

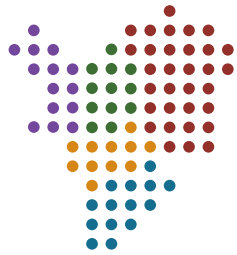


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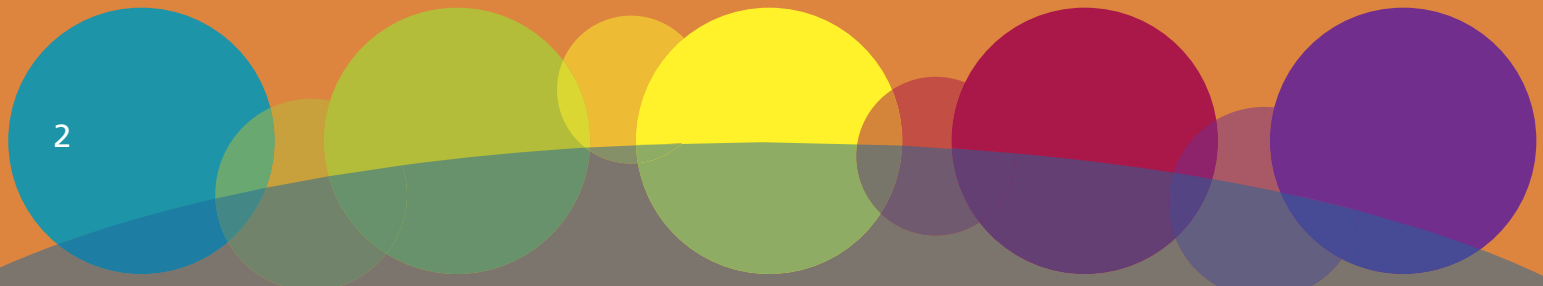


focus on workforce

A High Quality Workforce for the East Midlands

Development for the Wider Workforce





Introduction

Where would a patient be without their cup of tea? What would it be like without the caring porter pushing them to X-ray? And how would it be if their oxygen cylinder wasn't full or the cardiac monitor wasn't working? A patient's road to recovery is dependent on a loyal and largely unsung group of staff who work in a multitude of settings across many healthcare organisations.

The wider workforce are generally at Agenda for Change (AfC) bands 1 to 4 and can be found supporting all disciplines; doctors, dentists, nurses and midwives, healthcare scientists, allied health care professionals and pharmacists as well as within administrative, clerical, estates and ancillary functions.

From 2000/01 to 2005/06 a significant national investment was made as part of the *NHS Plan (2000)*. This funding was ring fenced and additional to the normal Multi-Professional Education and Training funding (MPET). Over this 5 year period, investment in support staff development has come some way to matching the traditional level of financial support for registered staff groups. It was used to increase take up of National Vocational Qualifications (NVQs) and Learning Accounts (LAs) as well as improve levels of basic skills. Generally staff recruited into band 1 or 2 will often have come into the workforce with very few qualifications and as part of this investment many have attained national qualifications, improved their personal skills, knowledge and abilities, and embraced the concept of lifelong learning.

It has also released registered staff time and in some instances enabled skill mix changes to be undertaken.

Through this investment in staff there is anecdotal evidence of staff moving up through the career framework eg from domestic to Health Care Assistants (HCA), from HCA to assistant practitioner and then onto pre-registration nursing as well as from basic grade administrative staff to manager and from therapy assistant to pre-registration therapists.

Increasingly professional bodies are recognising the valuable role that qualified support staff can play in delivering more complex healthcare and are broadening the regulatory framework. Currently in scope are Dental Nurses who were required to register by 1 August 2008 and Pharmacy Technicians for whom the move from voluntary to mandatory registration will take place on 1 July 2011.

In moving forward we are working to meet the quality and productivity challenge, providing staff with the opportunity to share skills and collaborate to develop local solutions for improving efficiency, maximising their input (*Towards Excellence, A strategy for improving health and healthcare through Quality, Innovation, Productivity and Prevention, NHS East Midlands*).

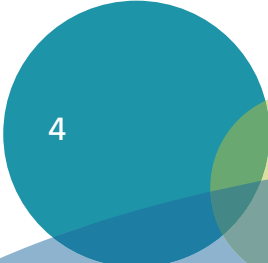
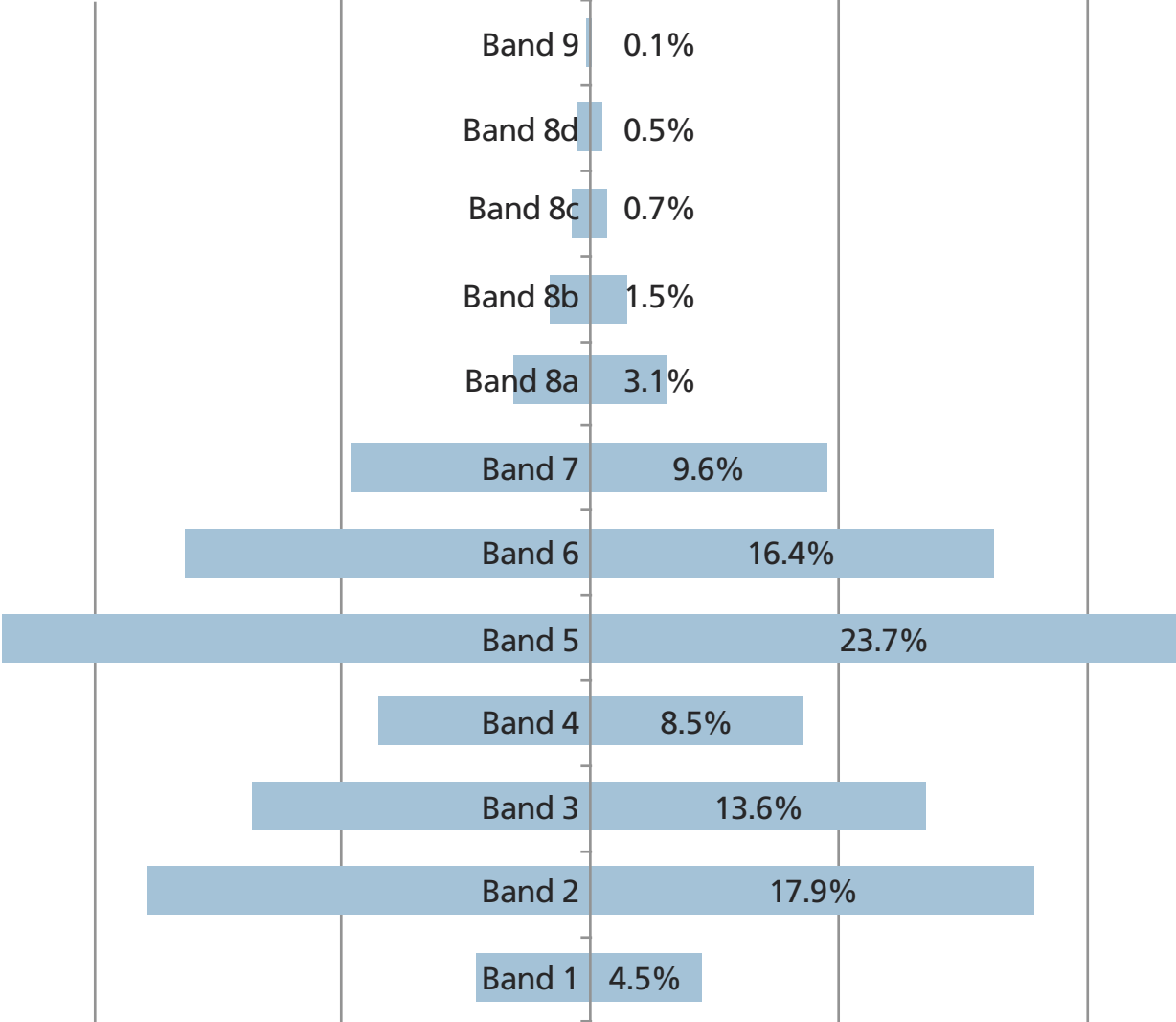
We need to be engaging and equipping staff with the tools, training and support to deliver the service, and to challenge the barriers that hold back innovation which lead to improved processes and service transformation. Achievements have already been made in priority areas such as reducing healthcare acquired infections and the wider workforce plays a considerable part in delivering against these goals.

Structures and Methodology

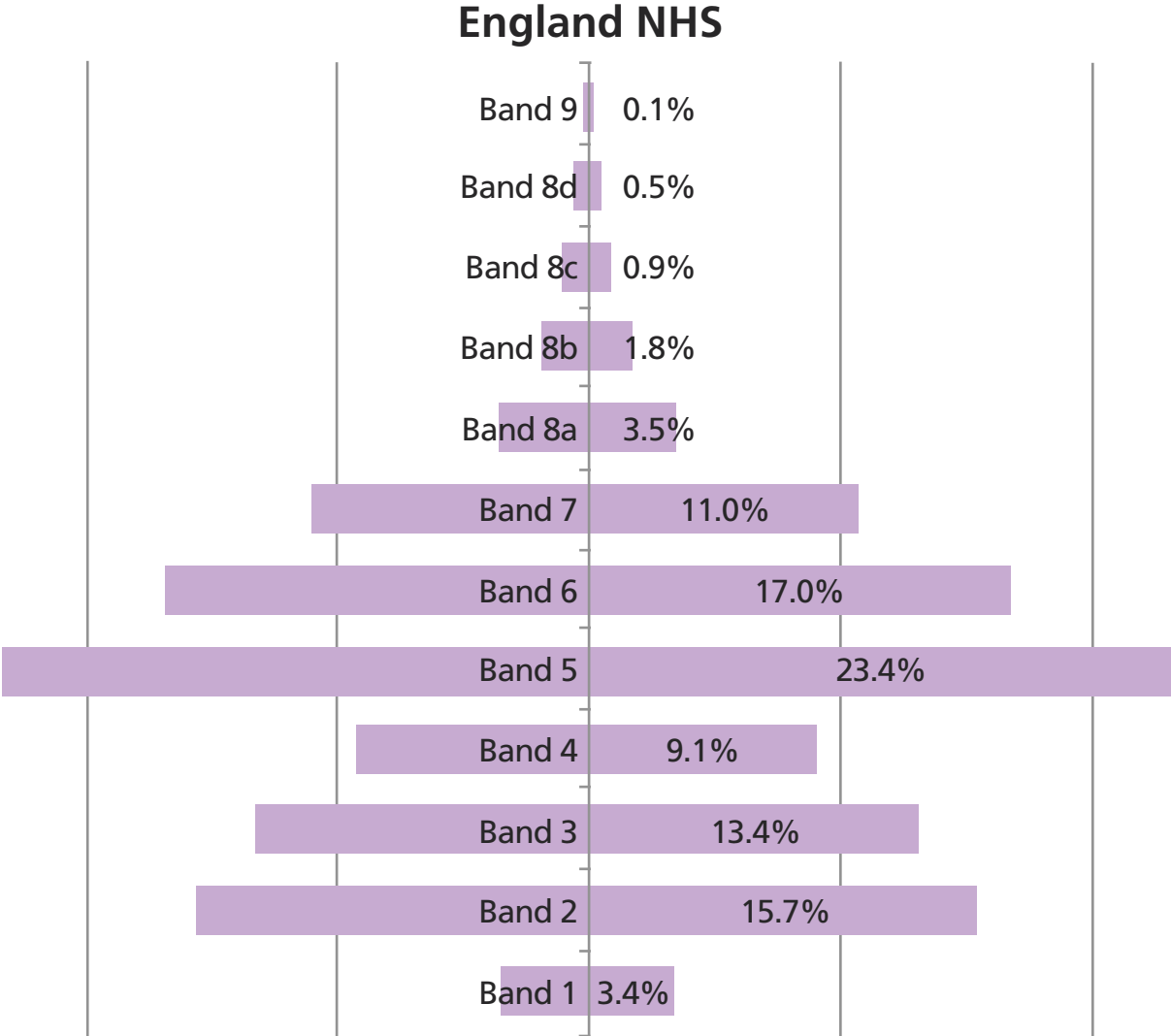
Workforce Composition

The structure of the East Midlands workforce is shown below:

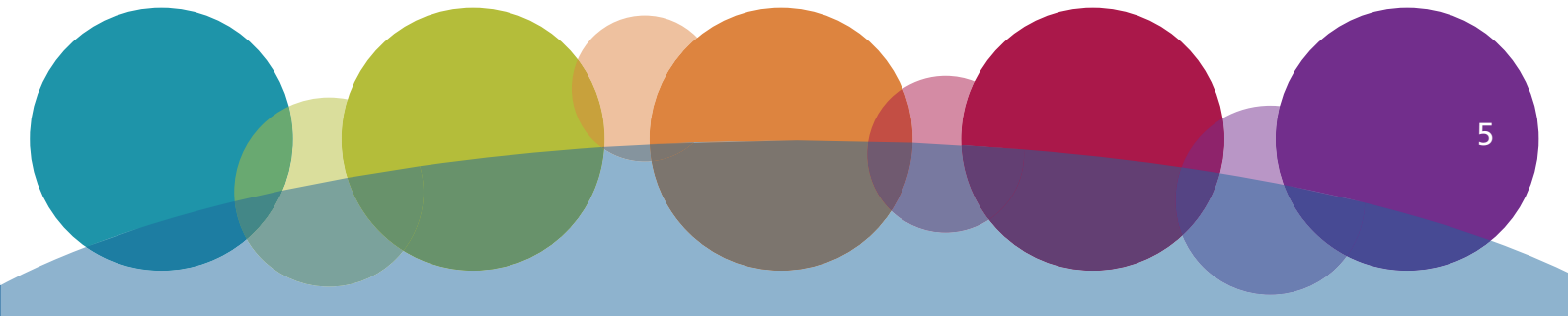
East Midlands NHS



The national workforce is shown for comparison below:



The tables above show that the East Midlands have a higher proportion of staff in bands 1 to 4 (44.5%) than nationally (41.6%).



Workforce Change

Themes emerging in the workforce planning process identified service modernisation, skill mix changes and the development of new roles particularly at levels 3 and 4 within the career framework as priorities. It is hoped that these changes will support improvements in quality, productivity, access and resilience in service delivery, and provide consistency across roles.

For most organisations, workforce redesign strategies are continually evolving but all recognise the need to:

- Align the provision of and access to education and training to the appropriate Career Framework level and Agenda for Change (AfC) pay bands
- Support the development of new roles at bands 3 and 4
- Provide access to a sustainable career structure. This is pivotal to succession planning and the development of career pathways
- Access to include their independent contractors in order to improve the service to patients
- Use the Knowledge and Skills Framework for driving improvement

However there is a general realisation that without dedicated funding to aid progression through the skills escalator it is unlikely that any substantial changes will be achieved.

Encouraging Development

A region wide project to increase the numbers of Union Learning Representatives (ULRs) is underway and is being jointly managed with Skills for Health and Unison. The role of the Union Learning Rep is to work with employers to improve the skills for life in the workplace, provide access to information, advice and guidance on learning and development and share and develop good practice concerning skills development. The ULRs will work to encourage employees who are lacking in confidence to gain relevant skills and qualifications and support colleagues to ensure that their basic skills needs are recognised and met.

Some NHS organisations have few ULRs and the aim will be to provide the opportunity for these organisations to develop staff into this role to support their learning and development approaches.

Changes to the national qualification framework will soon provide opportunities for staff to accredit smaller elements of learning, which reflect individual needs and employer requirements. By 2010 all key vocational qualifications will be approved by Sector Skills Councils and readily available to learners in small, credit-based units of learning. This new approach has the benefit to develop staff less confident in their learning ability, and will enable accreditation of training programmes that support continuous professional development. Packages of units will appear as qualifications at award, certificate and diploma levels.

It is recognised that collaboration with colleagues in social care is essential especially where the staff work side by side in teams. Partnerships between health and social care

working with education providers have developed some outstanding education for example the Learning Disability Award.

Workforce Development

Statutory and Mandatory Training

All organisations have generally identified a comprehensive matrix of statutory and mandatory training requirements in order that staff can work safely. Although these can vary from organisation to organisation, a general core of mandatory training may include topics such as health and safety, fire, security, information governance, child and adult protection, infection control, manual handling, risk management, resuscitation and food hygiene. The level, depth and frequency of training will often be determined by the grade and role of the staff member or group. Requirements for mandatory training are also kept under continual review to ensure that new national or local initiatives can be implemented.

Additionally departments and services may include further training that is job specific and essential to effective delivery for example customer service training. The core KSF dimensions now also create a framework against which staff members need to be adequately prepared to undertake their role. Statutory, mandatory and essential training may therefore regularly require 1-2 days of training per person per year and be considerably more for those joining an organisation during their induction period. The roll out of the National Learning Management System will provide an opportunity for all NHS staff to access the e-learning content and a transition plan and processes are being developed for migration to the new system.

Functional Skills Development

All NHS organisations in the East Midlands have made a public commitment to the Skills Pledge, and are now working through the stages to implement their action plans. The purpose of the Skills Pledge is to ensure that all employees are skilled, competent and able to make a full contribution to the success of their organisation. For those employees who do not already have a first Level 2 qualification, funding is provided to help them gain literacy and numeracy skills as well as their first Level 2 qualification.

In Leicestershire all four NHS organisations are at the final stage of the Skills Pledge implementation.

The training needs analysis for staff in bands 1-4 carried out in January 2008 indicated a high level of demand for the development of literacy and numeracy skills across the workforce, however there is little available evidence of these needs being met. One of the reasons for this is that employees are uncomfortable in bringing their basic skills needs to the attention of their managers.

The whole organisation approach to skills for life has been taken up by a number of NHS organisations in the region, where the promotion of training and development is creating opportunities for staff to take part in literacy and numeracy screening, moving on to more formalised assessment where required. Nationally the need for numeracy has been emphasised for all staff and the campaign is focusing on this area as a continuing priority. There is a need to gather a baseline understanding of existing skills and qualifications to bolster the achievement of the Skills Pledge.

General skills

The Northamptonshire workforce team provide some examples of how general development of the wider workforce is taking place. Northamptonshire PCT has developed in house programmes to develop skills for effective: Personal Assistants, communication skills, dealing with conflict, developing self confidence, change management, developing personal insights and team building events. These are advertised as part of their non-mandatory training programme and are open to all staff. Their study leave policy states that 3 days should be available for all staff to attend learning activities of their choice.

Assistant Practitioners

Whilst skill mix and developing new roles continues to be high on the workforce agenda across the East Midlands as yet there is yet no consistency of expectation of the role, responsibility, educational level and provision. Whilst the title Assistant Practitioner (AP) maybe used they may not consistently work at the equivalent of level 4 in the Career Framework. Others may work consistently at level 4 but the job title may reflect a lower level of responsibility and accountability. It remains unclear which areas lend themselves more easily to supporting the Assistant Practitioner (AP) role.

National research (2008) showed that 46% of trusts had APs in nursing with 22% going to employ them before 2009. 84% were in the north with the rest equally distributed across the country. Skills for Health are funding projects and work nationally to develop a common profile and minimum educational standards and Derbyshire is part of this work. Current consultation of National Standards for APs will result in their availability at the end of the year. A regional project continues across the East Midlands into the second year. This will result in the development of a toolkit to guide Employers, Registered Practitioners and AP's to support the AP role. Within the first year generic competencies and a generic job description were developed and educational options investigated.

The second year will result in recommendations regarding the role and adaptable educational options. However, support for mentorship and supervision from registered Practitioners is necessary for successful role development. An event will be organised to launch the toolkit, which will also include the identification of national and local models of good practice, which are being adapted across the region.

As in all areas in the East Midlands the importance of the role has been recognised and is at various stages of development and implementation within Leicestershire and Northamptonshire and is supported by education specifically related to the role. Funding to support the educational requirements of this staff group is available through the Joint Investment Framework (JIF). Training options include NVQ, Foundation degree, BTEC, Open University Programmes, Diploma in Higher Education and In- House training programmes.

APs are a major part of Lincolnshire's Workforce Development strategy and the development of APs continues across all trusts within the majority of services, much of which is supported by a locally delivered Foundation Degree. Additionally a Project Manager has been appointed to support the Work Based Learning element of the Foundation Degree. Derbyshire has demonstrated the desire to increase, develop and deploy AP roles identified by all Organisations within a majority of services which include Imaging, Pharmacy, Rehabilitation, Cancer, Children Services and Surgery.

The Teaching Public Health Network is funding research undertaken through Nottingham University to explore the development of Public Health skills to support the Level 4 role. Nottingham University Hospitals (NUH) seeks to double the numbers of APs to support development in the Radiography Department. Six new APs have been recruited in Nottingham City PCT to support new multi disciplinary teams. The AP role as a progression opportunity with clear role boundaries has been identified within Nottinghamshire County PCT i.e. as progression from the 14-19 Diploma, Apprenticeship Scheme, AP role and Registered Practitioner.

A commitment by Employers across the East Midlands to develop the AP role is apparent and work continues to ensure equity across organisations. However, future support for registered practitioners along with employer led education programmes, accessible for all APs is important to ensure the success of the role.

Foundation Degree Development

Some Assistant Practitioners or Practitioners may well be best served by Foundation degrees as long as this links in clearly to a sustainable career pathway. In the East Midlands there are a limited number of successful Foundation degrees:

- Assistant Practitioners in Radiography (Leicester)
- Health and Social Care Practice (Lincoln)
- Palliative Care (LOROS/Northampton)
- Healthcare Science (Nottingham)
- Dental (Derby)
- Health and Social Care (Northampton)

In Modernising Scientific Careers the aim is that the delivery of the Healthcare Science Foundation Degree will enable some shared learning within the first two years of the new integrated bachelors programme, providing a potential step off point in the curriculum, but also providing a framework to recognise prior learning for progression to full degree.

This principle is welcomed in moving to all Degree Nursing, where the Foundation Degree and other routes are components of a framework for progression within agreed processes supporting Accreditation of Prior Learning.

There are some diplomas and NVQs at level 3 that could be converted into Foundations if that appeared preferable:

- Paramedic (Northampton)
- Operating Department Practitioners (Leicester)

There are other areas which might require a foundation degree in the future such as Public Health, and focus groups are being held with employers to establish the level of interest.

Prior to acceptance of Foundation Degrees as a suitable educational route, considerable work needs to be undertaken within the service to explain the qualification, identify the need for foundation degrees and establish suitable educational programmes, effective work based support and funding. This work is being taken forward in close partnership with Foundation Degree Forward and HEFCE.

Joint Investment Framework

The Joint Investment Framework (JIF) was launched in April 2008 with the aim of investing up to £10m of funding from the Learning and Skills Council (LSC) and the NHS towards the skills and qualifications of staff in AfC bands 1-4. This 3 year rolling agreement will support the following areas:-

- NVQ levels 2, 3 and 4
- Apprenticeships
- Skills for life (literacy, numeracy and language)

Flexibilities in Train to Gain funding are providing individuals with the opportunity to undertake repeat qualifications at NVQ level 2.

Developing new qualifications will require occupational competence for assessment which is mostly provided by health service staff. Into the new financial year there will be increased opportunities for NHS organisations to develop partnership arrangements with Colleges and other providers, where both parties can benefit financially in delivering NVQs. These relationships can be brokered by Business Link Advisors (formally skills brokers) who are supporting Trusts with the Skills Pledge.

University Hospitals of Leicester (UHL) is only one of two NHS Organisations that hold a direct contract with the Learning and Skills Council for the delivery of Train to Gain. This contract has been increased for 2010 to include the delivery of Apprenticeships including Health where only in-service staff members have the occupational competence to assess these qualifications.

An evaluation is being undertaken to assess the impact of the JIF agreement in the East Midlands and results are expected in January 2011. Further work to identify the skills needs of staff in AfC bands 1-4 is progressing linked to appraisals and personal development planning.

Apprenticeships

Apprenticeships have become increasingly important and all public sector bodies have been requested to identify their contributions to the national Apprenticeship target in 2009/2010 and for which in the health sector nationally this is 5000 additional starts.

The NHS across the East Midlands region has proposed a contribution of 505 Apprenticeships for 2009/10 which is a significant increase from the existing baseline of 17 apprenticeships in 2008/09. A national apprenticeship network has been established by the Department of Health and work is underway to overcome the barriers to using the apprenticeship route for skills development, particularly in clinical areas. An evaluation of the benefits of using the apprenticeship route in the NHS will be carried out in 2010.

A number of organisations provide work experience for Apprentices whilst they are training with a college or other provider. This route, whilst beneficial for the employer, does not provide employment status for the apprentice and will not contribute towards the regional target.

A large scale analysis of the opportunity to utilise the Apprenticeship frameworks for existing staff regardless of age or position needs to be undertaken by NHS organisations. This approach will accelerate achievement of the target in the region. There are two areas which could immediately benefit by using the apprenticeships route:-

- Pharmacy Technicians and Pharmacy Assistants
- Dental Nursing

Work is already underway to create a virtual centre of training excellence for Pharmacy Technicians and support staff with a number of colleges across the region.

Where organisations are seeking to use Apprenticeships to bring people into the health service materials need to be developed to promote these career opportunities. HR practices will need to be reviewed and changed to support new entrants to the NHS who cannot evidence their level of current skill in relation to the job. Apprenticeships can also support the NHS to focus on inclusion, providing employment with training for people living in disadvantaged areas or for those individuals from the following groups:-

- Care leavers at age 19
- Offenders under probation supervision
- Adults receiving secondary mental health services
- Adults with moderate to severe learning disabilities

This has already proved to be the case where in Nottinghamshire the recruitment of three cohorts of Apprentices from the local area has changed the demographics of the workforce, now more closely representing the community served by the Primary Care Trust.

Further Progression

The opportunity to progress into professional training once employment in the NHS has lasted for over a year has been very well received and utilised across the East Midlands. Financial restraint has reduced the numbers entering training but it is still supported. In Lincolnshire the health community has Open University programmes in both adult and mental health branch nursing to which existing staff are seconded and there are also work-based part time Physiotherapy and OT pre-registration programmes delivered by Sheffield Hallam.

Northamptonshire also have opportunities for non-professional staff to be involved in training in 'Leadership at the Point of Care.'

The Skills Escalator

The Leicestershire Health community have worked with Job Centre Plus and other partners to develop a Skills Escalator tool which can demonstrate to individuals how they can progress in the health service.

Partnership Development

Lifelong Learning Networks (LLN)

There are currently 2 LLN initiatives within East Midlands. One is “Skills for Sustainable Communities” based in the south of the region and the other is “Leap Ahead” based more in the north.

The priority areas for 'Leap Ahead' are

- Construction
- Engineering
- Tourism and hospitality
- Retail

The priority areas for “Skills for Sustainable Communities” are

- Children
- Health

Both the Lincolnshire and the Northamptonshire workforce teams are linked into the southern network.

Public Sector Compacts

The Leicestershire Public Sector Compact was the first in this region to be developed. The model has been rolled out across the other counties and the SHA workforce team members participate in the steering groups and working groups for the local arrangements.

Work is underway to refine the action plans for the Compacts and look at potential areas of shared learning.

Learning Partnerships

Local Healthcare Community Workforce Development teams are encouraged to link to the Learning Partnership in their area as this was considered to be extremely beneficial previously in Leicestershire.

Aim Higher

There are close links with Aim Higher. In Nottinghamshire the lead of the workforce development team is a member of the Nottinghamshire Aim Higher Steering Group. The main East Midlands involvement is with the Aim Higher Healthcare Project which has the aim of attracting a more diverse range of applicants into the health service at Higher Education entry level. All health communities have had some engagement through a variety of projects which have been funded. For example:

- £8000 to support a dedicated resource for managing a work experience scheme. Following a successful pilot this role is now mainstreamed within Derby Hospitals NHS Foundation Trust
- £2000 to support the recruitment and resources for the Healthcare Ambassador scheme. A further contribution is subject to confirmation for an IAG event designed to raise awareness and aspiration in adults within a deprived ward in Derby city
- A dedicated member of the Lincolnshire team was a health and social care Ambassador and similarly Northamptonshire are developing the Ambassador role putting together a training package

- Funding of Drama performances in schools aimed at promoting health care as an option including non-professional careers
- Aim Higher Derbyshire have financed (c£5000) a multi-agency careers event run over 2 days at the University of Derby introducing Year 11 students to a range of career options and the educational routes to access these. Additional funding is being supplied through participating organisations in the form of prizes
- Aim Higher Northamptonshire are working with the workforce development team to improve work experience in healthcare

Widening Access in Employment

The Local Healthcare Community Workforce team will continue the good work that has already taken place to ensure as wide an access as possible to health care employment alongside the work being done with Aim Higher. This will build on the Leicestershire NHS Support Worker Project. In Nottinghamshire their Practice Learning unit is instrumental in supporting those in the 14 to 19 year old bracket to think about healthcare as an employment option. We recognise that there is enormous potential in the labour market which we need to harness.

In Northamptonshire, the Widening Participation to Employment Group is drafting a Widening Participation plan and will act as a forum for developing initiatives for widening participation, working in partnership with Jobcentre Plus and the Learning and Skills Council. Work to recruit to domestic and housekeeping posts through the New Deal programme is already in progress.

We need to ensure we are supporting NHS organisations in monitoring learning participation and the achievement of learners in terms of equality of access, using the six equality grounds in the context of the whole workforce.

Training Pathways in Bands 1-4 Project

The Department of Health have developed a work programme to focus on staff in Bands 1-4, believing that development of these groups of staff has the potential to increase quality, facilitate service transformation, support skill mix developments and importantly help provide staff with fulfilling and rewarding jobs.

Building on local progress and practice, the work will result in a data bank of a small number of job roles, and include the identification of the competences required for these roles, the education and training to support the competence, and provide examples of the progression routes. There are six roles in scope, a rehab support role, an acute nursing support role, maternity support worker role, a care pathway support role, scientific support worker role and an admin and clerical role.

The draft framework is due to be produced by March 2010 with roll out in June 2010.

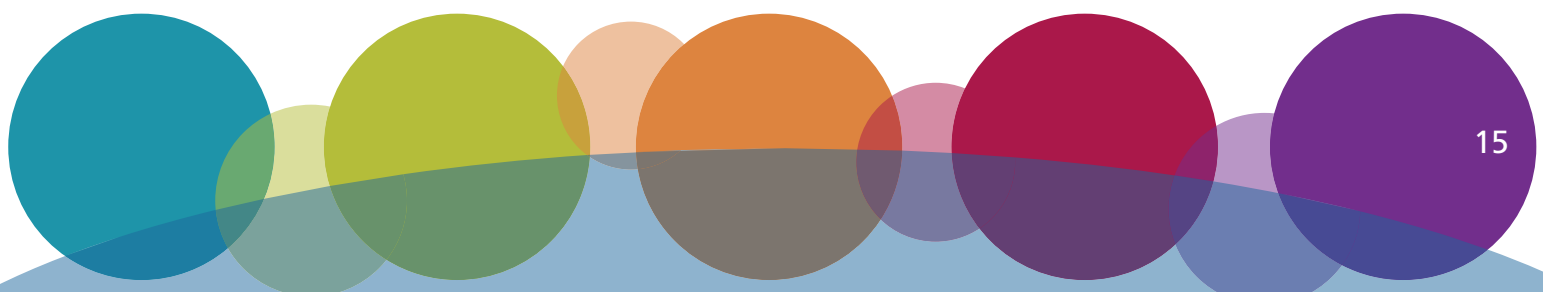
Conclusion

Investment in the wider workforce has provided many benefits to individual staff, their work teams, the patients that they interact with as well as the organisations that employ them. If this investment does not continue there is a real risk that service modernisation will be significantly affected and the opportunity to 'grow your own' will be lost.

Health and Social Care employment is recognised as being a priority within East Midlands as it has the potential to affect a considerable percentage of local inhabitants, not only in improving their personal skill but by ensuring that the individuals who look after them are effectively trained and assessed as competent. Developing the skills in healthcare staff will also assist the economic development of the region.

In order to make best use of individual potential and improve productivity an effective career framework needs to be in place for the wider workforce. This can only be a reality where staff at all levels have opportunities to develop meeting the needs of the organisation as well as personal aspirations.

Role	Issue/area for development
<p>Administration and Clerical</p> <ul style="list-style-type: none"> • Medical Secretaries • Clinical Coders 	<p>High retirement numbers – however staff returning p/t but unable to capture the returners on ESR so they are included in data as leavers and new starters. In Nottinghamshire they are outsourcing Administration functions abroad.</p> <p>Move to digital dictation. Need for replacement in support of aging workforce.</p> <p>Small workforce, identification of relevant training, and seek to retain staff. National skills shortage area.</p>
<p>Call Handling</p>	<p>Larger workforce than originally indicated; areas for development – triage arrangements, major trauma centre, urgent care – EMAS. Responsive to areas such as flu pandemic.</p> <p>NHS Direct – health information advisors</p> <p>Call centre NVQs available for this group of staff, customer service for frontline staff.</p> <p>Pilot sites for single digit number.</p>
<p>Information Technology</p>	<p>Professionals – competition with private sector for pay and conditions</p> <p>Capacity issue for introduction of new systems – hardware and software support.</p> <p>Lack of basic IT skills for clinical staff.</p>
<p>Estates and Facilities</p>	<p>Aging workforce, traditional craft skills requiring up to four years training of new staff. Use of apprenticeships is well developed.</p>
<p>Catering</p>	<p>Aging workforce mostly outsourced. Increase required in Northamptonshire. Full range of NVQs and apprenticeships available.</p>



Role	Issue/area for development
Nursery Nurses and support staff	Increased requirement with maternity and children's services. Developing assistant practitioner role in Lincolnshire, Play therapists – Lincolnshire. Range of NVQs and Apprenticeships available in childcare.
Mortuary Technician	Small workforce, difficulty in recruitment.
Podiatry Assistants	Increasing numbers across the region, established career pathway and training routes. General foot care skills required by other groups.
Housekeepers	Retention issues. Reliance on agencies. Where procured service difficult to influence. Training and qualifications available, including nutrition. Apprenticeship framework
Healthcare Assistant	Training pathways in place, roles and career pathways need to be developed. Examples of Assistant Practitioner role in Derbyshire. Apprenticeship framework well established. Pool of HCAs depleting, opportunity to provide access for staff to progress. Possible retirement bulge.
Maternity Support Worker Neonatal Support Worker	Roles in development. Apprenticeship framework underway. Some training provision at University of Northampton. Use of NVQs for the new roles.
Pharmacy Technician and support staff	Recognised progression pathway for technicians supporting registration, NVQs and apprenticeships. Training across the region is variable. Few Technicians progress to Pharmacist role. Support staff utilise technician NVQ units.

Role	Issue/area for development
Dental Nurses	<p>Wide range of training programmes available to support registration, but no consistency across the region.</p> <p>Lack of workforce intelligence due to external service delivery. Apprenticeship framework in place.</p>
Occupational Therapy Assistants/Physiotherapy Assistants Technical Instructors	<p>Need to increase numbers. Respond to extended hours. Rehab assistants' bands 3 and 4. Multi-therapy areas.</p> <p>Coding issues. Consideration of Foundation Degree for OT.</p> <p>Small workforce. Further detail required.</p>
Radiography support workers	<p>Assistant practitioners, Foundation degree – diagnostic at University of Derby, therapeutic at University of Hertford. NVQs.</p> <p>Move to 24/7 service provision and 37.5 hours week. Hertford. NVQs.</p> <p>Move to 24/7 service provision and 37.5 hours week.</p>
Speech and Language Therapy assistants	<p>Using assistants for specialist roles for adult Dysphagia. Educational assistant for teaching. Increased support of stroke patients.</p>
Audiology assistants	<p>Foundation Degree for private sector delivery, small adjustment for NHS assessments. Future contracted out service.</p>
Dietetics assistants	<p>Bands 3, 4 and assistant practitioner roles. NVQ level 3 pathways. Applicants' often skilled workers.</p>

Role	Issue/area for development
Mental Health support workers	Development of the Assistant practitioner role. Apprenticeship framework does not cover all the requirements of the role.
Sterile Services	Reported recruitment difficulties. Apprenticeship framework at level 3.
Orthopaedic technicians	Small workforce with no specific training programme.
Porters	Customer care qualifications. Further detail required.
Health Trainers	Employed in health service and other agencies, high turnover through progression. Wider range of competences required in Nottingham for the Brief Intervention Therapy, money advice, contraception and sexual health. Recognised education pathway at levels 2 and 3. Apprenticeship in development. Consideration of development of a Foundation Degree.
Emergency Care Assistants	Apprenticeship in development. NVQs in Healthcare.
Other	There is currently insufficient information regarding library assistants, pathology, learning disability support workers, community/GP support workers, security staff, orthotics and prosthetic staff.

