

# Workforce Planning Review

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

## Introduction

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

The initial Comprehensive Review of the Orthoptic Workforce, February 2003 was considered as a baseline 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 June 2002 and 31 March 2004.

## Methodology

The original Steering Group was reconvened in May 2004 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 2004 and HPSS vacancy surveys on 30 September 2003 and June 2004. The following comparisons were drawn.

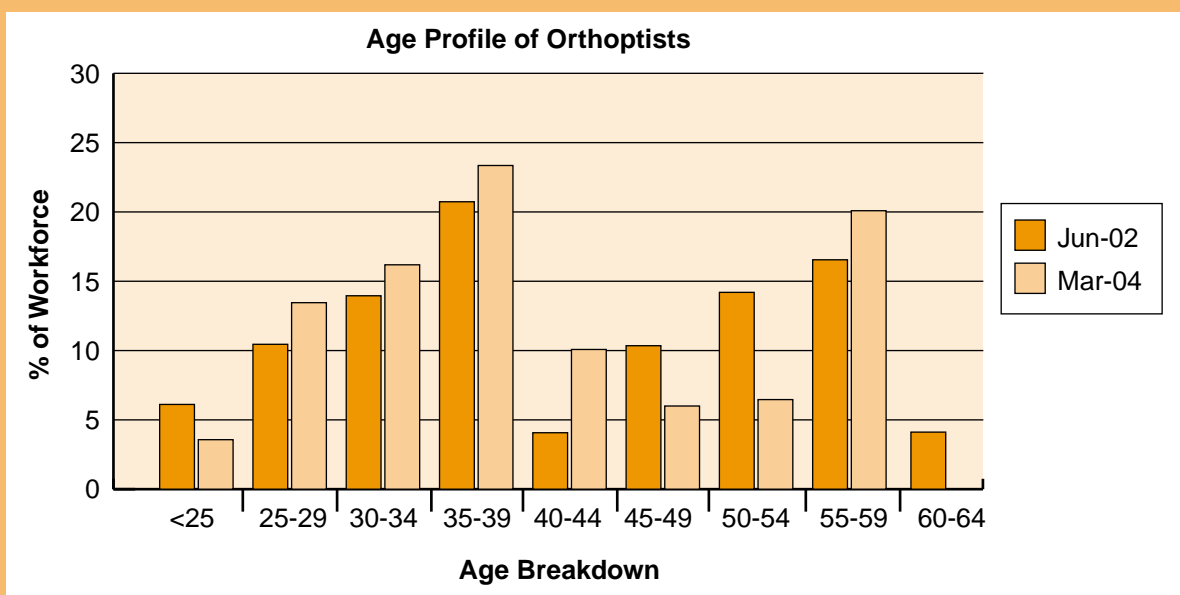
## Key Findings of The Review

- **Numbers in the Workforce by Headcount**

Orthoptic	2002 (June)	2004 (March)
Total	29	30

An increase of one Orthoptist was noted.

- **Comparison Graph of the Age Profile of Orthoptists (2002 & 2004)**



- **Vacancy Rate**

The DHSSPSNI collects HPSS staff vacancy statistics on a biannual basis.

**Vacancy Rates of the Workforce comparing 2002, 2003 and 2004**

Orthoptic	Headcount	WTE	% HC
June 2002	1	1	3.4
September 2003	2	2	6.6
June 2004	2	2	6.6

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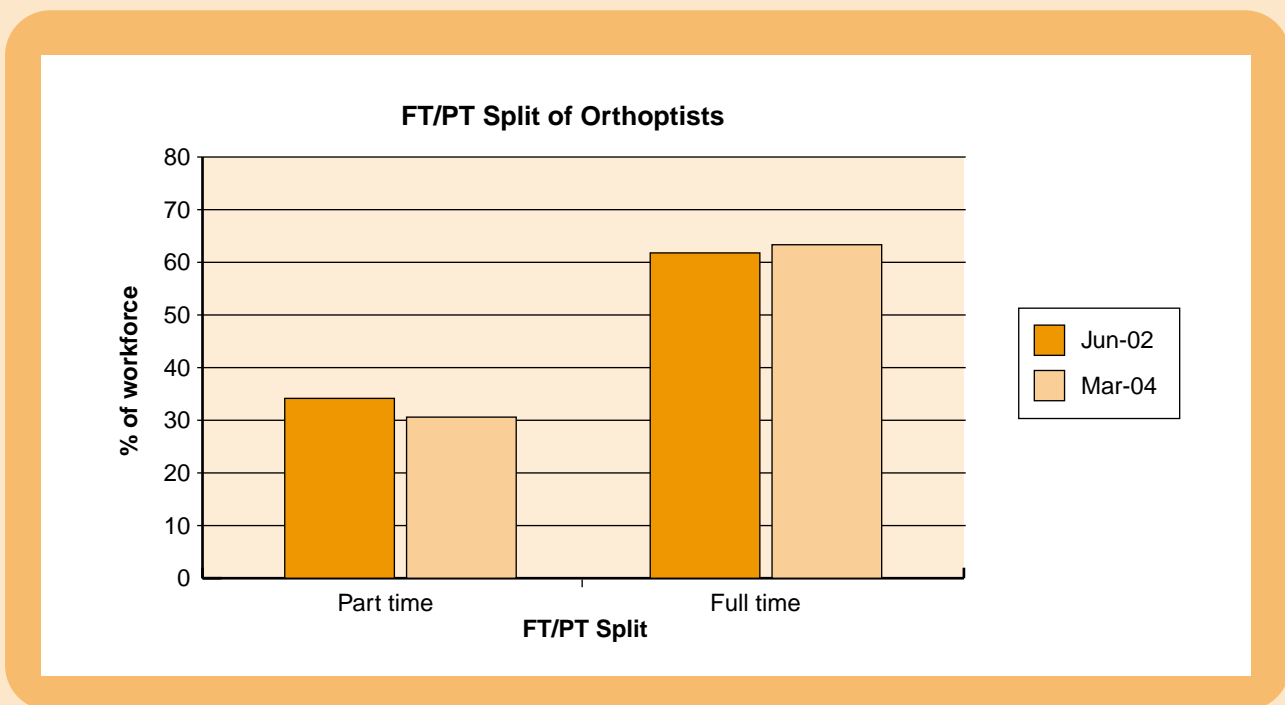
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### Long-term Vacancy Rate

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

Orthoptic	Headcount	WTE	% HC
September 2003	2	2	6.8
June 2004	1	1	3.3

- Full-time/Part-time Percentage Split of Workforce Comparing June 2002 with March 2004



## Supply and Demand Issues Revisited

### Supply Issues

Consideration was given to factors from the original report that may affect the supply of Orthoptists into the workforce.

The Steering Group raised concerns over the difficulties experienced on a regional basis of a supply of Orthoptists to fill vacant posts. Difficulties with professionals leaving the service, mainly through retirement, had been highlighted in the earlier review and compounding these issues is the fact that two senior managers had to move into commissioning roles regionally.

Issues surrounding the supply have already been identified due to training programmes taking place outside Northern Ireland and the ability then to attract students both into the profession and, once graduated, back into the HPSS given there is also a national shortage. Competition is also recognised from employers south of the border who are attracting applicants from the same UK pool. Progress has been made to establish once again undergraduate clinical placements in Northern Ireland with the view of developing relationships with the students and Trusts to attract applications to posts after graduation and registration.

Particular difficulties of supply and demand exist and are magnified in a small workforce such as Orthoptics and new and flexible ways of delivering services in these circumstances need to be explored.

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### 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.
- The report Health for all Children (4th Edition, 2003) by David M B Hall indicates the need for primary screening of school children ideally by Orthoptists or secondly by an orthoptic-led service. Work is currently underway regionally to identify the workforce requirements for these services.



“I really enjoy my job as every day brings a different challenge – from treating poor eyesight in children to diagnosing and treating adults with double vision.”

## Actions on the Recommendations

Action	To Be Initiated	In Progress	Complete
Develop Regional Orthoptic Strategy		✓	
Establish a Succession Plan for the 5 potential retirements regionally		✓	
Establish induction programmes for new employees			✓
Develop a recruitment strategy specific to Orthoptics' needs	✓		
Explore new role development in the form of an Orthoptic Assistant	✓		
Review Orthoptic services in Northern Ireland with the aim of exploring new dynamic ways of delivering a regional Orthoptic agenda	✓		
Re-establish undergraduate clinical placements for Orthoptic students in Northern Ireland		✓	
Develop 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			✓
Establish AHP homepage/extranet and internet to improve communication and the profile of AHPs in the HPSS			✓
Publish the workforce planning Review documents to disseminate workforce information to a wider audience			✓
Convene a regional workshop to progress the development of the AHP Consultant Post			✓
Clinical Placement Partnership Agreement to formalise the placement system between the education providers, Trusts and the Department			✓

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### Conclusion

The reconvened Steering Group for the Orthoptic Workforce Planning Project recognised that the initial approach to workforce planning established a profile of the current and future workforce requirements of health and social 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, it was recognised that the plan would have looked somewhat similar, establishing new or expanded service at a slower delivery pace. The Group also felt the methodology used was appropriate.

The Group agreed that it would remain available for any further regional workforce planning requirements.

**The Project Update  
Steering Group**

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