

Workforce Planning Review

Department of Health, Social Services and Public Safety
An Roinn Sláinte, Serbhísí Sóisialta agus Sábháilteachta Poiblí

Introduction

"Review 2" should be read as a supplement to the summary document "Review" issued in March 2003.

The initial Comprehensive Review of the Occupational Therapy Workforce of September 2001 was considered as a base line review profiling the workforce at a point in time and predicting future workforce requirements over the 5-year period 2002-2006. "Review 2" updates the original report, comparing statistical information at 31 March 2003.

Methodology

The original Steering Group was reconvened in June 2003 to compare the workforce profile statistics, test the original assumptions against the updated information, consider the demand and supply information gathered, and share information regarding the actions resulting from the Review recommendations. The Steering Group comprised professional, service manager, human resource, staff side, university and Department representatives.

Statistical information was sourced from Human Resource Management System, at 31 March 2003, and an HPSS vacancy survey, on 30 September 2002. The following comparisons were drawn.

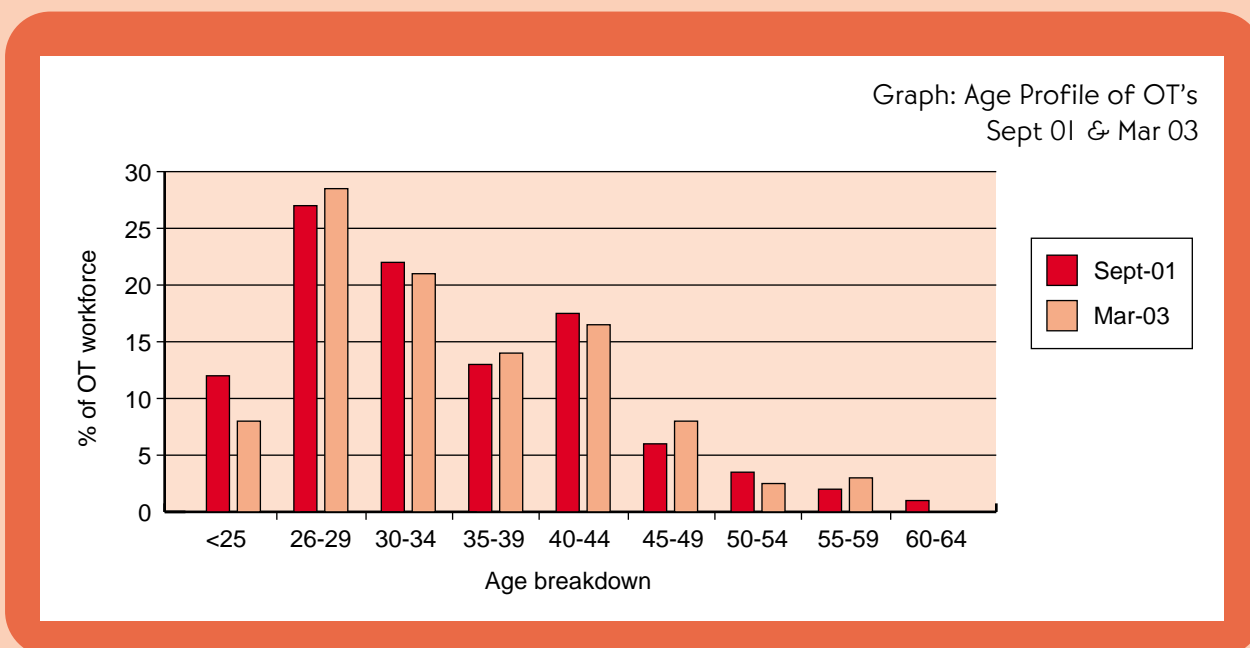
Key Findings of The Review

- **Numbers in the Workforce**

Occupational Therapists	2001 (Sept)	2003 (March)
Total	525	570

An increase of 45 Occupational Therapists was noted.

- **Comparison Graph of the Age Profile of Occupational Therapists (2001 & 2003)**



The profile indicates the majority of staff are still within the under 40 age group, where life-work balance requests are at their highest.

- **Numbers in the Workforce**

Vacancy Rates of the workforce comparing 2001 and 2002 statistics in headcount

Occupational Therapy	Headcount	%
2001	53	9
2002	52	9.1

Overall vacancy rates have remained rather constant.

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- **Long-term Vacancy Rate (30 September, 2002)**

Definition: a long-term rate is a vacancy of 3 months or more where the post has been advertised at least once.

Occupational Therapy	WTE	Headcount	%
TOTAL	17.31	20	3.5

Supply and Demand Issues Revisited

Supply Issues

Consideration was given to any factors that may affect change in the supply of Occupational Therapists into the workforce.

- Following recommendations of the original review the numbers of Department-commissioned undergraduate places were increased in the 2002/2003 intake by 14. The University simultaneously increased its undergraduate numbers for the same intake. These actions will increase graduation numbers at the completion of the degree course in 2005/6. These additional graduate numbers should be factored into the 5-year workforce plan statistics.
- The first destination statistics for graduates in the HPSS have not significantly improved in the 5 years of statistics captured. Employment to the HPSS as a percentage of the numbers graduating has risen and exploring recruitment strategies should consolidate this trend. This increase will be factored into the supply statistics.
- Leaver statistics appear to have reached the forecasted level.

- The estimated numbers entering the workforce from outside NI, both as new graduates and as mature entrants, were true to the original statistics.
- Managers identified an increasing recruitment problem with temporary posts.
- Regionally managers were experiencing difficulties filling specialised posts, especially for new services at the specialised grade.
- Managers expressed concern that, although the vacancy rate appeared constant across the OT service, the rate for specific services varied, eg the vacancy percentage could be higher in Mental Health Services.
- Managers continued to consider the skill mix within their services when vacancies have arisen and note that some funding has been redirected from professional time to support services such as administration and clerical.

Demand Issues

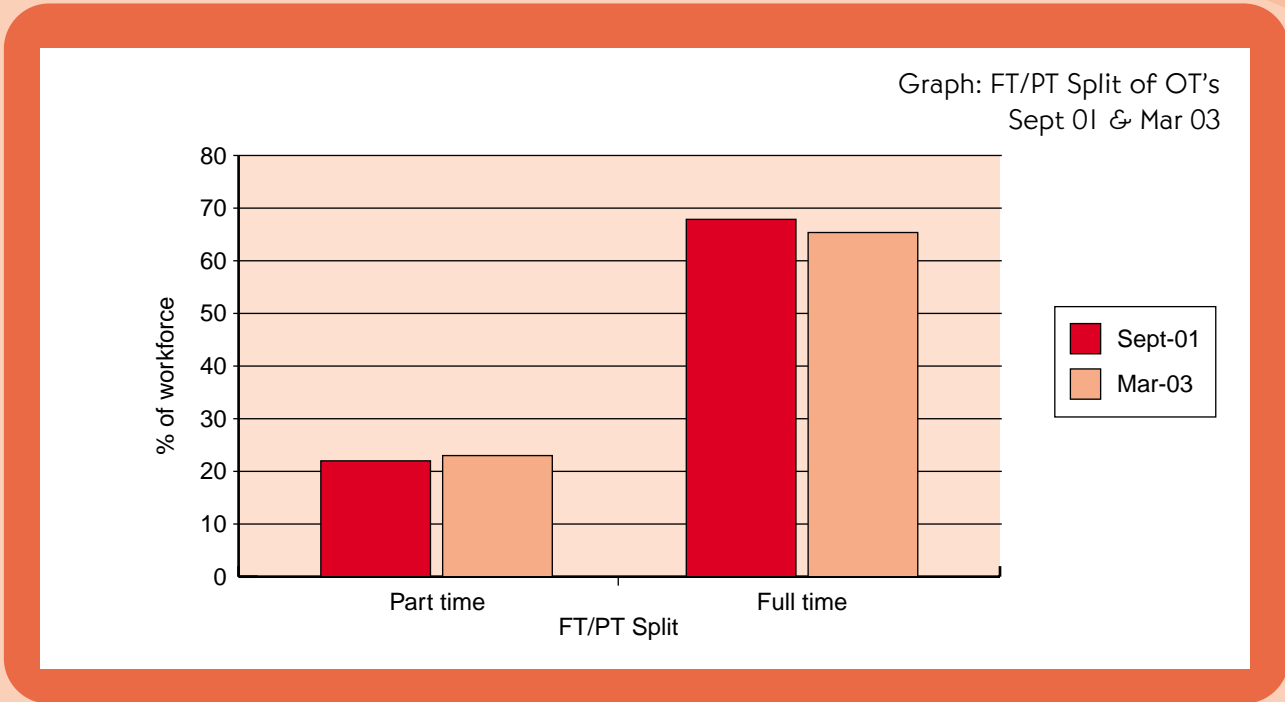
The group considered the three Demand Levels identified in the original report. The following was identified:

- Generally the demand issues remained as identified within the original report.
- The rate of appointment of posts and the development of services was much slower than first considered in the 5-year plan.
- There appeared to be a decrease in the number of 4th year undergraduate placements outside NI.
- OT undergraduate placements have altered to accommodate an increase in the length of the students' clinical experience from 20% to 40%. This increases the time the student spends in the service during training, with the view of improving the clinical experience. However, this exerts additional pressures on the existing clinical Services to accommodate this.
- There was an increase in the demand for more flexible delivery of services, eg out of hours, evening and Saturday clinics and services.
- Work-life balance requests continue, although at a slightly lower rate than first suggested. This may indicate the difficulties some services have in being able to accommodate requests while maintaining service provision. There was a variation between Trusts in the application of life-work balance guidelines.
- The CPD workforce requirements remained firmly in focus in line with the anticipated stipulation of the minimum mandatory CPD requirement for re-registration of professionals by the regulatory body the Health Professions Council.
- Managers suggested that all new allocated resources should be formally tracked to the posts.

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- **Full-time/Part-time Split of Workforce Comparing September 2001 with March 2003**



The graph shows a slight increase in the percentage of part-time occupational therapists and a corresponding decrease in the full-time workforce. This trend is presumably in response to life-work balance requests for increased flexible working conditions.

- **Assistant Posts**

In September 2001 there were 126 Occupational Therapy Assistant grade posts in the HPSS: this number increased by 10 to 136 in 2003.

- **First Destination Statistics – % of NI Graduates into the HPSS**

Graduates	1998	1999	2000	2001	2002
HPSS	59%	57%	45%	65%	64%

As the table indicates, graduate Occupational Therapist numbers recruited into the HPSS from the University of Ulster remained below the level of 65% over the time period captured (1998-2002). Improvement could be made to reduce the loss of the valuable resource of graduates to outside the HPSS.

Actions on the Recommendations

Action	To Be Initiated	In Progress	Complete
Development of a Regional AHP Information Project to improve the value of regional statistical information collection		✓	
AHP Regional Informatics Pilot to test the informatics core curriculum within an AHP team			✓
Information Communication Technology One-day Conference for AHPs to maximise the use of technology in healthcare delivery			✓
Establishment of AHP homepage/extranet to improve communication and the profile of AHPs in the HPSS			✓
Publish the workforce planning Review document to disseminate workforce information to a wider audience			✓
Convene a regional workshop to progress the development of the AHP Consultant Post			✓
Regional Recruitment Initiative for Entry Level Posts to improve upon the number of graduates entering the HPSS		✓	
Undergraduate Clinical Placement Survey to profile the clinical placements regionally			✓
Clinical Placement Partnership Agreement to formalise the placement system between the education providers, Trusts and the Department		✓	
Establish a commissioning monitoring system and develop the Service Level Agreement between the UU and the Department		✓	
Increase by 14 the number of undergraduate commissioned places to improve the number of graduates available to the HPSS			✓
Develop a regional workforce planning statistical monitoring model to capture the workforce attached to clinical services*		✓	

- * The Steering Group agreed to review statistical information collected at Trust level to detail the workforce numbers matched to service provision. This will provide a more meaningful planning tool to allow managers to progress issues of business planning, business case writing and workforce planning. The Department will establish a subgroup to lead on these issues.

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Conclusion

The reconvened Steering Group for the Occupational Therapy Workforce Planning Project recognised that the initial approach to workforce planning established a profile of the existing and future workforce requirements of health care delivery.

The Project Group demonstrated that the original assumptions and predictions were fairly accurate. However, it recognised the difficulties in identifying accurate timescales for the initiation and expansion of services, and the appointment of additional staff. When viewing the 5-year plan as a whole it was, therefore, recognised that establishing new posts took longer than originally assumed. If the original planning had scaled 10 years, and not 5, the plan would have looked somewhat similar.

The Group felt the original methodology used was appropriate. However, benefits could be achieved by further exploring the workforce in terms of aligning the Occupational Therapy workforce with identified services and it is anticipated a subgroup of the main Steering Group will progress this work.

The Group agreed to remain available for any further regional workforce planning requirements.

**The Project Update Group
(2001 & 2003)**

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