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1 Introduction

Skills for Health is the Sector Skills Council for the health sector. One of our key activities is the development of skills and labour market intelligence, the aim of which is to help employers understand their current and anticipated future skills needs. It is one of 23 such councils, who together generate skills and labour market intelligence for over 90% of the United Kingdom's workforce.

Skills for Health cover all those working in the sector; public, independent and voluntary. The sector can be technically defined using the 2007 Standard Industrial Classification. A breakdown of the technical codes for the sector and SSC can be found in the Glossary.

The Common Labour Market Intelligence (LMI) Framework, established by the UKCES in 2009, requires all Sector Skills Councils to produce annual Sector Skills Assessments.

This regional briefing is part of an ongoing suite of reports published by Skills for Health. These include:

- UK Sector Skills Assessment Full Report
- UK Sector Skills Assessment Summary Report
- England Skills and Labour Market Intelligence Report
- Scotland Skills and Labour Market Intelligence Report
- Wales Skills and Labour Market Intelligence Report
- Northern Ireland Skills and Labour Market Intelligence Report

The data in this briefing is drawn from a range of secondary data sources, including the UK Labour Force Survey (LFS), Annual Business Inquiry (ABI)¹, and the Office for National Statistics (NOMIS). These are robust sources of data that allow us to look at labour market information across all sectors of the UK economy, including the health sector. There may be slight variations in the data due to the differences in the purposes and time frames of the surveys. Where we consider the data is less reliable, or analysis should be treated with caution, this is highlighted within the text. This briefing also draws on commercially available intelligence that profiles the health of Yorkshire and The Humber and England as a whole.

These briefings are just one of a wider suite of outputs we are developing, which includes research on a range of themes important to the sector. Details of our activities and reports can be viewed at www.skillsforhealth.org.uk/workforce-design-development/workforce-strategy/skills-labour-market-intelligence.aspx

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¹ Data quality: The ABI is based on a sample survey so estimates are subject to sampling errors which need to be taken into account when interpreting the data. All figures rounded to the nearest hundred.

2 Key Facts

- There are 169,400 people employed in the health sector in the region
- Yorkshire and The Humber accounts for 11.1% of the England health sector workforce
- The sector accounts for 7.6% of the region's employment, subregionally this can vary from 4% to 12%
- There is 1 health employee for every 31 people resident in the region and 1 health establishment for every 1,303 people. Subregionally these ratios can range from 1 employee to 18 up to 66 people and 1 establishment for every 977 up to 2,018 people
- The Independent Sector accounts for approximately 22% of the workforce
- The sector is highly feminised 80% of the workforce are female compared to 50% in the local economy
- Part-time workers account for 45% of the workforce compared to 33% in the local economy
- Highly qualified 57% qualified to NVQ Level 4 and above compared to 32% in the local economy
- 21% of health establishments report skills gaps in their current workforce
- 47% of the health sector workforce qualified to NVQ Level 4 and above report having received training in the past 13 weeks compared to 23% qualified to below NVQ Level 2
- In Yorkshire and the Humber, 78,000 people are expected to retire from the sector between 2007 and 2017

3 A Profile of Demand for Healthcare in Yorkshire and The Humber

Key Features

- The largest health group is 'healthy'
- The largest health type is 'affluent towns and villages with excellent health and diet'
- Key themes within the health profile are 'disadvantaged', 'poor diet'
- Population projections show that the population is expected to grow by 1.1 million people between 2008 and 2033

3.1 Introduction

Understanding the market for healthcare provision is a key means of starting to understand the demand for employment and skills in the health sector. A range of organisations are therefore seeking to understand more about the well-being of the United Kingdom's population and these include Public Health Observatories, as well as providers of local healthcare.

3.2 Health Profile

The general trends in healthcare and healthcare provision are played out very differently throughout the regions and subregions of England.

CACI's health and consumer ACORN profiles (A Classification of Residential Neighbourhoods) is one commercially available source of data profiling the demand of healthcare in the UK². This profile provides us with a snapshot of current and possible future health requirements.

Health ACORN classifies households into four main health groups. These are:

² These draw extensively from official sources of intelligence, such as the annual population survey, 2001 Census, consumer surveys and expenditure data. These sources enable models of healthcare and consumer demand to be developed on a local, regional and country basis.

- Existing problems where the levels of illness are above average. The proportion of people with angina is 60% higher than average, the proportion who have suffered a heart attack is 45% above average. The incidence of diabetes, high blood pressure and high cholesterol are also above average, and this is the only group where this is the case.
- Future problems the areas classified as harbouring future problems do not generally have high incidence of existing illnesses. Exceptions to this are depression, asthma and migraine.
- Possible future concerns these are areas with lower levels of smoking, obesity and average or slightly below average incidence of illness.
- Healthy the healthy areas tend to have a younger demographic and the proportions of people with high blood pressure, angina, diabetes and high cholesterol are lower than average. This group are likely to take more exercise and less likely to be smokers or overweight.

These four groups are refined into a further twenty-five health types which provide more explanation of household composition, work position, lifestyle and diet. Examples include:

- older couples, traditional diets, cardiac issues
- disadvantaged elderly, poor diet, chronic health
- poor single-parent families with lifestyle related illnesses

Table 1 details the health profile for Yorkshire and The Humber by the four main health groups and draws comparison to England.

1. Yorkshire and The Humber Health Profile

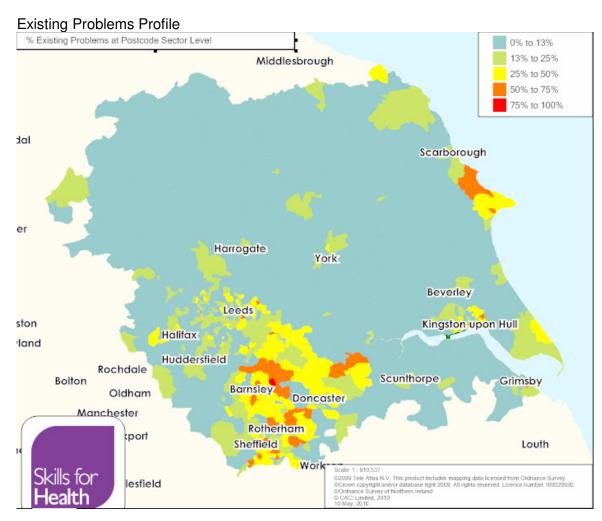
	Yorkshire and T	he Humber	England		
	Data	%	Data	%	
Existing Problems	949,962	18.0	7,011,380	13.5	
Future Problems	794,545	15.1	6,231,293	12.0	
Possible Future Concerns	1,560,042	29.6	18,174,048	35.0	
Healthy	1,925,962	36.5	19,987,231	38.5	
Unclassified	40,757	0.8	479,950	0.9	
Total	5,271,268		51,883,902		

Source: CACI, 2009

3.3 Geographical Profile of Yorkshire and The Humber

Within Yorkshire and The Humber, the smallest groups are 'existing problems' and 'future problems' but both groups are higher than the average for England. Of the thirteen types that make up these two groups, eleven are overrepresented in the region.

The following map depicts postcode sectors where existing problems are higher than the average for England. The average for England is 13% but as the map illustrates there are pockets of households where the percentage is significantly higher.



Source: CACI 2009

A detailed health profile for Yorkshire and The Humber can be found in Appendix 1.

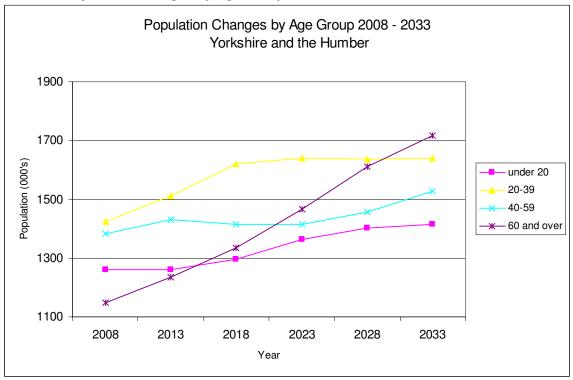
3.4 Yorkshire and The Humber Population Projections

Predicted changes in the population of the region have a double impact on the health sector. Demographic pressures of an ageing population will increase demand for health services, whilst a potentially dwindling labour pool will mean that employers may struggle to supply the labour and skills needed to deliver the services the population needs.

Please refer to heading 5.6.1 to see how the ageing population could impact the health service provision. The charts and tables that follow contain population projections by age group for the region.

Population projections from the Office for National Statistics³, published on 27 May 2010, show that the population is expected to grow by 1.1 million people between 2008 and 2033. Growth in absolute numbers is expected in all but the 55-59 age group, and the population aged over 60 will grow at a faster rate than those under 60 years of age.

1 Total Population Changes by Age Group 2008 – 2033



Source: Office for National Statistics Subnational Population projections (SNPP) for England, 2008

Table 2 and Chart 2 show these age groups as a proportion of the total population of the region. These clearly show that there is anticipated to be significant shifts in the proportion of the population of Yorkshire and the Humber aged 60 years and over and decreases in the proportion of the population aged under 60.

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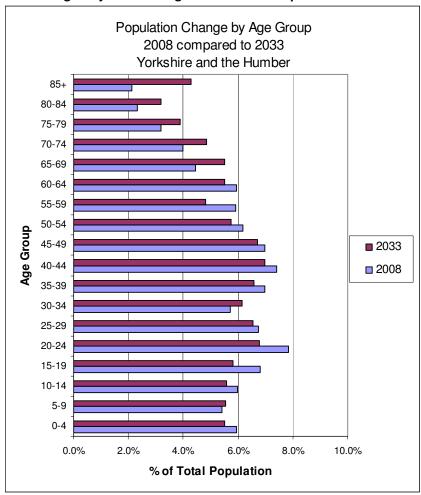
³ Office for National Statistics Subnational Population Projections (SNPP) for England <u>www.statistics.gov.uk/snpp</u>

2. Population Changes by High Level Age Bands as a Proportion of the Total Population

				Time I	Period		
		2008 to 2013	2013 to 2018	2018 to 2023	2023 to 2028	2028 to 2033	Total Change 2008 to 2033
	under 20	-1.0	-0.3	0.3	-0.2	-0.5	-1.7
Age	20-39	0.5	0.8	-0.7	-1.0	-0.8	-1.2
Group	40-59	-0.2	-1.3	-0.9	-0.2	0.4	-2.3
	60 and over	0.7	0.8	1.4	1.5	0.9	5.2

Source: Office for National Statistics Subnational Population projections (SNPP) for England, 2008

2 Population Changes by Detailed Age Bands as a Proportion of the Total Population



Source: Office for National Statistics Subnational Population projections (SNPP) for England, 2008

4 The Labour Market in Yorkshire and The Humber

Key Features

- A total of 2.2 million are employed across all industry sectors in Yorkshire and
 The Humber
- The unemployment rate (in those aged 16 plus) as at February April 2010
 across the region was 9.6%
- 13% are employed in human health and social work activities
- Wholesale and Retail Trade is the biggest employer

4.1 Introduction

There has been significant turmoil within the labour market since 2008. The unemployment rate (in those aged 16 plus) as at February – April 2010 across the region was 9.6%, this was an increase of 1.5% on the previous 12 months. This is the highest unemployment rate of any region of England.

An examination of claimant counts in May 2010 shows a decrease in total claimants within the region but a continued increase in those claiming for 12 months or more. The number of individuals claiming for 12 months or more has risen from 11,900 in May 2009 to 26,100 in May 2010⁴.

4.2 Employment by Industry Sector

Table 3 shows employee numbers by Industry (ABI Employee Analysis). The data shows the region is dominated by wholesale and retail trade, manufacturing and human health and social work activities.

Human health and social work activities account for 13% of the labour market. Throughout the regions this proportion ranges from 9% to 14%.

⁴ Office for National Statistics: Labour Market Statistics June 2010 http://www.statistics.gov.uk/statbase/Product.asp?vlnk=15084

3. Yorkshire and The Humber Industry Sector 2008

Industry	Yorkshire The Hum	
industry	Data	%
A : Agriculture, forestry and fishing	16,100	1
B : Mining and quarrying	3,100	<1
C : Manufacturing	272,400	12
D : Electricity, gas, steam and air conditioning supply	6,900	<1
E: Water supply; sewerage, waste management and remediation activities	11,900	1
F : Construction	122,400	5
G: Wholesale and retail trade; repair of motor vehicles and motorcycles	379,700	17
H: Transportation and storage	104,200	5
I : Accommodation and food service activities	140,100	6
J: Information and communication	53,700	2
K : Financial and insurance activities	87,600	4
L : Real estate activities	31,600	1
M : Professional, scientific and technical activities	121,700	5
N : Administrative and support service activities	157,400	7
O: Public administration and defence; compulsory social security	119,700	5
P : Education	236,000	11
Q : Human health and social work activities	281,200	13
R : Arts, entertainment and recreation	49,200	2
S : Other service activities	37,400	2
Total	2,232,300	100

Source: Annual Business Inquiry Employee Analysis 2008 (SIC 2007)

5 The Size and Structure of the Health Sector in Yorkshire and The Humber

Key Features

- There are 169,400 people employed in the health sector in the region
- Yorkshire and The Humber accounts for 11.1% of the England health sector workforce
- The health sector accounts for 7.6% of the region's employment, subregionally this can vary from 4% to 12%
- There is 1 health employee for every 31 people resident in the region and 1 health establishment for every 1,303 people. Subregionally these ratios can range from 1 employee to 18 up to 66 people and 1 establishment for every 977 up to 2,018 people
- The Independent Sector accounts for approximately 22% of the healthcare workforce

5.1 Introduction

From the Yorkshire and The Humber health profile, Table 1, we can see that 18% of the region has existing health problems. With those indicating 'possible future concerns' standing at 29.6%, will the health sector have the skills and resources to meet this potential increase in demand?

The following section looks at the size and structure of the health sector in Yorkshire and The Humber.

5.2 Size of the Health Sector Workforce

Table 4 details the size of the sector in each of the Government Office Regions. In Yorkshire and The Humber the health sector employs 169,400 people accounting for 11.1% of the England workforce.

In the region, employment in the health sector accounts for 7.6% of the total workforce, but this percentage can vary greatly subregionally. Please refer to Table 5.

4. Health Employment by Government Office Region

	Health Employees	Regional Percentage of Total Health Employment	Percentage of Health Employment in Total Economy
East of England	144,900	9.5	6.1
East Midlands	129,300	8.5	6.8
London	226,500	14.8	5.4
North East	81,900	5.4	7.9
North West	220,600	14.4	7.3
South East	240,100	15.7	6.4
South West	159,000	10.4	7.1
West Midlands	158,000	10.3	6.7
Yorkshire and The Humber	169,400	11.1	7.6
England	1,529,700		6.6

Source: Annual Business Inquiry employee analysis 2008 (SIC 2007)
Figures rounded to nearest hundred

5.3 Health Employment at a Subregional Level

Table 5 shows the size of the health sector workforce as a percentage of the total workforce⁵ within each of the Local Authorities, and potentially indicates which subregion will feel the anticipated reductions in funding more strongly.

Within Sheffield 12% of the workforce is employed within the sector, compared to 4% in North Yorkshire.

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⁵ Total employed figures are aggregates from which farm agriculture (SIC class 0100) have been excluded

5. Health Sector Workforce as a Percentage of the Local Workforce

Local Authority: county/ unitary	Health	Percentage of workforce employed in Health
Barnsley	5,600	8
Bradford	16,300	8
Calderdale	4,200	5
Doncaster	13,000	11
East Riding of Yorkshire	7,800	7
Kingston upon Hull, City of	9,500	8
Kirklees	9,200	6
Leeds	26,100	6
North East Lincolnshire	7,000	10
North Lincolnshire	4,600	7
North Yorkshire	9,100	4
Rotherham	7,200	7
Sheffield	29,300	12
Wakefield	10,600	8
York	9,900	10
Column Total	169,400	8

Source: Annual Business Inquiry 2008 (SIC 2007)

5.4 Workforce Growth in the Health Sector and the Economy

In England the workforce remained stable over the period 2007 – 2008. However, this was the not the case at a regional level. Table 6 shows the percentage of change experienced at a regional level in the health sector workforce and the total regional workforce. Between 2007 and 2008, Yorkshire and The Humber saw an increase in the health workforce of 5.3%, the highest of any region and a slight decline of 0.3% in the regional economy.

6. Regional Growth in Employment

	2007	2008	Percentage Growth in Health Workforce	Percentage Growth in Regional Workforce
East of England	151,800	144,900	-4.5	1.0
East Midlands	125,100	129,300	3.4	-0.3
London	228,100	226,500	-0.7	1.7
North East	78,900	81,900	3.8	0.4
North West	220,900	220,600	-0.1	-1.2
South East	239,900	240,100	0.1	0.7
South West	162,000	159,000	-1.9	-0.1
West Midlands	163,000	158,000	-3.1	-0.4
Yorkshire and The Humber	160,800	169,400	5.3	-0.3
England	1,530,400	1,529,700	0.0	0.3

Source: Annual Business Inquiry employee analysis 2008 (SIC 2007)

5.5 Health Employment by Local Authority

Table 7 shows the numbers of health sector employees (latest 2008 estimates SIC 86) by Local Authority. The high concentrations reflect both population and regional centres for specialist services.

Within Yorkshire and The Humber, Sheffield contains 17% of the total health sector workforce, providing care to 10% of the resident population. North Yorkshire, however, has only 5% of the workforce, providing care to 11% of the resident population.

7. Health Sector Employees by Local Authority, 2008

Local Authority: county/	86 : Human he activities	Population Estimates		
unitary	Data	%	Data	%
Barnsley	5,600	3	225,900	4
Bradford	16,300	10	501,700	10
Calderdale	4,200	2	201,800	4
Doncaster	13,000	8	291,600	6
East Riding of Yorkshire	7,800	5	335,000	6
Kingston upon Hull, City of	9,500	6	258,700	5
Kirklees	9,200	5	403,900	8
Leeds	26,100	15	770,800	15
North East Lincolnshire	7,000	4	158,200	3
North Lincolnshire	4,600	3	160,300	3
North Yorkshire	9,100	5	599,200	11
Rotherham	7,200	4	253,900	5
Sheffield	29,300	17	534,500	10
Wakefield	10,600	6	322,300	6
York	9,900	6	195,400	4
Total	169,400	100	5,213,200	100

Source: Annual Business Inquiry employee analysis 2008 (SIC 2007)

5.6 Ratio of Health Establishments and Employees

Table 8 shows the ratio of health establishments and employees to the region's resident population. A high ratio could be indicative of easier access to services and regional variations in health system structures. This table is subject to future debate.

Within Yorkshire and The Humber there is 1 health employee for every 31 people and 1 health establishment for every 1,303 people. These figures can vary dramatically within the region ranging from 1 employee to every 18 people up to 66 people and 1 establishment for every 977 people up to 2,018 people. Please refer to Appendix 2 for a subregional analysis.

8. Ratio of Health Establishments and Employees to Resident Population, 2008

	Population	n			
	Mid Year 2008 Estimates	%	Ratio of 1 Health Data Unit to Resident Population	Ratio of 1 Health Employee to Resident Population	
East of England	5,728,700	11.1	1,219	40	
East Midlands	4,433,000	8.6	1,167	34	
London	7,619,800	14.8	1,003	34	
North East	2,575,500	5.0	1,288	31	
North West	6,875,700	13.4	1,127	31	
South East	8,380,100	16.3	1,048	35	
South West	5,209,200	10.1	1,108	33	
West Midlands	5,411,100	10.5	1,258	34	
Yorkshire and The Humber	5,213,200	10.1	1,303	31	
England Total	51,446,200		1,138	34	

Source: Annual Business Inquiry employee analysis 2008 (SIC 2007)

5.6.1 Impact of an Ageing population

By 2033 the proportion of the population aged over 50 years is projected to grow by 3.7%. With the current workforce estimates what will be the anticipated demand on the health sector?

Tables 9 and 10 detail the current ratio provision for the population aged 50 years and over and apply the current provision to projected population numbers. We acknowledge that there are far more sophisticated methods and models for forecasting but have included the following analysis as an indication.

For Yorkshire and The Humber, using latest estimates, there is currently 1 health establishment for every 445 resident population aged 50 years and over. Using population projections, and assuming there is minimal growth in the health sector, this ratio could increase to 1 establishment to every 595 people.

In terms of patient care, using the current estimates, there is 1 health employee to every 11 resident population aged 50 years and over. Again using the population projections, by 2033 this ratio will have increased to 1 employee for every 14 resident population.

9. Ratio of Health Establishments and Employees to Resident Population Aged 50 Years and Over, 2008

	2008 Population % 50 years and over	Ratio of 1 Health Data Unit to Resident Population	Ratio of 1 Health Employee to Resident Population
East of England	35.6	434	14
East Midlands	35.3	412	12
London	25.7	259	9
North East	36.1	464	11
North West	34.8	392	11
South East	35.3	369	12
South West	38.5	427	13
West Midlands	34.8	438	12
Yorkshire and The Humber	34.1	445	11
England Total	34.0	387	11

Source: Annual Business Inquiry employee analysis 2008 (SIC 2007)

10. Ratio of Health Establishments and Employees to Projected Population Aged 50 Years and Over, 2033

	Projected 2033 Population % 50 years and over	Ratio of 1 Health Data Unit to Resident Population	Ratio of 1 Health Employee to Resident Population
East of England	41.5	629	20
East Midlands	41.2	578	17
London	29.8	361	12
North East	40.7	576	14
North West	39.6	485	13
South East	41.5	521	17
South West	43.9	590	17
West Midlands	39.3	559	15
Yorkshire and The Humber	37.8	595	14
England Total	39.1	525	16

Source: Office for National Statistics Subnational Population projections (SNPP) for England, 2008

5.7 Health Establishments by Sizeband

In Yorkshire and The Humber, health establishments account for 8.8% of the total health establishments for England. In the region, health establishments account for 2.2% of all establishments.

11. Health Establishments by Government Office Region

	Health Data Units	Regional Percentage of England Health Units	Percentage of Health Units in Total Economy
East of England	4,700	10.4	1.9
East Midlands	3,800	8.4	2.2
London	7,600	16.8	1.9
North East	2,000	4.4	2.7
North West	6,100	13.5	2.4
South East	8,000	17.7	2.0
South West	4,700	10.4	2.1
West Midlands	4,300	9.5	2.1
Yorkshire and The Humber	4,000	8.8	2.2
England	45,200		2.1

Source: Annual Business Inquiry 2008 (SIC 2007)

Table 12 indicates the health sector is dominated by microestablishments. Within Yorkshire and The Humber, 65% of the total health establishments fall within the sizeband 1 -10 employees (throughout the regions this proportion ranges from 60% to 76%). The establishments in this sizeband will largely consist of medical and dental practices and other human health activities by independent, public and voluntary providers.

12. Size and Structure of the Health Sector compared to all sectors, 2008

	Data Units			Employees		
	Health	Health Sector Total		Health Sector		Total
	Data	%	Economy %	Data	%	Economy %
1-10 employees	2,600	65	83	10,300	6	20
11-49 employees	1,100	28	13	24,400	14	24
50-199 employees	200	5	3	18,800	11	24
200 or more employees	100	3	1	115,800	68	32
Total	4,000	100	100	169,400	100	100

Source: Annual Business Inquiry 2008 (SIC 2007)

5.8 Subsector Activity

In analysing data for the Skills for Health footprint Standard Industrial Classification (SIC) codes are used. The most recent SIC codes that have been developed are SIC 2007.

The industrial classification 86, 'Human Health', is made up of five subsectors that define the activities across the health sector. The definitions for each subsector can be found in the Glossary.

Table 13 further supports the analysis in Table 12 that the sector is dominated by the primary care providers in terms of establishments, i.e. dental and medical practices, but in terms of employee numbers, 71% of the workforce is employed within secondary care, i.e. hospital activities.

13. Health Sector by Activity, 2008

	Data Units		Employe	ees
	Data	%	Data	%
8610 : Hospital activities	500	13	119,500	71
8621 : General medical practice activities	1,400	35	15,400	9
8622 : Specialist medical practice activities	100	3	1,300	1
8623 : Dental practice activities	800	20	5,400	3
8690 : Other human health activities	1,100	28	27,800	16
Column Total	4,000	100	169,400	100

Source: Annual Business Inquiry workplace analysis 2008 (SIC 2007)

5.9 Public and Independent Sector

Healthcare is delivered through private and public providers, the public sector being a combination of NHS and Voluntary⁶.

Using annualised Labour Force Survey data we can estimate, in Yorkshire and The Humber, the independent sector accounts for 22% of the total healthcare workforce, of which 37% are employed in hospital activities. It is important to note that the percentages are not definitive as employees can work across both, if not all three, sectors.

14. Public and Independent Sector Profile

Yorkshire and The Humber	Indepen	Independent		Public		Total	
TOTASTILLE AND THE HUMBER	Data	%	Data	%	Data	%	
86.10 Hospital activities	13,618	8	87,603	53	101,221	62	
86.21 General medical practice	5,889	4	11,955	7	17,844	11	
86.22 Specialist medical practice	2,128	1	151	0	2,280	1	
86.23 Dental practice activities	5,693	3	1,563	1	7,256	4	
86.90 Other human health activities	9,119	6	26,592	16	35,711	22	
Total	36,447	22	127,864	78	164,311	100	

Source: Labour Force Survey 2009 4 Quarter Average

6

⁶ Definition as used in the Labour Force Survey

6 Workforce Characteristics

Key features

- The health sector is highly feminised 80% of the workforce are female compared to 50% in the local economy
- The total employed in age band 16-24 years is just over half of those employed in the local economy
- Part-time workers account for 45% of the workforce compared to 33% in the local economy
- Highly qualified 57% qualified to NVQ Level 4 and above compared to 32% in the local economy

6.1 Introduction

The following section breaks down the healthcare workforce to its component parts. The purpose of this is, where relevant, to highlight any differences when comparing to the workforce of the whole economy and the health sector in England.

6.2 Age Profile

The age profile of the existing workforce is essential to workforce planning when factoring in the demand for replacement.

The total employed in age band 16-24 years is just over half of those employed in the whole economy in Yorkshire and The Humber and in England. This is most likely due to the time taken to qualify for specialist roles.

15. Age Profile

	Yorkshire a	and The Humber	England		
	Health %	Whole Economy %	Health %	Whole Economy %	
16-24 years	9	15	6	13	
25-34 years	18	20	20	22	
35-44 years	29	25	28	25	
45-54 years	27	24	28	23	
55-64 years	16	14	16	14	
65 years and over	2	2	2	3	

Source: Labour Force Survey 2009 4 Quarter Average

6.3 Gender Profile

The health sector is a highly 'gendered' sector with the majority of roles being taken by women. Using the latest estimates from the Annual Business Inquiry we can see:

- Gender ratio: female 80%/male 20% compared to female 50%/male 50% in the local economy
- 45% of the workforce are part-time (throughout the regions this proportion ranges from 31% to 49%) compared to 33% in the local economy
- Of the part-time workforce (45%) only 4% are male

16. Gender and Employment Status Profile

	Yorkshire and The Humber				
	Health	%	Whole Economy	%	
Male Full-Time Workers	25,900	15	942,000	42	
Male Part-Time Workers	7,500	4	175,800	8	
Female Full-Time Workers	67,900	40	556,000	25	
Female Part-Time Workers	68,100	40	558,600	25	
Male	33,400	20	1,117,700	50	
Female	136,000	80	1,114,600	50	
Full-Time Workers	93,800	55	1,498,000	67	
Part-Time Workers	75,600	45	734,300	33	
Total	169,400	100	2,232,300	100	

Source: Annual Business Inquiry 2008 (SIC 2007)

6.4 Ethnicity Profile

There is a greater diversity of ethnicity in the health sector workforce than the whole economy. This is a pattern that is repeated across England

17. Ethnicity Profile

	Yorkshire and The Humber		England	
	Health %	ealth % Whole Economy %		Whole Economy %
White	93	94	85	90
Non-White	7	6	15	10

Source: Labour Force Survey 2009 4 Quarter Average

6.5 Highest Qualification Held Profile

The health sector is highly qualified with 57% of the health sector workforce of Yorkshire and The Humber holding qualifications equivalent to NVQ Level 4 and above (this proportion ranges from 57% to 65% throughout the regions). This is slightly lower than the average across the sector in England (60%) but significantly higher than the workforce across all sectors of the Yorkshire and The Humber (32%).

The differences in those qualified to Levels 2 and Levels 4 of Yorkshire and The Humber and the English health sector could be accounted for by the focus across the sector on developing assistant practitioners and the extended career opportunities that these roles create. The region still has a challenge however in that it has 3% of the sector that holds no qualifications at all.

18. Highest Qualification Held

	Yorkshire a	nd The Humber	England		
	Health %	Whole Economy %	Health %	Whole Economy %	
NVQ Level 4 and above	57	32	60	35	
NVQ Level 3	12	20	11	18	
NVQ Level 2	14	19	12	18	
Below NVQ Level 2	9	14	8	13	
Other qualifications	5	9	6	9	
No qualifications	3	7	3	7	

Source: Labour Force Survey 2009 4 Quarter Average

6.6 Major Occupation Group Profile

The majority of the workforce can be found in Associate Professional and Technical and Personal Services occupations. This is not surprising given the nature of the health sector.

Associate Professional and Technical include nurses, therapists and midwives etc. whilst Personal Service occupations include nursing auxiliaries, nursery nurses etc.

19. Major Occupation Profile

		hire and The Humber	ı	England
	Health %	Whole Economy %	Health %	Whole Economy %
1 Managers and Senior Officials	5	15	7	16
2 Professional occupations	14	12	17	14
3 Associate Professional and Technical	37	14	38	15
4 Administrative and Secretarial	15	11	14	11
5 Skilled Trades Occupations	1	11	1	10
6 Personal Service Occupations	21	10	18	9
7 Sales and Customer Service Occupations	0	8	0	7
8 Process Plant and Machine Operatives	1	8	1	7
9 Elementary Occupations	5	12	4	11

Source: Labour Force Survey 2009 4 Quarter Average

7 Skills Gaps, Skills Shortages and Provision of Training

Key Features

- 21% of health establishments report skills gaps in their current workforce
- The main areas of reported skills gaps are technical, practical or job specific skills and customer handling skills
- 85% of health establishments have provided training in the past 12 months
- 47% of the health sector workforce qualified to NVQ Level 4 and above report having received training in the past 13 weeks compared to 23% qualified to below NVQ Level 2

7.1 Introduction

The National Employers Skills Survey 2009 (NESS 2009) for England is the latest in a series of employer surveys conducted since 2003. The survey, from the UK Commission for Employment and Skills and its partners, provides robust and reliable information from employers in England on recruitment difficulties, skills deficiencies, and workforce development to help in the development of policy and influence actions to address skills issues.

In comparison with the previous surveys the NESS 2009 shows that there has been a marked increase in skills gaps across the health sector with the proportion of employers reporting skills gaps increasing from 16% to 22%. The proportion of employers reporting skills shortages has however remained stable at 4% and the proportion reporting vacancies has reduced from 24% in 2007 to 20% in 2009.

These findings are consistent with the changes across the labour market that are expected at times of recession, although it should be noted that those sectors with a strong public sector presence such as health have reported higher levels of activity around vacancies and recruitment than sectors dominated by the private sector. This may indicate that at the time of the survey the health sector may not have felt the full effects of the recession.

7.2 Skills Gaps and Shortages

Skills gaps are said to exist at an establishment when the employer indicates that staff at the establishment are not fully proficient at their jobs. The number of skills gaps refers to the number of staff not fully proficient.

Table 20 shows that skills gaps across Yorkshire and the Humber affect a slightly lower proportion of employers and employees than the average across the sector as a whole within England.

20. Establishments with Skills Gaps by Region

Region	% with skills gaps		
negion	Establishments	Employees	
East of England	23	6	
East Midlands	19	15	
London	18	5	
North East	21	5	
North West	23	3	
South East	23	13	
South West	25	10	
West Midlands	24	8	
Yorkshire and the Humber	21	7	
England Average	22	8	

Source: NESS, 2009 Base: Column 2 - All establishments and Column 3 - All employees

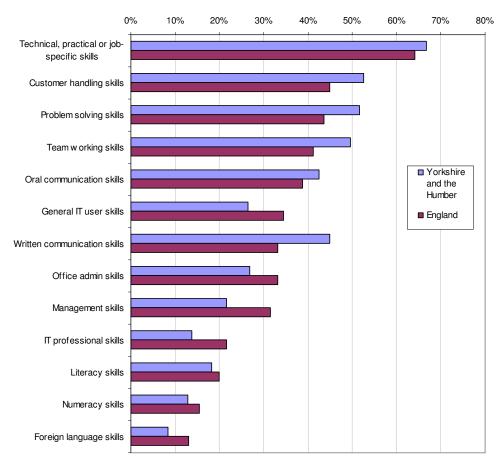
The 2009 National Employers Skills Survey for England⁷ shows that the main areas of reported skills gaps within Yorkshire and the Humber are:

- Technical, practical or job specific skills (67%)
- Customer handling skills (53%)

Chart 3 shows a comparison of the skills that health sector employers in Yorkshire and The Humber highlight as needing to be improved compared with the averages for the sector across England.

⁷ National Employer Skills Survey 2009, Data Site http://researchtools.lsc.gov.uk/ness/itab/default.asp

3 Skills That Need Improving



Source: NESS, 2009 Base: All Establishments

7.3 Vacancies within the Health Sector

The National Employers Skills Survey for England provides an overview of vacancies at a sectoral level including hard-to-fill vacancies and skills shortage vacancies.

The latest survey shows that a higher proportion of establishments in the health sector report vacancies and at a sectoral level the health sector reports the highest level of hard-to-fill vacancies.

Table 21 shows the proportion of employers reporting vacancies, hard-to-fill vacancies and skill shortage vacancies.

21. Vacancies, Hard-to-Fill Vacancies and Skill Shortage Vacancies

Health		Whole
	Sector	Economy
% of all employers reporting vacancies	20	12
% of all employers reporting hard-to-fill vacancies	7	3
% of employers reporting Skill Shortage Vacancies	4	4

Source: NESS, 2009 Base: All establishments

Table 22 shows the percentage of all employers in the health sector reporting vacancies at a regional level.

22. Employers Reporting Vacancies in the Health Sector

	% of Employers reporting vacancies				
	Health Sector	Whole Economy			
East of England	23	12			
East Midlands	23	11			
London	18	14			
North East	20	12			
North West	17	11			
South East	21	13			
South West	21	12			
West Midlands	19	11			
Yorkshire and the Humber	18	12			
England Average	20	12			

Source: NESS, 2009 Base: All establishments

The figures for hard-to-fill vacancies and skill shortage vacancies are not available at a regional level due to low baselines, however, an indication of vacancies at occupational level gives us an indication of high vacancy rates and specific occupations experiencing higher turnover or difficulties.

7.4 Jobcentre Plus Vacancies and Claimant Count

Based on 27 occupations, in May 2010, 905 people claiming Job Seekers Allowance (JSA) were actively looking for a job in the health sector. In the same period 1,279 health vacancies were being advertised at Jobcentres⁸ throughout Yorkshire and The Humber.

Local Authorities where vacancies significantly exceed the numbers of jobseekers are Barnsley, North Yorkshire and Wakefield. Please refer to the Table in Appendix 3.

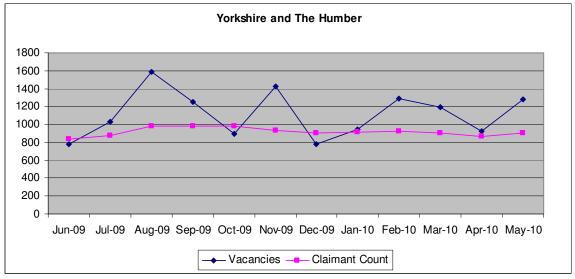
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⁸ All adverts for vacancies with an Agenda for Change salary band of 1-5 (inclusive) are fed directly to Jobcentre Plus. From February 2009 NHS Jobs updated the vacancy feed to Jobcentre Plus advisers to additionally include All Administrative and Clerical vacancies in pay bands 6 and 7 and all Estates and Ancillary vacancies in pay bands 6 and 7. www.nhsemployers.org/RecruitmentAndRetention/nhs-jobs/Pages/NHS-Jobs-and-Jobcentre-Plus.aspx

Occupations where the number of vacancies advertised exceeds those being sought by registered job seekers are Nurses and Pharmaceutical Dispensers. However, this is not a true reflection of the labour market as sought occupation figures only account for those currently registered as unemployed and does not take into account people who are in current employment in other sectors seeking entry into the health sector. Please refer to the Table in Appendix 3.

Chart 4 shows the number of Job Seekers looking for employment within the health sector remaining fairly constant. Health sector vacancies, however, have fluctuated throughout 2009/10 on almost a monthly basis.

4 Jobcentre Plus Vacancies Compared to Health Sought Occupations



Source: Nomis

7.5 Skills Supply

Key to the supply of skills across any sector is high quality training and development led by employer demand. If this is achieved there should be a greater balance between the demand and supply of skills. NESS 2009 shows that the health sector experiences high levels of training compared to the whole economy.

Table 23 shows that 85% of health sector establishments in Yorkshire and the Humber report that they have provided training for their employees in the preceding 12 months compared to 65% in the local economy.

23. Establishments Providing Training by Region

Region	% of Establishments that have provided Trainin (on or off the job) in the preceding 12 months Health Sector Whole Economy				
East of England	89	66			
East Midlands	88	67			
London	82	66			
North East	91	69			
North West	87	67			
South East	84	70			
South West	83	71			
West Midlands	82	68			
Yorkshire and the Humber	85	65			
England Average	85	68			

Source: NESS, 2009 Base: All establishments

7.6 Training in the Last 13 Weeks

There is also a general pattern across all sectors that more highly qualified staff receive more training than those with lower level qualifications. This pattern is seen across the health sector with Table 24 showing that those individuals qualified to NVQ Level 4 and above (47%) are almost twice as likely to report having received training in the last 13 weeks as those qualified to below NVQ Level 2 (23%).

Estimates at a regional level should be interpreted with caution due to sample sizes.

24. Percentage of the Health Sector Workforce That Have Received Training in the Last 13 Weeks Split by Qualification Level

	Yorkshire and The Humber %	England %
NVQ Level 4 and above	47	45
NVQ Level 3	36	33
NVQ Level 2	34	31
Below NVQ Level 2	23	25
Other qualifications	25	29
No qualifications	7	14

Source: Labour Force Survey 2009 4 Quarter Average

These figures can be broken down further to look at specific staff groups. In doing this we have taken the largest 25 staff groups across England from the Labour Force Survey 2009 and separated the staff groups into the following:

 those with a high qualification profile (where 75% of the people in the staff group are qualified to NVQ Level 4 and above)

- those with a low qualification profile (where at least 35% of the workforce are qualified to below NVQ Level 2)
- those with a mixed qualification profile

Table 25 shows the estimated percentage of the workforce in each staff group that have received training in the last 13 weeks. In general we can see that those with the highest qualification receive more training and those in clinical roles receive more training than those in non-clinical roles. This is not surprising given the regulatory requirements of clinical roles and the need for clinical skills to be maintained.

25. Percentage of the Workforce in Each Staff Group That Have Received Training in the Last 13 Weeks

	Yorkshire and The Humber %	England %
3212 Midwives	47	50
2215 Dental practitioners	42	48
2211 Medical practitioners	48	52
3222 Occupational therapists	63	51
3211 Nurses	49	47
3221 Physiotherapists	35	46
2112 Bio scientists and biochemists	75	44
2212 Psychologists	25	40
3214 Medical radiographers	35	46
1181 Hospital and health service mangers	62	43
3229 Therapists n.e.c.	39	40
6113 Dental Nurses	40	43
1183 Healthcare practice managers	19	31
6115 Care assistants and home carers	37	38
6111 Nursing auxiliaries and assistants	40	38
3218 Medical and dental technicians	54	41
6112 Ambulance staff (excluding paramedics)	29	32
4211 Medical secretaries	25	19
4131 Filing & other records assists & clerks	16	16
4215 Personal assists and other secretaries	44	26
4216 Receptionists	20	20
4150 General office assistants or clerks	15	20
9233 Cleaners domestics	9	12
9223 Kitchen and catering assistants	0	16
9221 Hospital porters	23	15

Source: Labour Force Survey 2009 4 Quarter Average

8 Projections of Future Levels of Employment in the Health Sector

Key Features

- The health sector across Yorkshire and The Humber is predicted to grow by 19,000 people between 2007 and 2017. These estimates were created prior to the economic downturn and tighter public spending and should therefore be treated with extreme caution
- 78,000 people are predicted to retire from the sector between 2007 and 2017,
 this represents an opportunity for employers to reshape their workforce

8.1 Introduction

Working Futures III 2007-2017⁹ is an econometric forecast of changes to employment and skills needs between 2007 and 2017. It seeks to model the impact of technological change, changes in government policy, economic conditions and other social drivers for the UK labour market, including the health sector.

These forecasts for future employment in the sector were produced prior to the recession which began in 2008. The effect of this and tighter public spending will almost certainly mean that these forecasts of expansion are now overstated. Set against a backdrop of tighter public spending, and the dominance in terms of employee numbers of the NHS across the sector, it is unlikely that the sector will experience any significant growth over the short to medium term.

The forecasts do however provide an interesting analysis of estimated numbers of workers that will retire between 2007 and 2017. These figures indicate that an average of 7,800 employees will leave the sector every year across the region. Employers may therefore wish to examine what opportunities this presents for them to reshape their workforce through systematic workforce and succession planning activities.

⁹ Working Futures 2007-2017, Institute for Employment Research, University of Warwick, December 2008

8.2 Changes in the Workforce by Main Occupational Group

The health sector across Yorkshire and The Humber is predicted to grow by 19,000 people (9.9%) between 2007 and 2017; this is lower than the 11.8% growth predicted for the health sector across England. However, the region and its employers will need to recruit an additional 97,000 people between 2007 and 2017 to fill new jobs and replace existing workers who will retire or leave the sector.

Table 26 provides an overview of the expansion and net requirement for workers across the sector by occupation groups. The largest expansion in absolute numbers of workers is predicted in the caring personal services occupations which includes nursing auxiliaries, nursery nurses etc. This group is predicted to increase by almost 16%. The largest expansion in percentage terms is found within the Corporate/Senior Managers Occupations at 34%. Again there should be caution here given the timing of the projections and the tighter fiscal environment across the sector.

26. Changes in the Workforce across the Sector by Main Occupation Group 2007 - 2017

2017					
	2007 (000s)	2017 (000s)	Estimated Growth 2007-2017 (000s)	Estimated Retirements 2007-2017 (000s)	Net Requirement* 2007-2017 (000s)
Corporate/Senior Managers	19	26	7	7	14
Health Associate Professionals (inc nurses, therapists, midwives etc.)	43	46	3	17	21
Caring Personal Services Occupations (inc nursing auxiliaries, nursery nurses etc.)	52	60	8	21	29
Health Professionals (inc medical and dental practitioners, pharmacists, psychologists etc.)	12	13	1	4	6
Science/Technical Professionals (inc Chemists Biomedical scientists, etc.)	3	4	1	1	2
Teaching and Research Professionals (inc special needs teachers, primary and nursery education teachers)	2	3	0	1	1
Business/Public Service Professionals (inc social workers, accountants etc.)	11	14	2	4	7
Administrative Occupations (inc admin officers, wages clerk, filing and records clerk, office assistants etc.)	12	12	0	5	5
Secretarial (inc medical secretaries, personal assistants, receptionists)	5	4	-1	2	1
All Other Occupations	36	35	-2	14	12
Total Workforce	195	215	19	78	97

Source: Working Futures III

9 Conclusion

This regional briefing has sought to provide readers with an overview of the main employment and skills trends in Yorkshire and The Humber health sector. We hope this regional briefing has been of use to you and has provided you with the insights you need.

The development of Skills and Labour Market intelligence is always an iterative process and we welcome the comments and suggestions of health sector employers and stakeholders. Please email LMI@skillsforhealth.org.uk should you wish to comment on these assessments or any other aspects of our work.

9.1 Skills and Labour Market Intelligence

Skills for Health believe that robust and reliable labour market intelligence is a vital part of the workforce planning and skills development process. We want to assist you in understanding the local, region and national picture of skills and labour market trends and give you the confidence to make informed decisions.

We seek to enhance the understanding of current and future skills needs across the sector through a varied range of outputs that are freely available on our website.

Our products and services are suitable for a wide range of users including healthcare employers and line managers, strategic health authorities, education commissioners and careers advisors. They include:

- Baseline Reports profiling health sector skills and labour market trends within the UK, England, Scotland, Wales and Northern Ireland, and the English regions
- Themed research to address gaps in workforce knowledge and promote new ways of delivering healthcare
- An online information tool allowing you to interrogate statistics on health sector employment, skills, labour demand, training and demographics
- <u>Future-orientate reports</u> and seminars exploring creative approaches to the emerging healthcare workforce issues
- Bespoke searches and reports on specific themes relevant to you as an employer.

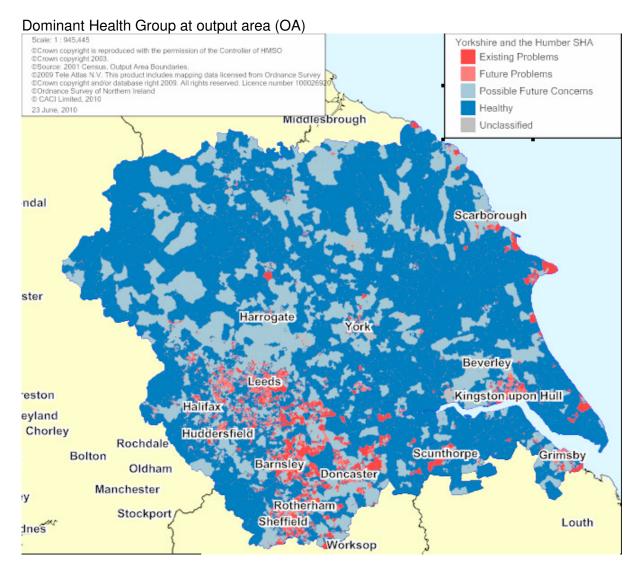
10 Appendix 1 Health Profile

10.1 Yorkshire and The Humber 2009 Health Acorn Population Profile

Не	ealth ACORN Group Profile	Profile	Data as % Yorkshire and The Humber	Data as % England	Index Avg = 100
1	Existing Problems	949,962	18.0	13.5	133
2	Future Problems	794,545	15.1	12.0	126
3	Possible Future Concerns	1,560,042	29.6	35.0	84
4	Healthy	1,925,962	36.5	38.5	95
	Unclassified	40,757	0.8	0.9	84
То	tal Population:	5,271,268	100.0	100.0	100

Health ACORN Type Profile	Profile	Yorkshire and The Humber	England	Index
Older couples, traditional diets, cardiac issues	35,459	0.7	0.4	159
2 Disadvantaged elderly, poor diet, chronic health	38,047	0.7	0.3	239
3 Vulnerable disadvantaged, smokers with high levels of obesity	57,149	1.1	0.6	180
4 Post industrial pensioners with long term illness	137,050	2.6	1.7	156
5 Deprived neighbourhoods with poor diet, smokers	160,474	3.0	1.7	177
6 Elderly with associated health issues	156,799	3.0	2.7	112
7 Home owning pensioners, traditional diets	101,371	1.9	2.2	87
8 Disadvantaged neighbourhoods with poor diet & severe health issues	263,613	5.0	3.9	127
9 Poor single parent families with lifestyle related illnesses	82,759	1.6	0.8	208
10 Multi-ethnic, high smoking, high fast food consumption	107,470	2.0	1.9	107
11 Urban estates with sedentary lifestyle & low fruit & veg consumption	230,779	4.4	2.6	167
12 Deprived multi-ethnic estates, smokers and overweight	199,972	3.8	4.0	95
13 Disadvantaged multi-ethnic younger adults, high levels of smoking	173,565	3.3	2.7	120
14 Less affluent neighbourhoods, high fast food, sedentary lifestyles	244,616	4.6	4.9	96
15 Affluent healthy pensioners dining out	137,495	2.6	3.8	69
16 Home owning older couples, high levels of fat & confectionery	382,437	7.3	7.4	97
17 Affluent professionals, high alcohol consumption, dining out	313,668	6.0	8.5	70
18 Low income families with some smokers	345,719	6.6	6.3	105
19 Affluent families with some dietary concerns	136,107	2.6	4.2	61
20 Young mobile population with good health and diet	180,235	3.4	4.3	80
21 Younger affluent, healthy professionals	179,032	3.4	5.0	68
22 Students and young professionals, living well	99,303	1.9	2.0	97
23 Towns and villages with average health and diet	465,384	8.8	8.1	109
24 Mixed communities with better than average health	419,818	8.0	7.8	103
25 Affluent towns and villages with excellent health and diet	582,190	11.0	11.4	97
Unclassified	40,757	0.8	0.9	84
Total Population:	5,271,268	100.0	100.0	100

10.2 Yorkshire and The Humber Dominant Health Group Map



Source: CACI 2009

11 Appendix 2 – Local Ratio of Health Employees and Establishments

11.1 Yorkshire and The Humber Ratio of Health Employees and Establishments

Within Yorkshire and The Humber there is 1 health employee for every 31 people and 1 health establishment for every 1,303 people.

At a subregional level this figure can range from 1 health establishment to every 977 people in York to 1 health establishment to every 2,018 people in Calderdale.

At a patient care level this ratio ranges from 1 health employee to every 18 people in Sheffield to 1 health employee for every 66 people in North Yorkshire.

	Population			Ratio of 1
	Mid Year 2008 Estimates	%	Ratio of 1 Health Data Unit to Resident Population	Health Employee to Resident Population
Barnsley	225,900	4	1,130	40
Bradford	501,700	10	1,254	31
Calderdale	201,800	4	2,018	48
Doncaster	291,600	6	1,458	22
East Riding of Yorkshire	335,000	6	1,117	43
Kingston upon Hull, City of	258,700	5	1,294	27
Kirklees	403,900	8	1,346	44
Leeds	770,800	15	1,542	30
North East Lincolnshire	158,200	3	1,582	23
North Lincolnshire	160,300	3	1,603	35
North Yorkshire	599,200	11	1,198	66
Rotherham	253,900	5	1,270	35
Sheffield	534,500	10	1,336	18
Wakefield	322,300	6	1,612	30
York	195,400	4	977	20
Yorkshire and The Humber	5,213,200		1,303	31

Source: Annual Business Inquiry 2008 (SIC 2007)

12 Appendix 3 - Health Vacancies and Claimant Count

12.1 Jobcentre Plus Vacancies and Claimant Count by Occupation, May 2010

Occupation	Jobcentre Plus Vacancies	Claimant Count - Sought Occupation
1181 : Hospital and health service managers	12	30
1182 : Pharmacy managers	1	0
1183 : Healthcare practice managers	20	10
2112 : Biological scientists and biochemists	20	65
2211 : Medical practitioners	22	15
2212 : Psychologists	3	30
2213 : Pharmacists/pharmacologists	36	10
2214 : Ophthalmic opticians	0	0
2215 : Dental practitioners	4	0
3211 : Nurses	829	70
3212 : Midwives	1	5
3213 : Paramedics	0	5
3214 : Medical radiographers	4	0
3215 : Chiropodists	0	5
3216 : Dispensing opticians	2	5
3217 : Pharmaceutical dispensers	51	35
3218 : Medical and dental technicians	17	25
3221 : Physiotherapists	6	15
3222 : Occupational therapists	9	15
3223 : Speech and language therapists	1	5
3229 : Therapists n.e.c.	6	55
4211 : Medical secretaries	37	30
8138 : Routine laboratory testers	2	25
6111 : Nursing auxiliaries and assistants	115	220
6112 : Ambulance staff (excluding paramedics)	0	30
6113 : Dental nurses	54	35
9221 : Hospital porters	27	180
Column Total	1,279	905

Data based on 27 defined occupations. Vacancies - a monthly count of vacancies notified to employment service job centres. Claimant Count – number of people claiming JSA and NI credits at Jobcentre plus local offices. This is not an official measure of unemployment.

Claimant Count rounded to nearest 5

Source: Nomis

12.2 Jobcentre Plus Vacancies and Claimant Count by Local Authority, May 2010

Local Authority: county/unitary	Jobcentre Plus Vacancies	Claimant Count
Barnsley	98	30
Bradford	90	75
Calderdale	36	40
Doncaster	34	55
East Riding of Yorkshire	41	50
Kingston upon Hull, City of	56	70
Kirklees	102	80
Leeds	179	140
North East Lincolnshire	25	25
North Lincolnshire	11	10
North Yorkshire	267	65
Rotherham	76	55
Sheffield	117	140
Wakefield	114	40
York	33	25
Column Total	1,279	905

Data based on 27 defined occupations. Vacancies - a monthly count of vacancies notified to employment service job centres. Claimant Count – number of people claiming JSA and NI credits at Jobcentre plus local offices. This is not an official measure of unemployment.

Claimant Count rounded to nearest 5

Source: Nomis

13 Appendix 4 – Regional Matrix

11 9	_								
Description	East of England	East Midlands	London	North East	North West	South East	South West	West Midlands	Yorkshire and The Humber
Tbl 1 - Health Profile (% of population)									
Existing Problems	10	14	8	30	20	7	10	17	18
Future Problems	8	13	18	16	14	7	7	14	15
Possible Future Concerns	38	33	30	29	34	44	38	35	30
Healthy	44	40	44	25	31	40	44	34	37
Unclassified	1	1	1	1	1	1	1	1	1
Population Projections 2008 - 2033 (millions)	1.4	0.9	1.5	0.3	0.6	1.7	1.1	0.7	1.1
Tbl 12 - Sizeband (% of Health Establishments)	00	00	70	00	67	00	00	07	0.5
1 -10 employees	66	63	76	60	67 05	66	60	67	65
11 - 49 employees	28	29	18	30	25	26	32	26	28
50 - 199 employees	4	5	4	5	5	5	6	5	5
200 or more employees	2	3	1	<5	2	1	2	2	3
Tbl 13 - Sub Sector Activity Establishments	40			45	40	4.0	40	40	40
Hospital activities	13	11	11	15	13	16	19	12	13
General medical practice activities	32	32	37	30	33	29	30	35	35
Specialist medical practice activities	2	3	4	<5	3	3	2	2	3
Dental practice activities	21 30	18	22	20	21	21	21	21	20
Other human health activities		37	28	30	31	30	28	30	28
% employed in the Independent Sector		22	29	19	18	28	24	20	22
Tbl 16 - Health Employment (%)	4.5	4.5	00	10	10	10	4.4	10	4.5
Male Full Time	15	15	20	16	16	16	14	16	15
Male Part Time	4	4	4	4	4	5	5	4	4
Female Full Time	41 39	41	49	43 38	42 38	40	38 43	42 39	40
Female Part Time Tbl 18 - Highest Qualification Held	39	39	27	30	30	39	43	39	40
NVQ Level 4 and above	57	57	G.E.	60	59	62	58	60	57
NVQ Level 3	9	12	65 7	13	12	10	13	11	12
NVQ Level 2	12	16	9	13	12	12	12	14	14
Below NVQ Level 2	11	8	9 5	8	8	8	9	8	9
Other Qualifications	8	5	10	5	5	6	5	4	5
No qualifications	4	3	4	1	4	2	2	3	3
Tbl 24 - % Training in last 13 weeks	7			<u>!</u>					
NVQ Level 4 and above	48	44	45	47	43	44	42	46	47
NVQ Level 3	31	29	35	33	36	35	31	26	36
NVQ Level 2	31	31	30	34	31	34	22	34	34
Below NVQ Level 2	19	26	32	16	26	31	26	18	23
Other Qualifications	28	30	34	34	33	28	23	23	25
No qualifications	13	5	17	0	22	14	14	16	23 7
Tbl 26 - Replacement Demand (000s)	10		.,			17	17		
Estimated Growth	26	18	36	6	25	43	23	29	19
Estimated Growth Estimated Retirements	77	60	110	40	107	121	82	79	78
Louinated Hetirements	1 1	00	110	70	107	141	02	13	70

14 Glossary

ABI

The Annual Business Inquiry is a business survey which collects both employment and financial information. The ABI is based on a sample survey so estimates are subject to sampling errors which need to be taken into account when interpreting the data

ACORN

A Classification of Residential Neighbourhoods. A geodemographic classification using census and other data to classify postcodes into neighbourhood categories. The classification has been developed by the marketing-data firm CACI

Footprint

All organisations in the health sector use Standard Industrial Classifications (SIC) Human Health Activities

In analysing data for the Skills for Health footprint SIC codes are used. The most recent SIC codes that have been developed are SIC 2007

The codes relevant to the Skills for Health Footprint are SIC code 86 – Human Health Activities which is comprised of the following areas:

- SIC 86.101 Hospital activities
- SIC 86.210 General medical practice activities
- SIC 86.220 Specialist medical practice activities
- SIC 86.230 Dental practice activities
- SIC 86.900 Other human health activities

Change in Data

The SIC 2003 classification included Nursing Home Activities (excluding homes for the aged) SIC 85.113 within Hospital Activities. This has always been an area where we have known there to be significant overlap with Skills for Care and Development in respect of responsibility for the workforce however it has never been possible to disaggregate this section of the workforce within the data that we hold.

The SIC 2007 classification now splits this sub classification into Medical Nursing Home Activities under the direct supervision of medical doctors (which falls within the skills for health footprint) and several other sub classifications which now clearly fall within the footprint of Skills for Care and Development.

The net result of this split is that it appears that our overall workforce numbers across the health sector have reduced when comparing to earlier documents but in fact this is not the case.

For a full overview of this issue please refer to the Skills for Health SIC 2007 Technical Paper which is available on the Skills for Health website.

GOR The nine Government Office Regions are the primary statistical subdivisions of England

Great Britain Refers to the whole of England, Scotland and Wales including offshore islands. It does not include Northern Ireland, the Channel Islands or the Isle of Man

LFS The Labour Force Survey (LFS) is a quarterly sample survey of households living at private addresses in the UK

NESS National Employers Skills Survey

OAs
Output Areas (OAs) are based on postcodes as at Census Day. The minimum OA size is 40 resident households and 100 resident persons but the recommended size was rather larger at 125 households. In total there are 165,665 OAs in England

The United Kingdom Standard Industrial Classification of Economic Activities (SIC) is used to classify business establishments and other standard units by the type of economic activity in which they are. For further information please visit www.statistics.gov.uk/statbase/Product.asp?vlnk=14012

SOC Standard Occupation Classification is used to define the workforce across the whole economy

The unit group structure i.e. occupation code of the major groups, are detailed in the table below. For example occupation codes beginning with 1 i.e. 1181 Hospital and health service manager will be incorporated under major group 1- Managers and Senior Officials, 2211 Medical Practitioners will be incorporated under major group 2 - Professional Occupations

Code commencing with:	Major Group	Example of Unit Groups
1	Managers and Senior Officials	1181 Hospital and health service manager 1183 Healthcare Practice Managers
2	Professional Occupations	2211 Medical practitioners 2215 Dental practitioners
3	Associate Professional and Technical Occupations	3211 Nurses, 3212 Midwives, 3213 Paramedics
4	Administrative and Secretarial Occupations	4211 Medical secretaries
5	Skilled Trades Occupations	5434 Chefs, cooks
6	Personal Service Occupations	6111 Nursing, auxiliaries and assistants 6112 Ambulance staff (excl Paramedics)
7	Sales and Customer Service Occupations	7212 Customer care occupations
8	Process, Plant and Machine Operatives	8138 Routine laboratory testers
9	Elementary Occupations	9221 Hospital porters

UK The United Kingdom is the nation state consisting of England, Scotland, Wales and Northern Ireland

15 Data Sources

Annual Business Inquiry

www.nomisweb.co. uk

CACI

CACI offer an unrivalled range of marketing solutions and information systems to local and central government and to businesses from most industry sectors.

www.caci.co.uk

Department of Health

www.dh.gov.uk

Labour Force Survey

The Labour Force Survey (LFS) is a quarterly sample survey of households living at private addresses in the UK. Its purpose is to provide information on the UK labour market that can then be used to develop, manage, evaluate and report on labour market policies. www.statistics.gov.uk/STATBASE/Source.asp?vlnk=358&More=Y

NOMIS

Official labour market statistics www.nomisweb.co.uk

Office for National Statistics

The Office for National Statistics (ONS) is the UK Government's main survey organisation and its main producer of official statistics.

www.statistics.gov.uk

Working Futures 2007 - 2017

Working Futures 2007-2017 is the latest in a long series of projections produced by IER in collaboration with Cambridge Econometrics (CE). It focuses upon the future patterns of demand for skills as measured by occupation. The results covered the National (UK) picture, as well as detailed sectoral and spatial results.

www2.warwick.ac.uk

UKCES

UK Commission for Employment and Skills - Home of National Employer Skills Survey for England.

www.ukces.org.uk