

**Q3
2026**

UK HEALTHCARE WORKFORCE & TALENT MARKET PULSE REPORT





EXECUTIVE SUMMARY

The UK healthcare workforce seems to have settled into something of a two-speed labour market this quarter. **Headline NHS vacancy and staff-turnover figures continue to improve**, while the overseas nurse pipeline that filled gaps for much of the last decade appears to have reversed quite sharply.

Beneath those headlines, three trends look worth watching together: **newly qualified staff across medicine, nursing and allied health professions are struggling to find posts** despite ongoing frontline pressure elsewhere; visa-driven overseas supply has fallen a long way in a short time; and **private healthcare demand keeps growing**, though perhaps more slowly than before.

Taken together, this may suggest 2026 is less a story about candidate scarcity and more one about where **supply and demand aren't quite lining up**.

KEY TRENDS



NHS VACANCIES & REGIONAL VARIATION

NHS vacancy rates continue to ease on the headline numbers. As at 30 June 2026, the overall NHS vacancy rate stood at **6.7% (100,326 vacancies)**, down from 7.1% a year earlier; the registered nursing vacancy rate (including midwives and health visitors) was **5.3% (23,046 vacancies)**, down from 6.1%; and medical vacancies were 5.6% (9,390), down from 6.3%

Regional patterns are a little more nuanced than the national average implies. **For registered nursing specifically, London remains the highest-pressure region at 6.8%** (down from 7.2% a year ago), with the South East showing the sharpest improvement, down to 5.4% from 7.3%. North East & Yorkshire is lowest at 3.9%.

Interestingly, **when you look at the whole workforce rather than nursing alone, the Midlands has edged narrowly ahead of London (7.8% vs 7.75%)** — a shift that might be worth a second look, since it cuts against the usual assumption that London is always the most pressured region.

Staff leaver rates remain relatively low by recent standards. The latest published analysis puts the annual outflow rate for Agenda for Change staff at **9.5%** in the year to October 2025, down from a peak of 12.3% in the year to June 2022. This represents one of the lowest annual outflow rates recorded since 2010, excluding the Covid-19 period.



**100,326 NHS
VACANCIES**



**6.7% VACANCY
RATE**



**23,046 RN
VACANCIES**



**5.3% NURSE
VACANCY RATE**



MEDICAL TRAINING AND DOCTOR SUPPLY

Medical training bottlenecks look like a genuine pressure point this quarter. For the 2026 specialty training round, roughly 40,000 individual applicants made an estimated 74,000 applications for around 10,000 posts — a **competition ratio of about 3.8 applicants per post (or 7.4 applications per post)**.

Separately, a British Medical Association (BMA) survey found **around half of resident doctors finishing foundation training this summer had no confirmed job for the following month**. The Medical Training (Prioritisation) Act, which prioritises UK medical graduates for training places, became law on 5 March 2026, though the BMA has been fairly clear it doesn't think this solves the underlying shortage of posts

3.8

APPLICANTS PER
POST



50%

OF RESIDENT DOCTORS
FINISHING FOUNDATION
TRAINING HAD NO
CONFIRMED JOB



BMA MEDIA CENTRE, 2026

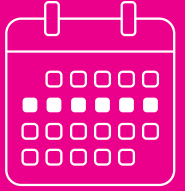
7.27M

ELECTIVE
BACKLOG OF
CASES



11.9 weeks

MEDIAN WAIT TIME FOR
ELECTIVE SURGERY



GOV.UK, JUNE 2026

WAITING LISTS AND DEMAND:

The elective backlog remains substantial, even if it's edging down. **NHS England's waiting list stood at roughly 7.27 million cases** (about 6.15 million individual patients) as at June 2026 — the first time it's dipped below 7.3 million in a while — with around 2.48 million patients waiting over 18 weeks and **a median wait of 11.9 weeks**

NEWLY QUALIFIED STAFF:

Newly qualified nurses appear to be facing a similar blockage to junior doctors. The Royal College of Nursing (RCN) found that a third (33%) of Band 5 vacancies advertised in July 2026 required prior experience, and only 26% of English vacancies (82 of 317) were full-time, permanent and open to inexperienced applicants — falling to 13% in the East of England and Yorkshire & Humber. London's Band 5 posts reportedly fell 68% between 2019/20 and 2024/25.

Allied health professionals seem to be reporting comparable pressure. In an August 2026 survey by the Chartered Society of Physiotherapy (CSP), 79% of NHS physiotherapy staff said staffing levels were insufficient to meet demand, and 68% reported recruitment freezes in their service, up from 53% a year earlier.

NURSING SUPPLY & LEAVERS



International nursing supply appears to have fallen quite sharply. Just 26.4% of new joiners to the Nursing and Midwifery Council (NMC) register in the year to March 2026 trained overseas, down from 39.1% the year before and a peak of 49.4% two years earlier.

Only 10,961 internationally educated professionals joined for the first time in 2025–26, **down 47% from 20,669** the year before; **India, the largest source country, fell 54.4% to 4,215 joiners.**

Register leavers are rising in absolute terms, though this may be more about demographics than dissatisfaction. 30,323 professionals left the NMC register in the year to March 2026, up 5.3% on the prior year (though broadly stable as a share of the register, at 3.6%). **Retirement remains the top reason (48.4%),** followed by physical/mental health (11.5%) and burnout or exhaustion (5.4%); almost half of leavers (46.8%) said they left earlier than they'd originally planned

41,542

Professionals joined the NMC Register for the 1st time



30,323

Professionals left the NMC Register





WIDER LABOUR MARKET, PAY AND MIGRATION

The wider UK labour market appears to have continued loosening. **UK unemployment rose to 4.9%** in the three months to June 2026, up from 4.7% a year earlier; **total UK vacancies fell to 707,000 in the May–July 2026 quarter**, down 2.7% year-on-year, with human health and social work recording one of the larger single-quarter falls.

Public sector pay growth has picked up, though this may partly be a timing effect. **Public sector annual regular earnings growth was 6.1% in the three months to June 2026**, up from 5.5% the prior period — the ONS itself notes this is partly a base effect from 2026 NHS pay awards landing earlier in the year than in 2025.

Visa-driven migration into health and care continues to fall. **Health and Care Worker visas issued fell 45%** to 34,143 in the year ending June 2026, and are **down around 90% from the year ending December 2023 peak**. A separate measure of applications (rather than grants) shows a similar picture, down 65% year-on-year to June 2026



UK UNEMPLOYMENT ROSE TO 4.9%

ONS, Aug 2026



PUBLIC SECTOR ANNUAL EARNINGS GROWTH WAS 6.1%

ONS, Average Weekly Earnings



HEALTH AND CARE WORKER VISAS DOWN 90% FROM YEAR ENDING DEC 2023

GOV.UK, 2026



WORKFORCE PLANNING AND THE NHS/ PRIVATE INTERFACE

The Health Foundation's REAL Centre puts the current **NHS staffing gap in trusts at roughly 110,000 full-time equivalent (FTE) posts**, and is independently assessing the modelling behind the government's forthcoming 10-year workforce plan, expected this year.

Separately, Nuffield Trust's May 2026 analysis highlighted variation in district nursing numbers relative to patient need, and the extent to which **clinical support workers** — who aren't registered professionals but deliver a large share of hands-on care — **may be an underused route into the workforce**.

Independent sector activity within the NHS appears to have softened this quarter, which may be worth watching. According to the Independent Healthcare Providers Network (IHPN — the trade body for independent healthcare providers), the sector's share of NHS elective activity fell to 7.5% in February 2026, its lowest single-month share since before the pandemic, and progress towards the NHS's next interim 18-week target (70%) seems to have stalled through April–May 2026, holding around 65–65.6%.

Overall referral-to-treatment (RTT) activity delivered by the independent sector was down 1.4% in 2025/26 compared with 2024/25

PRIVATE HEALTHCARE DEMAND AND PROVIDERS

- PMI-funded hospital admissions hit a record 670,300 in 2025 (up 1%, a fifth straight year of growth); total private admissions including self-pay reached 953,000, also a record. But Q1 2026 broke that streak — **the first year-on-year quarterly fall in insured admissions in five years**, down to 171,000.
- **The UK private acute healthcare market is now worth £13.79bn**, and the wider health cover market is up 13.83% to £8.64bn according to LaingBuisson's most recent report.
- **Spire Healthcare cut around 400 roles this year after NHS-funded revenue fell sharply** — even as revenue from private-paying patients (now ~70% of its hospital income) keeps growing. **Its half-year results have been pushed back to 30 September.**
- Staff at independent providers most often cite patient time, career progression and pace of work as reasons for staying, according to a 2026 workforce survey of the sector





IMPLICATIONS FOR THE NHS

- **Improving vacancy figures may mask a distribution problem** — new nurses and doctors can't get posts while theatres, ICU, mental health and diagnostics stay short.
- **Falling international supply removes a decade-old recruitment lever** — plans built around it need revisiting.
- **Retention now looks more cost-effective than acquisition**, given rising NMC leavers and RCN sentiment data.
- **Blocking graduates from entry-level roles is a pipeline and reputational risk**, not just a short-term headache.

PRIVATE HEALTH IMPLICATIONS

- **Demand is still rising**, but double-digit growth may be ending in favour of a **maturing market**.
- **Private and NHS providers are competing for the same shrinking pool of experienced staff**, even as some (Spire) restructure to protect margins.
- The independent sector's shrinking share of NHS elective outsourcing may signal the 2023–2025 partnership model cooling.
- **Independent providers have a genuine retention story** — progression, pace, patient time which is worth leaning into as talent competition intensifies.



IMPLICATIONS FOR INTERNATIONAL RECRUITMENT

- **Recruitment has shifted from a volume game to a targeting game** — visa costs and requirements have risen sharply since late 2025. The steepest falls sit exactly where recruiters relied most: Health and Care Worker visas down 45–90% depending on measure, NMC international joiners down 47%.
- **Returns are now concentrated in experienced, job-ready candidates for specialist roles like theatre and ICU — lower-experience hires carry more risk.**
- **Cost control and conversion rates matter more** than sourcing volume now.

KEY TAKEAWAYS FOR LEADERS

- **Retention may be worth prioritising over acquisition**, at least directionally, given falling international supply and rising NMC register attrition.
- The newly qualified pipeline — across nursing, medicine and allied health professions — appears to be underused at scale because of a lack of funded entry-level posts; **organisations that find ways to fund and structure graduate roles now may end up with something of a recruitment advantage** as this cohort becomes scarcer.
- **International recruitment strategy might benefit from being rebuilt around cost, targeting and experienced candidates rather than volume**; broad campaigns aimed at early-career overseas candidates may now carry more risk.
- Private and NHS providers seem to be converging on a similar, finite pool of experienced clinical staff even as overall demand growth cools somewhat — **sentiment, flexibility and progression pathways could be genuine competitive differentiators.**
- Regional and specialty-level detail appears to matter more than national averages suggest — **London, the Midlands, mental health, community nursing, theatres and diagnostics all seem to show meaningfully different pressure than the national headline** figures on their own would indicate.

KEY SOURCES

- **NHS ENGLAND DIGITAL**
- **OFFICE FOR NATIONAL STATISTICS**
- **NURSING AND MIDWIFERY COUNCIL**
- **GENERAL MEDICAL COUNCIL**
- **ROYAL COLLEGE OF NURSING**
- **BRITISH MEDICAL ASSOCIATION**
- **CHARTERED SOCIETY OF PHYSIOTHERAPY**
- **THE KING'S FUND**
- **NUFFIELD TRUST**
- **THE HEALTH FOUNDATION**
- **ASSOCIATION OF BRITISH INSURERS**
- **INDEPENDENT HEALTHCARE PROVIDERS NETWORK**
- **LAINGBUISSON**
- **GOV.UK (HOME OFFICE IMMIGRATION STATISTICS)**



ABOUT US

My Healthcare Recruit specialise in international nurse recruitment for NHS trusts and private providers across the UK.

If you're reviewing your international hiring approach, we can share what's working right now to improve retention and reduce time-to-hire.



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