

Workforce Planning in Occupational Therapy

Published 2024 (updated from 2023)

Country relevance – UK wide

Introduction

This document seeks to provide managers and leads with guidance on modelling their workforce planning needs in order to determine the number and skill mix of staff required to deliver their service. It has been produced in response to the number of requests received for information on planning for new services, reconfiguring current services, role redesign, service/career structure, the number of occupational therapists related to local population size and the recommended occupational therapy staff ratios per client group/clinical area.

Accountability for workforce planning has now been devolved to health and care systems across the United Kingdom (UK).

The establishment of legal, system-wide approaches to health and care design, delivery and evaluation means that workforce planning should be inclusive of all providers including public, private, independent, voluntary, charity and social enterprise organisations.

In England, Integrated Care Boards (ICBs) and Integrated Care Partnerships (ICPs) are responsible for workforce planning in line with population health and care needs.

In Scotland, health boards, and integration authorities (Scottish Government, 2020) are the entities responsible for workforce planning.

In Wales, integrated workforce planning in line with population health and care needs is led by regional partnership boards, (Welsh Government, 2020).

In Northern Ireland (NI), staffing arrangements are the responsibility of individual health and social care employers, based on service need and available resources, (Department of Health NI).

Background information

RCOT has often been asked to provide a definitive statement about the numbers of occupational therapists and/or support workers that should be employed within services, in order to justify the need for staffing to commissioners and other related purposes. Given the diversity of settings in which occupational therapists practice, it is not possible to provide a 'one size fits all' approach that can be applied to all areas of occupational therapy activity which may be too simplistic to be effective. This document identifies frameworks that will enable occupational therapists to develop a modelling approach to facilitate service planning within the context concerned and will also identify unmet needs.

Warwick University were commissioned to undertake a review of global literature on workforce planning to identify good practice. Curson et al (2010) published their article entitled '*Who does workforce planning well?*' It provides a review of the published literature on workforce planning- and is a helpful document to support local service activity.

Main body of information

Approach

The workforce planning process is complex, and it involves:

1. Understanding the demand and requirements as determined by health and social care commissioners.
2. Conducting an analysis of the service to be provided, projected outcomes, skills required to deliver the service and who can provide these skills. Costs and ability to resource must also be taken account of.
3. Having criteria in place for assessing the effectiveness of the service such as through the use of standardized assessments, outcome measures, audit or service evaluation.
4. Developing a strategic approach to providing services, reflecting the changing culture of the organisation and being aware of new trends and models in health and social care.
5. Identifying new models of working practices, which may include 7-day week working. Identify the level of staffing needed to maintain services at times of sickness, study leave, annual leave and training days.

Requirements

In identifying the occupational therapy workforce required for both current and future needs it is necessary to determine:

- The total number of staff needed (identify capacity).
- The composition of the workforce in terms of staffing grades.
- Job competencies that are required for specific posts and skill mix.

Understanding demand

Within your service, identify:

- Local population data and any recent local population needs assessment undertaken.
- From this the pathologies or other conditions which would indicate demand for occupational therapy services.
- Data on likely demand – obtained from existing service data or from epidemiological data relating to incidence and changing trends.
- Your organisation may have an expert in local demographics to help you identify the key areas for which occupational therapy intervention is essential.
- Commissioning criteria for accessing your service.
- Average number and duration of interventions.
- Extraneous factors that contribute to individual intervention time, such as travel to home visits, group activities etc.
- Non-contact activities such as note-writing, telephone calls, supervision, team meetings.
- Areas of current practice that may be curtailed or removed, such as in response to changing demand or developments in the evidence-base that supports practice.

From this knowledge it is possible to estimate the level of demand on a service in terms of numbers, types and duration of interventions.

Predicting future workforce needs

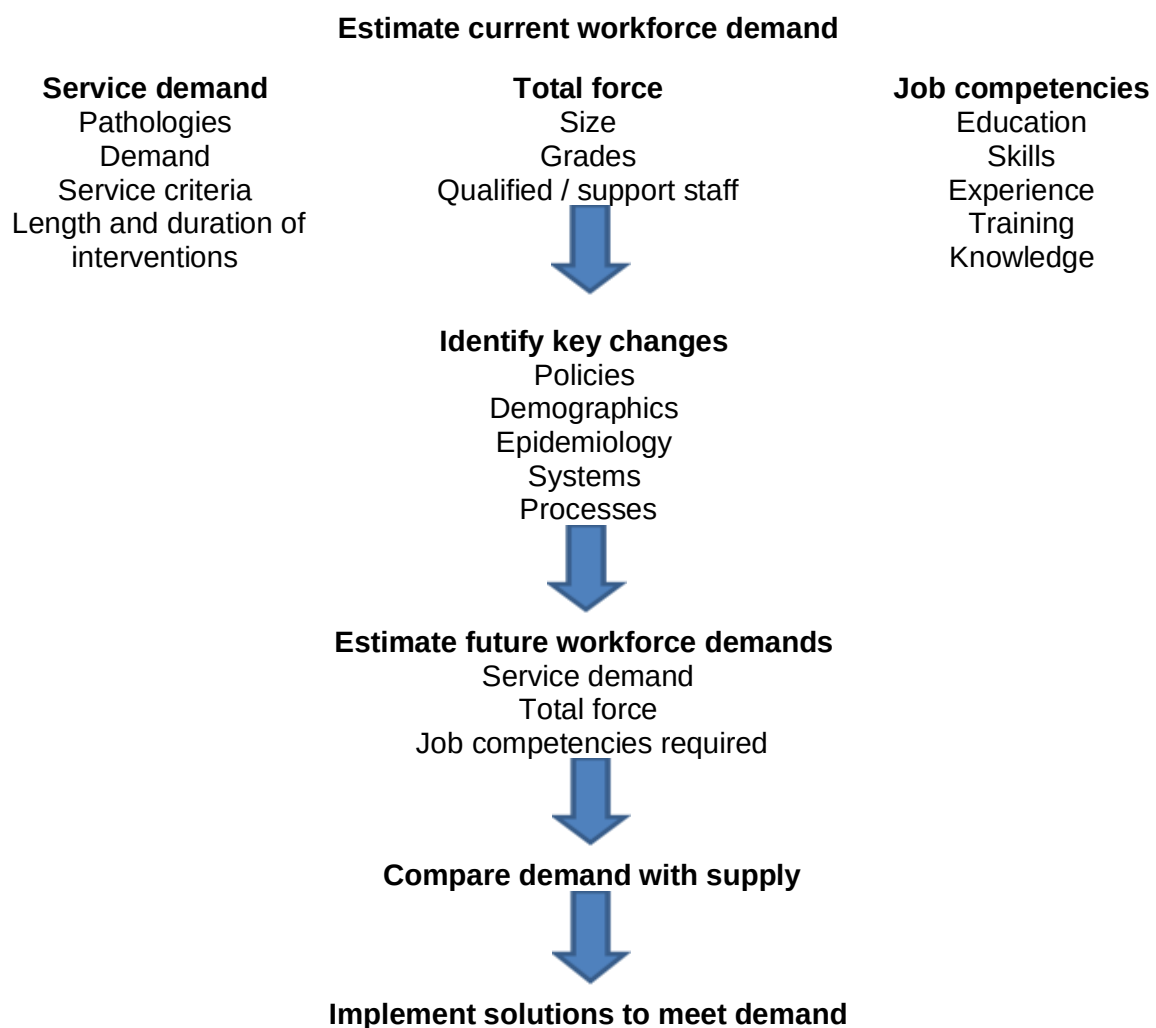
Once the process outlined above has been completed, competencies can be updated as required to reflect changing external factors. This could include such aspects as policy directives, demographic changes or the installation of a new Information Management procedure, for example.

Using your data

Once you have completed your modelling activity and established the occupational therapy workforce needs for your service, it is essential that you target this information at the right level. Ensure you are aware of the commissioning arrangements that affect your workplace and keep track of decisions made that will impact on the outcome. It is extremely helpful in support of your proposals to include compelling cases, examples of unmet need and the implications, and other available evidence to support your claims.

Examples

1) The table below, based on RAND (2007), outlines the process for predicting current and future workforce needs.



2) The publication '*AHPs into Action - Using Allied Health Professionals to transform health, care and wellbeing*' (NHS England, 2017) contains an occupational therapy safe staffing case study (number 53, p.132).

The basic principle described in the case study is: Clinical time needed for an average patient x the number of patients + an uplift to account for non-clinically related time = how much staff time you need to safely manage the needs of that patient group.

3) The Department of Health in Northern Ireland (NI) carried out a workforce review programme covering all thirteen allied health professions in NI. The Health and Social Care Workforce Strategy for NI 2026 (2018) was developed following 'through detailed engagement with colleagues across health and social care sectors. 'Since March 2017, project groups comprising representatives from across the health and social care service, professional bodies, staff side representatives and the Department of Health have met regularly to consider how these professions / services are likely to develop in the period 2018 – 2028' (Martin S, Rodgers P, 2022).

The aim of the review was twofold, firstly ensuring that adequate numbers of Occupational Therapists are trained at undergraduate level to meet the anticipated demands for the profession over the next 5-10 years. Secondly, assuring that the workforce was suitably equipped to meet the changing demographic needs and demands of the population.

The report identified it was evident that the Occupational Therapy profession faces 'challenges in terms of having a staffing resource with the capacity and skills to manage the increasing demand across all areas' (Martin S, Rodgers P, 2022). The report recommended key actions that are needed to achieve the aims of the review.

4) NHS England (2019) provided a template, *AHP job planning, productive hours calculator* which helps to support the calculation of clinical capacity for AHP teams and services and is provided to support the implementation of job planning for AHP services that do not have software in place.

5) The six steps approach to workforce planning has, for several years, been widely regarded as the method used to support workforce planning in health and social care. 'The eLearning programme can be used as a tool to support health and social care organisations with workforce planning. The programme is made up of six steps which will guide the health and social care professional through the principles and activities of planning. It is aimed at anyone who engages in service redesign, restructures and reorganisations but can be appropriately scaled to suite the users' need dependant on the size of the change. It also is supported by a case study illustrating the steps that should be followed as part of the workforce planning process.' (eLearning for healthcare).

In order to access the e-learning, you need an elfh account. If you do not have one, then you can register via the link below. It is also available to NHS healthcare staff via the Electronic Staff Record (ESR). Accessing this e-learning via ESR means that your completions will transfer with you throughout your NHS career. If you are not an NHS health or care organisation and therefore do not qualify for free access elfh Hub, you may be able to access the service by creating an OpenAthens account. eLearning for healthcare in partnership with NHS England's Workforce, Training and Education directorate (formerly known as Health Education England) is available at: <https://www.e-elfh.org.uk/programmes/six-steps-approach-to-workforce-planning/>

Resources

Please visit <https://www.rcot.co.uk/> to view the most current versions of RCOT publications.

Department of Health NI (2016) *Health and wellbeing 2026*. NI direct: Gov UK. Available at: <https://www.health-ni.gov.uk/sites/default/files/publications/health/health-and-wellbeing-2026-delivering-together.pdf>

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East Sussex and North Essex Foundation Trust (2019) *Increasing AHPs' clinical capacity using job planning and deployment metrics*. London: NHSE. Available at: <https://www.england.nhs.uk/wp-content/uploads/2021/05/increasingp-clinical-capacity-of-ahps-using-job-planning-at-ipswich-hospital.pdf>

eLearning for healthcare *Six steps approach to workforce planning*. London: HEE. Available at: <https://www.e-lfh.org.uk/programmes/six-steps-approach-to-workforce-planning/>

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