contract hours. This increase seems a more appropriate measure of manpower growth in resource input terms, and would be used, for example, in a PESC context.
- 8. Both calculations are shown in the table suggested with explanatory notes.

Monday 8 March 1982 Written Answer PQ 2168/1981/82 Han Ref Vol 19 Col 334 - 36

NATIONAL HEALTH SERVICE PAY

186 Mr Jim Spicer (C. West Dorset)

To ask the Secretary of State for Social Services, what is the latest position on National Health Service pay in 1982-83.

MR NORMAN FOWLER

My right hon and learned Friend, the Chancellor of the Exchequer announced in his statement on public expenditure on 2 December that expenditure plans for 1982/3 included a 4 per cent pay factor for the public services. Allocations for 1982/83 to Health Authorities in Great Britain accordingly include 4 per cent for increases in earnings from due settlement dates. It remains the Government's view that this is in general an appropriate provision. The Government recognise the need for pay settlements to take account of market factors including their effect on recruitment and the retention of certain types of expensively trained staff in the NHS. An additional £81.9 million will, therefore, now be made available for some specific groups within the NHS responsible for the direct treatment of patients. This money, which includes the cost of related employers' superannuation and national insurance contributions, will be available to finance appropriate pay settlements for nurses and midwives and for the professions supplementary to medicine, to introduce a new contract for ambulancemen and an emergency duty agreement for hospital pharmacists. Two thirds of the additional money will be provided from the contingency reserve and added to the cash limits, and the remaining third will be found by Health Authorities. The pay of doctors and dentists will be considered in the light of the Report of the Doctors and Dentists Review Body later in the year.

Health Service staffing in England in September 1981; whether he will publish them in a table showing how numbers have increased since 1979; and if he will make a statement.

Mr. Fowler: The table which follows gives provisional figures in whole-time equivalent terms, for all the main National Health Service staff groups for September 1981, compared with the numbers employed in 1979. As explained in the footnotes to the table the differences between the figures are partly accounted for by reductions in the nurses working week.

The provisional overall increase in staff over the period was just over 47,000. Nurses and midwives accounted for about 34,000 of this increase. This reflects Government policy to improve our health services and in particular to increase expenditure on direct services to patients.

National Health Service (Manpower)

Mr. Hordern asked the Secretary of State for Social Services whether he has yet received figures of National

NHS Directly Employed Staff: England, 30 September 1981

6 and yet to provide the bills has question been extended 1979 wite	Whole-time 1981 provisional wte	Equivalents Provisional character wte	nge 1979-81 percentage
Nursing and Midwifery Staff 358,400	392,200	33,800	wadvalle all 9.4
Medical and Dental Staff 37,100	39,000	1,900	5-1
Professional and Technical 60,100	63,300	3,200	
Works 5,600	6,100	500	the thorsborn 5:3
Maintenance 20,100	21,000		ilsin Aun a 2 8.1
Administrative and Clerical 103,000		900	4.4
A - E - I - // I I' - O - O - O - O - O - O - O - O - O -	108,600	5,600	5.4
A	18,200	1,100	6.5
Ancillary (Institutional Info-Dia Alexandra) 171,900	172,400	500	0.3
All Staff 773,400	820,700	47,400	6.1

Notes.

1. The figures for nursing and midwifery staff include agency nurses and midwives and health visitor students. In 1980 the working week was reduced from 40 hours to 37½ hours and part of the increase of 33,800 (whole time equivalent) will be accounted for by additional staff recruited as a direct

2. The figures for medical and dental staff include locums; exclude hospital practitioners, part-time medical officers (clinical assistants), general medical practitioners participating in Hospital Staff Funds and occasional Sessional Staff in the Community Health Services. The number of general medical practitioners also increased by 1,400—general practitioners do not appear in this table which deals only with employed staff. 3. The slight discrepancy between the figures shown for individual staff groups and the totals arises through independent rounding of the figures

in each group.

Not Health.



hc Mr Vereker Mr Scholar

24 March 1982

Manpower and Efficiency in the NHS

The Prime Minister was grateful for your Secretary of State's minute of 22 March, providing updated information on NHS staff numbers, and in particular on nurses and midwives.

She is content for the new gigures to be published in a Parliamentary Answer. She has not yet written to Mr. Hordern, but I expect her to do so shortly.

MA PATTISON

D.J. Clark, Esq., Department of Health and Social Security.

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10 DOWNING STREET

Prime Minister

Content that these figures should now be published, as Mr

Fowler suggests in his finil rangiagh?

19/40 23/3 Vo M Monday 8 March 1982 Written Answer PQ 2168/1981/82 Han Ref Vol 19 Col 334 - 36

NATIONAL HEALTH SERVICE PAY

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