



Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	09 August 20	)22	Agenda Item	5.3
Report Title	Therapies & Health Sciences Workforce & OD Key Issues Report			
Report Author	Alison Clarke – Deputy Director of Therapies & Health Science			
Report Sponsor	Christine Morrell – Director of Therapies & Health Science			
Presented by	Alison Clarke – Deputy Director of Therapies & Health Science			
Freedom of Information	Open			
Purpose of the Report	relevant key v	orms the W&OD vorkforce issues e professions.		
Key Issues	<ul> <li>Evalua</li> <li>Occupa Universisucces</li> <li>HEIW I placem conten</li> <li>Cross Cuttin</li> <li>Regula Act 20 DoTHs</li> <li>Certific and wid</li> <li>Profession S</li> <li>Patholo</li> </ul>	ogy Top-up Equi	Streamlining Pro (OT) Programm PC approval an of educators. The ement relating to surance of pro- greement for au <b>egislative Dev</b> thal Capacity (A rotection Safegu ecommendation s- new legislation s. valence Bid sup	e Swansea d to practice cess and thorisation <b>elopments</b> mendment) uards, us. on, training
Specific Action	Information	Discussion	Assurance	Approval
Required (please choose one only)				
Recommendations	Members are	asked to:		·
	Receive	ve the information	n in the report.	

<ul> <li>Note the evaluation of the Student Streamlining Process 2022.</li> <li>Assure the committee of the active engagement with its academic partner Swansea University in relation to the Occupational Therapy programme.</li> <li>Assurance that the Local Level Agreement is fit for purpose and recommend that the Deputy Director of T&amp;HSc be the authorised signatory on behalf of the organisation for the AHP and HSc professions.</li> <li>Assure the committee of the active engagement in the consultation process in relation to the new Mental Capacity Act regulations supporting the implementation of Liberty Protection Safeguards (LPS).</li> <li>Note the considerations of the new legislation relating to the certification of fit notes for the AHP professions and wider actions required.</li> <li>Note the application process and the established funding allocation for supporting NHS staff within Healthcare Science to access education to support workforce development and sustainability by achieving registration/regulation via an alternative</li> </ul>

## Therapies and Health Sciences Workforce & OD Key Issues Report

#### 1. INTRODUCTION

The purpose of this report is to draw to the attention of the committee, key workforce issues and risks relating to the Therapies and Health Science professions and any mitigation being undertaken.

## 2. KEY ISSUES

#### 2.1 Education and Workforce Development

#### 2.1.1 Evaluation of Student Streamlining Process 2022

HEIW is responsible for overseeing the graduate recruitment into Wales of AHP and BMS students who study in Wales. The operational process known as streamlining is administered by NWSSP and has been adapted from a long-standing operational process for nursing. 2022 was the second year this adapted process was used for AHP and BMS graduates. It was the first year for audiology and podiatry to be included. HEIW and NWSSP have given a commitment to jointly evaluate the modifications to the operational process put in place for the 2022 round and to share proposals for further improvements/modifications as required, for graduates entering the workforce in 2023.

Evidence and opinions have been collected throughout 2022 to inform a report to be submitted to HEIW Executive and to be shared early September with Health Boards, Trusts and professional networks such as Directors of Therapies, Workforce and Finance colleagues. An online workshop took place on 26<sup>th</sup> July 2022 to further inform the report. HEIW/NWSSP was committed to listening and responding to suggestions for the next round of recruitment of AHPs with all options on the table to be explored recognising that this is partnership approach.

The workshop was an opportunity for HEIW, NWSSP and the HB to reflect on another recruitment round and share experiences across different locations, service models and service needs. It was useful hear how different parts of Wales have different expectations and results from this years' round of recruitment. It is a unique national approach which requires participation from all and inevitably compromise to operate the model.

The workshop examined how operationally the SSP had gone this year, and secondly provided the opportunity to have some "free thinking" around the principles that underpin the current approach and ask again, is it working for HBs and what solutions can be explored to sustain the approach?

In terms of the operational adjustments that were made to the recent round, the following summarises the observations and feedback:

- A smoother process than last year but still some issues to resolve
- Regular planning and development groups helped with improved engagement and the pragmatic approach to commissioned numbers was appreciated

- The opening of job vacancies needs to commence earlier for some professions whilst other professions are happy with timescales. Radiographers, for example, were keen to start in November. S&LT colleagues stated that it hadn't been successful for the profession.
- NWSSP are keen to improve the experience and commit to hold exploratory meetings to make the transition from matching to recruitment smoother. Communication is key and a clear pathway for resolving queries. The ability to employ students at band 4 whilst waiting for registration and the mechanics of transition from SSP platforms to general recruitment required further clarification.
- Interviews are valued and should continue. Physiotherapist leads will determine if they wish to continue without interviews and consider the added value given the large numbers and pressure on the service.
- Roadshows to promote opportunities to join HBs require better coordination and promotion to students. They are valued and should continue. They require support from HBs.
- Escalation, the second stage of SSP does not add sufficient value and results in prolonged anxiety for bursary students. SSP will cease at the end of the matching phase. HEIW will liaise earlier and more effectively with bursary unallocated graduates.

To note that the SSP recruited 415 graduates to work in Wales, 76 remain without jobs and there are 134 unfilled posts. Unfilled posts are located in predominately in BCUHB, Powys and HDUHB, and across specific professions.

In both sessions there was time to explore how the underpinning principles laid out 2 years ago are helping or hindering achieving the overall objectives. It was acknowledged there are different stakeholder objectives the scheme is attempting to meet. Recruitment isn't an exact science and changing expectations of students, service models and workforce are all drivers influencing success. The bursary policy was not discussed however it was noted that Welsh Government are to review the policy.

One area of concern that dominated discussions was the issue of domicile welsh students who study in England and wish to return to Wales to work. The principle currently is; Welsh graduates have priority access to new graduate jobs resulting in HBs and Trusts having to wait until the end of SSP before attempting to fill gaps and reduce service pressures from recruiting talent elsewhere and pick up returning graduates who wish to work locally.

The view expressed by some was that a possible return to the old system may meet the organisations objectives in a better way and that this should be explored. Overall it has been a more positive experience in 2022, however there are still areas which require further improvement.

## 2.1.2 Occupational Therapy (OT) Programme Swansea University

Working in collaboration with Swansea University on the development of their OT programmes the University has gained the Health and Care Professions Council

(HCPC) approval for their Occupational Therapy programmes. This will be officially approved at the next HCPC Education Committee meeting on 31<sup>st</sup> August 2022. In regards to accreditation by the Royal College of Occupational Therapists (RCOT), measures have been submitted to meet the conditions for accreditation and the university is currently awaiting an outcome. This is likely to be communicated in August 2022 when reviewers return from leave. The university is confident that the measures to address the conditions will be approved and accreditation will be gained before the programme starts.

Successful recruitment of a further OT lecturer, anticipated to join the University in the coming weeks, will take the teaching establishment up to three Occupational Therapy educators.

The university will be welcoming the first cohort of students in mid-September 2022 and preparing them for placement within the Health Board in late April 2023.

## 2.1.3 Local Level Agreement (LLA) practice placements

The Local Level Agreement is approved by HEIW and outlines the obligations between Higher Education Institutions and Placement Providers for the provision of placements in Wales relating to commissioned nursing, midwifery, allied health profession, physician associate, and healthcare science programmes.

The agreement was last updated in October 2018 and has been under review with Heads of Therapies and Health Science having the opportunity to contribute to the review process.

The provision of high-quality education and training of healthcare professionals depends on effective partnership arrangements between Higher Education Institutions (HEIs) and Health Boards involved in providing placement learning experiences.

Placements are a critical component of healthcare students' programme journeys. Placement learning is essential for students' personal and professional development and allows real-time immersion in healthcare delivery, providing contextual opportunities for students to work towards achievement of programme learning outcomes. Placement environments also allow students to work as part of multiprofessional teams, develop skills, values, and behaviours, and to connect theory to practice.

The LLA document requires sign off by the Placement Providers authorised signatories and designated point of contact, see appendix 1. The LLA has been circulated to SBU HB AHPs and Healthcare Science leads for comment, updated by HEIW, discussed at the All Wales Placement Reference group and received into the organisation. Assurance is provided that Heads of Therapies and Health Science are signed-up to the agreement and approval is sought for the Deputy Director of Therapies to be the authorised and designated signatory.

## 2.1.4 Annual Placement Plan 2022-23

HEIW has informed the organisation of the 'Education and Training Plan' commissioned student numbers and has shared its 'Annual Placement Plan' with HEIs and placement providers in order to manage placement capacity across Wales. Allocations of student numbers are aligned with Health Board Integrated Medium Term Plans (IMTP's).

The HEIW Annual Placement Plan applies to students across all healthcare programmes and fields of practice and breaks down indicative student numbers that each University allocates to partner Health Board placement providers. For reference the placement plans for the academic year 2022-23 for AHPs and HCS can be found in Appendix 2. HEIW anticipate that SBU HB will make available the appropriate number of placements to support students during their education. This builds on the principles set out in the "Local Level Agreement" and provides opportunity to recruit the required number of newly qualified staff on graduation. HEIW will monitor this and are in the process of arranging meetings with Health Boards to discuss practice placement offers and concerns relating to number of available placements with HBs.

## 2.2. Cross Cutting Service and Legislative Developments

# 2.2.1. Regulations on the Mental Capacity (Amendment) Act 2019 and Liberty Protection Safeguards

Consultation has taken place on the new Mental Capacity Act regulations which will support the implementation of liberty protection safeguards (LPS).

The new LPS regulations will provide important rights and protections for people who lack the mental capacity to agree to care, support or treatment arrangements, where these arrangements amount to a deprivation of liberty.

The draft document provides details of those professions who can undertake, the **mental capacity assessment and determination under the LPS;** the **medical assessment and determination of a Mental Disorder** and the **necessary and proportionate assessment and determination.** The professions comprise;

- a medical practitioner
- a nurse
- an occupational therapist
- a social worker
- a psychologist
- a speech and language therapist

A response has been provided on behalf of SBUHB's Director of Therapies & Health Sciences to advise that whilst the inclusion of the speech and language therapist in those professions who can undertake the mental capacity assessment is supported, other HCPC registered professionals are highly experienced and competent in undertaking capacity assessments as per the MCA for the purpose of consent to treatment. HCPC professionals also assess the capacity to make decisions relating to Deprivation of Liberty Safeguards. It is therefore recommended that the list of professions be expanded to include all HCPC registered professions. Similarly, some health conditions identified in the revised draft code of practice, e.g. dementia, learning disability and autism are currently diagnosed by appropriately trained and qualified HCPC professionals, including occupational therapists and speech and language therapists. Those individuals who have received their diagnosis via Integrated Autism Services or Community Learning Disability Services may not have their diagnostic letter signed by a registered medical practitioner or practitioner psychologist. The expansion of the professions authorised to undertake the medical assessment would prevent unnecessary delay and duplication of work. HCPC registered professions are not permitted to work outside of their competencies, therefore only those who have received the appropriate training would be able to undertake such diagnostic assessments. It is recommended that the expansion of professions include all appropriately trained HCPC professions.

Likewise, with reference to those professions who can undertake the necessary and proportionate assessment role, it is recognised that all HCPC registrants meet the criteria laid out in the Assessment and Determination regulations and it is recommended that the list be expanded to include all HCPC registered professions.

## 2.2.2. Certification of Fit Notes

New legislation to allow a wider range of healthcare professions to certify fit notes has been introduced by the UK Government to ease pressure on GPs, (Getting the most out of the fit note: guidance for healthcare professionals - GOV.UK). This legislation applies across England, Scotland and Wales.

From 1 July 2022 nurses, occupational therapists, pharmacists and physiotherapists will all be able to legally certify fit notes.

The fit note provides evidence to a patients' employer about their absence and any relevant advice on how to support employees to remain in, or return to work.

The change will support and empower better conversations about work and health between employers and staff by making it easier to access this advice certified by the most relevant healthcare professional.

This has been noted at the Therapies and Health Science Workforce meeting and consideration needs to be given to its implementation across the organisation with the wider range of healthcare professions engaged in its operationalisation. Information to support the operationalisation is available in relation to training i.e. FIT Note training is available in Wales via ESR: Course: 000 The Fit Note and Learning@Wales. The description of the course on ESR states that the course 'has been developed by the joint Work and Health Unit (Department for Health and Social Care and Department for Work and Pensions) to support eligible health care professionals to certify a fit note. The course explains the importance of good work for good health and how the fit note can be used to support good quality work and health conversations. This course must be successfully completed (achieve a minimum of 80% in the final assessment) before an eligible health professional can certify and issue a fit note.'

Key points for consideration for AHPs and for the organisation is that the professionals are operating in an appropriate role within a relevant clinical setting, with the correct expertise and/or capability, ensuring continuity of care for the individual they're supporting, linking this to the utilisation of the <u>Allied Health</u> <u>Professions Fitness For Work Report</u> where appropriate, providing individualised and targeted support to remain or return to work and ensuring maintenance of competence in this area of work.

## 2.3. Profession Specific Considerations

## 2.3.1. Pathology Top-up Equivalence Bid

HEIW has an established funding allocation for supporting NHS staff within Healthcare Science to access education that enables staff to achieve registration/regulation via an alternative or equivalence route. A robust application process has been developed to ensure that allocation of funding is fair and equitable, with a clear audit trail. There are a number of criteria associated with the allocation. These are divided into two sections; those which must be achieved (Core), and those where these is measurable benefit where one or a number of these must be achieved;

No	Core Criteria
1.	Proposal must include how this supports progress towards an equivalence/
	alternative route to registration, including expected date of submission
2.	Funding will only be supplied non-recurrently
3.	The commissioner will not agree to any recurrent costs as part of the
	proposal. Any recurrent costs incurred pertaining to a non-recurrent funding award
	must be borne by the employing organisation
4.	State whether proposal is divisible – i.e. elements of the proposal can be awarded
	as well as full funding
5.	The proposal must be submitted on the HEIW template supplied and signed by the
	employee's line manager or Head of Department.
6.	Funding must be utilised in the financial year in which it was awarded
7.	Detailed cost schedules must be provided with the proposal
8.	Accommodation and travel costs will need to be borne by submitting organisation
9.	Funding will not support salary or posts

No	Benefits Criteria	
1.	Proposals need to demonstrate some or all of the following	
	Succession planning	
	<ul> <li>Demonstrates impact on service delivery/ Service need</li> </ul>	
	<ul> <li>National and local healthcare priorities</li> </ul>	
	Workforce transformation	
	Team skill mix	
	<ul> <li>Employment opportunities post training</li> </ul>	
2.	Priority will be given to proposals that demonstrate	
	<ul> <li>Track record of supporting work-based learning</li> </ul>	
	<ul> <li>Established training support structures</li> </ul>	
	Sufficient local mentors/trainers	

	<ul> <li>Clearly outlined training plan including timeframes for completion with progress points, and protected study time</li> </ul>	
3.	Benefits from the funding must be measurable. Where appropriate value must be	
	demonstrated across:	
	<ul> <li>Financial efficiencies</li> </ul>	
	<ul> <li>Business/service efficiencies</li> </ul>	
	<ul> <li>Student/staff/trainee experience</li> </ul>	
	<ul> <li>Retention, contribution to service</li> </ul>	

Swansea Bay Health Board is currently awaiting the outcome of 2 applications submitted to HEIW from the Laboratory Medicine Service.

The Laboratory Medicine service at SBUHB has a high turnover and is experiencing recruitment and retention difficulties impacting on the ability to maintain the core service and cover out of hours shifts. The department has recently lost a number of senior staff in the Biochemistry section through promotions and will in turn see Biomedical Scientist (BMS) staff taking these posts leaving more vacant posts at different grades. The service is unable to commission additional Healthcare Science placement students due to training capacity at present but is able to support experienced Associate Practitioners to become BMS staff via the equivalence route. The department is attempting to phase out the employment of locums required to cover out of hours shifts and has identified the grow-your-own route as essential in providing a sustainable workforce. Evidence suggests that such staff are more likely to stay within the health board having had many years' experience and are valued members of the team. The training programme is well developed within Laboratory Medicine and the department has Training Status approval from the Institute of Biomedical Science (IBMS) for pre and post-registration training.

The department continues to promote the development of eligible Health Care Support Workers to complete top-ups to enable staff to become registered BMSs.

## **3. GOVERNANCE AND RISK ISSUES**

Governance and risks have been highlighted in the individual sections identifying the current key issues for the AHP and HCS workforce.

As a significant proportion of programmes require students to undertake practice placements, the relationship between HEIW, HEIs and Placement Providers is critical to ensure the students' learning and developmental needs are provided and that staff have the capacity to provide the appropriate level of supervision.

## 4. FINANCIAL IMPLICATIONS

Service group finance partners are informed of financial risks highlighted in the report.

#### **5. RECOMMENDATION**

Members are asked to:

• **Receive** the information in the report.

- **Note** the evaluation of the Student Streamlining Process 2022.
- **Assure** the committee of the active engagement with its academic partner Swansea University in relation to the Occupational Therapy programme.
- Assurance that the Local Level Agreement is fit for purpose and **recommend** that the Deputy Director of T&HSc be the authorised signatory on behalf of the organisation for the AHP and HSc professions.
- **Assure** the committee of the active engagement in the consultation process in relation to the new Mental Capacity Act regulations supporting the implementation of Liberty Protection Safeguards (LPS).
- **Note** the considerations of the new legislation relating to the certification of fit notes for the AHP professions and wider actions required.
- Note the application process and the established funding allocation for supporting NHS staff within Healthcare Science to access education to support workforce development and sustainability by achieving registration/regulation via an alternative or equivalence route.

Governance and Assurance			
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and	
Objectives	Partnerships for Improving Health and Wellbeing	$\boxtimes$	
(please choose)	Co-Production and Health Literacy		
()	Digitally Enabled Health and Wellbeing		
	Deliver better care through excellent health and care services achieving the		
	outcomes that matter most to people		
	Best Value Outcomes and High Quality Care	$\boxtimes$	
	Partnerships for Care	$\boxtimes$	
	Excellent Staff	$\boxtimes$	

	Digitally Enabled Care	
	Outstanding Research, Innovation, Education and Learning	
Health and Ca	re Standards	
(please choose)	Staying Healthy	
	Safe Care	$\boxtimes$
	Effective Care	$\boxtimes$
	Dignified Care	
	Timely Care	$\boxtimes$
	Individual Care	$\boxtimes$
	Staff and Resources	$\boxtimes$
Quality, Safety and Patient Experience		
A sustainable AHP and HCS workforce is essential to provide effective, patient centred care with improved outcomes for patient, carer and workforce.		
Patient safety runs through education standards and requirements and is		

inseparable from an excellent learning environment and culture that values and supports learners and educators.

#### **Financial Implications**

Financial risks associated with the key themes described are not specified in the paper and are operationally managed via Service Groups.

#### Legal Implications (including equality and diversity assessment)

As set out in the paper.

#### **Staffing Implications**

As described in the paper.

## Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

This paper reflects *The Well-being of Future Generations (Wales) Act* (2015) and working relationships between organisations helping to meet the longer-term needs of NHS Wales and enhance the sustainability of the healthcare workforce.

Report History	Sixth report
Appendices	Appendix 1 – Local Level Agreement Final2022LLAJuly20 22docx (003).pdf Appendix 2 – All Wales Placement Plan
	2022-23 Placement Plan AHP-HCS v7 Fin