

Supplementary submission on NHS vacancies

Overview

The Nuffield Trust is an independent think tank which uses research and policy analysis to improve health care in the UK. At the request of the Committee, this submission outlines estimates for the number of vacancies in the NHS in England, based on the limited data available.

The prominent available data on NHS hospital and community services in England suggest there were some 105,855 posts not filled by permanent or fixed term staff as at March 2022. Around half of these are nursing or medical posts. However, the majority of these vacancies are filled with temporary staff. Our analysis of data submitted to the Committee suggest that there were in the region of 8 to 12,000 full-time equivalent nurse and around a further 1,400 doctor vacancies unfilled around May 2021.

However, vacancies make up only a proportion of all reasons for day-to-day staffing shortages. For example, across a broad set of healthcare providers there were around 122,500 staff reportedly absent from work on 6 January 2022 through sickness or self isolation. It is not clear what proportion of those absences were filled temporarily. Looking at nursing, and considering all reasons for staff shortages, the number of requests for temporary staff on 20 May 2021 was equivalent to an estimated 98,800 vacancies and absences, of which around 17,200 are not filled by temporary staff.

Defining a vacancy

The most commonly reported figure on NHS vacancies is likely that published by [NHS Digital](#), which stood at 105,855 as at March 2022. This figure captures the number of posts that are unfilled by permanent or fixed-term (i.e. substantive) staff. However, these reported vacancies may be filled by temporary staff and, as such, they may not represent a staffing shortage in all these cases.

On the other hand, this number does not include short-term gaps in staffing rotas caused by, for example, staff sickness. While these may not be captured in the 'vacancy' data, such absences – if not filled by temporary staff – can have negative consequences for other staff and patients. It also does not capture any vacancies across roles that are not directly employed by NHS Trusts, including those within contractors or in general practice.

It is also important to note that vacancies are usually considered in relation to how many funded posts there are (the funded or budgeted 'establishment'). This is, therefore, constrained by the workforce budget and does not reflect how many staff might be considered desirable.

Estimates for NHS staffing shortfalls

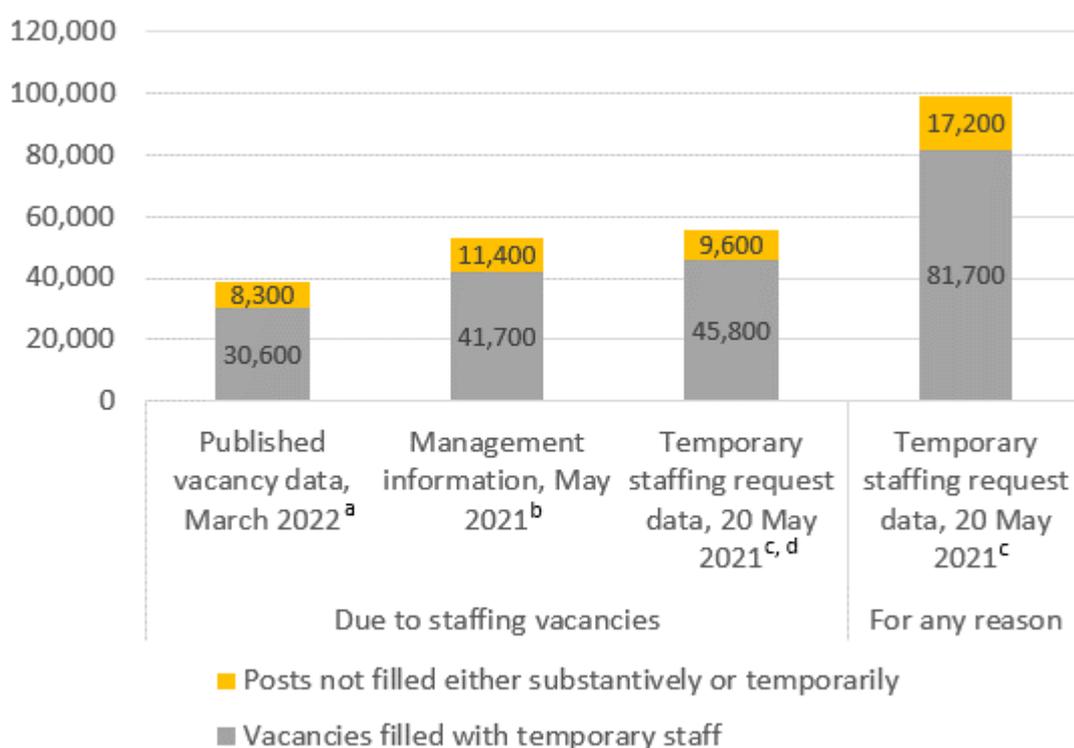
In May 2021, it appears that around four-in-five 'vacancies' are filled temporarily. Information provided by NHS Professionals suggests that, of temporary staffing requests that were filled on a given day, over half (56%) were due to 'staffing vacancy' (i.e. the post is unfilled by substantive staff) and one-in-six (16%) due to long-term sickness.

According to the data published by NHS Digital, there were 38,972 (10%) full-time equivalent registered nurse posts not filled by substantive staff across NHS Trusts as at March 2022. However,

this may be an underestimate. Alternative, bespoke data provided by NHS Professionals and NHS England & NHS Improvement, albeit for May 2021, suggest there could have been over 50,000 nursing and midwifery vacancies (see Figure 1).

While the exact number is not reported, we estimate that around 8,000 to 12,000 full-time equivalent nurse vacancies were not filled by temporary staff over the various time periods covered by the different available sources of data on shortfalls. Considering all reasons for staff shortages, the number of requests for temporary staff on 20 May 2021 may be equivalent to 98,800 vacancies and absences, of which around 17,200 are not filled by temporary staff.

Figure 1. Various estimates for nurse and midwife vacancies and absences, full-time equivalents (rounded to nearest 100)



Notes:

- To estimate the posts not filled at all, we use the fill-rate (78.6%) provided by NHS England & NHS Improvement although this is for an earlier time point. Reported vacancies were similar for a comparable time-period to the other data sources (38,814 for June 2021). Data for registered nurses only.
- To convert data to full-time equivalent estimates, we assume, based on the data provided (41,694 full-time equivalent temporary staff filling around 476,000 shifts), that there were on average 11.4 shifts that month per full-time equivalent.
- Figures derived from NHS Professionals information should be treated with caution as they are based on 51 Trusts, with assumption that shortages across those reflect the patterns nationally. To calculate estimates based on the data which related to hours, we assume – accounting for non-working days – that a full-time employee would likely work 6.5 hours on that day.
- Estimate assumes that fill-rate for filling staffing vacancies is the same as for all vacancies (82.6%)

Sources: [NHS Digital](#) ('published data') and letters provided to the Health and Social Care Committee from NHS Professionals ('temporary staffing request data') and NHS England and NHS Improvement ('management information').

Using a similar approach to that described above for nurses, we estimate that – as at May 2021 – there may have been 12,000 vacancies for doctors. This is higher than the published data which suggested that, by the following month, vacancies stood at 9,659 (and 8,016 by March 2022). Given

the higher reported fill-rate for medics – fewer than 1 in 8 shifts are not filled with temporary staff in May 2021 – the number of actual staffing gaps may be in the region of 1,400 full-time equivalents.

As mentioned above, across NHS Trusts total workforce there were a reported 105,855 (7.9%) posts not filled with permanent or fixed-term staff as at March 2022. In addition, there are also staffing pressures caused by sickness absence. The latest sector-wide [data](#) available, for January 2022, estimated a 6.7% sickness absence rate across NHS hospital and community services which is equivalent to around 88,000 absences every day.¹ In fact, across a broader set of healthcare providers, there were [reportedly](#) around 122,500 staff absent from work through sickness or self isolation on 6 January 2022. It is not clear what proportion of these absences are filled temporarily.

Gaps in our understanding

These estimates are not certain. In fact, the number of vacancies and absences, as well as proportion that are able to be filled temporarily, will vary considerably over time.

There are also limitations with the data. For instance, NHS Digital notes about the data it published (but relevant to NHS England & NHS Improvement's management information too) that “as with any directly collected data there are potential issues with respect to interpretation and application of guidance”. The data from NHS Professionals also does not cover the majority of NHS trusts and so we have had to make some assumptions to generate a national estimate. Other assumptions used to estimate the number of posts not filled by substantive or temporary staff were made to convert data on shifts and hours to full-time equivalent staff which, again, adds some uncertainty to the figures presented.

The estimates also do not cover some services, such as general practice. Given the importance of understanding staff shortages it is disappointing the conclusion from a 2016 national [report](#) – that “available data on vacancies are poor” – remains true.

¹ Based on 31 days in January. The levels are likely to be higher from Monday to Friday when there are more staff due to work.