

Evidence Brief: Admin & Clerical

Contents

*Help accessing articles or papers	1
Key publications – the big picture	2
Case Studies.....	4
The Star for workforce redesign.....	4
Statistics.....	4
National Data Programme.....	5
Published Peer Reviewed Research.....	5
Digital, data and technology	5
Administrative and clerical support.....	6
Management and leadership	9
Communications, human resources, and finance.....	12
Knowledge and library services	13
Competency Frameworks	14

Produced by the Knowledge Management team Evidence Briefs offer an overview of the published reports, research, and evidence on a workforce-related topic.

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Key publications – the big picture

[NHS Long Term Workforce Plan](#)

NHS England, 2023, updated 2024

Administrative automation: significant workforce benefit can be gained from the automation of administrative processes, including through AI applications such as speech recognition. Some studies have shown that over 70% of a clinician's working time is spent on administrative tasks and 44% of all administrative work in general practice can be mostly or fully automated. [...] There are considerable opportunities for better deployment of the administrative workforce to free up clinicians' time and support patient flow, alongside using technology to reduce administrative burden. For example, East Sussex Healthcare NHS Trust has successfully introduced doctor's assistants to undertake specific tasks to reduce doctors' workload. This was in response to an evaluation that found doctors were spending 44% of their time on administration and that 78% of overtime/ exception reports could be carried out by doctor's assistants. [...] The future of NHS human resources and organisational development report sets out how people professionals need to work differently to create a consistently compassionate, inclusive and values-driven culture that delivers better staff experience now and in the future. This Plan builds on these previous pieces of work.

[Building our future digital workforce](#)

NHS England, no date

Key to our work is establishing a [workforce planning model](#) for our health informatics workforce – those who work in data, digital, technology and knowledge - so we can understand both our current workforce, the demand for our future workforce and to develop a comprehensive plan to bridge the gaps.

[The NHS finance function in 2024: England](#)

The professional association for healthcare finance, April 2025
Since the last census in 2022, there has been minimal change in the number of core NHS organisations. Overall, NHS finance staff numbers have remained fairly stable, with an overall 2% increase in NHS finance staff headcount. As well as staff numbers, the report covers the numbers of organisations, roles and qualifications, diversity and staff attitudes.

[Introductory guide to NHS finance](#)

The professional association for healthcare finance, April 2025
The guide is a vital resource for anyone who wants to understand NHS finance and get the maximum value from NHS resources. It will be of interest to finance staff at all levels, non-executive directors, clinicians, budget holders and general managers. Indeed, anybody who wants to know more about how money works in the NHS; be they at the beginning of their career, moving to a new role, or just interested to understand the impact of recent changes.

[Lost in the system: the need for better admin](#)

The King's Fund, February 2025

In this long read, we reveal the scale of the problem, alongside the personal impact of poor experiences of admin. We review what the evidence tells us about patient experience of admin, including findings from newly commissioned polling undertaken by Ipsos on public views and experiences of NHS communications. We offer an explanation for why admin, something so essential to the delivery of high-quality care, has been overlooked and set out six steps for action.

[The role of the NHS chief finance officer](#)

The professional association for healthcare finance, October 2024

NHS chief finance officers (CFOs) are at the heart of organisations' management structures. With huge pressure on public finances, the CFO's role is more challenging and demanding than ever. This policy statement provides an analysis of what the role involves, covering the four key CFO attributes: principles and values; professional qualifications, experience and skills; personal characteristics; and key roles.

[NHS workforce in a nutshell](#)

The King's Fund, May 2024

Despite an increase in the NHS workforce, there are not enough staff to match demand, as shown by the [number of people waiting for care](#). Recruitment and retention are both problems, with high and growing vacancy rates, and low and falling staff satisfaction. [Ethical international recruitment](#) will be essential to [addressing the current NHS workforce crisis](#), especially in the short term given the time it takes to train staff. But this is not a long-term solution. To provide the number of staff the NHS needs, greater investment in training and staff development will be needed, alongside improved retention rates.

[The state of NHS communications](#)

NHS Confederation, March 2024

The report provides unique insights into the diversity of NHS communications leaders, their capacity and resources, ways of working, and what they regard as their key challenges. The centrepiece is a survey of almost 200 communications leaders, including 130 who identified as the most senior communications professional in their organisation (just under half of those working in England's NHS trusts and integrated care boards).

[Are there too many NHS managers?](#)

NHS Confederation, February 2024

When NHS pressures are high, there can be increased attention on the role of NHS managers and how many there are, what value they add, and how much they get paid. This piece explores these points in more detail to understand more about the role of NHS managers.

[The future of NHS human resources and organisational development report](#)

NHS England, 2021, updated 2022

This report outlines the ten-year strategy for the human resources (HR) and organisational development (OD) services in the NHS. It is aimed at HR and OD directors, chief people officers, HR and OD practitioners, managers, leaders and anyone with an interest in HR and OD.

[Strengthening NHS management and leadership: Priorities for reform](#)

The Health Foundation, February 2022

We interviewed NHS managers and leaders in England to understand the challenges they face, what works well and what could be done differently. In this long read, we set out some of the insights from these interviews, focusing mainly on the role and practice of managers, and how they are trained and supported.

[Knowledge for Healthcare](#)

Health Education England, 2021

The expertise of knowledge specialists is business-critical for the success of the NHS. We are committed to a compelling ambition to drive transformation and improvement across the healthcare system. We are transforming the infrastructure for digital knowledge resources. We are upskilling the workforce to

mobilise evidence and knowledge. We are championing improved health literacy.

[Admin matters: the impact of NHS administration on patient care](#)

The King's Fund, 2021

Integrated care systems, and place-based partnerships within them, are tasked with promoting more seamless care that better meets people's needs. To do this they will need to understand the role admin plays in care – from both patient and staff perspectives.

[NHS admin: how does it affect patient experience?](#)

The King's Fund, 2019

Are all your interactions with NHS services as good as you would like? My guess is that, at one time or another, most of us have experienced feeling frustrated by bureaucratic processes, outdated IT systems or unsatisfactory interactions with administrative staff.

Case Studies

[Local NHS receptionists to receive loneliness training in a bid to ease pressure on health services](#), 2022

In a first-of-its kind partnership, NHS Property Services (NHSPS) and Campaign to End Loneliness are delivering training to NHS receptionists across the country to enable them to support patients showing signs of loneliness.

[Restructuring of HR Practices in NHS: A Case Study of Oxleas NHS](#)

International Journal of Economics and Management Science, May 2015

The aim of this paper is to evaluate the Human Resources department of Oxleas NHS Foundation Trust and see whether

there is need to restructure the organisation's HR practices. A review of the trust's HR management system is carried out to determine how it has impacted on the overall performance of the organisation.

[Dispensary and admin/reception teams work together to release 55 hours per week – The Leith Hill Practice, Surrey – South East](#)

Working over 2 sites the practice's dispensary and reception/admin teams were overloaded with a high demand for dispensing medication, and participated in the [Productive General Practice Quick Start](#) programme to look at ways it could reduce this workload. The programme is delivered by NHS England and NHS Improvement and part of the Time for Care support available through the [General Practice Forward View](#).

The Star for workforce redesign

More resources and tools are available in [the Star](#)

Statistics

You can find relevant statistics on the [Health and Care Statistics Landscape](#).

[GP Patient Survey 2025](#)

NHS England, July 2025

83% of respondents said that overall, the reception and administrative team at their GP practice are helpful (no change from 2024).

[Total headcount of the NHS Hospitals and Community Health Service \(HCHS\) workforce in England as of December 2024, by staff group](#)

Statista, March 2025

[Total number of administrative support staff for scientific, therapeutic and technical staff in the NHS Hospitals and Community Health Service \(HCHS\) workforce in England from 2009 to 2022](#)

Statista, 2023

This statistic shows the number of clerical and administrative support staff for scientific, therapeutic and technical staff (ST&T) in the National Health Service (NHS) Hospitals and Community Health Services (HCHS) workforce in England from 2009 to 2022, as of November of each year. The number of administrative ST&T support staff reached a total of 9,952 full-time equivalent employees in November 2022.

[Total number of clerical and administrative support staff in the NHS Hospitals and Community Health Service \(HCHS\) workforce in England from 2009 to 2022](#)

Statista, 2023

This statistic shows the total number of clerical and administrative support staff for doctors, nurses and midwives in National Health Service (NHS) Hospitals and the Community Health Services (HCHS) workforce in England from 2009 to 2022. The number of administrative support staff increased during this period to reach over 107 thousand full-time equivalent employees in November 2022.

National Data Programme

Workforce, Training and Education staff can look at the [National Data Warehouse \(NDL\)](#) SharePoint site to find out more about datasets and Tableau products.

Published Peer Reviewed Research

Digital, data and technology

[Digital, Data and Technology \(DDaT\) strategy 2024-2029](#)

NHS Business Service Authority, 2024

[p. 11] We also need to enhance our understanding of our people, their skills, capabilities and the work they are assigned to, so that we can pivot the right people at the right time when priorities change. In the longer term this also supports us in ensuring we develop our workforce in the right way to meet the challenges of the future. In line with the NHSBSA strategy we will develop and embed an effective workforce plan. We will continue to enhance our agility by maintaining and managing relationships with strategic delivery partners enabling us to rapidly increase our delivery capacity at short notice and to supplement our existing teams with individuals who bring specific skills and capabilities.

[Building our future digital workforce](#)

Health Education England, no date

There is an urgent need to address current and future capability and capacity challenges and to build a future workforce with the right skills and shape.

Key to our work is establishing a [workforce planning model](#) for our health informatics workforce – those who work in data,

digital, technology and knowledge - so we can understand both our current workforce, the demand for our future workforce and to develop a comprehensive plan to bridge the gaps.

To date we have developed a comprehensive analysis of the current workforce in the NHS (Stage 1) and have recently published our demand forecasting analysis (Stage 2) – [a strategic workforce planning report](#) – which has modelled the projected supply for the future digital workforce in two plausible scenarios.

Administrative and clerical support

[Evolution of the general practice receptionist role and online services: a qualitative study](#)

British Journal of General Practice 26, August 2025

The digitalisation of healthcare services impacts the workflow and consistency in task completion of general practice receptionist staff and has potential implications regarding job satisfaction and retention. In addition, the knowledge and skills required to fulfil this role are evolving and therefore may have recruitment and training implications.

[Addressing the learning and development needs of the NHS support workforce: a qualitative study of what helps and hinders](#)

British Journal of Healthcare Management 31 (6), June 2025

Four main themes were identified: career aspirations; learning needs; enablers of learning and development; barriers to learning and development. Participants had undertaken a large amount of training, but several learning needs remained, especially relating to digital skills, project management, leadership, people skills and presentation skills. Enablers of learning and development included: clarity about the skills and qualifications required to progress; managerial support; positive role models; protected time and/or funding; and thorough job

inductions. Barriers to development included: a lack of structured plans for learning and development; lack of availability of courses; lack of managerial support; and limited time and budgets for training.

[Role of receptionists in general practice: under-researched and under-valued](#)

British Journal of General Practice 75 (752), March 2025

The figure of a dragon-like and unsympathetic receptionist primarily focused upon keeping patients out of practices remains sadly prevalent, despite research going back decades highlighting the complex realities underlying the trope, and the experience of practice staff of increasing abuse as they sit on the front line of an access crisis. Against this backdrop, Ban et al's review is timely. They found that, despite receptionists operating as key members of the practice team, with the potential for a significant impact on both patient experience and safety, they continue to operate without adequate recognition or training. They highlight the extent to which reception roles involve clinical decision making, without either training or support for this aspect of their role.

[Revealing administrative staff roles in primary care during the COVID-19 pandemic: a qualitative study of family physicians' perspectives](#)

Frontiers in Health Services 4, November 2024

During the COVID-19 pandemic, the work of FPs with their administrative staff had direct consequences for patient and provider safety, access to primary care, and the processes required to enable that access. Despite their critical roles, existing pandemic plans do not account for the responsibilities of administrative staff. Steps should be taken to prepare pandemic plans in advance that include guidance for the roles taken on by primary care administrative staff, as they will continue to play an important role in pandemic recovery and future public health

emergencies. Attention to supporting administrative staff would enhance primary care providers' ability to manage care during pandemics, facilitate resilience, and decrease provider and administrative burnout. Consideration must also be given to potential shortages of administrative staff during a pandemic and what contingencies are necessary to ensure the needs for primary care during pandemics.

[Exploring the roles and influences of the modern general practice receptionist: a systematic review with narrative synthesis](#)

British Journal of General Practice, October 2024

We identified 28 studies which we grouped into three themes: Service delivery, confirming the continuing role of receptionists in providing administrative support alongside clinical tasks of prioritising patients for consultations, facilitating repeat prescriptions, and communicating blood test results; Patient attitudes describing how patient's lacked trust in receptionists viewed as unqualified and unnecessarily obstructive; Finally, in considering Receptionist experience, the contrast between their confidence in performing administrative roles and the anxiety induced from the clinically related tasks was described, particularly the mounting pressure from patients to meet their preferences for clinician appointments.

["You're only a receptionist, what do you want to know for?": Street-level bureaucracy on the front line of primary care in the United Kingdom](#)

Heliyon 9 (11), November 2023

Street-level bureaucracy, complemented with a tri-level contextual analysis, is a useful theoretical framework to understand how health workers, such as receptionists, attempt to provide universality without sufficient resource, and could potentially be applied to other kinds of public service workers in this way. This theoretical framework also benefits from being an

accessible foundation on which to base practice and policy changes.

[Patient aggression towards receptionists in general practice: a systematic review](#)

Family Medicine and Community Health 11 (3), July 2023

Patient aggression towards reception staff is a serious workplace safety concern for general practices and negatively affects healthcare sector function more broadly. Receptionists in general practice deserve evidence-based measures to improve their working conditions and well-being for their own benefit and that of the community.

[The challenges of integrating signposting into general practice: qualitative stakeholder perspectives on care navigation and social prescribing in primary care](#),

BMC Primary Care 23, April 2022

2) role preparedness – a lack of training meant that some receptionist staff felt unprepared to take on the CN role as expected and raised patient safety issues; for SPLW staff, training affected the consistency of service offer across an area; 3) integration and co-ordination of roles – a lack of planning and co-ordination across components of the health and care system challenged the success of integrating signposting into general practice.

[Qualitative and quantitative approach to assess the potential for automating administrative tasks in general practice](#), 2022

BMJ Open 10 (6), April 2022

The model predicted that roughly 44% of administrative tasks carried out by staff in general practice are 'mostly' or 'completely' automatable using currently available technology. Discussions with practice staff underlined the need for a cautious approach to implementation.

[Understanding the invisible workforce: lessons for general practice from a survey of receptionists](#)

BMC Primary Care 23, September 2022,

This study has provided a much-needed update on the demographics, duties, and job satisfaction of GP receptionists. The need for diversification of the workforce to reflect the range of primary care patients warrants consideration in light of continuing variation in access along lines of gender and ethnicity. Training continues to focus on administrative duties not on the clinically relevant aspects of their role such as triage.

[A quantitative assessment of the parameters of the role of receptionists in modern primary care using the work design framework](#)

BMC Family Practice 21, July 2020

The evidence of our survey suggests that the role of modern GP receptionists requires an array of skills to accommodate various administrative, communicative, problem solving, and decision-making duties. There are ways in which the role might be better supported for example devising ways to separate complex tasks to avoid the errors involved with high cognitive load, providing informal feedback, and perhaps most importantly developing training programmes.

[Between demarcation and discretion: The medical-administrative boundary as a locus of safety in high-volume organisational routines](#)

Social Science and Medicine 203, April 2018

The majority of administrative work in UK general practice takes place in the context of organisational routines such as repeat prescribing and test results handling, where high workloads and increased clinician dependency on administrative staff have been identified as an emerging safety issue. Despite this trend, most research to date has focused on the redistribution of the clinical workload between doctors, nurses and allied health

professionals within individual care settings. Drawing on Strauss's negotiated order perspective, we examine ethnographically the achievement of safety across the medical-administrative boundary in key high-volume routines in UK general practice.

[The future role of receptionists in primary care](#)

British Journal of General Practice 67 (664), November 2017

Arguably the most visible among the primary care workforce are receptionists, required to work under unprecedented levels of pressure and scrutiny, yet without any concurrent change in their training or support. Their position at the point of entry to the healthcare system means they are the most accessible member of the care team and have a significant influence on patients' perception of their care. They frequently embody the frustrations of patients: a recent survey of complaints in primary care found those concerning receptionists were responsible for nearly half of upheld complaints, the largest figure of any staff group. This dissatisfaction with reception staff can have serious implications for non-attendance, increased A&E visits, and health outcomes.

[Risk work in NHS 111: the everyday work of managing risk in telephone assessment using a computer decision support system](#)

Health, Risk & Society Volume 19 (3-4), May 2017

We found that call handlers engaged in risk work that involved interpretation, judgement and flexibility in using NHS Pathways. Call handlers also deferred some risk work to both clinicians and patients/callers. Risk work now involves 'making the technology work' and much of this work has been delegated to non-clinical call handlers. These new healthcare workers are interpreters of risk. Risk work creates a sense of responsibility (and sometimes anxiety) for these non-clinical call handlers.

Management and leadership

[Book chapter] [Perspectives on Organising the Health and Care Workforce](#)

Organising the Health Care Workforce, August 2025

The first section summarises the parameters of the key contemporary themes as they relate to workforce in health and care organisations. The thematic descriptions include occupations and professions; management and leadership; incentives, pay and performance; working conditions and the work-life balance and neglected or missing themes (practising staff, research gaps vis-à-vis clinical research, workforce diversity).

[Making evaluations useful for healthcare leadership development programmes](#)

BMJ Leader, March 2025

This study provides insights into outcome measures we should endeavour to capture in order to conduct a successful evaluation of the impact of a healthcare leadership development programme. The key domains for evaluation generated from this thematic analysis related to patient outcomes, organisational outcomes, and individual outcomes. Individual outcomes were further classified into those relating to skills or knowledge, those relating to qualities or attitudes, and those relating to the experience of the programme itself. Interviewees also highlighted the perceived value of a mixed methods evaluation, alongside incorporation of pre- and post-measures, 360 feedback, and a longitudinal evaluation.

[Hybrid managers in an evolving healthcare: Does gender matter?](#)

Health Services Management Research, November 2024

Hybrid managers have the potential to respond to the need for more integrated, responsive and accountable healthcare.

Scholars have studied the antecedents of hybridization, but the role of gender has been neglected. Therefore, we study whether and how gender impacts on the way in which medical professionals exercise their managerial role. We found that women hybrids show specific abilities and motivations, but they also encounter a specific lack of opportunities. Women hybrid managers appear well positioned to foster the evolution of professionalism, but healthcare organizations should implement policies and practices to effectively support them.

[Corporate governance and financial performance: the case of English NHS hospitals](#) Abstract only*

International Journal of Public Sector Management 37 (7), November 2024

The findings indicate that board expertise, board meetings, board diversity, CEO gender, and academic directors significantly and negatively affect NHS hospitals' financial performance. For NHS trusts, the results reveal that board expertise, board diversity, and CEO gender have a significant negative effect, while for NHS foundation trusts, only CEO gender has a significant negative impact.

[The imperative of professionalising healthcare management: A global perspective](#)

Future Healthcare Journal 11 (3), September 2024

As the complexities of healthcare systems continue to grow, the gap between clinical expertise and managerial overview becomes increasingly evident. The examples from some of the OECD countries and the situation in the EMR stress a global consensus on the need for a structured and comprehensive approach to develop recognised competencies in management and leadership at all levels, as well as an increased professionalisation for those with the responsibility to lead the organisations. This includes globally setting standards, fostering

education and training, ensuring certification, and promoting continuous learning.

[The impact of healthcare board characteristics on NHS trust performance](#)

Public Money & Management 43 (6), January 2022

Results revealed that, to improve performance, FTs should try to minimize turnover on the board of directors; improve attendance at board meetings; and increase the number of non-executive directors on the board. Further, increasing clinical expertise on the board would benefit financial performance and produce a better Care Quality Commission (CQC) score. Such implications are also relevant to other healthcare settings which have similar institutional setups, particularly those in Europe.

[The role of professional elites in healthcare governance: Exploring the work of the medical director](#)

Social Science & Medicine 277, May 2021

Analysing data collected from observations, interviews and documents from 15 healthcare providers in England (2014–2019), we elaborate the role of medical directors in healthcare governance as ‘translation work’, ‘diplomatic work’, and ‘repair work’. Our study highlights the often enduring emotional effects of repeated structural changes to clinical services. It also contributes to theories of professional restratification, showing the work of medical directors as regional ‘political elites’, and as ‘corporate elites’ in publicly-funded healthcare systems.

[Framework on strategic competence performance – a case study of a UK NHS organization](#)

Journal of Strategy and Management 14 (1), January 2021

y examining a UK-based qualitative case study, the proposed framework puts forward four strategic competence pillars vital for delivering organizational performance and effectively managing the environment of NHS unit's operations. The four strategic

competences that are identified to foster NHS unit's performance are strategic leadership, staff engagement, knowledge transfer and partnership working.

[Routes to the top: the developmental journeys of medical, clinical and managerial NHS chief executives](#)

BMJ Leader 4 (2), June 2020

Few proactively sought leadership opportunities and there was a lack of an active leadership development strategy. Yet the ‘seeds of leadership development’ took root early. Combined with a blended approach of formal leadership development and ‘on-the-job’ informal leadership development, emerging NHS chief executives were exposed to multiple ‘crucible moments’ that helped them develop into and excel at the top of their field.

[Reverse mentoring for senior NHS leaders: a new type of relationship](#)

Future Healthcare Journal 7 (1), February 2020

The Reverse Mentoring for Equality, Diversity and Inclusion (ReMEDI) programme was rolled out in Guy's and St Thomas' NHS Foundation Trust in 2018 and paired senior white leaders (mentees) with black and minority ethnic (BME) staff (mentors) to help them explore their mentees' practices in relation to equality, diversity and inclusion.

[Does leadership matter for healthcare service quality? Evidence from NHS England](#)

International Public Management Journal 26 (2), October 2020

We find that task-oriented leadership has the strongest effect on staff-rated hospital quality while change-oriented leadership affects most patient satisfaction and the clinical measure. We also find some evidence that organizational autonomy and competition across hospitals moderates the effect of leadership quality on healthcare quality.

[An evaluation of a training intervention to support the use of evidence in healthcare commissioning in England](#)

International Journal of Evidence-Based Healthcare 18 (1), March 2020

A total of 63 staff in a variety of commissioning-related roles attended the workshops between March and September 2016. 95% rated the workshop overall as either 'excellent' or 'good'. Of particular value was the involvement of the local healthcare librarian, helping to promote their expertise and services; and the discussion of grey literature as a valuable source of evidence. A variety of intended actions as a result of the training included initiating a thorough search for evidence for new projects, use of bibliographic databases, and making use of local library services for evidence searching. Follow-up interviews with nine staff revealed a positive impact in the longer-term.

[Making sense of effective partnerships among senior leaders in the National Health Service](#)

Health Care Management Review 44 (4), 2019

We identified four areas of ongoing tension between senior leaders. Each of these was linked to a set of underlying drivers, with the strongest support for drivers with interpersonal roots. Effective strategies for resolving tensions involved significant effort by leaders at improving the interpersonal dynamics associated with everyday interaction and forging relational connections through enhanced trust within the leadership team.

[Leadership in the NHS](#)

BMJ Leader, 2019

We do know, however, that top-down approaches to leadership are the least effective way of managing healthcare organisations whereas inclusive and compassionate leadership helps create a psychologically safe workplace where staff are more likely to listen and support each other resulting in fewer errors, fewer staff

injuries, less bullying of staff, reduced absenteeism and (in hospitals) reduced patient mortality.

[Organizational Silence in the NHS: 'Hear no, See no, Speak no'](#)

Journal of Change Management, September 2018

From generalized evidence, it is suggested that the NHS is systemically and institutionally deaf, bullying, defensive and dishonest. There appears to be a culture of fear, lack of voice and silence. The cost of suppression of voice, reluctance to voice and the resulting 'sea of silence' is immense. There is a resistance to 'knowing' and the NHS appears to be hiding and retreating from reality. There is an urgent need for action to be taken to address this dysfunctional culture.

[Barriers and facilitators to implementing workplace health and wellbeing services in the NHS from the perspective of senior leaders and wellbeing practitioners: a qualitative study](#)

BMC Public Health 18, December 2018

Barriers to the successful initiation and implementation of health and wellbeing services in the NHS are numerous and range from front-line logistical issues with implementation to high-level strategic and financial constraints. Adopting a strategic and needs-led approach to implementation and ensuring thorough staff engagement are amongst a number of factors that facilitate implementation and help overcome barriers to initiation of wellbeing programmes in the NHS. There is a need for a culture that supports staff health and wellbeing in the NHS.

[Senior stakeholder views on policies to foster a culture of openness in the English National Health Service: a qualitative interview study](#)

Journal of the Royal Society of Medicine 112 (4), December 2018

Implementation of procedural interventions to support openness is challenging but feasible; engineering cultural change is much

more daunting, given deep-rooted and pervasive assumptions about what should be said and the consequences of mis-speaking, together with ongoing ambivalences in the organisational environment about the propriety of giving voice to concerns.

[The use of patient feedback by hospital boards of directors: a qualitative study of two NHS hospitals in England](#)

BMJ Quality & Safety, July 2017

The two boards used in-depth qualitative feedback and quantitative feedback from surveys in different ways to help develop strategies, set targets for quality improvement and design specific quality improvement initiatives; but both boards made less subsequent use of any kinds of feedback to monitor their strategies or explicitly to assure the quality of services.

[NHS top managers, knowledge exchange and leadership: the early development of Academic Health Science Networks – a mixed-methods study](#)

Health and Social Care Delivery Research 5 (17), 2017

This study explored knowledge networking and leadership in the context of the early development of Academic Health Science Networks and made recommendations for future research.

[New development: Women with altitude—exploring the influence of female presence and leadership on boards of directors](#)

Public Money & Management 38, 2017

A high female presence among executive and non-executive directorships did not result in significant differences either in financial return or service quality. However, female chairs or chief executives resulted in significant reductions in negative social outcomes, such as lower clinical negligence costs, without harming financial management. The findings have important implications for gender diversity and gender targets on the boards of directors in business and other sectors.

Communications, human resources, and finance

[Breaking barriers: improving diversity in NHS communications](#)

NHS Confederation, July 2025

The Taskforce for Diversity in NHS Communications was established in September 2024 by the NHS Confederation, NHS Providers and Centre for Health Communication Research, to enhance diversity in the NHS communications and engagement workforce, with a particular focus on ethnic diversity and representation in the first instance.

As part of this work, the taskforce has taken a comprehensive, insight-led approach to understand the experiences, challenges and aspirations of communications professionals from ethnic minority backgrounds in particular.

[Conference Abstract] [Human Resource Management in Healthcare](#)

[Slovakia] SHS Web of Conferences 115, July 2021

The positive impact of HRM practices on increasing employee satisfaction and engagement is scientifically proven. Currently, HRM practices in healthcare are used in a limited way, often only at the level of HR or labour law and union bargaining. This is indicative of the low level of HR development. It is desirable to make full use of HRM practices in healthcare. The aim of this paper is to identify and define the challenges of human resource management in healthcare and explain the importance of implementing developed HRM practices to improve the quality of health care delivery. The research method used is a literature search. The investigation of the relationship between quality human resource management and healthcare delivery is considered important because the knowledge and competency to manage people are not necessary to hold a management position in most healthcare professions in Slovakia. In the

world's best hospitals, we find developed HRM with a positive impact on employee satisfaction and medical indicators.

[The Rapidly Changing NHS Communication in the age of coronavirus](#)

Centre for Health Communication Research, August 2020

This research project – the first to explore the experiences of NHS professional communicators during the coronavirus pandemic - has been conducted as a contribution towards NHS learning.

[Conflicting Logics of Public Relations in the English NHS: A Qualitative Study of Communications and Engagement](#)

Sociological Research Online 24 (3), March 2019

Using qualitative methods, we conducted empirical research in two localities to explore the role of communications and engagement staff as they worked to 'transform' the NHS in line with the vision of the Five Year Forward View. We gathered documentary data and interview data from people whose roles required them to 'do engagement'. These staff came from a range of backgrounds, including professional marketing backgrounds, and many were unaware of emancipatory goals or user-led involvement and activism. Our analysis examines the competing logics of marketing and patient empowerment within a key stakeholder matrix document and that surfaced in participants' accounts of their engagement practices.

Knowledge and library services

[Adding value to learning and development through CILIP accreditation: The NHS knowledge for healthcare learning academy](#)

Health Information & Libraries Journal, December 2022

When considering the accreditation of learning, there is considerable value in working with an experienced accreditation

body which recognises the value of the learning opportunities being delivered. [...] The processes involved in learning accreditation facilitates reflection and can lead to service improvement and development.

[NHS librarians collaborate to develop a search bank peer reviewing and sharing COVID-19 searches - an evaluation](#)

Health Information and Libraries Journal 39 (4), July 2022

Collaborative working for the search bank probably saved time for individual NHS librarians. The quality of the searches submitted was variable as were librarians' approaches to presentation and development of search strategies. Peer review benefits from a buddy approach among expert searchers and agreement about feedback provided to contributors.

[UK survey demonstrates a wide range of impacts attributable to clinical librarian services](#)

Health Information and Libraries Journal 39 (2), June 2022

To understand the impact of the UK Clinical Librarian (CL) workforce and benchmark the results against a study undertaken in the North West region of the English National Health Service (NHS). CLs provide diverse services to clinical teams. They support the continuing professional development and personal research needs of team members, service development needs of organisations, and the information provided contributes to improved quality and safety of patient care.

[Health information seeking behaviour: the librarian's role in supporting digital and health literacy](#)

Health Information & Libraries Journal 36 (3), September 2019

The data collected from users showed that they are most likely to use search engines to find health information online. The interviews with librarians furthermore suggested opportunities to support users with their health literacy. These included proactively providing and delivering relevant and targeted

training sessions and liaising with health organisations to ensure that they provide the most up to date information.

Building capacity among healthcare librarians to teach evidence-based practice: an evaluation

Journal of the Medical Library Association 109 (3), July 2021
The course boosted confidence, provided valuable new skills, and positively impacted careers of the librarians through access to new opportunities. It inspired the development of new approaches to critical appraisal training. An important need was identified among the librarians for more education in teaching. Librarians funded by the scheme have successfully cascaded the training to their colleagues.

A best fit solution: transforming an NHS Library and Knowledge Service in readiness for a new hospital building without a traditional library space

Journal of the Medical Library Association 109 (3), July 2021
Embedding the LKS team in the clinical setting, engaging in proactive outreach activity, and improving our marketing led to a 44% increase in literature searches requested compared to the same eleven-month period in the previous year. A 40% decrease in our print book loans indicates additional barriers to using a click-and-collect service and the need for greater investment in our e-book provision. However, early outcomes for our best-fit service transformation are positive. Having an open, dual mindset has enabled the service to embrace change and maximize emerging opportunities to collaborate with clinical staff on new projects.

Competency Frameworks

NHS England Fit and Proper Person Test Framework for board members

NHS England, April 2025

The framework will introduce a means of retaining information relating to testing the requirements of the FPPT for individual directors, a set of standard competencies for all board directors, a new way of completing references with additional content whenever a director leaves an NHS board, and extension of the applicability to some other organisations, including NHS England and the CQC.

NHS Finance Competencies

National Finance Academy, September 2021

The purpose of this document is to provide finance staff and their managers with an up to date, relevant and complete list of all the competencies which finance staff need to be able to fulfil their roles effectively.

HR/OD Competency Framework

HPMA London Academy, July 2021

This HPMA HR/OD Competency Framework has been developed over the years as a simple and valuable tool to any HR/OD professional and to any HR director or manager looking to develop the skills of their teams.

National Competency Framework for Data Professionals in Health and Care

NHS England, no date

The aim of the National Competency Framework for data professionals is to provide a key building block for the professionalisation of the data and analytical workforce, to underpin career pathways and continuing professional development of the data and analytical community.

Digital, Data and Technology (DDaT) occupational framework development

Health Education England, no date

The overall purpose of this project is to define the health informatics and digital workforce terminology and create appropriate job architecture to describe skill levels, through either agreeing and establishing a modernised capability framework or adapting and adopting pre-existing frameworks into the NHS and Social Care. The current project is a pilot to map a discrete area of the current [GDS DDaT Capability Framework](#) to health and care job roles and test its implementation.

Developing the knowledge and library services workforce

NHS England, no date

A range of resources is available to facilitate the development of your knowledge and library services team, ensuring they are equipped to meet the information needs of all NHS staff and learners.