



Better Skills
Better Jobs
Better Health

Skills for Health

Sector Qualification Strategy
Action Plan 2009 - 2011
for
England

Final Version

PART A

1. Scope

This Action Plan refers specifically to the health sector in England; it follows on from, and therefore is not intended to replicate, the Skills for Health UK wide Sector Qualifications Strategy (SQS), the 14-19 Sector Qualifications Strategy Annex (2009) and the 2008 SQS Action Plan. It is one of a suite of Action Plans which has been developed, one for each of the four UK countries.

The Action Plan aligns with the Skills for Health Operational Plan for England and the Sector Skills Agreements emerging from the 9 English regions.

It is inclusive of all parts of the health sector in England, as described in section 2.1 of the SQS and therefore includes services provided by the National Health Service, the independent sector and the voluntary sector. Broadly speaking the scope of the action plan is:

- Primary care, including General Practitioner services, dental care, opticians and pharmacies
- Secondary care, including physical and mental health services and specialist provision through hospitals
- Other community-based services for example, drug and alcohol services
- Complementary health care

Since completion of the SQS in 2007 there have been some additions to the health sector footprint and this Action Plan therefore also includes:

- Therapeutic counselling (transferred from ENTO)
- Optical manufacturing (transferred from SEMTA)
- Optical retail (transferred from SEMTA)

Skills for Health is mindful that many employees working in health services fall outside of our footprint but that the services provided by these staff are critical to the delivery of healthcare. Examples include estates and facilities staff and those providing catering, third sector management and IT services. Skills for Health remains committed to working in partnership with other sector skills councils and standards setting bodies to represent a voice of these staff groups in developing appropriate qualifications.

In 2007 the main focus of the SQS was those vocational and vocationally related qualifications delivered through further education, with consideration given to how these qualifications articulated with school based qualifications and higher education. However, following the development of the 14-19 SQS Annex (2009), the schools' curriculum is now included and this Action Plan includes qualifications for delivery as part of schools based provision where applicable.

The SQS Action Plan for England sets out the priorities, methods and outcomes which will be actioned in England from July 2009 until June 2011. All identified plans will be active for at least some part of this timeframe; longer term actions which demonstrate strategic importance to the sector may not be completed within this timescale but may be evident in this plan. It is also recognised that many of the plans cannot be completed in isolation but will form part of UK wide initiatives, thus this plan should be considered in the context of the full SQS and Action Plans for the three other countries.

Key Stakeholders

Skills For Health welcomes the opportunity to work with a wide range of stakeholders as detailed in section 6.2 of the SQS.

- Employers – *NHS Trusts, independent and voluntary sector*

- Education commissioners – *Strategic Health Authorities, Primary Care Trusts*
- Funding bodies – *the Learning and Skills Council and its successor organisations*
- Central Government departments
- Other sector skills councils and standards setting bodies – *Skills for Care and Development, Skills for Justice, Council for Administration, Asset Skills, People 1st, Skills – Third Sector*
- Statutory Qualification Regulator - *Ofqual*
- Qualifications frameworks bodies – *including the Qualifications and Curriculum Authority*
- Awarding bodies
- Unions and professional bodies
- Statutory professional regulators
- Learning providers

2. Methodology

This Action Plan has been developed at a time when there is whole scale change to the vocational qualifications landscape across the UK. The closure of the National Qualifications Framework (NQF) to vocational qualifications by December 2010 and its replacement with the Qualifications and Credit Framework (QCF) offers both great opportunity and great challenge to be faced in the lifespan of this Action Plan. Skills for Health intends to utilise the characteristics of the QCF, particularly in relation to the flexibilities offered through the allocation of credit at unit level, to fully meet the aspirations of the health sector described in the SQS.

Whilst it is acknowledged that these changes to regulatory frameworks do not apply directly to Scotland, Skills for Health is mindful of the peripheral impact of such changes across borders; the principle of transferability must remain an uppermost priority.

In preparation for the closure of the NQF, Skills for Health consulted on the approach to re-developing qualifications for the QCF for the health sector. This took place during 2008 and a working draft completed by the close of 2008, to include a timeline of activities based on groupings of qualifications by subsector.

The following description of the methodology to collect intelligence to inform the content of this Action Plan was done so with our approach to developing qualifications for the QCF and the associated timeline already in working draft.

The SQS is main stream business activity and Skills for Health undertakes dialogue with employers and other sector stakeholders on a continuous, inclusive and iterative basis. This Action Plan has therefore been developed following continuous consultation with sector stakeholders over an 18 month period since the development of the SQS and publication of the 2008 Action Plan.

Additional targeted and focused engagement activities were conducted across the English regions in the period November 2008 to May 2009.

These activities included:

- Workshops and consultation events with a specific SQS focus
- Interviews and small focus groups with existing sector employer groups
- Harvesting intelligence from Skills for Health staff
- Dedicated agenda items were tabled at both the March 2009 and June 2009 Skills for Health Awarding Body Forum meetings. The Forum is held quarterly and is regularly attended by those Awarding Bodies with whom we work; actions arising from the SQS

form a central theme to these meetings and we will continue to work closely with awarding bodies in achieving these plans. A full list awarding bodies operating in the sector can be obtained from qualifications@skillsforhealth.org.uk.

Focused engagement activities afforded the opportunity to verify with stakeholders those qualifications strategy activities already underway. Questions were designed to:

- test whether or not stakeholders agree that the overall vision of the SQS still holds true
- ascertain stakeholder opinions as to the nature of 14-19 qualifications which will best support entry and progression of young people into the health sector

and using the timeline of activities for re-developing qualifications for the QCF to

- identify any additional gaps in qualifications, including 14-19 provision, for the sector with potential drivers being local or national skills gaps or policy drivers
- contribute to development priorities for 2009-2011

The process harvested a large amount of information which was analysed and compared to information from across the UK prior to drafting the Action Plan. This cross country comparison was an important step in identifying common themes and country specific needs to inform the approach which will be taken to many of the identified developments.

Draft Plans have been through a number of stakeholder reviews to assure the content.

3. Summary of outcomes

Stakeholders were unanimously in agreement with the vision expressed in the Sector Qualifications Strategy for Health (2007). As such they re-affirmed the principles on which Skills for Health has been working to develop qualifications since the completion of the SQS and on which the outcomes listed below are based. These principles, known as the Learning Design Principles state that learning and qualifications should be:

- Developed using robust intelligence gathered in response to employer needs
- Transferable across the UK using National Occupational Standards as the currency
- Constructed of units and assembled into educational pathways to allow maximum flexibility
- Be responsive to accommodate the fast changing landscape in healthcare delivery, best practice and new roles

A full description of the Learning Design Principles can be found in Section 6.1 of the SQS.

Outcome 1: Qualifications for the Health Informatics Workforce

A review of Health Informatics National Occupational Standards will be complete by March 2010. Concurrent to the review of the NOS, Skills for Health will scope current educational provision for the Health Informatics community and where gaps exist will seek to work collaboratively with partner SSCs, including e-Skills, and awarding bodies to develop units to populate the Health Informatics educational pathway. By March 2010 units will be assembled into new qualifications or incorporated into existing qualifications to best meet the needs of the Health Informatics workforce.

Outcome 2: Educational Pathway for Therapeutic Counselling

The development of Psychological Therapies National Occupational Standards will be complete by October 2009. These new NOS will then be used to inform the review and development of units which can be used to assemble counselling qualifications which will meet emerging regulatory frameworks. This development is likely to cross all levels of education to build into an educational pathway for therapeutic counselling.

Outcome 3: Fit for Purpose Dental Nursing and Dental Technician Qualifications

Skills for Health will respond to the outcomes of the review of educational curriculum for dental health professionals currently being undertaken by the General Dental Council (GDC). National Occupational Standards and corresponding vocational qualifications will be revised accordingly to ensure they remain fit for purpose in line with GDC registration requirements.

Outcome 4: Fit for Purpose Qualifications for the Optical Sector

The National Occupational Standards for optical manufacturing and optical retail are newly transferred into the Skills for Health footprint. Skills for Health will work with the Optical Sector Steering Group and other optical sector stakeholders to redevelop existing NQF qualifications for the QCF.

Skills for Health will work with the optical sector to develop a fit for purpose apprenticeship framework.

Outcome 5: Fit for Purpose Pharmacy Services Qualifications

Based on new National Occupational Standards Skills for Health are working in partnership with awarding bodies, the professional regulatory bodies and employers to develop both competence based and underpinning knowledge qualifications for the QCF for pharmacy support staff including Pharmacy Technicians, Pharmacy Assistants and Dispensers including GP Dispensers by 2010.

Outcome 6: Progression Routes for New and Emerging Roles eg Assistant Practitioners

Skills for Health recognises that New and Emerging Roles eg Assistant Practitioners are of growing importance in the re-configuration of health care delivery across the UK. There is however, great variation in the scope of these roles and therefore it is not possible to identify a single curriculum.

Skills for Health will seek to work with all partners to develop unit level education from which qualifications can be assembled to reflect the educational needs of the diverse health care workforce and which will support progression into and through higher education. Assigning a credit value and level to the units will support New, Emerging and Transferable Roles in selecting those elements of learning which most closely match their role and will support progression routes from Support Worker to higher level roles across appropriate academic levels through development along an educational pathway. The higher level vocational routes will be supplemented by additional underpinning knowledge qualifications where applicable.

These examples are provided to illustrate this outcome:

Maternity Roles: In response to policy drivers across all four countries of the UK Skills for Health is reviewing the educational pathway for support worker roles in maternity services. There will be new underpinning knowledge units to complement units to assess competence in the workplace. Units will be packaged into qualifications and assigned a credit value and level for the QCF to show clearly where the units sit in the educational pathway for the maternity workforce.

Allied Health Professions: Skills for Health will work with stakeholders from across the UK to develop units which can be incorporated into qualifications to form progression routes for new and emerging roles within the Allied Health Professions sector and into professional education programmes in higher education.

Healthcare Science: Skills for Health will work with stakeholders from across the UK to develop units which can be incorporated into qualifications to form progression routes for new and emerging roles within Healthcare Sciences and into professional education programmes in higher education.

Outcome 7: Transferable and Transparent Qualifications Routes in Health, Health and Social Care and Support Services

Skills for Health will be working with awarding bodies to re-develop vocational qualifications in Health, Health and Social Care and Support Services for accreditation to the QCF by December 2010. Skills for Health remains committed to qualifications which attest to occupational competence and which have transferability and transparency across the UK through the use of National Occupational Standards on which these qualifications will be based. The Learning Design Principles will ensure that the resulting units and qualifications offer the workforce flexibility and progression opportunities which can match emerging career pathways and national transferable roles.

These examples are provided to illustrate this outcome:

Existing vocational qualifications in Health and in Support Services will be integrated into one Health and Support Services qualification thus giving greater flexibility and supporting transition between the clinical and non-clinical support workforce. There will be new higher level units/pathways available for non-clinical support services staff, particularly focussing on first line supervisory management and leadership skills. Where appropriate and in response to the emerging health workforce priorities there will be new units and pathways developed for the children and young person's health workforce and for the emergency care workforce.

A review of Intraoperative Cell Salvage NOS will be complete by March 2010. These NOS will be re-considered for development into units for inclusion into qualifications suitable for the continuing education of peri-operative care practitioners.

Skills for Health will work collaboratively with Skills for Care and Development in re-developing the vocational qualifications in Health and Social Care for the QCF. There is a commitment to continue to recognise the cross sector nature of these qualifications in supporting the growing number of services and roles which operate across the health and social care boundaries. The construction of these qualifications will reflect a 'core' of requirements identified for all workers in the health and social care sector (eg recognition of dignity for service users, communication, infection control) and changing models of service delivery. There will be new units focussing, for example, on self care, dementia care, mental health and children and adolescent mental health services, forming sets of units embedded within the new vocational qualifications. Further joint work to support the development of the workforce supporting both the End of Life Care Strategy and Carers Strategy will also lead to NOS and qualification review.

Outcome 8: Fit for Purpose Apprenticeship Frameworks

Skills for Health will continue to review current Apprenticeship Frameworks in line with amendments to qualifications which comprise the framework. Where there are national changes to a framework template arising from the Specification of Apprenticeships Standards for England (SASE) consultation, Skills for Health will respond accordingly.

Where there is evidence that new Apprenticeship Frameworks are required Skills for Health will work with sector representatives to ensure that new Apprenticeship Frameworks are developed. Where these requirements sit outside of Skills for Health remit we will work collaboratively with other Sector Skills Councils to influence the contents of Apprenticeship Frameworks to ensure they meet the requirements of the health sector.

Where Governments set targets for the uptake of Apprenticeship Frameworks within the health sector, Skills for Health will work with employers and other partnership arrangements to support their implementation.

These examples are provided to illustrate this outcome:

Skills for Health will seek to work with e-Skills to ensure that the qualifications outputs arising from the population of the educational pathway for Health Informatics/Information Technology staff may be incorporated into the e-Skills Apprenticeship Frameworks.

Skills for Health will develop guidance materials and tools to support employers in accessing Apprenticeship Frameworks developed by other Sector Skills Councils.

Outcome 9: Clear progression routes from schools' curriculum into the health sector.

Skills for Health will continue to review and develop qualifications for young people within full time education which will facilitate entry into the health sector and encourage progression within the sector.

Skills for Health will undertake this work in a way which takes account of national Government policies and initiatives and, in so doing, will work collaboratively with partner Sector Skills Councils and other stakeholders where appropriate to ensure that the needs of the health sector are met.

Qualifications for young people will be developed in a way which takes account of the wider vision for health sector qualifications and the Learning Design Principles. In addition, qualifications for young people will be developed so that their learning can be recognised when they progress into the health sector, thereby avoiding duplication of learning.

Skills for Health will work with relevant partners, including employers, to support and implement national Government targets relating to young people's entitlement to access specific qualifications and/or progression.

The importance of high quality Information Advice and Guidance is recognised and Skills for Health will work with stakeholders to ensure that clear, accurate and consistent information is easily accessible to young people and their advisors so that informed choices about qualification and progression routes can be made.

The following examples are illustrative of this outcome:

Skills for Health will continue to work with partners to develop Principal Learning and Specialist Learning qualifications for young people undertaking the Diploma in Society, Health & Development, Public Services and Science to encourage and facilitate their entry into and progression within the health sector.

Skills for Health will continue to map Diploma Principal and Specialist Learning to apprenticeship frameworks to enable recognition of prior learning and to align with Government policy of entitlement to progression from Diplomas to apprenticeships for all young people who wish to take that route.

Outcome 10: Population of the Integrated Qualifications Framework (IQF)

A significant majority of the health workforce will provide services to children as part of their role. Where units and qualifications developed for the Qualifications and Credit Framework also meet the criteria for population of the IQF, Skills for Health will seek their inclusion onto the IQF. This will not only support the needs of the health sector but also in meeting the needs of the wider children's workforce.

Outcome 11: Best use of Public Funding for Qualifications

The Joint Investment Framework has seen a significant investment in the training for NHS England since its agreement in July 2007. Despite the increased flexibilities available through the agreement, limitations remain and the negotiation of a new and fully inclusive sector specific funding agreement offers opportunities to further target funding across the whole sector. Skills for Health will work with the Learning and Skills Council, the Department for Business,

Innovation and Skills and employers to define and agree a sector funding agreement at the earliest opportunity.

The focus of the funding agreement should make best use of the opportunities presented by the Qualifications and Credit Framework to target funding aligned with the flexibilities of credit accumulation along educational pathways.

Until a new funding agreement is in place, Skills for Health will continue to influence the targeting of public funding through the appropriate definition of fullness thresholds for level 2 and level 3 qualifications and the identification of priority qualifications. Thresholds and priorities will be set according to employer definitions and will vary as appropriate for different sub-sectors within health.

4. Partner engagement and working arrangements

In implementing this Action Plan, Skills for Health will continue to engage with partners through a number of existing groups and established working arrangements. Many of these forums are not specifically convened for the purposes of implementing the SQS but rather the SQS will underpin and influence these forums with the Action Plan becoming embedded as core business.

1. Skills for Health Awarding Body Forum

These meetings are convened quarterly and form a central forum for discussion with all awarding bodies operating within the health sector footprint. Should it become necessary, an awarding body may also request a one to one meeting to address a specific item. Thus Skills for Health maintains a good working relationship with awarding bodies.

2. Skills for Health/Learning and Skills Council Meetings

Meetings are convened regularly with aim of ensuring that public funding is best targeted at national, regional and local levels to meet the qualifications strategy. Specific arrangements are in place for the Joint Investment Framework. Increasingly meetings will focus on the development of a new and fully inclusive sector specific funding agreement.

3. Regional Employer Engagement

Varying across the nine English regions, the Skills for Health Regional Directors and the Skills Academy for Health maintain employer engagement networks through which information can be gathered and disseminated.

4. Diploma Development Partnerships

Diploma Development Partnerships (DDPs) have been established for all Diploma lines of learning. Skills for Health leads the DDP for the Society, Health & Development Diploma and is a member of the DDPs for both Public Services and Science Diplomas. The DDPs are the overall steering group for the line of learning and are funded by and report to the Department of Children, Schools and Families. DDPs have several sub-groups which focus on specific aspects of Diploma development such as employer engagement, teaching workforce development and qualification development. DDPs enable Skills for Health to maintain contact with stakeholders, influence national policy and ensure that Diploma development meets the needs of the health sector at a local level.

5. Skills for Health Learning, Innovation and Development Group

The purpose of this group is to offer guidance and potentially Skills for Health support in educational developments within the sector. Submissions are considered which may be at any academic level and for use in any part of the education system within the health sector footprint. Its broad remit means that it is a mechanism which allows Skills for Health to influence the nature of educational developments on behalf of the sector and is a route by which the principles of the SQS can be embedded into developments. It is also a route by which Skills for Health can collect emerging priorities. Core membership comprises of Skills for Health staff, however additional stakeholders and other partners are frequently asked to join panels to provide guidance and opinion according to their status.

In addition to these existing working arrangements, Skills for Health has put in place specific arrangements which will be more focussed in delivering the SQS Action Plans:

The Skills for Health Internal SQS Steering Group will play a key role in operationalising the Action Plans within the organisation. It will explore, identify and prioritise Skills for Health work streams arising from the Action Plan, facilitate feedback into the wider corporate agenda and internally monitor progress against the Action Plan. The group will receive intelligence and make decisions relating to new priorities as they emerge.

Skills for Health will convene project groups to deliver on specific outcomes detailed in the Action Plan. These groups will have responsibilities and accountability mechanisms appropriate to the work undertaken and will report to the Internal SQS Steering Group and other internal Executive Groups. Skills for Health will ensure that the membership of project groups will include relevant partners and stakeholders.

5. Risks and assumptions

Assumptions

Skills for Health footprint remains constant

Skills for Health is re-licensed as an SSC

Resources are available to complete projects

Risks & contingencies

Risk	Description	Likelihood (H, M, L)	Impact (H,M,L)	Contingency
Insufficient internal capacity to deliver	Skills for Health currently employs a team of 10 staff with varying responsibilities dedicated to supporting the development of qualifications and associated agenda, including the requirements to meet our SSC license. Staff turnover and competing priorities would compromise delivery of the Action Plan.	L	H	SfH operates a matrix working structure and will draw on the input and expertise from across the organisation. Succession planning and talent management are central to maintaining internal capacity. Skills for Health would consider utilisation of external contractors/consultants where appropriate. Skills for Health will ensure Executive sign off and monitoring of SQS Action Plans to balance competing priorities.
Failure to engage partners	Skills for Health cannot deliver the SQS Action Plans without successful engagement of partners and stakeholders.	M	H	Maintain open dialogue with all stakeholders and partners using wide variety of engagement mechanisms. Build on regional engagement networks and inter-reliance with other workstreams. Review membership and terms of reference of all

				groups regularly. Early escalation of first signs of partners disengaging
Insufficient capacity within partner organisations to deliver	Skills for Health is sensitive to capacity issues and competing priorities currently facing partner organisations, particularly awarding organisations	M	H	Maintain open dialogue with all stakeholders and partners to remain cognisant of these challenges. Remain open to amendments in timescales to align with business requirements of partner organisations
Reduction in funding for Government led initiatives relating to the schools' curriculum	Skills for Health is sensitive to capacity issues and reduced funding would impact adversely on staffing levels and capacity to engage with other partners and stakeholders.	M	H	Maintain open dialogue with all relevant parties to remain cognisant of changes in funding levels and advise as to impact on effect of changes upon capacity to deliver within Government targets and timescales.
Qualifications not receiving public funding	Skills for Health is aware that access to funding for qualifications is an issue which impacts on take up and completion across the sector	M	H	Maintain open dialogue with all stakeholders and partners using wide variety of engagement mechanisms. Ensure that level 2 and level 3 definitions are appropriate for the health sector and the Learning and Skills Council are advised accordingly.

6. Monitoring arrangements

Skills for Health will monitor progress against the 2009-2011 Action Plans on a regular and continuous basis, ensuring that the plans remain fit for purpose and aligned with the changing landscape in which they will be delivered.

Formal monitoring will take place quarterly as part of the core business of the Skills for Health Internal SQS Steering Group. The group will identify appropriate performance measures and will access reporting mechanisms from projects and programmes of work put in place to deliver these plans. Group membership will continuously feed information into the Action Plan in order that it will reflect any changes or emerging priorities.

Other stakeholders and partners will be included in monitoring progress through a number of mechanisms already described, including:

- The Skills for Health Awarding Body Forum
- UK Commission for Employment and Skills and Learning and Skills Council liaison meetings

Project groups convened to deliver specific outcomes eg revision or development of a particular qualification

SQS ANNUAL ACTION PLAN TEMPLATE

PART B

1. Provision of information to funding bodies

State if and when you will provide all of the relevant funding bodies with a list of qualifications (excluding HE) which should be funded or be considered as full Level 2 in the QCF.

Skills for Health will refine recommendations to the LSC on defining fullness thresholds for Level 2 and level 3 qualifications in the QCF by Autumn 2009. Relevant information will then be populated in the IT database.

2. List of non-qualification outcomes.

These have been completed in the separate web-based tool.

3. Qualification Actions and Planned Outcomes

These have been completed in the separate web-based tool.