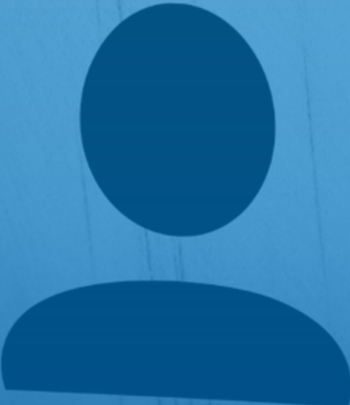


Health and Social Care Workforce Strategy – Delivering for our People

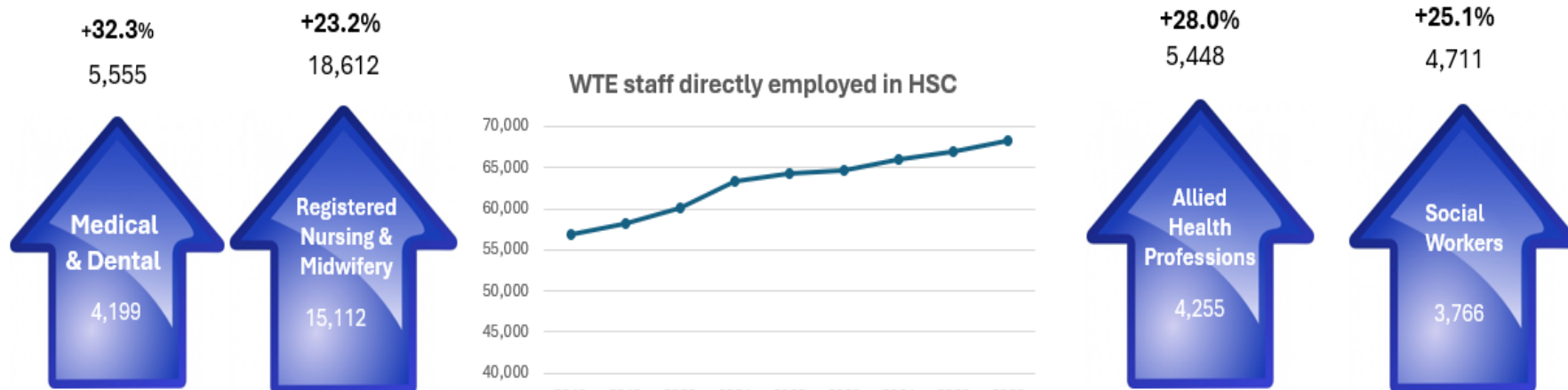


Third Action Plan Progress Report (31 March 2026)



Department of
Health
www.health-ni.gov.uk

HSC Workforce (Whole Time Equivalent) by Staff Group, 31 March 2018 to 31 March 2026



**Strengthening Our Core
Staff Health & Wellbeing
Framework**



Being Implemented

HSC Recruitment Review Programme

Time to Fill has reduced significantly, with waiting list recruitment reduced by 15.6 days (33%)
bespoke recruitment down by 9.5 days (13%)

**Development of HSC Multi
Disciplinary Retention Framework
Underway**

**Pilot public sector apprenticeship: Diagnostic
Radiography**



Health and Social Care Workforce Strategy: Delivering for our People

The Third Action Plan (to March 2028)

Introduction

The Department of Health's ambitions for developing the Health and Social Care (HSC) workforce are set out in the *Health and Social Care Workforce Strategy 2026: Delivering for our People*, published in May 2018. Since its publication, the Department, HSC employers and system partners have worked collectively to stabilise, grow, and reform the workforce, recognising its central role in delivering safe, effective and sustainable services for the population.

Sustained progress has been achieved through successive action plans which have strengthened workforce supply, improved recruitment processes, and enhanced retention initiatives across a wide range of professions. These efforts have delivered measurable improvements, including a significant expansion in the overall workforce. By March 2026, the HSC workforce had increased by 20.3% compared with March 2018, representing an additional 11,538 whole-time equivalent staff now in post across the HSC. Growth has been particularly notable across key professional groups, including medical and dental staff, nursing and midwifery, allied health professions, and social work (see **Appendix 1**).

Alongside this growth, important system-wide improvements have been delivered. These include the establishment of a stronger employer brand, streamlined recruitment pathways, the expansion of training and education capacity, and the introduction of targeted international recruitment programmes. Progress has also been made in reducing reliance on agency staffing, strengthening workforce planning, and enhancing staff health and wellbeing support. More recently, advances in digital capability, including the rollout of major programmes such as Encompass and the planned introduction of the Equip programme, are beginning to transform how staff work and how services are delivered.

While these achievements provide a strong foundation, workforce challenges remain. Demographic pressures, increasing demand for services, workforce supply constraints in specific areas, and ongoing financial pressures mean that continued focus is required to ensure the workforce is configured to meet current and future needs.

It should be acknowledged that implementation of the Strategy was significantly impacted for several years due to the pandemic response. Given this disruption, the momentum achieved in delivery in recent years, and the view that the aims and objectives of the Strategy remain

relevant and consistent with current Department of Health priorities, Minister Nesbitt has approved an 18-month extension to the life of the Strategy, to the end of March 2028.

To align with this extension, the Strategy's Third Action Plan has been developed through extensive engagement with stakeholders across the HSC system, including employers, professional leaders, trade unions, and delivery partners. It reflects a shared understanding of the priority actions required to build on the progress made to date and address ongoing challenges. The Third Action Plan sets out a coherent and ambitious programme of work for the period April 2025 to March 2028, aligning with wider strategic priorities, including *Health and Social Care NI: A Three-Year Plan to Stabilise, Reform and Deliver* and the *HSC Reset Plan*.

The Third Action Plan is structured around four key pillars:

<u>Pillar 1</u>	<u>Pillar 2</u>	<u>Pillar 3</u>	<u>Pillar 4</u>
• Attraction • Recruitment • Retention	• Workforce Planning • Training and Development • Agency Reduction • Safe Staffing • Multi-Disciplinary Working including creation of new roles	• Health and Wellbeing • Communication and engagement • Recognition	• Data and analytics

Across these pillars, the Third Action Plan outlines 22 strategic actions and a series of defined outputs, each with clear leadership and accountability for delivery. It represents a comprehensive and flexible framework, enabling continued progress while responding to an evolving operating environment.

The Department recognises that delivery of the Third Action Plan will take place in a challenging financial context. While not all actions require additional investment, achieving the full ambition of the Strategy will require sustained funding and continued prioritisation. The Department remains committed to working with partners across government and the wider HSC system to secure the resources required and to maximise the impact of available funding.

Overall, the Third Action Plan reflects both the progress made to date and the scale of the challenges ahead. It sets a clear direction for the continued development of the HSC workforce, ensuring it is equipped, supported and resilient enough to deliver high-quality care for the people of Northern Ireland, now and into the future.

Implementation of the Third Action Plan is ongoing, and this report provides an update on progress achieved in implementation up to 31 March 2026.

Objective 1: The reconfigured health and social care system has the optimum number of people in place to deliver treatment and care, and promote health and wellbeing to everyone in Northern Ireland, with the best possible combination of skills and expertise

Theme 1 – Attraction, Recruitment and Retention

Action 3.1 - Continue to develop an HSC wide approach to the promotion of health and social care careers

Through the **HSC Recruitment Review Programme**, work has progressed across HSC organisations during 2025/26 to strengthen how careers within the service are promoted to prospective applicants. This has included a focus on raising awareness among both job seekers and students of the full breadth of opportunities available across the HSC, encompassing frontline clinical and professional roles, as well as a wide range of support and corporate career pathways.

As part of the development of a regional HSC Recruitment Attraction Strategy, initial work also commenced on establishing sustainable, long-term recruitment pipelines. This included a particular emphasis on engaging earlier with young people and students, especially those in Years 10 and 11, to increase awareness of HSC careers and support informed career choices.

A range of potential outreach approaches aimed at this cohort are actively being explored and scoped, with the intention of developing a more structured and consistent approach to engagement. This work represents a positive step towards building future workforce supply and ensuring that the HSC is well positioned to attract talent across a broad range of roles.

Work is underway to redevelop the jobs.hscni.net website. Aligned with the transition to the new Oracle system through Equip, this presents a significant opportunity to reposition the site as a dedicated attraction platform. The enhanced site will showcase the HSC as an employer of choice, promote the range of roles and professions available, and provide clearer information on career pathways and progression opportunities. This forms part of a longer-term workplan, with delivery anticipated by December 2027.

Action 3.2 - Develop a range of targeted campaigns to showcase health and social care professions for areas with acute staffing needs

The **HSC Recruitment Review Programme** has also commenced a programme of work to assess recruitment and attraction needs across professions and service areas within the HSC. Key developments include the creation of the **HSC Recruitment Attraction Strategy** and an updated Employee Value Proposition, clearly articulating why candidates should join and build their careers within the HSC. Establishing a consistent and compelling narrative across all organisations, and reinforcing this through recruitment activity, is recognised as a central pillar in strengthening attraction.

To complement this work, a series of profession-specific campaigns showcasing careers in high-need roles are being progressed by the respective Chief Professional Officers within the Department. The Office of Social Services (Chief Social Worker) is working with the Northern Ireland Social Care Council (NISCC) to deliver annual campaigns aimed at showcasing **Social Work** and **Social Care**. These campaigns are targeted at both school leavers and the wider potential workforce and include a mix of digital activity and regional, in-person careers events.

Within **Social Care**, this includes the annual **Making a Difference** campaign, delivered in partnership with sector leaders, which promotes the diversity of social care roles across the statutory, community, voluntary and private sectors.

The Chief Nursing Officer, working with the Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC), launched a new Career and Development Model in 2025 to support professional development and retention. This is intended for the wider **Nursing and Midwifery** family, including **Nursing or Midwifery Assistants / Support Workers** working in a range of settings and sectors across Northern Ireland, as well as **students**. The model is based on two key interrelated components, Nursing & Midwifery Careers and the Learning and Development Framework.

Pharmacy Futures NI represents a strategic, targeted recruitment campaign developed by the Department of Health in partnership with Pharmacy Forum NI to attract and retain **Pharmacy** professionals across Northern Ireland. The campaign responds to identified workforce demand and promotes the wide range of opportunities available across community, hospital, and general practice settings. Through a dedicated digital platform, careers events and outreach activity, it provides accessible information on entry routes,

training requirements, and available roles, supporting informed decision-making at different stages of an individual's career journey.

Action 3.3 - Develop alternative training and recruitment pathway into a career in health and social care

The lack of a funding model for Public Sector Apprenticeships in Northern Ireland has proved to be a major obstacle to the development of apprenticeship programmes within the HSC. Recognising the potential value of such programmes to health and social care, Minister Nesbitt approved funding to deliver a pilot Public Sector Apprenticeship programme in a healthcare profession to assess the suitability of apprenticeships within the HSC should a funding model be developed for Public Sector Apprenticeships in Northern Ireland in the future.

This project, which is being delivered collaboratively with the Department for the Economy, identified diagnostic radiography as an appropriate profession for this pilot. Following extensive planning, five apprentices from the existing HSC Assistant Diagnostic Radiography workforce commenced the **Pilot Diagnostic Radiography Apprenticeship Programme** in January 2026 through a training programme delivered by the University of Derby, with a view to acquiring the qualifications necessary for employment as registered Diagnostic Radiographers. The programme is designed to run over an 18-month period, combining academic learning with practical on-the job clinical experience. The pilot will be evaluated to assess outcomes which, it is hoped, will inform the development of Public Sector Apprenticeship policy in Northern Ireland more broadly.

HSC Trusts are also exploring opportunities to utilise existing **apprenticeship programmes in non-healthcare roles**, with a view to establishing alternative training routes into careers in non-healthcare support professions.

Action 3.4 - Establish processes and procedures to ensure safe recruitment practice is managed in as short a time as possible engaging the candidate throughout the journey

Following completion of a **Review of HSC Recruitment** which reported in 2022, an **HSC Recruitment Review Programme** was established to drive implementation of the recommendations arising from this review. The work of this programme continues to deliver

sustained and measurable improvements in recruitment performance across the HSC. Since the September 2022 baseline, Time to Fill has reduced significantly, with bespoke recruitment reduced by 9.5 days (-13%) and waiting list recruitment reduced by 15.6 days (-33%) by September 2025. These outcomes demonstrate the positive impact of targeted actions to streamline processes and improve overall efficiency.

Progress is being reinforced through a range of complementary initiatives, including the development of a Hiring Managers' Recruitment and Selection Toolkit, refinements to waiting list management, and enhancements to pre-employment checks, particularly in relation to occupational health assessments and escalation processes.

Delivery of a Future Recruitment Model remains a central priority. This will be progressed in two phases, with Phase 1 (January to November 2026) focused on preparing recruitment teams for the Equip system go-live, followed by Phase 2 (April to December 2027), which will see full implementation.

In parallel, several key enabling actions are being advanced, including redevelopment of the HSC Careers website, development of an Employee Value Proposition for HSCNI, and introduction of an interim recruitment model ahead of Equip. Additional efficiencies are anticipated through improvements to Occupational Health pre-placement processes, including a new e-form expected to reduce processing times by up to 4–5 days, alongside the rollout of Amicus pre-employment checking across HSC Trust recruitment teams.

Overall, the programme continues to build strong momentum, with clear evidence of improved timelines and a well-defined roadmap to support ongoing transformation and modernisation of recruitment services across the HSC.

A series of profession-specific workforce recruitment approaches are being led by Chief Professional Officers within the Department, aligned with the Workforce Strategy and delivered collaboratively with HSC service colleagues.

Regional Newly Qualified Nurse recruitment takes place twice a year, aligned with the February and September graduations. The recruitment is led by HSC Trusts in collaboration with Recruitment Shared Service Centre, following a regionally agreed approach, and includes engagement with Approved Education Institutions (AEIs). Trust representatives also attend careers events across Northern Ireland and the wider UK to support recruitment efforts.

HSC Trusts are currently exploring options for streamlining recruitment for Band 3 senior nursing assistants.

The Office of Social Service (Chief Social Worker) has worked with HSC Trusts to develop **an annual process to move newly qualifying social workers into post promptly**. This has resulted in 731 newly qualified social workers entering the HSC workforce swiftly since 2023.

The Office of Social Services is currently developing a 10-year plan to attract, recruit and retain social workers and has identified key strategic priorities in relation to recruitment over the coming decade.

Under the **Social Care Workforce Strategy 2025-2035**, the Social Care Workforce Implementation Board has been established to ensure that its key actions, which include improving the recruitment of social care practitioners, are implemented. This includes positive engagement with AccessNI and nidirect aimed at improving recruitment timeframes for social care practitioners.

The Allied Health Professions (AHP) Workforce Programme Board has also introduced a workstream focused on streamlining Band 5 recruitment. The group includes representation from Department of Health, HSC HR, and Trust Assistant Directors / Co-Directors of AHPs and Professional Heads of Service. Initial analysis of Band 5 recruitment data has been completed and is being used to inform recruitment priorities aimed at attracting, recruiting, and retaining the AHP workforce, while ensuring newly qualified AHPs move into post in a timely manner.

Action 3.5 - Explore opportunities to recruit health and social care professions from other jurisdictions

A successful **regional international nurse recruitment programme** has made a valuable contribution to strengthening the HSC workforce, providing important support to nursing services, particularly up to 2023/24. As system capacity to support large-scale recruitment has stabilised, the pace of international adult nurse recruitment has naturally eased, enabling a shift in focus towards other priority areas.

Building on this strong foundation, work is continuing to expand international recruitment across health and social care professions, with AHPs identified as particularly well suited to this approach. Early engagement with professional leads has confirmed strong support for this direction, with **Podiatry** and **Orthoptics** identified as professions for particular focus. A formal business case and detailed scoping exercise are currently being progressed by the Business Services Organisation International Recruitment Project Lead. Subject to funding

availability, an initial assessment of the potential for international AHP recruitment will be undertaken during 2026/27.

This next phase of work is being strengthened by the HSC's established experience in international recruitment. Lessons learned from the successful nursing programme are being actively applied to develop robust onboarding processes, effective pastoral support arrangements, and strong professional integration frameworks. Together, this reflects a positive, coordinated, and sustainable approach, ensuring that international recruitment is aligned with workforce priorities while supporting a high-quality staff experience and long-term retention.

Action 3.6 - Explore and establish non-salary incentive programmes as a means of recruiting and retaining staff

Consideration is being given to reconfiguration of financial support for health and social care to be contingent on the individual working in HSC for a defined period after qualification. Discussions were held with Trade Unions in March 2025 regarding financial support and reinvesting into education and training and a follow up meeting is planned to consider a future consultation which includes a range of options on the way forward. Trade Unions have been asked to submit written views by 25 March 2026.

Action 3.7 - Develop an overarching retention framework that addresses the unique challenges faced by different professional groups.

A range of initiatives to support staff retention are being delivered across HSC organisations. This work is being completed by Chief Professional Officers from within the Department who are progressing projects tailored to the specific needs of their respective professions.

To further support this work and to drive consistency of application across all HSC settings and professions, a project to develop a **Regional Multidisciplinary HSC Staff Retention Framework** commenced in January 2026. The framework has been formally commissioned by the Department of Health Workforce Policy Directorate and HSC HR Directors, with a dedicated project team appointed to progress the work with a view to developing and

launching the framework in early 2027. An HSC steering group has also been convened to provide support and guidance to the project team in the delivery of this project.

Comprehensive engagement will take place in the coming months to gather insights on staff experience, workforce demographics, and expectations around flexibility, career development, and progression. This will ensure the framework is grounded in the lived experience of staff and reflects the evolving needs of the HSC workforce.

The framework will draw on existing workforce data and build on the wide range of retention initiatives already in place across the HSC, ensuring a strong evidence base and alignment with wider workforce planning and service stabilisation activities.

Recognising that a single approach will not meet all needs, the framework will support tailored and targeted interventions for different staff groups and professions, particularly in areas experiencing workforce pressures.

Overall, this work represents a positive and strategic step forward, with the framework set to become a valuable resource for HSC employers, supporting the development of flexible, responsive initiatives that enhance staff experience, strengthen retention, and promote long-term workforce sustainability.

Theme 2 – Sufficient availability of high-quality training and development

Action 3.8 - Commissioning of pre- and post-registration training programmes that are aligned to and meet current and future health and social care requirements for multi-disciplinary service delivery

Informed by its strategic workforce planning programme, the Department of Health has maximised available budgets **to significantly expand pre- and post-registration training opportunities across the HSC**, demonstrating sustained progress in strengthening the workforce talent pipeline from which HSC organisations recruit. This includes a 40% increase in medical school places, rising from 262 in 2019/20 to 367 in 2025/26, alongside continued investment in GP training, with 121 places commissioned annually since 2022/23. Nursing and midwifery education remains a strong priority, with over 1,000 pre-registration places commissioned each year since 2018, with a planned 1,045 places in 2026/27. Allied Health Profession training has also seen substantial growth, more than doubling from 245 places in 2018/19 to 505 in 2025/26, with 450 places to be commissioned in 2026/27.

Investment in social work training places increased from a baseline of 260 in 2018 to an intake of 340 in 2025.

Further targeted investment has been secured to support medical workforce development. Through collaboration with SPPG colleagues, Elective Care funding has enabled the creation of 50 additional anaesthetic training posts between 2025/26 and 2028, including seven posts funded in 2025/26. For 2026/27, a further 25 training posts will be supported across a range of specialties. In addition, 16 extra Internal Medicine Training posts have been funded in partnership with HSC Trusts, commencing in August 2025 and continuing into August 2026. Approval has also been secured for an additional ten Core Psychiatry Training posts, expanding both recruitment and programme capacity.

Theme 3 – Effective workforce planning

Action 3.9 – Develop a strategic workforce planning programme to provide a system wide view of workforce requirements across a reformed health and social care system

Specific organisational roles and responsibilities for workforce planning across the HSC are outlined in the ***Regional HSC Workforce Planning Framework***. An exercise to refresh this framework is ongoing and is aligned with the development of Safe and Effective Staffing (Workforce Planning) Legislation.

The Department of Health currently has specific responsibility for strategic medium to long term workforce planning aimed at securing workforce supply across the entire HSC over a five-to-ten-year horizon. This responsibility is currently fulfilled through a comprehensive **rolling programme of strategic workforce planning**, with the aim of providing a system wide view of workforce requirements across a reformed health and social care system (see **Appendix 2**).

To further enhance these strategic workforce planning capabilities, the Department has commenced a project exploring the development of a **statistical modelling system to produce comprehensive workforce projections for each health and social care professional group** based on an analysis of service demand, including population demographics, and workforce supply. Engagement with colleagues in NHS England is ongoing to gain insights into similar models employed there, with a view to developing similar capabilities to generate medium to long term health and social care workforce projections for Northern Ireland. The development of such a model is considered key to

making HSC strategic workforce planning more efficient and agile and a scoping exercise is planned for 2026/27 to assess the feasibility of this concept.

Progress has been made in undertaking a scoping **exercise to identify vulnerable medical specialties**. A key outcome of this work has been the introduction of a matrix-based assessment model to systematically identify services at risk. This approach considers a range of critical factors, including workforce availability, vacancy rates, age profile, geography, service size, and reliance on locum staff. This structured methodology ensures the consistent and evidence-based identification of vulnerable specialties across the HSC enabling targeted interventions to be applied to these areas to improve workforce stability.

Action 3.10 – Development and implementation of proposals to reduce agency dependency across HSC

The **Regional Agency Reduction Group** is driving delivery and ensuring a consistent, strategic approach to reducing agency dependency across the HSC.

Significant progress has already been achieved, particularly through the **implementation of the Nursing and Midwifery Agency Framework** from 15 May 2023, which led to the cessation of off-contract agency usage from August 2023 and a reduction of £120 million in off-framework expenditure against the 2022/23 baseline. Building on this momentum, a new non-medical / non-nursing agency framework for all other professional staff groups came into effect on 2 June 2025 and **a new Medical and Dental agency procurement framework** came into effect on 2 March 2026. Work also continues to develop Non-Medical Agency Frameworks.

A specific programme to drive **Regional Medical and Dental Agency Reduction** has also been introduced within the broader governance structure of the Regional Agency Reduction Group. This is delivered through a range of workstreams aimed specifically at reducing medical and dental locum dependency, including the development of the new Medical and Dental Agency Procurement Framework, the allocations and utilisation of resident doctors across the HSC, and identification of vulnerable medical specialties that may require targeted intervention.

Encouragingly, data for 2025/26 report a 9.7% reduction in medical and dental locum costs (-£13.7 million) and a 10.7% reduction in nursing and midwifery agency costs (-£17.2 million) compared to the position in 2024/25. Overall, this programme demonstrates strong progress

and a clear commitment to enhancing workforce sustainability and delivering better value across the system.

The HSCNI is implementing agency reduction targets for Nursing and Healthcare Assistant agency utilisation for 2026/27, which will continue to build on the progress achieved during 2025/26.

Building on the progress outlined above, further work is underway to advance **Bank Reform** across the HSC, with a continued focus on strengthening the effectiveness and sustainability of bank staffing arrangements across the system.

Current efforts are focused on several key priority areas, including improving bank performance, increasing workforce capacity, enhancing IT functionality, and exploring approaches to incentivisation. Alongside this, detailed workstream action plans are being developed to drive forward Bank Reform priorities for 2026/27. Together, these initiatives demonstrate continued momentum and a clear commitment to strengthening bank usage as a key component of workforce supply.

Action 3.11 – Development of legislation and consideration of the resources required to ensure safe and effective staffing within health and social care settings

Development of the proposed **Safe and Effective Staffing (Workforce Planning) Legislation** continued during 2025/26. Findings from the 12-week public consultation, completed in October 2024, together with stakeholder engagement, informed final policy proposals due to be considered by the Northern Ireland Executive in April 2026. Subject to Executive approval, drafting instructions will be issued to the Office of the Legislative Counsel, with the legislation expected to be introduced to the Northern Ireland Assembly in September 2026.

The proposed legislation will provide a comprehensive framework to strengthen safe staffing across the HSC, with the aim of improving healthcare quality, staff wellbeing, and patient safety. It will establish a clear set of principles to guide staffing decisions, with a strong emphasis on workforce planning, the use of appropriate staffing tools and methodologies, and structured reporting arrangements. The framework will also clarify responsibilities for workforce planning at all levels: the Department of Health will lead strategic workforce planning; HSC employers will be responsible for operational workforce planning; and the

SPPG and the PHA will provide regional oversight to ensure strategic and operational planning are both aligned and effective.

Preparatory work is already underway to support implementation. This includes the development of statutory guidance and the development of profession specific policies and practices aligned with the proposed legislation including the publication of **a Refreshed Delivering Care Policy Framework**, and the issue of **Safer and Effective Staffing in Social Work Guidance** to HSC Trusts. The AHP Workforce Programme Board is also progressing a range of initiatives to strengthen workforce data intelligence and **support delivery of the legislation within Allied Health professions**, subject to available funding. In addition, the Chief Dental Officer is undertaking work to understand the implications of the legislation for **Community and Hospital Dental Services** in Northern Ireland. As part of a Framework for **Psychological professions** in Northern Ireland, a taxonomy is being developed to identify the core professions, their training pathways and governance and organisational arrangements. Work is also commencing to identify and address psychological workforce gaps in physical health services, complementing the Mental Health Strategy workforce review. Further work is underway to support workforce planning and ensure safe and effective staffing within HSC **pharmacy** services.

Theme 4 – Multi-disciplinary and inter-professional working and training

Action 3.12 – Planning for and introducing new roles

A series of profession-specific workforce initiatives are being led by Chief Professional Officers, aligned with the Workforce Strategy and delivered collaboratively with HSC service colleagues, to support the development of new roles, including advanced and associate practice roles. These developments are informed by evolving service delivery models and ongoing multidisciplinary, service-level strategic workforce reviews, ensuring that roles are designed to meet current and future service needs.

The **Career and Development Model for Nursing and Midwifery** includes role frameworks and the development of three career pathways: clinical, operational and educational & research. These support Health and Social Care Trusts in assessing the roles needed to meet population needs within specific specialties. As part of this model, the Nursing Assistant and Senior Nursing Assistant role frameworks are currently under review.

Within **Social Work**, this has included the creation of **Children's Social Work Senior Support Officer** posts across the HSC to support Children's Social Work teams.

The Office of the Chief Allied Health Professions Officer is currently working on the development of new **Advanced Practice Radiography** roles as part of the DoH Breast Services re-design. Scoping of the potential for new roles in **Sonography** is also being undertaken.

A pilot training course to develop the role of **Clinical Associate in Psychology** is being rolled out by Ulster University in conjunction with HSC Trust Heads of Psychology Services. This Psychological Practitioner profession has already been developed across the rest of the UK.

Work has also commenced within the Pharmacy professions to assess the feasibility of developing **Consultant Pharmacists** roles in Northern Ireland, alongside the publication of guidance on developing the role of **Advanced Practice Pharmacists** in Northern Ireland. Work is also ongoing through the Pharmacy Technician Regulation and Development (PTRD) project to enable the regulation and development of **Pharmacy Technicians** in Northern Ireland. Progressing the registration and regulation of Pharmacy Technicians as healthcare professionals will support the transformation of pharmacy services through the optimisation of skill mix and will help to maintain public safety and confidence in the pharmacy profession.

To support the development of new advanced practice roles across healthcare professions, NIPEC has convened a **Regional Multi-Professional Advanced Practice Network**, with a focus on the development of a **Northern Ireland Multi-Professional Advanced Practice Framework** and a set of core Advanced Practice Principles and competencies. This strategic initiative aims to support and enhance the development and introduction of new Advanced practice roles across HSC services, with a commitment to support the Department's strategic objectives related to the Reset plan and Neighbourhood health model while ensuring the clinical optimisation of the workforce within service redesign.

Action 3.13 – Ensure health and social care reform aligns with and incorporates actions outlined in the Health and Social Care Workforce Strategy

Work is being delivered collaboratively with Departmental and HSC colleagues to ensure that the workforce development themes set out in the Workforce Strategy are fully embedded within programmes to reform health and social care.

Objective 2: Health and Social Care is a fulfilling and rewarding place to work, and our people feel valued and supported

Theme 5 – Building on, consolidating and promoting health and wellbeing

Action 3.14 – Provision of services informed by *Strengthening Our Core: A Regional Framework for HSC Staff Health and Wellbeing in the Workplace* to improve staff health, wellbeing and safety at work

HSC organisations currently provide a range of services to support staff health and wellbeing, including the delivery of Wellbeing Events, the provision of telephone support helplines and counselling through Employee Assistance Programmes, and access to online resources, all aimed at supporting healthy bodies and minds. Additional support is also available through HSC Occupational Health Services.

To assist HSC organisations in this area, the Department published '***Strengthening our Core: A Regional Framework for HSC Staff Health and Wellbeing in the Workplace***' in September 2024. This Framework provides a valuable resource to assist HSC employers in the provision of services and resources to support staff health and wellbeing. Utilisation and implementation of the framework are being supported by a dedicated **Regional HSC Staff Health and Wellbeing Steering Group**. To inform the level of support required, work was undertaken to explore how the Framework has been adopted and operationalised across HSC organisations to date, which included a workshop held with HSC employers on 23 June 2025. Priority areas identified for progression include:

- (i) the development of staff health and wellbeing metrics and impact measures;
- (ii) development of HSC Line Manager wellbeing training;
- (iii) development of an effective regional HSC communications platform to disseminate staff health and wellbeing resources; and
- (iv) development of a community of practice to support delivery of HSC staff health and wellbeing services. Workstreams have been created for each of these areas with implementation ongoing.

Action 3.15 – Commissioning and establishment of sustainable Occupational Health Services

Following completion of a *Review of HSC Occupational Health Services* in 2023, a **Regional HSC Occupational Health Steering Group** is currently progressing a programme of work to address the recommendations arising from the review.

The identification and agreement of a preferred HSC Occupational Health Service (OHS) model have been progressed as a key priority, with a final report on this workstream due to be delivered in early 2026/27. In parallel, work has advanced on reviewing Service Level Agreements (SLAs) with primary care, ensuring that contractual arrangements are aligned with the emerging model and remain fit for purpose.

Alongside this, there has been a clear focus on strengthening workforce capacity through training and development. The **expansion of Occupational Health (OH) medicine training** is progressing, helping to increase specialist capacity. In addition, work is ongoing to develop post-registration training pathways for nursing and AHPs, supporting a broader, multidisciplinary approach to service delivery. This reflects a shift towards building a more flexible and resilient workforce, reducing reliance on a limited pool of specialists.

There is also an increasing emphasis on collaboration beyond the HSC, with DoH and HSC representation on the **Public Sector Collaborative Forum on OHS**. This forum is exploring opportunities for shared approaches and potential efficiencies in the delivery of Occupational Health Services across the wider public sector. Such collaboration is intended to maximise learning, reduce duplication, and support more integrated service delivery.

Theme 6 – Improved workforce communication and engagement

Action 3.16 – Ensure information flows freely across organisations and that employees are kept abreast of developments

All HSC organisations have Joint Negotiating and Consultation Forums that meet on a regular basis. Terms of reference exist in each organisation that describes frequency of meetings, membership, and reporting arrangements. To date the work on developing an HSC workforce communications strategy has not commenced.

Significant progress has also been made in enhancing learning and development infrastructure, with the introduction of the new 'Learn HSCNI' Learning Management System.

Now live across all HSC organisations, this platform enables the delivery of accessible, comprehensive, and timely training and development opportunities for staff.

Theme 7 – Recognising the contribution of the workforce

Action 3.17 – Design and implementation of a co-produced policy on recognition initiatives

Engagement undertaken through the development of the **Regional Multidisciplinary HSC Staff Retention Framework** outlined in Action 3.7 will be used to inform development of a co-produced policy on staff recognition initiatives.

Theme 8 – Work-life balance

Action 3.18 - Adopt section 33 Agenda for Change Handbook arrangements across the HSC

HSC organisations in Northern Ireland continue to demonstrate a strong and proactive commitment to flexible working, aligned with the principles set out in **Section 33 of the Agenda for Change Handbook**. Flexible working is well embedded across the employee lifecycle, from recruitment through to retirement, supported by established policies and effective management practices. A substantial number of staff access part-time and other flexible working arrangements, reflecting both organisational commitment and workforce need, while contributing positively to staff wellbeing, equality, recruitment, and retention.

Flexible working arrangements are actively promoted and supported across HSC organisations. Applications and outcomes are monitored through organisational workforce and governance processes, helping to identify trends, support consistency of approach and inform workforce planning. Where appropriate, this information is considered alongside workforce equality and demographic data to help organisations understand patterns of access and uptake.

Performance and developments relating to flexible working are reported through People and Culture governance arrangements within HSC organisations, providing appropriate oversight and supporting continuous improvement in policy and practice.

HSC organisations continue to explore opportunities to strengthen and expand inclusive work-life balance measures. Policies are regularly reviewed to ensure they remain

responsive to the changing needs of the workforce and support staff at different stages of their professional and personal lives.

Examples of developments across HSC organisations include enhanced support measures such as foster and kinship care leave, fertility-related leave, miscarriage leave, and partial retirement arrangements. These initiatives demonstrate a commitment to creating supportive and inclusive workplaces while helping staff balance work and personal responsibilities.

Staff feedback mechanisms, including Pulse Surveys, Investors in People assessments, and other employee engagement activities, provide valuable insights into staff experience and perceptions of work-life balance. These insights help organisations identify potential inequalities, understand workforce pressures and inform ongoing improvements in access to flexible working opportunities.

HSC organisations continue to share effective people management practices, monitor emerging employment and workforce developments, and consider learning from across the wider NHS. In partnership with Trade Union colleagues, this supports the ongoing development of flexible and inclusive employment practices and contributes to better working lives for staff across the HSC system.

Theme 9 – Making it easier for the workforce to do their jobs

Action 3.19 – Undertake HSC staff survey

A specification has been developed to support the procurement of a provider to undertake the next HSC staff survey. While current system capacity is focused on the implementation of Equip, this has required a temporary pause in progressing procurement activity.

Action 3.20 – Promote and embed appropriate culture and behaviours within all areas of the HSC

The ***HSC Collective Leadership Strategy*** has transitioned from implementation into business as usual across HSC Trusts, with its principles now embedded within HSC organisational People Plans and wider regional culture frameworks and policies. This has supported a consistent and aligned approach, with the Strategy providing a foundation for ongoing culture development and related initiatives across the system.

Remaining programme funding was utilised to deliver a targeted development intervention for HSC Organisational Development (OD) teams in early 2025. This programme focused on supporting teams experiencing challenges or undergoing transition, helping OD practitioners

to better understand team dynamics, and equipping them with tools to strengthen team resilience and performance, an important component in embedding collective leadership.

Diversity, Inclusion and Workforce Engagement - Progress on a regional HSC staff survey has been impacted by system pressures associated with major digital transformation programmes, including Encompass and Equip. However, staff engagement continues to be prioritised at a local level through pulse surveys, engagement events, and staff networks. These approaches help ensure that staff feel valued, listened to and supported to contribute to decision-making, while informing actions to promote inclusive workplaces.

Open, Just and Learning Culture - the launch of the '*Being Open Framework*' by the Minister of Health on 19 February 2026 marks an important milestone in strengthening an open, just and learning culture across HSCNI. Recognising the range of complementary frameworks in place, including the RQIA '*Being Human Framework*' and '*Strengthening our Core: A Regional Framework for HSC Staff Health and Wellbeing in the Workplace*', there is a clear focus on ensuring alignment and avoiding duplication.

To support this, a workshop has been scheduled with HSC Trust colleagues in June 2026 to consider the most effective structures and planning arrangements for implementation. This will help ensure a coherent and coordinated approach across frameworks, reducing complexity for staff while reinforcing a shared commitment to continuous improvement, transparency, and a positive safety culture across the HSC system.

Action 3.21 - Develop workforce engagement projects for the introduction of new technologies and systems, including e-health initiatives which are designed to support the workforce in doing their jobs

Digital Health and Care NI has continued to focus on the design, delivery and support of digital change activity, enabling the HSC workforce to adopt new technologies and systems safely and effectively. Progress to date has been delivered across several key areas:

Strengthening digital capability: Regional work has advanced to build digital skills and capacity across HSC staff. This includes the development of digital health learning resources, consideration of the All-Ireland Digital Capability Framework, and exploration of support models such as mentorship, digital champions, and professional accreditation. This builds on activity already led locally by Trust professional leads and change managers, particularly in response to Encompass-related requirements.

Encompass programme delivery: The Encompass programme has demonstrated the scale and importance of workforce engagement required to support major digital transformation. Thousands of staff have been trained, supported by a super-user model in which approximately one in four HSC Trust staff received enhanced training to act as local champions. This approach has extended beyond initial training to include ongoing support, coaching and change management, recognising the need to embed new ways of working alongside new systems.

Microsoft 365 Copilot pilot: The recent HSCNI Copilot pilot has provided a strong practical example of successful workforce engagement with emerging technologies. Delivered over 16 weeks and involving up to 1,000 users across six HSC Trusts, 13 Arm's Length Bodies and two tenant organisations, the pilot focused on real-world use cases such as drafting, summarisation, data analysis, and meeting preparation. Adoption was most effective where support was tailored to roles and delivered through interactive formats, including champion-led models, workshops and hands-on learning. The use of an actively supported champion network and a phased approach to change have been particularly beneficial.

Looking ahead, the focus is on strengthening a more systematic and sustainable approach to digital adoption and change. DHCNI's 2026/27 Business Plan includes commitments to further develop structured change management approaches and to support staff in working more efficiently and sustainably through the effective use of digital services.

Objective 3 – The Department and health and social care providers are able to monitor workforce trends and issues effectively, and be able to take proactive action to address these before problems become acute

Theme 10 – Improving workforce business intelligence

Action 3.22 – Continue to develop health and social care workforce information

Progress in this area during 2025/26 has been impacted by the staffing resources required to progress the development of Human Resources element of the Equip system. A focussed Workforce Data Development Programme will commence in 2026/27 utilising opportunities arising from the development of workforce data following the introduction of the Equip system.

Oversight and Accountability

Oversight and accountability for the Workforce Strategy continues to be provided by the Workforce Strategy Programme Board. The Programme Board is supported in this function by the Workforce Strategy Reference Group, which includes representation from relevant employers, trade unions and other key stakeholders. This group provides advice and assurance to the Programme Board on progress of the strategy.

Day to day coordination of the Strategy is led by the Workforce Strategy Unit, located within the Workforce Policy Directorate in the Department. This Unit works closely with the stakeholders identified as lead organisations for each action within The Third Action Plan. Dedicated working groups, with appropriate representation from across the health and social care system have been established to support delivery. For each output, these groups agree detailed delivery plans, clear responsibilities, and defined implementation timeframes.

There is also a need for consistent focus on the implementation of this action plan. Progress against each identified output is monitored and reported on a regular basis. This is the first of three annual progress reports produced and published on the Department of Health website, ensuring transparency and enabling stakeholders to track delivery over time.

Funding

The Third Action Plan sets out an ambitious and challenging programme of actions and outputs to be progressed by the end of March 2028. Many of these commitments can be advanced without the need for additional funding. In several cases, the initial steps involve undertaking scoping work to determine the most appropriate mechanisms for delivery, including the development of costed implementation plans. For other actions such as the commissioning of pre-registration and postgraduate training, the Department will continue to provide ongoing funding. However, it is recognised that significant additional funding will be required to grow the workforce to the levels identified through strategic workforce planning.

It is recognised that significant, additional, multi-year funding will be required to deliver the full range of actions and outputs identified. The Department is committed to exploring all available options to fund The Third Action Plan, including the release of resources through service efficiencies and by seeking additional funding from the Executive.

While this may affect the pace of delivery, the Department believes it is right to be ambitious. Working in partnership with colleagues across health and social care, we remain fully committed to implementing The Third Action Plan at the earliest opportunity.

Appendix 1

Table 1: HSC Workforce (Whole Time Equivalent) by Staff Group, 31 March 2018 to 31 March 2026

Staff Group	March 2018	March 2026	Difference	% Difference
Administration & Clerical	11,067	13,229	+2,162	19.5%
Estates Services	686	832	+146	21.3%
Support Services	4,802	5,072	+270	5.6%
Registered Nursing & Midwifery	15,112	18,612	+3,500	23.2%
Nursing & Midwifery Support	4,374	4,164	-210	-4.8%
Social Services (excl. Domiciliary Care)	7,326	9,098	+1,772	24.2%
Professional & Technical	8,137	10,453	+2,315	28.5%
Medical & Dental	4,199	5,555	+1,356	32.3%
Ambulance	1,100	1,328	+228	20.7%
Total	56,803	68,341	+11,538	20.3%

Source: Information & Analysis Directorate, DoH

Table 2: HSC Medical & Dental Workforce (Whole Time Equivalent) by Grade, 31 March 2018 to 31 March 2026

Staff Group	March 2018	March 2026	Difference	% Difference
Consultant	1,693	2,147	+454	26.8%
SAS Doctor (Specialist or Specialty Doctor)	475	738	+263	55.4%
Resident Doctor	1,879	2,374	+495	26.3%
Other Doctor	77	217	+140	182%
Dental Officer	75	78	+3	4.3%
Total	4,199	5,555	+1,356	32.3%

Source: Information & Analysis Directorate, DoH

Table 3: HSC Social Worker Workforce (Whole Time Equivalent), 31 March 2018 to 31 March 2026

Staff Group	March 2018	March 2026	Difference	% Difference
Social Workers	3,766	4,711	+945	25.1%

Source: Information & Analysis Directorate, DoH

Table 4: HSC Allied Health Profession Workforce (Whole Time Equivalent) by Profession, 31 March 2018 to 31 March 2026

Staff Group	March 2018	March 2026	Difference	% Difference
Dietitians	272	360	+88	32.2%
Occupational Therapists	996	1,307	+312	31.3%
Orthoptists	31	44	+13	40.3%
Physiotherapists	1,021	1,329	+308	30.2%
Podiatrists	202	210	+8	4.0%
Radiographers	877	1,085	+208	23.7%
Speech & Language Therapists	473	623	+150	31.7%
Paramedics *	384	490	+106	27.5%
Total	4,255	5,448	+1,193	28.0%

Source: Information & Analysis Directorate, DoH

* Paramedics only became recognised as an Allied Health Profession in the summer of 2018, however for comparability purposes, Paramedics have been included for March 2018.

Appendix 2

Strategic Workforce Reviews from the introduction of the Regional HSC Workforce Planning Framework in March 2015: Position at 18 June 2026	
* Indicates a Strategic Workforce Review of a medical specialty carried out for the Department of Health by the Public Health Agency	
Profession/Medical Specialty/Programme of Care	Date completed
Pathology Services	February 2025
* Psychiatric Specialties	July 2024
Mental Health Services	July 2023
Dental Services	July 2023
Therapeutic Radiography	May 2022
Orthoptics	May 2022
Occupational Therapy	May 2022
Music, Art and Drama Therapies	May 2022
Dietetics	May 2022
Diagnostic Radiography	May 2022
Social Work	March 2022
Pharmacy	September 2020
Speech and Language Therapy	August 2020
Prosthetics	August 2020
Podiatry	August 2020
Physiotherapy	August 2020
Clinical Psychology Needs assessment	February 2020
* Acute Medical Specialties: Acute Internal Medicine; Endocrinology; Gastroenterology; Geriatric Medicine; Respiratory Medicine; Rheumatology	April 2018
* Dermatology	January 2018
* Urology	May 2017
* Neurology	May 2017
* Occupational Medicine	May 2017
* Intensive Care Medicine	November 2016
* Anaesthetics	November 2016
General Medicine Superseded by the Northern Ireland Medical School Places Review	June 2016
* Paediatrics	January 2016
Domiciliary Care	December 2015
Imaging (Radiology)	December 2015
* Emergency Medicine	September 2015
* Trauma and Orthopaedics	September 2015
* General Practice	June 2015
Nursing and Midwifery	May 2015

Strategic Workforce Reviews from the introduction of the Regional HSC Workforce Planning Framework in March 2015: Position at 18 June 2026
* Indicates a Strategic Workforce Review of a medical specialty carried out for the Department of Health by the Public Health Agency
Profession/Medical Specialty/Programme of Care
Strategic Workforce Review ongoing
* Acute Internal Medicine
Cancer Services – Programme of Care (Paused)
* Cardiology
* Cardiothoracic surgery
Diabetes Services (Specialist) – Programme of Care
* Emergency Medicine
* Endocrinology and Diabetes
* ENT surgery
* Gastroenterology
* General surgery (including transplant, breast and gastrointestinal surgery)
* Geriatric Medicine
* Haematology
Learning Disability
* Microbiology, Virology and Infectious Disease
* Neonatology
* Neurosurgery
* Obstetrics and Gynaecology
* Ophthalmology
Orthotics
* Paediatric Intensive Care
* Paediatric surgery
Palliative Care (Specialist) – Programme of Care
Paramedics
* Plastic surgery
* Public Health
* Respiratory Medicine
* Rheumatology
Stroke Services – Programme of Care
* Vascular surgery
Strategic Workforce Review planned to take place
* Genitourinary Medicine