The challenging environment in which the NHS is operating places the spotlight on its 1.4 million workforce as well as its systems and processes. There is an urgent need for innovation to meet the changing health needs of the population, a changing age demographic and fewer commissioned places for registered professionals. Retaining skills and developing staff is critical if services are to move and change to enhance patient care. Developing flexibility in the workforce is essential if employers are able to respond to the needs of the community it serves.

This Briefing explains why employers need to assess the shape of their workforce and invest in the development of their support workers to ensure both flexibility and sustainability in workforce supply. It considers some of the current issues facing employers and highlights options available to help meet the workforce challenge.

Key points

- Role substitution and reviewing the skill mix of teams may deliver savings but may not necessarily be the best options for patients. Employers need to consider whether staff are doing work that adds value and whether development of roles will enhance the position for patients and staff.

- Many support workers provide the fundamentals of care to their patients or clients.

- The generic skills and competences that support workers possess make them a valuable and flexible asset to any organisation.

- A strategic and organisational approach to re-profiling the shape of the workforce and developing the roles of support workers is needed to ensure sustainability in workforce supply.

- Obtaining more specific skills will enable the individual support worker to work at a more advanced level within the multi-disciplinary team, releasing certain tasks and duties from registered professionals.
Background

The NHS has been aware for many years of the changing healthcare needs of the population. The UK has an increasing number of individuals with long-term conditions, an ageing population with complex and multiple needs and a rising percentage of the public with health conditions such as obesity.

The White Paper, Equity and excellence: liberating the NHS, sets out a major programme for change and places a different emphasis on the role of employers in the NHS. The changes it proposes require employers to rethink the configuration of their workforce, take an active role in workforce planning and commissioning education and training, whilst considering how their ways of working for patients will need to change in the near future.

Immigration policy increasingly looks to restrict the number of skilled and highly skilled migrants who can enter the UK to work and train. The NHS has had a traditional reliance on non-EU immigration in some professions or specialties. Employers need to consider alternatives to migration as part of an overall workforce plan to meet local demand.

There is a clear desire from the Government to encourage investment to enhance the skill base of the resident population to support local business and service needs, reduce unemployment and, as a result, enhance the health of the population. Building on the previous mechanisms for employers to ‘grow your own’, the current plans focus on apprenticeships and other work-based learning opportunities that provide individuals with skills, competence and work experience.

Changes to the formal education and training process for registered nurses and healthcare scientists will also have an impact on the role and scope of support workers. The nursing profession will see a phased implementation of the new standards for pre-registration nurse education between 2011 and 2013, and the Modernising Scientific Careers programme is being rolled out now. The programmes have a central focus on enhancing the skills of support workers.

Similarly, we should make sure that hospital doctors in training maximise their learning opportunities within reducing working hours and that we support moves towards a consultant-delivered NHS. There are some routine tasks which could in some instances be effectively undertaken by support workers with their...
different training backgrounds or skill sets. At a local level the solutions for this service provision will vary widely to help devise the most efficient and effective team working.

To fully realise the benefits of these education and workforce programmes, you should consider the scope of the registered or professionally qualified workforce. From this you can identify what the supporting infrastructure needs to look like and be skilled to enable the changes to happen.

Benefits of developing your support workforce

Financial and service planning is difficult in the current climate and employers are likely to be making some very tough decisions about the workforce, the health and care services currently provided, and how to meet the healthcare needs of the local population in the future. Identifying the skills you need from your workforce, to deliver the quality service that patients require, will be critical. Once identified, you need to be assured that staff in the necessary roles have the skills and competences they need to lead the changes you will be implementing.

An organisation-wide approach to the development of the support workforce has many benefits.

- You are more likely to have a workforce that reflects the local community you serve.
- Investing in staff and valuing their contribution to the organisation directly correlates to improved staff morale and improved outcomes for patients.
- A rich skill mix in multi-disciplinary teams will provide the flexibility to meet the changing needs of patients.
- Having a flexible workforce means your staff are more able to adapt to new technologies and meet the emerging needs of patients as care pathways are revised.
- Using flexible, in-service approaches to education and development helps to ensure you are more likely to manage through times of skills shortage in a particular professional group.
- A consistent approach that is applied across the organisation enables equity in expectation of standards and quality and forms the basis of a robust governance plan.
- It can aid retention and encourage career progression, both within the support worker structure and beyond into a professional career, demonstrating your commitment to the widening participation agenda and to retaining skilled and committed staff.
- It demonstrates your organisational commitment to the staff pledges in the NHS Constitution.
- It can aid local recruitment in an increasingly competitive environment.
- Using the career framework will enable transferability between employers through a common understanding of roles and educational frameworks.
Options and challenges

Most support workers are employed in Agenda for Change bands 2 and 3, with a growing number being employed in band 4. Issues such as local skills shortages, changes within a particular profession or increases in caseload have tended to produce pockets of innovation where investment and development programmes have been used. However, the critical factor for sustained success is the need to have a strategic and organisational approach to re-profiling the shape of the workforce and developing the roles of support workers. There are several options that can be deployed to meet the organisational objectives, including introducing and increasing the use of assistant practitioners, apprentices, healthcare or maternity support workers. Knowing the shape of your current workforce, coupled with your local workforce and service needs, will aid the decision-making process around where you need to make initial investment.

The assistant practitioner

The assistant practitioner role has been introduced as a role that can assist organisations with meeting the changing needs of patients and provide a career pathway for individuals in more junior support roles. It is not occupational group specific and in that respect provides employers with an opportunity to develop an individual to a high level of competence in some core areas. The generic nature of the role, with some bespoke areas of expertise and skill, equip individuals in this position to meet the needs of patients with multiple and complex needs more effectively.

For example, using competencies drawn from a variety of fields of practice, including allied health professions and nursing and social care, you could create an assistant practitioner role to help manage the needs of the frail and elderly. This could reduce the reliance on secondary care input and help contribute to the quality, innovation, productivity and prevention agenda.

There are a set of core standards produced by Skills for Health which employers can use as the basis for constructing an assistant practitioner role, but it is essential that you are clear about why the role is required, what the relationship will be in the team and what the intended outcomes are.

To date, most roles appear to have developed in hospital settings, but this is a role which using a standardised framework across care boundaries can add real value to patients and employers.

Calderdale and Huddersfield NHS Foundation Trust has implemented an assistant practitioner role that enabled role substitution and a delegation of responsibility in appropriate cases (see case study opposite).

The healthcare support worker

There may be cases when an assistant practitioner role is not the most appropriate way to invest in enhancing the skill level of the team. NHS Leeds Community Health identified that by developing their community support worker roles, they could enhance patient care and reduce costs. This approach met their current local need and also provides a platform for further development of roles if required (see case study on page 6).

This approach has been used widely in maternity services and examples of this can be viewed on our support workforce web pages.
Calderdale and Huddersfield NHS Foundation Trust has created a local framework to develop the role of the assistant practitioner in response to national drivers such as the impending skills gap facing employers.

The Calderdale Framework is a transformational tool which can be used to improve the way people work. It provides a clear and systematic method of reviewing skills mix, role and service design to ensure safe and effective patient-centred care.

The framework addresses issues such as cultural change, educational requirements (including work-based learning) and governance arrangements required for the new roles.

As a result, competency-based job descriptions are developed as well as accredited work-based learning in conjunction with the formation of a new level 4 qualification at the University of Bradford. Clear governance practices, including clinical supervision and a local register of competence, are also established.

The process consisted of the following seven stages:

1. Awareness raising
2. Service analysis
3. Task analysis
4. Competency generation/mapping to national occupation standards
5. Supporting systems
6. Training
7. Sustaining

As a result, the trust was able to develop new assistant practitioner roles to substitute for registered practitioners in appropriate cases. The clinical therapy and rehabilitation directorate is now applying the Calderdale Framework across all adult rehabilitation services with a view to identifying the potential for more assistant practitioners.

The process led to the development of three cohorts of clinical competencies to support standard training for:

- skill sharing across registered practitioners
- using an assistant practitioner in place of a registered professional
- delegation to a rehabilitation assistant.

The trust will be able to utilise this new role to cover at least 50 per cent of the visits in the orthopaedic early discharge team.

To see the full case study, please see: www.nhsemployers.org/supportworkforce
Apprenticeships
There are over 80 apprenticeships and frameworks that cover over 100 different job roles within the health sector. You can use apprentices to grow your own solutions to workforce shortages or recruitment and retention difficulties. They also carve out a pathway for the individual to progress from one level to the next, having previous experience, skills and competences recognised. Depending on your local circumstances, you may wish to target specific audiences such as school leavers or your current workforce to start a programme. Apprenticeships are currently undertaken at level 2 of the education framework, with an advanced apprenticeship being available at level 3. Upon completion of the advanced apprenticeship, an individual could be eligible to enter a bridging programme before commencing on a formal pre-registration education programme, for example to become a registered nurse. Another option after completing the advanced apprenticeship would be to continue on the same pathway and undertake a higher apprenticeship at level 4.

NHS Leeds Community Healthcare – developing the community support worker
The shift from acute to community care provision is increasing demand on community services. There is a need to ensure staff are able to manage this change and that the organisation is able to maximise the use of skilled staff to enhance patient care. It was recognised that there were inconsistencies in support worker roles across the trust, both in terms of role expectations and preparation for roles. While NVQs were offered, these did not encompass all of the clinical competencies staff needed.

The project aimed to develop a comprehensive support and development programme for clinical support workers within the trust. The programme developed:
• a portfolio containing competency frameworks covering all aspects of their role
• an associated training programme to ensure consistency in preparation
• the opportunity to undertake the development programme in association with Leeds Metropolitan University and achieve a certificate-level qualification.

The outcomes were a robust framework which readily lent itself to developing roles further, and the opportunity for staff to achieve a recognised clinical qualification. Ultimately, this resulted in improved patient care as staff knowledge and confidence increased.

This initiative was initially rolled out across the district nursing service, and later to intermediate care teams with the expectation that ultimately all staff within the trust will use the competency frameworks relevant for their roles. This will provide a quality assured approach to patient care with the same high standard delivered in the same way across the organisation.
The final evaluation has produced the following results:

- consistent expectations and development for staff, leading to increased job satisfaction and quality patient care
- staff reported they felt both motivated and appreciated
- the programme was seen as a welcome development opportunity by staff
- support workers reporting increased confidence in their skills and abilities
- some staff reported that they found doing the academic work daunting but had been surprised with their achievements
- some of the support workers had been motivated to undertake further formal study, including pre-registration nursing courses
- as many of the support staff had not undertaken formal study for many years, some reported they would have liked more support both from trainers and in practice
- evidence of competence means improved professional accountability and minimises risk for clinicians and the organisation by eliminating discrepancy and increasing consistency.

It is anticipated that cost savings can be made by using the framework to develop roles. In the first year, support workers delivering diabetes care in place of registered nurses is estimated to save between £5,294 and £12,800. This increases to between £8,500 and £16,000 in subsequent years as the cost of the initial support worker training is removed. The savings are dependent on the number of patients requiring intervention for their diabetes and if they are suitable for delegation to the support worker.

To see the full case study, please see: www.nhsemployers.org/supportworkforce

where some apprentices undertake a foundation degree. This is not an area currently explored within the health sector but needs consideration by employers.

For employers who have not yet used apprentices in clinical roles, this is an ideal opportunity to recruit highly motivated individuals into positions which have a strong commitment to learning whilst working and which currently attract some central funding.

Apprenticeship funding is available from the National Apprenticeship Service. The size of the contribution will vary, depending on a range of factors. For more information, see: www.apprenticeships.org.uk

**Challenges**

Whether you look to increase the number of assistant practitioners, apprentices or maternity support workers to meet your workforce and service delivery plans, there are some actions which will be critical to the success of your plan. Ensuring the project has clear objectives and that the benefits are articulated to all team members as well as the senior team is important.
Changes to tasks and duties can cause a feeling of unease, particularly if staff feel their role could be eroded. Changing roles and functions in one area has a direct impact on others within the multi-disciplinary team. Sometimes it may be changes to supervision and delegation arrangements and sometimes it may mean changes to the way whole services are delivered across the organisation. Understanding the inter-dependencies and ensuring they are addressed will be critical to the successful delivery of your aims.

It is important to remember that training and development does not deliver change immediately. The duration of any additional training, coupled with the time to embed the new role, means that employers need to move quickly to ensure the benefits outlined in the nursing and healthcare science workforce plans can be realised.

Choosing the education component

The complexity of the different types of qualifications and learning available to individuals can make selecting the right option a challenge. The education and qualifications landscape is also changing and from January 2011 all vocational qualifications will be regulated within the Qualifications and Credit Framework (QCF). Specific detail on these changes can be found by contacting Skills for Health for health and social care related courses and qualifications.

It is important that employers work with further and higher education institutions to develop the most appropriate packages for local delivery. There are different types of qualification, some of which are more vocational and others more academic. Your needs and the needs of the individual starting the course will determine whether it will be more beneficial to use an apprenticeship model, an NVQ (or their replacements launched in January 2011) or a foundation degree. Working with your union learn representatives and education partners will help inform the decision-making process.

When discussing your requirements it is important to ensure that the educational component is accredited, recognised and holds currency both for the individual and the employer. Ensuring there can be accreditation of prior learning for both parties delivers best value in both the short and longer term.

Resources to support you

Several tools and support packages are available to assist employers with profiling, planning and development of the workforce to meet service needs.

- To understand what your current workforce looks like, the NHS Information Centre has developed iView, an on-line tool populated with data drawn from your electronic staff record profile. You can also search and benchmark your workforce profile against other NHS organisations.

- Career frameworks have been published by Skills for Health. The career framework tool is a database of job descriptions across nine levels. Each one includes individual competences, work activities, quality standards and the knowledge and skills needed to carry out those activities.
The support workforce: developing your patient-facing staff for the future

To assist with the planning and implementation of an organisation-wide approach to developing your support workforce, this checklist includes key tasks and questions for local action.

- Ensure you have a full and accurate picture of the shape and skill base within your workforce.
  Using iView, the tool developed by the NHS Information Centre, will allow you to view your full organisational shape and structure. Assessing this alongside the age and skill profile of your workforce will provide a baseline dataset from which to begin service, financial and workforce planning discussions at a board level.

- Be clear about the types of services you are going to be providing, whether the location for delivery of care will change and the needs of your local population.
  Investing in staff is expensive both in terms of funding for courses and the support and supervision time required from within the organisation. You need to be clear that the investment is linked to your strategic business objectives and is incorporated into your overall business plan.

- Be clear about the type of support worker you need: generic, profession specific, or a mixture of both.
  Having a clear plan of what you are trying to achieve by investing in your support workers will enable a productive discussion with your staff and your education partner/s. Your business needs will drive the type of workforce you are trying to train and the type of educational programme that needs to be commissioned. One size does not fit all and you may need to use different approaches and different educational packages in different parts of the business.

- Ensure your current workforce contributes to the development of the workforce plan.
  Communicating with staff and ensuring they have ownership of the change process is critical to its success. Introducing new roles to relieve the pressure on registered staff will

Employers’ checklist

In partnership with a range of employers, professional organisations and trade unions, Skills for Health has developed a competence framework that illustrates the core competences all healthcare support workers should attain and specific competences required for roles across three care pathways:
- healthcare support worker (acute care)
- maternity support worker
- rehabilitation support worker.

The frameworks build on the core standards for assistant practitioners that were published last year and are intended to act as a baseline for national standards.

Continues over page
Employers’ checklist (continued)

only be successful if the whole team is clear about the direction of the programme and is supportive of its implementation.

✔ Make sure you have a strong and flexible relationship with your local education provider/s. Investing in the development of the workforce requires in most cases the support of a provider of education. You will have relationships with further and higher education providers in your local region. It is critical that the courses you are commissioning reflect what you need as the employer. Conversations should occur early on in the process to maximise educational input into a programme that should be tailored to your needs, but fit into a recognised national framework.

✔ Ensure staff with line management responsibilities are engaged with the process and can incorporate appropriate discussions within individual personal development plans. Having a clear and consistent message that is being used across the organisation by line managers will support equity across teams and departments. Line managers will need to use the current Knowledge and Skills Framework (KSF). This is currently being reviewed in light of the recommendations within the report from the Institute for Employment Studies but must be used in its current format until a revised version is published. Personal development plans can be used to inform the organisation’s development plan and identify individuals who show a desire to progress in their career.

✔ Develop a governance plan that ensures the management of risk for the organisation and the individual and places the patient and patient safety at the heart of the plan. Ensuring staff are competent to undertake the tasks they are being asked to do and that all team members, not only supervising staff, are clear on the boundaries in place is essential. Robust appraisal and personal development plans will support the governance structure but the responsibility for ensuring patients are protected needs to be embedded in the recruitment, selection and supervision practices of all staff.

✔ National funding is currently available to support employers with the enhancing skills and apprenticeship agenda. It is essential that you have a designated channel for ensuring your organisation receives the most up-to-date information from your SHA or from Skills for Health. Ensuring you receive the most up-to-date information on education, qualifications and funding will place you in a more competitive position when seeking to attract local talent to your organisation. Sign up for the Skills for Health bulletin to ensure you receive the most up-to-date information.
Keeping in touch

NHS Employers will be keeping you up to date with support workforce issues via our website and through regular items in our NHS Workforce bulletin. To subscribe to this free weekly bulletin, visit: www.nhsemployers.org/workforcebulletin

We will be seeking to share further learning and your experiences could help other organisations facing similar challenges. If you would be willing to share them, please email: recruitmentandretention@nhsemployers.org

Further information

**NHS Employers:**
Support workforce web pages: www.nhsemployers.org/supportworkforce

Briefing issue 73. Preparing for change: implementing the new pre-registration nursing standards: www.nhsemployers.org/nursing

Modernising scientific careers web pages: www.nhsemployers.org/healthcarescience

Staff engagement: tools and resources to help you engage your staff: www.nhsemployers.org/staffengagement

**Skills for Health:**
To access the career and competence frameworks, the core standards for assistant practitioners and updates to the qualifications framework, go to: www.skillsforhealth.org.uk

**Skills for Care:**
Information about developing a skilled workforce, qualifications and training in social care: www.skillsforcare.org.uk

**NHS Information Centre:**
To access iView, workforce statistics and other resources, go to: www.ic.nhs.uk

Most trade unions or professional bodies have information on the support workforce. Of particular interest are:

**UNISON:**
Healthcare assistants section: www.unison.org.uk/healthcare/nursing/hcas.asp

**Royal College of Nursing:**
Healthcare assistant toolkit: www.rcn.org.uk/development/hca_toolkit

**Royal College of Midwives:**
Maternity support worker learning and development guide: www.rcm.org.uk/college/msws/msw-learning-and-development-guide/
NHS Employers

NHS Employers represents trusts in England on workforce issues and helps employers to ensure the NHS is a place where people want to work. The NHS workforce is at the heart of quality patient care and we believe that employers must drive the workforce agenda. We work with employers to reflect their views and act on their behalf in four priority areas:

- pay and negotiations
- recruitment and planning the workforce
- healthy and productive workplaces
- employment policy and practice.

NHS Employers is part of the NHS Confederation.

Contact us

For more information on how to become involved in our work, email getinvolved@nhsemployers.org

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