Training and system development: Essex County Council

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Context

Essex County Council's adult social care occupational therapy service identified gaps in occupational therapy education and workforce development related to housing and adaptations.

Newly qualified OTs and experienced OTs entering social care from different areas of practice were expected to ‘hit the ground running’ with adaptations work, but lacked fundamental skills in areas such as home adaptability, applying clinical reasoning to environmental barriers, designing accessible spaces, and understanding building regulations.

Additionally, experienced social care OTs were deprioritising adaptations work for higher risk situations relating to safeguarding and moving/handling cases, creating a knowledge and skills deficit across the workforce.

The challenge

Multiple interconnected problems existed:

Education gaps

- OT undergraduate curricula didn't include skills such as drawing scale plans or reading architectural drawings.
- Pre-registration learners graduated with a limited understanding of the person-environment-occupation relationship within housing contexts.
- Newly qualified OTs weren’t familiar with the building regulations or best practice guidance regarding the accessibility of homes for people with different needs.
- New staff had a limited understanding of housing design for sensory needs, neurodivergence and learning disabilities.

Workforce issues

- Newly qualified OTs in social care had few experienced staff to mentor them in adaptations.
- Home adaptations were seen as a lower priority than safeguarding and moving/handling cases.
- Senior practitioners had less experience with major home adaptations work in their skillset.
- No structured pathway for OTs to develop housing expertise during their first year in social care.

System challenges:

- Housing staff, developers, architects, and builders had limited understanding of what OTs could contribute.
- Grants officers didn't understand when OT input was essential versus unnecessary.
- Inconsistent practice across the county in adaptation approaches and standards.

The role

The housing OT contributed to multi-level training and system development initiatives:

- University guest lectures – Delivering annual lectures at multiple higher education providers in the region.
- Interactive teaching methods – Using case-based learning where OT learners design bathroom adaptations in small groups using real situations.
- Practical skills development – Teaching OT learners to draw proportional bathroom layouts using digital tools.
- Legislative framework education – Explaining how DFG legislation, Care Act, building regulations, and housing policy intersect.
- Person-centred design emphasis – Starting sessions by asking ‘what's most important to you about your home?’ to emphasise design and dignity alongside clinical function.
- Virtual room development – Planning to work with one university to develop virtual environments where OT learners can digitally move bathroom fixtures.
- Public engagement – Participating in Chelmsford Skills Fest for year 8 students (1,500 attendees), creating hands-on bathroom design challenges with wheelchairs and cardboard fixtures.
- Resource development – Updating Essex-specific practice guidance, schemes, assessment templates, and checklists.
- Promotion of specialist housing training – Encouraging OTs to access specialised courses on wheelchair accessibility, reading plans and drawings, bathrooms, and kitchens.
- Preceptorship programme contribution – Advocating for mandatory housing adaptations experience in first-year social care OT roles.
- Peer education – Supporting newly qualified OTs through joint visits, case discussions, and teaching basic skills like creating proportional recommendation layouts.
- System protocols – Developing stairlift assessment checklist, accessibility level assessment frameworks, and decision-making tools.
- Cross-sector education – Training housing staff, grants officers, building developers, and planners on OT value and contribution.

Benefits to the system

Education benefits

- Students graduating with practical housing and adaptation skills ready for social care roles
- Increased interest in social care career pathways through engaging, hands-on learning
- Future OT workforce better prepared to address housing as a health determinant
- Year 8 students exposed to OT career possibilities and problem-solving approaches
- Universities developing more relevant, practice-focused curricula.

Workforce benefits

- Structured approach to developing housing competence in first-year practitioners
- Reduced risk of unsafe practice through better training and supervision frameworks
- More OTs confident to include housing considerations in all practice areas
- Recognition that home adaptations work is equally a priority and requires skill and expertise
- Career pathway opportunity for OTs wanting to develop housing specialism.

System benefits

- Housing colleagues, developers and planners have a better understanding of when and how to involve OTs
- Consistent practice standards across the county through shared resources and training
- Reduction in inappropriate referrals and more effective use of OT expertise
- Better collaboration between housing and OT services
- Sustainable workforce pipeline for future housing OT roles.

Benefits to individuals and families

- People receive better-designed adaptations from more skilled practitioners
- Homes that are both functional and aesthetically pleasing
- Reduced wait times when workforce capacity increases through better training
- Prevention of poor adaptation outcomes that would need correction
- Future generations benefit from better-trained OT workforce.

Developing the role: A practical guide

Setting up the role

- Identify local universities with OT programmes and offer guest lectures.
- Enable experienced OTs to offer guest lectures as part of their own CPD, bringing real-world practice into the curriculum.
- Start with a single session and build relationships before expanding involvement.
- Develop relationships with workforce development leads in social care to identify training needs.
- Create a portfolio of teaching resources: case studies, before/after photos, assessment templates.
- Identify opportunities for public engagement, such as careers fairs, skills festivals, school visits.
- Secure protected time in job plan for training delivery and resource development.

Building the teaching programme

- Design interactive sessions rather than lecture-based learning.
- Use real, anonymised cases with photos, layout plans and actual outcomes in a variety of homes, to demonstrate how to meet the needs of a variety of people.
- Incorporate group work where learners problem-solve together.
- Include legislative/policy context but balance with practical application.
- Challenge learners to consider both function and aesthetics/personalisation
- Provide clear frameworks, such as graded approaches to access solutions.
- Demonstrate the clinical reasoning process explicitly.
- Give learners tools they can use immediately, such as checklists, decision trees, proportional drawing techniques, useful websites and supplier catalogues.

Creating workforce development resources

- Develop county-wide/organisation-specific practice guidance that reflects local schemes and policies.
- Create visual guides using photographs and diagrams, not just text.
- Build decision-making flowcharts for common scenarios.
- Compile lists of key resources, such as training courses, building regulations documents, design guides.
- Establish communities of practice where OTs can discuss complex cases.
- Design professional development frameworks showing progression from basic to advanced housing skills.
- Create induction materials for new OTs that include housing essentials.

Key messages to embed in training

- Housing is everyone's business – all OTs work with people who live somewhere.
- The environment is one-third of the PEO model – it's central to OT practice, not peripheral.
- Accessible housing should look and feel like a home, not a hospital.
- Inclusive design benefits everyone, not just disabled people.
- Understanding building regulations and construction is a core OT skill in housing work.
- Adaptations are complex clinical reasoning, not ‘simple’ or ‘low priority’ work.

- Housing is a social determinant of health – OTs are uniquely positioned to address this.
- Getting housing right prevents crises, reduces health inequalities and enables occupational participation.

Overcoming challenges

- **Challenge:** Finding time for training delivery alongside clinical caseload demands.
- **Solution:** Build training into job description with protected time allocation. Position this as strategic workforce development or CPD. Calculate long-term efficiency gains from a better-trained workforce reducing demand on specialist housing OTs.

- **Challenge:** Students and newly qualified OTs overwhelmed by the complexity of building regulations, legislation, and technical requirements.
- **Solution:** Start with core principles (person-environment-occupation, inclusive design) before diving into technical detail. Use analogies and real examples. Provide simple reference sheets. Emphasise that they don't need to know everything immediately – focus on understanding when to seek specialist input.

- **Challenge:** Universities resistant to changing established curricula or adding content.
- **Solution:** Offer to deliver as guest lecturer rather than requiring curriculum change. Provide evidence that students value this content (feedback forms). Link to professional standards and workforce needs. Start small and demonstrate impact before seeking more curriculum space.

- **Challenge:** Lack of practical teaching resources (props, virtual tools) to make learning engaging.
- **Solution:** Create simple, low-cost materials (cardboard bathroom fixtures worked brilliantly at Skills Fest). Use free digital tools like PowerPoint for proportional drawing. Partner with universities to use their teaching simulation spaces or develop virtual learning environments. Share real photos and plans to demonstrate the reality of solutions within space constraints.

- **Challenge:** Senior OTs and managers don't value housing/adaptations work, or prioritise specialist training.
- **Solution:** Reframe adaptations as complex clinical reasoning requiring high-level skills. Present evidence of impact (hospital discharge, admission avoidance, DFG savings). Include housing competency in performance reviews and progression criteria. Use preceptorship requirements to embed this work in first-year practice.

- **Challenge:** Inconsistent practice across different teams and areas making standardised training difficult.
- **Solution:** Create regular informal case options meetings for staff to drop in and discuss potential adaptations and solutions with a team of senior OTs and managers. Where relevant, use the upcoming transition to unitary authorities as an opportunity to harmonise. Develop core principles applicable across settings. Create ‘local variations’ appendices to central resources. Advocate for consistent standards while acknowledging current reality.

Demonstrating impact

- Collect student feedback forms after guest lectures (quantitative ratings and qualitative comments)
- Track number of OTs completing housing-focused CPD.
- Monitor increase in housing-related placements requested by OT learners.
- Document number of newly qualified OTs successfully completing a variety home adaptation cases in first year.
- Measure reduction in case supervision needs related to major adaptations.

- Survey housing colleagues on their confidence working with OTs before and after training.
- Count downloads/usage of practice guidance resources.
- Track number of other organisations requesting to use your training materials.
- Record career outcomes – how many students exposed to your teaching enter social care or housing OT roles.

Top tips for managers

- Allocate protected time for training delivery – don't expect it to happen ‘in addition to’ clinical work.
- Support the OT to develop teaching skills through train-the-trainer programs or education qualifications.
- Recognise this approach as strategic workforce development with long-term impact, not short-term output.
- Provide resources for the development of teaching materials (photography equipment, graphic design support).
- Celebrate and publicise training achievements (university partnerships, student feedback).
- Connect your OT with other clinical educators for peer support and shared learning.
- Include education and training in job descriptions and annual objectives from the outset.
- Support presentation at conferences and publication of teaching resources to increase reach.
- Build succession planning – train other OTs to deliver education so it's sustainable.
- Use positive student feedback to advocate for increased investment in housing OT services.
- Link training delivery to recruitment – students who receive excellent teaching may apply for posts in your organisation.