



Experience, Delivery and Impact of Physiotherapy Degree Apprenticeships - Summary Report

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1. Executive summary

Introduction/Scope of project

With the establishment of physiotherapy degree apprenticeships as a recognised way of training, the CSP want to understand the delivery, experience and impact of the pathway. This includes identifying examples of good practice and areas that could be further developed, informing recommendations that will support the sustainability and quality of the degree apprenticeship model.

Objectives

Skills for Health (SfH) have been commissioned to complete this work in two parts; firstly, a literature review and primary data collection from all three key participant groups - apprentices, employers and education providers - to understand what the current evidence says, identify gaps and inform key lines of enquiry. Secondly, an overview of existing data to identify the current evidence base relating to the physiotherapy degree apprenticeship.

Methodology

A literature review was carried out, focusing on degree apprenticeships literature published after 2020; relevant terms were entered into search engines (including Google, Google Scholar, and EBSCO Discovery Service). A logic model was also developed to demonstrate the relationship between activities, outcomes, and impacts raised in the literature.

Key lines of enquiry (KLOEs) were developed utilising available evidence and the logic model. These, alongside previous research (e.g. Nawaz et. al. (2024)) were then used to generate survey questions for apprentices and employers and a semi-structured interview schedule for education providers. Semi-structured interviews were also carried out with apprentices and employers to dig deeper into the themes highlighted in the survey.

A total of 127 apprentices and 97 employers completed the survey, and 11 interviews each were conducted with apprentices, employers, and education providers (33 interviews in total). Survey and interview results were analysed under thematic headings established by the KLOEs.

Secondary analysis of existing administrative data was also carried out to identify the current evidence base relating to the delivery and experience of physiotherapy degree apprenticeships.

Findings

Findings in relation to the KLOE thematic headings:

Widening Participation and Recruitment: the apprenticeship pathway was considered the only financially viable route to becoming a physiotherapist for many, with (61%) of apprentices indicating they would have been unlikely to train if the apprenticeship was not available. Before starting their apprenticeship, 95% of apprentices were working for the same employer, with evidence emerging that this may be beginning to change, with more apprentices being recruited externally. The variability in entry requirements and the recruitment process were also highlighted as a key challenge.

Support: Overall, the majority of apprentices strongly agreed or agreed that they felt supported by their line managers, workplace mentors, peers and the university. Less than half of apprentices (44%) agreed there was an effective partnership between them and their employer and their university, with 53% of employers satisfied with their partnership with the university. Dissatisfaction was strongly related to issues with communication. Apprentices reported a lack of understanding from employers regarding off the job requirements (45% disagreeing they were understood) with half (50%) of employers feeling that they weren't provided with sufficient information, support, and guidance.

Belonging: A similar proportion of apprentices agreed that they felt part of their organisation (60%) and their university (57%). Within the organisation, managing roles and identities was important, with apprentices often still being seen in their support worker role. At university apprentices also reported having a close relationship with their cohort but not engaging in wider university life.

Course: The majority of employers (55%) and apprentices (65%) were satisfied with the quality of teaching from the university. Placement capacity continues to be a significant issue for apprentices, employers and education providers, many of whom expressed difficulty finding or arranging suitable placements. There was a lack of variability in the types of placements, with only 2% of apprentices having undertaken role emerging or simulated environment placements. Employers had mixed feelings on whether the model is flexible enough to meet their needs, with a lack of ability to influence the apprenticeship structure, content, delivery and duration.

Funding and sustainability: Nine out of ten (89%) employers rated the funding of apprenticeship programmes through the apprenticeship levy as important. Issues of sustainability focused on the lack of placement tariff, funding costs associated with apprenticeships - including backfill, mentoring, supervision, travel, and subsistence.

Challenges and barriers: Work life balance for apprentices is challenging with nearly half (47%) unable to maintain a work/ life balance. All stakeholder groups raised that apprentices were not being consistently recognised as learners within

the workplace. There was also a perceived lack of guidance, as well as low awareness of the apprenticeship standard and the associated Knowledge, Skills and Behaviours.

Benefits and impacts: Nearly all apprentices (96%) believed the apprenticeship will improve their career prospects with 86% agreeing they are better at doing their job. Apprentices were also cited by employers to offer more stability, as many had previously worked in the organisation and were already settled. Apprentices were described by both employers and education providers as making well rounded physiotherapists who “hit the ground running.”

Recommendations

Based on the evidence from this work, five overarching recommendations are made; alignment of recruitment practices; support tailored to the needs of the apprentice; the mapping of current guidance to enable targeting and embedding; a new funding model to ensure the sustainability of apprenticeships, and more strategic management of apprentice opportunities and placements. A further 26 recommendations are made at a member, system, and policy level based on the findings in relation to each KLOE thematic heading.

Conclusion

Results present an overall positive picture of the experience and delivery of apprenticeships. They also highlighted substantial variability in almost every aspect of the apprenticeships from recruitment support, course delivery, organisational capacity and the employers' awareness of apprenticeships. A notable minority reported significant difficulties relating to one or more of the above. For the three stakeholder groups the main issues reported were, a lack of work-life balance for apprentices including being required to carry out substantial amounts of the course in their own time; employers highlighted a lack of guidance and the pressure an apprenticeship places on the wider team, and education providers spoke about the additional administrative burden posed by apprenticeships. All groups cited placements as an issue.

There is clear evidence of the positive impact of apprenticeships in widening participation and offering an alternative route into higher education. At an individual level, physiotherapy degree apprenticeships have a huge impact on the career development of apprentices, with nearly all apprentices believing the apprenticeship will improve their career prospects. Employers see apprenticeships as offering improved stability in the workforce, including improved retention, as well as helping to tackle skills shortages as part of workforce planning.

2. Literature Review

“An apprenticeship is a job that includes training”

Varetto (2017)

Degree Apprenticeships were introduced in 2015 with the aim of improving social mobility and tackling skills shortages, as well as providing a viable alternative route into high education Nawaz et al. (2022). The first physiotherapy degree level apprenticeships were launched in the 2018/19 academic year. The NHS Long-term workforce plan (2023) announced increases in the proportion entrants joining the AHP workforce via an apprenticeship route.

There is a growing body of literature on the experience and impact of degree apprenticeships as a whole, and an emerging evidence base on their application in health.

Current evidence on degree apprenticeships

In general, literature provides support for the positive role of degree apprenticeships in helping to address workforce shortages, widening participation, and offering an alternative route into higher education (Nawaz et al., 2022; University Alliance, 2025). The findings of several recent studies were reviewed.

Nawaz and Edifor (2024) provide a recent and comprehensive assessment of degree apprenticeships with survey responses from 1,073 degree apprentices, 148 employers, and 248 education providers. In addition to the survey, several focus groups were carried out to qualitatively explore findings. Employers highlighted the positive impact of degree apprenticeships on organisational performance, growth, employee retention, employee engagement and diversity. The quality of the delivery of apprenticeship was also high, with 80% reporting overall satisfaction in teaching. They also identified several areas for improvement, including support for applications, creating greater consistency in being able to manage work-life balance, meeting off the job requirements, clearer understanding of course requirements, integration into the university environment and the perception of degree apprenticeships.

Nawaz et al. (2022) carried out an extensive assessment of early work evaluating the impact of degree apprenticeships. Utilising a combined methods approach to systematically review and synthesize around 4,000 data points, to assess the impact of degree apprenticeships. Despite noting a lack of depth and breadth in the evidence base, their findings demonstrated that degree apprenticeships were contributing to their intended purpose of increasing productivity and social mobility. They were also shown to offer an alternative route into higher education.

Fabian et al. (2021) looks more specifically at the perspective and experience of degree apprentices in their methodological study, exploring support, belonging and challenges of their experience. They revealed three perspectives; aligned student-workers, who were balancing work and study effectively, and finding value in both; busy professionals, who already had consolidated their skills in the area and were using this degree apprenticeship to upskill; and what Fabian et. al. described as the 'cast adrift' who reported a lack of support in the workplace, feeling strongly that they had to take responsibility for their own development at work.

Wider Health apprenticeships

University Alliance (2025) published an exploration of barriers and enablers to widening apprenticeship participation for Allied Health Professionals (AHPs), nurses, and doctors in England. Analysis showed that apprenticeships provided an entry point into healthcare as well as a practical response to workforce challenges. The research also identified several constraints including financial and capacity, especially in clinical placements, as well as the need for better communication, stronger partnerships between employers and education providers, and improving public perceptions.

Cushen-Brewster et al. (2022) evaluated the experiences of a degree-level nursing apprenticeship. Communication was a key theme focusing on the communication about the apprentice role and how this was influenced by uniform. The value of the apprenticeship as an alternative pathway providing a more rounded approach to professional development. Apprentices proactively sought out learning opportunities, suggesting this was because they understood the mechanisms of the organisation, more than undergraduate nurses did. Additional support received by apprentices was also viewed as having a positive impact on their learning.

Allied health professions (including physiotherapists)

There is a growing body of literature on the experience and impact of degree apprenticeships overall, along with an emerging evidence base on their application in health. Literature assessing the impact of degree apprenticeships on allied health professionals (AHPs) and more specifically physiotherapists is limited. Therefore, both published literature (peer-reviewed and grey) as well as more locally available practitioner literature were included in the review.

Liddell et al (2023) evaluated the perspectives of five occupational therapy apprentices, three themes emerged from thematic analysis: support including peer and employer support, organisation and communication-emphasising the importance of clear communication and management of expectations, and effective induction processes.

Stevens and Nightingale (2020) explored motivations for developing degree apprenticeships for the radiography profession. With clear themes emerged around professional recognition, and conflicts between being 'educated' versus 'trained', and between vocational and academic components. Benefits were seen in relation to

recruitment and retention of staff through widening participation. Although there are concerns around apprentice pay and mentorship, as well as the lack of understanding around degree apprenticeship programmes.

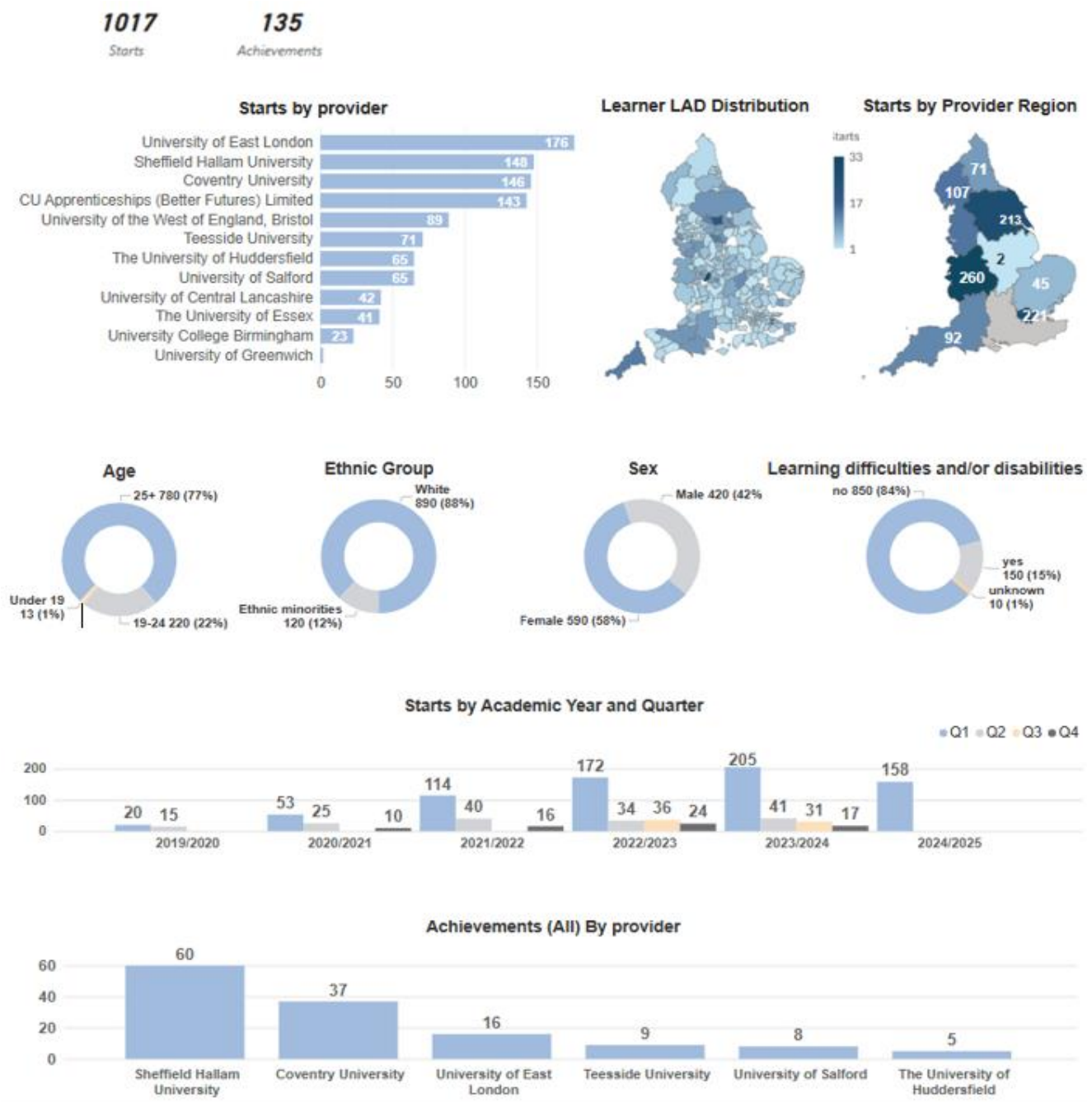
Longley (2022) explored the role of degree apprentices in supporting AHP workforce challenges in an acute NHS Trust. The main driver for implementing apprenticeships was found to be vacancy rates, with the benefits seen as developing a diverse, more resilient workforce, reflecting organisation values as well as improving retention. Challenges related to capacity to support, the loss of productivity of the apprentice whilst training, as well as mentor availability, workload pressures and resilience.

Wotton (2024) considered physiotherapy and occupational therapy students' perspectives on what makes a successful learner. Thematic analysis revealed five high level themes. Financial stability was an important factor in apprentices' motivation to apply, with apprenticeships providing a practical alternative to learning and offering an opportunity for career advancement/ The main barriers were associated with difficulties in maintaining a healthy work-life balance and managing academic workload. Support from peers and effective mentor relationships were identified as contributors to success, as well as individual resilience and confidence.

3. Data Overview

The number of physiotherapy degree apprentice learners have grown steadily, peaking at 294 starts in the most recent full academic year 2023/24 (Department for Education, 2025). There has also been a steady increase in the number of higher education institutes (HEIs) in England offering physiotherapy apprenticeships, with thirteen current providers (GOV.UK, 2025).

Physiotherapist Degree Apprenticeships Data Overview



Source: DfE, 2025

4. Methodology

To identify and understand the general views in relation to the how Degree Apprenticeships are being delivered, implemented, and experienced, a mixed methods design has been utilised for this project. A mixed methods design provides the benefit of balancing out some of the limitations in qualitative and quantitative approaches, providing a more comprehensive and granular evidence base (Tashakkori and Teddlie, 2021). The outcomes from which, alongside secondary data analysis, will form the basis of evidence-based recommendations to ensure the quality and sustainability of the physiotherapy degree apprenticeship.

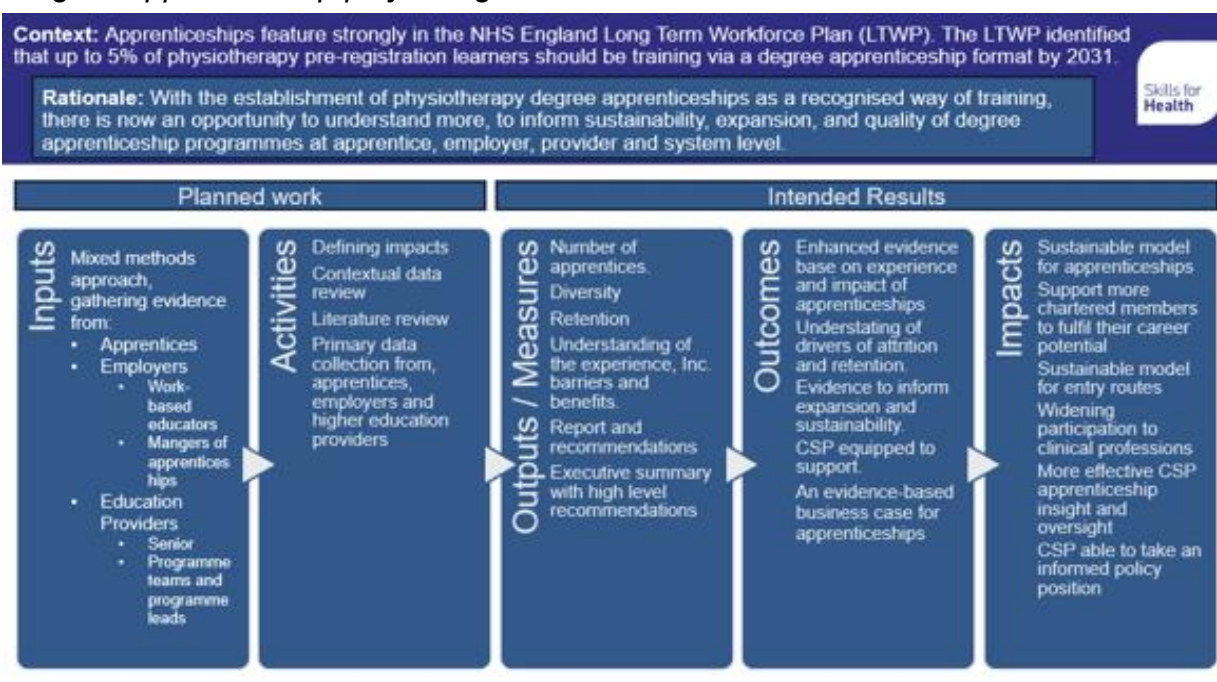
Literature review

Combinations of several search terms like, “physiotherapy degree apprenticeship”, “allied health professional degree apprenticeship”, were entered into search engines (including Google, Google Scholar, and EBSCO Discovery Service) in this review analysis. Search results were limited to degree apprenticeship. Given the relatively recent introduction of physiotherapy degree apprenticeships (academic year 2018/19) the review was restricted to literature published after 2020.

Logic model and key lines of enquiry

To demonstrate the relationship between activities, outcomes and impacts of this insight, a logic model was developed. A logic model sets out the relationships and assumptions, between what a project will do, and what changes it expects to deliver (Hayes et al., 2011). In considering the outcomes and impacts of physiotherapy degree apprenticeships, Kaufman's Learning Evaluation Model was utilised (Kaufman and Keller, 1994).

Degree Apprenticeship project logic model



Key lines of enquiry (KLOE) and associated sub-themes were developed utilising the existing literature on the delivery of Degree Apprenticeships, alongside the project requirements to develop recommendations to ensure the sustainability of Degree Apprenticeships into the future.

KLOEs and associated sub-themes

Themes	Sub-themes	Apprentices	Employers	Education providers
Widening Participation and Recruitment	Why do apprentices train via the apprenticeship route?	○	○	○
	Do degree apprenticeships provide an alternative route to higher education?	○		
	What did apprentices do before?	○	○	
	What is the balance of new recruits to existing employees?		○	○
	How are apprentices recruited?		○	
	What are the entry requirements for apprentices?		○	○
Support and guidance	Is there sufficient support from line managers, workplace mentors and peers?	○		
	What is the experience of the partnership between apprentice, employer, and education provider?	○	○	
	Is there sufficient support for work-based learning?	○	○	
	Is there sufficient information and guidance?	○	○	
	Are apprentices able to access health and wellbeing support?	○		
	What support would have helped?	○	○	
Belonging	To what extent do apprentices feel part of their organisation?	○		
	To what extent do apprentices feel part of the university?	○		○
	To what extent is learning a continuation of work?	○	○	
	To what extent are teaching practices inclusive?	○		○
Course	How well is the standard of university teaching rated?	○	○	
	Is the apprenticeship induction sufficient?	○	○	
	Are courses designed around apprentices?	○		○
	Is there sufficient placement capacity?	○	○	○
	What is the best placement model?	○	○	○
	What makes work-based learning work well?	○	○	
	To what extent is the curriculum aligned with the workplace context?	○	○	
	To what extent are employers involved in programme design?		○	○
Funding and Sustainability	Do apprentices experience any financial issues?	○		
	How important is the Apprenticeship Levy funding?		○	○
	Is the current Levy funding sufficient?		○	○
	Are apprenticeships sustainable?		○	○
Challenges and barriers	What is the work life balance like for apprentices?	○		
	Are apprentices sufficiently recognised as learners within the workplace?	○	○	
	Are apprentices readily able to apply their skills and academic knowledge?	○	○	
	Do employers understand their apprenticeship responsibilities?		○	
	Is there sufficient organisational capacity to support apprenticeships?		○	○
	Are there any areas for improvement?	○	○	○
	What sort of job planning is in place to support apprenticeships?		○	
Benefits and Impacts	How satisfied are apprentices and employers?	○	○	
	Do degree apprentices show higher rates of retention?		○	
	Do degree apprenticeships aid career advancement?	○	○	
	Are degree apprenticeships beneficial in tackling skills shortages?		○	
	Do degree apprenticeships attract talent?		○	
	Do degree apprenticeships help to meet organisational strategic goals?		○	
	Do apprentices have better clinical skills on qualifying compared to those from undergraduate degree routes?		○	

Design

For apprentices and employers, where the target group is bigger (just over 1,000 apprentice starts from academic year 2018/19 to quarter one 2024/25 (Department for Education, 2025)) a concurrent nested design was utilised. With a survey acting as the primary method, followed by semi-structured interviews carried out to elaborate and provide additional context to emerging themes. As survey responses were collected, preliminary thematic analysis was conducted, identifying areas for further exploration.

For education providers, which represent a much smaller group, semi-structured interviews were utilised. Although semi-structured interviews are qualitative in nature, questions are asked with a predetermined thematic framework, reflecting the sub-themes identified as part of the KLOEs. Therefore, offering a structured approach, with the option to ask additional probing questions.

Questionnaire development

Sub-themes identified from the KLOE have been used to guide the development of the data collection methods. Questions developed in previous research and evaluation in the area have also, where relevant, been utilised or adapted including; Department for Education (2024) Degree Apprenticeship evaluation 2023; Fabian et. al. (2021) explorative study of degree apprentice viewpoints; Nawaz et. al. (2024) Degree Apprenticeship: Voices from the Frontline and Institute for Apprenticeships and Technical Education (2022).

Interviews

Interview schedules were developed using the preliminary survey findings. This enabled the interviews to be focused on areas which were highlighted as requiring further exploration.

Participant Overview

Three participant groups were identified as providing important perspectives, apprentices, employers, and education providers. In total, 242 responses were received to the survey, past and present apprentices were combined giving 127 apprentices responses, as were past and present employers, giving a total of 97 employer responses.

Apprentices Survey Respondent demographics

In our study of the apprentices currently completing their physiotherapy degree apprenticeship (64%) identified as female and (35%) identified as male, with majority (93%) identify themselves as white. A range of ages were represented with the youngest apprentice being under 21 and the eldest over the age of 61. This broadly reflects the overall demographic characteristics of physiotherapy degree apprentices.

Before starting their physiotherapy degree apprenticeship, most apprentices (72%) had completed a NVQ level 4 or above and (23%) had qualifications at NVQ level 3.

Survey Respondent demographics

The majority of employers identify as female (83%) whilst 12% identified as male. A range of ages were represented from 21-25, to over the age of 60. One in ten employers identified as white (90%).

Interview respondents

Eleven interviews were conducted with each group: apprentices, employers, and education providers (33 interviews in total).

The eleven education providers interviewed provided a good representation from the current thirteen providers. Eight of those interviewed were female and three were male.

The eleven employers and eleven apprentices interviewed came from a variety of geographic locations, offering a good spread across England. The majority were employed by the NHS; however, Community Interest Companies and Independent providers were also represented in both groups.

Analysis

The survey provides a valuable and robust dataset for understanding the physiotherapy degree apprentice experiences and impacts. Whilst there was wide representation from the apprentices, it should be noted that this sample is not representative of the entire physiotherapy degree apprentice population. To date 1,017 apprentices have started on a physiotherapy degree apprenticeship (Department for Education, 2025), of those, 127 have completed the survey, giving a 12.5% response rate. It should also be noted that the responses have not been weighted. There is not enough information available to estimate how many employers should be represented in the employer group. Descriptive analysis was carried out on survey findings, summarising the responses to questions in relation to the key lines of enquiry and sub themes by calculating measures including frequencies, percentages, and averages.

Interviews were analysed using a deductive thematic analysis approach, the KLOEs and associated sub-themes were used to guide (Braun & Clarke, 2006).

5. Results

This chapter sets out the results from all three key participants groups, apprentices, employers, and education providers. These were analysed under the thematic headings developed as part of the key lines of enquiry. When referring to apprentice or apprenticeship, this is used in direct reference to physiotherapy degree apprenticeships.

Widening Participation and Recruitment

Key lines of enquiry covered in this theme:

- Why do apprentices train via the apprenticeship route?
- Do degree apprenticeships provide an alternative route to higher education?
- What did apprentices do before?
- What is the balance of new recruits to existing employees?
- How are apprentices recruited?
- What are the entry requirements for apprentices?

Overview of survey findings

Apprentices overwhelmingly cited wanting to become a physiotherapist and professional development (99%) as the most important factors in deciding to enrol. Three in five (61%) apprentices indicated that they would have been unlikely to have trained as a physiotherapist if the physiotherapy degree apprenticeship was not available.

Eight out of nine apprentices (88%) had worked in their organisations for at least one year before starting their apprenticeship. Before starting their apprenticeship, nearly one third (32%) were physiotherapy assistants, with 19% assistant practitioners or in support worker roles, and 14% technical instructors. Nearly three in four (73%) apprentices had a qualification of NVQ level 4 or above before starting their apprenticeship.

The most common reasons given by employers for offering apprenticeships was to help staff develop their skills (65%) and a part of their retention / workforce development strategies (59%).

Nine out of ten employers (89%) stated that some, or all of their apprentices were existing employees working with physiotherapists in support roles. One in six (16%) employers stated that some or all of their apprentices were recruited externally, specifically to start an apprenticeship.

Qualitative Insights

Apprentices, employers, and education providers widely stated the primary reason for apprentices' participation was the financial feasibility. Further, most would not meet the traditional entry requirements of a degree programme. It was framed as the only viable pathway in the majority of instances, rarely as a choice between apprenticeship and traditional study. In this sense, the model was found to be widening participation – providing a route to individuals who otherwise would have no route into the profession. However, the vast majority of apprentices being existing physiotherapy support staff suggests more could be done to open up the route further, which may happen organically as employers reported moving to more external recruitment.

Reasons cited by employers for offering apprenticeships was development of the existing workforce, normally as part of workforce planning and the creation of a sustainable workforce.

In terms of entry requirements education providers cited variations in entry requirements - those who reported no distinction between entry requirements for apprentices and undergraduate students, those who has similar requirements but were flexible, and those who had considered ways of accrediting prior experience. Some employers raised requirements as being too stringently adherent to points-based academic requirements. Employers noted where they had tried to work with universities to include greater consideration of work experience.

Support

Key lines of enquiry covered in this theme:

- Is there sufficient support from line managers, workplace mentors, peers and the university?
- What is the experience of the partnership between apprentice, employer, and education provider?
- Is there sufficient support for work-based learning?
- Is there sufficient information and guidance?
- Are apprentices able to access health and wellbeing support?
- What support would have helped?

Overview of survey findings

Overall, the majority of apprentices strongly agreed or agreed that they felt supported by their line managers, workplace mentors, peers and the university. Within the workplace, apprentices felt most supported by other apprentices (82%) and least supported by colleagues within their team (69%). Over three in four (77%)

apprentices either strongly agreed or agreed that they felt supported by the academic staff in their university.

Nine out of ten employers (90%) were satisfied with their partnership with the apprentice. This reduced to just over half (53%) who were either very satisfied or satisfied with their partnership with the university. Less than half of employers were satisfied with communication from their training provider with one third either dissatisfied or very dissatisfied.

Half of employers (50%) did not feel that they were provided with sufficient information, support, and guidance. The most commonly cited additional information, support and guidance required by employers was work plans (60%), followed by how to supervise apprentices (55%).

Two thirds of apprentices (66%) felt they had sufficient information and guidance. Four in five apprentices (81%) who felt that they did not have enough information and guidance, cited the lack of information and guidance was regarding the time commitment required.

Nearly half of apprentices (45%) disagreed that their employer understands the off-the-job requirements of their physiotherapy degree apprenticeship. With nearly half (47%) disagreeing that their employer was aware of the requirements of university academic work.

Over four in five (84%) apprentices agreed that they had access to the same wellbeing support as other staff members within their workplace. Seven in ten apprentices (70%) agreed that they knew who to contact if they had a welfare or wellbeing issue relating to their physiotherapy degree apprenticeship.

Qualitative Insights

Although generally positive, substantial variations in support was raised in the qualitative data. Many mentioned the variability in experience, either in relation to their own situation or that of their peers. Issues of communication were raised in relation to how much support apprentices felt they received from the university. Support from their employing organisation varied, as determined by the organisational knowledge of, and support for, apprenticeships (e.g. dedicated apprenticeship teams, apprenticeship specific training for line managers, integration of apprenticeship KSB within workforce planning, etc.). Support was most often needed in relation to workload management and related stress. Where apprentices had reported an issue, they had generally approached their line management. Instances were cited where support had been poor resulting in a substantial impact on wellbeing.

Almost all employers described the partnership between apprentice, employer, and education provider in terms of their contact; tripartite meetings featured heavily in these interviews, often in tandem with less frequent, ad-hoc contact usually to flag urgent issues. The quality of the partnership was framed as being dependent on communication. Most employers expressed uncertainty about what to expect from work-based learning, with some characterising their approach to apprenticeships as a work in progress, or otherwise still developing.

Education providers reported the partnership to be the foundational element that was most determinant of the experience for the apprentice. Where a high-quality partnership is in place, most issues can be addressed and risks mitigated, but where the relationship is strained, the ability of any individual member of the tripartite agreement to resolve issues is severely strained. Education providers explained their efforts to support employers through activities like mentor training.

Belonging

Key lines of enquiry covered in this theme:

- To what extent do apprentices feel part of their organisation?
- To what extent do apprentices feel part of their university?
- To what extent is learning a continuation of work?
- To what extent are teaching practices inclusive?

Overview of survey findings

A similar proportion of apprentices agreed that they felt part of their organisation (60%) or their university (57%), there was however a notable difference in those who strongly agreed, with 30% strongly agreeing they felt part of their organisation, compared to 13% who strongly agreed they felt part of their university.

Half of apprentices (49%) strongly agreed or agreed that their employer recognised them as a learner in the workplace. One third (35%) of apprentices either strongly disagreed or disagreed that they were recognised.

Qualitative Insights

Apprentices often felt a strong connection to their organisation (and often team), where many of them had substantial experience. However, there was sometimes a challenge associated with identity – in particular, whether or not an apprentice was seen as a learner within the workplace, and not merely staff. There was a direct relationship in perceived belonging, depending on how well the employing organisation worked to treat an apprentice as a learner in a transformative period.

Some employers expressed that they felt apprentices were very well integrated into their respective teams. Issues surrounding apprentice workplace integration are primarily tied to their status as a learner.

Travel, time, work, and family responsibilities were identified as barriers to connecting with the university experience. Apprentices, on the whole, did not see themselves as having the same university experience as undergraduates. They did, however, cite a close relationship with their cohort and other apprentices. Education providers felt that apprentices integrated well into the university, but highlighted that apprentice tended to group together within their cohort.

Course

Key lines of enquiry addressed by this theme:

- How well is the standard of university teaching rated?
- Is the apprenticeship induction sufficient?
- Are courses designed around apprentices?
- Is there sufficient placement capacity?
- What is the best placement model?
- What makes work-based learning work well?
- What sort of job planning is in place to support apprenticeships?
- To what extent are apprenticeships aligned with the workplace context?
- To what extent are employers involved in programme design?

Overview of survey findings

Two thirds of apprentices (65%) were satisfied with the quality of learning delivered by the university. With three in five employers (59%) satisfied with the quality of learning delivered by the university, and one third neither satisfied nor dissatisfied.

Three in five (59%) apprentices were satisfied with the amount of learning and feedback on progress. Although most apprentices (57%) agreed that the unit/module delivery adequately prepared them for assessment modules, nearly a quarter (23%) disagreed.

Only one in four (25%) apprentices said that they had received an induction from their employer. Nine in ten (93%) apprentices said they had received an induction from their university. Seven in ten (69%) employers said line manager / mentors had received some form of induction prior to the apprentice starting their training.

Nearly half (46%, and 59% of those who reported having been on a placement) of apprentices had been on placement within their own trust, with an additional 3% completing placement within their own department or team.

Three in five (59%) of apprentices who had been on a placement) apprentices agreed that it was easy to secure a suitable placement. However, three in ten (29%) disagreed. Less than half of employers (44%) agreed that they were sufficiently involved in organising the physiotherapy degree apprentice's placements.

The vast majority of apprentices had undertaken a placement in a clinical environment with one student per educator (92%), with less than 5% having undertaken placements in simulated environments, role emerging environments or within the community.

Although most apprentices (59%) agreed that their work provided them with work-based opportunities to consolidate their learning, three in ten disagreed. Less than half of employers (48%) agreed that the amount of time spent in off the job training was sufficient to meet the apprentice's needs.

Two in five employers (40%) were satisfied, with a further two in five neither satisfied nor dissatisfied with the flexibility of learning to meet their needs. With over half of employers (51%) neither satisfied or dissatisfied with their ability to influence the structure, content, delivery and duration of the apprenticeship training, with one third dissatisfied. The most common thing employers would have liked changed being closer alignment of the curriculum with workplace practices (47%).

Qualitative Insights

Teaching quality received mixed reviews and was strongly associated with the quality of communication from the university (e.g. exam timings, course requirements, induction, etc.). Where apprentices spoke about course design, the focus was on aligning course content with the ability to be able to implement learning on the job. The apprentices found, whilst helpful, some key issues were the overwhelming amount of information and the burden of the KSB logbook.

Placement capacity was an issue highlighted by nearly all apprentices. Several apprentices mentioned lack of support for placements from their employers and providers, with apprentices not knowing where to start. Others mentioned the lack of internal provision in terms of breadth, and with a lack of external links or resource to trade in reciprocal agreements. The lack of a systematic approach was evident, whilst there was evidence of improvement, apprentices who had managed to get their desired placements described themselves as 'lucky'.

Employers expressed broad satisfaction with the quality of learning; sentiments included: "brilliant", "really good", "great", and "enthusiastic". For some, however, problems with communication marred their perception of the quality of teaching. There was a general lack of employer involvement with course design. All employers discussed placement capacity, most discussing the value of reciprocal agreements. Employers also spoke of the different practices of education providers and

increasing involvement with placement management, some mentioned the positive role of placement coordinators. Some expressed that the tariff was a key driver of placement capacity struggles.

In interviews, education providers noted the substantial work that goes into assuring compliance with the apprenticeship standard and meeting the specific compliance requirements of Ofsted. Most education providers reported that employers had minimal input on the course structure. Exceptions did exist, such as where the course was new to the university. Inductions were considered broadly sufficient with some gaps, highlighting that these were normally available for apprentices and mentors, rather than line managers or others responsible for apprentices. In terms of placements, education providers raised the administrative challenge of arranging placements even when capacity is “sufficient”, and challenges with tariff and geography. It was also argued that currently the most attractive placement opportunities are clinical placements in NHS organisations, resulting in other significant alternatives being underutilised, such as non-clinical, leadership and research.

Funding and sustainability

Key lines of enquiry addressed by this theme:

- Do apprentices experience any financial issues?
- How important is the Apprenticeship Levy funding?
- Is the current Levy funding sufficient?
- Are apprenticeships sustainable?

Overview of survey findings

Nine out of ten (89%) employers rated the funding of apprenticeship programmes through the apprenticeship levy as very important or important.

Two thirds (66%) of employers stated that if the levy no longer existed, they would be unlikely to continue their involvement with physiotherapy degree apprenticeships.

Qualitative Insights

Apprentices most commonly struggled with travel and subsistence costs, especially during placement periods where the placement location was significantly further from home than their workplace. Other issues included some apprentices who had taken a pay cut in order to get a place on their apprenticeship. Employers and education providers noted there was a lack of parity with the undergraduate route. Undergraduates, being tariff carrying, lead to them being preferred by organisations

looking to take students on placement, meanwhile educators noted undergraduates cost less per student for universities to train than apprentices do. Employers and educators noted the need for an additional funding stream, or a more robust approach to ensure the sustainability of the model; currently, delivery of apprenticeships is bound to the terms of the levy and any change in policy or circumstance presents substantial risk.

Challenges and barriers

Key lines of enquiry addressed by this theme:

- What is the work life balance like for apprentices?
- Are apprentices sufficiently recognised as learners within the workplace?
- Are apprentices readily able to apply their skills and academic knowledge?
- Do employers understand their apprenticeship responsibilities?
- Is there sufficient organisational capacity to support apprenticeships?
- Are there any areas for improvement?

Overview of survey findings

Seven in ten apprentices cited experiencing challenges in their physiotherapy degree apprenticeship. Nearly half of apprentices (47%) disagreed that they were able to maintain a good work-life balance whilst undertaking a physiotherapy degree apprenticeship. With nearly half (48%) dissatisfied with their ability able to complete their physiotherapy degree apprenticeship in contracted hours.

Two in five (59%) apprentices were satisfied with the amount of practical skills they could apply in their role. Two thirds (65%) of apprentices were satisfied with the ability to apply their skills in the workplace, with seven in ten (72%) satisfied with their ability to apply academic knowledge in the workplace.

Four in five employers either strongly agreed or agreed that they were able to provide physiotherapy degree apprentices with opportunities to develop the required knowledge, skills, and behaviours in the workplace.

Seven in ten employers either strongly agreed or agreed that they had sufficient mentor capacity to provide appropriate support to physiotherapy degree apprentices, with one quarter disagreeing.

Qualitative Insights

Work life balance was the single biggest challenge raised by apprentices, without caveat. Evenings and weekends were required to keep up with course demands. Most apprentices had additional responsibilities such as childcare or other

dependents. Many framed their wellbeing and mental health as a necessary “sacrifice”, noting the apprenticeship was temporary – a stepping stone to better things, and for many, the only way to break through their career ceiling.

Some apprentices noted that they were mostly treated by their employing organisation as support staff and not learners. This resulted in apprentices commonly being given responsibilities at the level of assistant with no significant scaling commensurate with their learning.

Employers cited ambiguity around responsibilities, as well as a general lack of knowledge of the apprenticeship standards, the Knowledge, Skills, and Behaviours (KSB) within, and how these should be implemented when planning workplace tasks. This had apparent, and far-reaching consequences for the ability of apprentices to apply learning on the job. They also spoke of an ad hoc approach to apprenticeships, which was not linked to more formal workforce planning.

Benefits and impacts

Key lines of enquiry addressed by this theme:

- How satisfied are apprentices and employers?
- Do degree apprentices show higher rates of retention?
- Do degree apprenticeships aid career advancement?
- Are degree apprenticeships beneficial in tackling skills shortages?
- Do degree apprenticeships attract talent?
- Do degree apprenticeships help to meet organisational strategic goals?
- Do apprentices have better clinical skills on qualifying compared to those from undergraduate degree routes?

Overview of survey findings

Overall, two thirds of apprentices (66%) and three out of five (59%) employers were satisfied with the delivery of physiotherapy degree apprenticeship.

Nearly all apprentices (96%) agreed that since starting their physiotherapy degree apprenticeship their career prospects had improved. Nearly nine in ten apprentices agreed that since starting their physiotherapy degree apprenticeship, they were better at doing their job. Four out of five apprentices agreed that since starting their physiotherapy degree apprenticeship, their confidence at work had improved.

Four out of five (81%) apprentices said that they would continue working for the same employer as a registered physiotherapist, retaining the skills within the organisation.

Over three quarters of employers (78%) agreed that physiotherapy degree apprenticeships attracted individuals to the profession who would not have become physiotherapists without it, supporting organisational growth (75%) and enabling learners to make a positive impact on the organisation (76%).

Five out of six (85%) employers agreed that apprenticeships developed learners who were readily able to apply their knowledge and skills.

Employers see apprenticeships as helping to improve staff retention (55%), as well as contributing to new ways of working (45%) and helping to meet organisational goals (41%).

Qualitative Insights

Apprentices overwhelmingly said they would choose the apprenticeship route again – despite the concessions they had made. Employers expressed a preference among teams and line managers to deal with apprentices over undergraduate students due to the greater real-world experience, and the strong base of job-related skills common among the apprentice cohort when compared to traditional students. Most education providers believed that apprentices typically have stronger clinical skills immediately after graduating, compared to traditional route students. They framed this as being broadly reflective of their stronger clinical skill prior to, and during, the course - as a result of their workplace experience. Some made the connection that their prior experience made apprentices better students, reporting higher engagement with discussion, and a greater ability to translate theory into practice. Education providers highlighted that apprentices develop into well rounded professionals, with many achieving first class honours.

6. Conclusions and Recommendations

This chapter provides evidence-based conclusions and recommendations based on the findings from the surveys and interviews

Based on the evidence from this work, **five overarching recommendations are made:**

1. Alignment of recruitment practices.
2. Support tailored to the needs of the apprentice.
3. The mapping of current guidance to enable targeting and embedding.
4. A new funding model to ensure the sustainability of apprenticeships.
5. More strategic management of apprentice opportunities and placements.

A further 26 recommendations are made at a member, system, and policy level based on the findings in relation to each KLOE thematic heading.

Recommendations are made at the employer (operational / delivery level), system (employing organisation level), education provider and governmental level (policy). Some recommendations are made for CSP to coordinate, influence and embed at different levels. We expect that most, will require the cooperation of individuals at different levels within the employers and education providers.

Widening Participation and Recruitment

When asked why apprentices train via the apprenticeship route, there was a high level of commonality across apprentices, employers and education providers. The apprenticeship pathway was considered the only financially viable route to becoming a physiotherapist. This is supported by survey findings which suggest that three fifths of apprentices would have been unlikely to train if the apprenticeship route was not available. Apprentices were clear on their reasons for wanting to train; to become a physiotherapist, for personal development, career advancement, and to gain new skills.

“People who have gone into it are people that would not be able to just go and do a full time degree. They have got houses and they have got families, and they have got lives.”

Employer NHS

Evidence suggests that apprenticeships are meeting the aim of widening participation into the profession. Currently, the majority of apprentices recruited from the existing support workforce are more mature, and more likely to have financial (mortgage) and caring responsibilities. Before starting their apprenticeship 95% of

apprentices work for the same employer. However, qualitative evidence suggested there is likely to be a shift in the typical profile of apprentices being recruited internally, to more apprentices likely to be recruited externally.

Recruitment practices for apprenticeships vary, with some applying via expressions of interest, some applying formally (either internally or externally), and others being nominated by managers or teams. The interview process also differs with some apprentices being interviewed by their employer, followed by an interview with the university, while others are co-interviewed by both the university and the employer.

1. Recommendation - education providers and employers should carry out joint interviews for apprenticeships.

Entry requirements also vary considerably. Some providers made no distinction between apprenticeship and undergraduate routes in their entry requirements, while others had bespoke approaches to recruitment for each route. It was recognised that the typical academic requirements were frequently limiting opportunities for candidates with strong practical experience.

2. Recommendation - systems and education providers to increase the consistency in entry requirements for apprenticeship opportunities, recognising the value of prior work experience.

Some employers were in agreement and also discussed the lack of accreditation of prior learning for those training via the apprenticeship route, highlighting this as a key issue.

3. Recommendation - CSP and education providers to explore how Recognition of prior learning (RPL) is being used. Including the period in which it is recognised, and what action could be undertaken to increase the use of RPL.

Support

The majority of apprentices agreed that they felt supported by their line managers, workplace mentors, peers, and the university. Within the workplace apprentices felt most supported by other apprentices and least supported by colleagues within their team. However, less than half of apprentices agreed that there was an effective partnership/ relationship between themselves, their employer, and their university. One third disagreed that there was an effective partnership/relationship. Nine out of ten employers were satisfied with their partnership with the apprentice, reducing to just over half who were satisfied with their partnership with the university. One third of employers were dissatisfied with university communication specifically.

4. Recommendation - employers and education providers to strengthen partnership working, ensuring that employers are aware of education provider requirements.

Less than half of apprentices agreed that their employer understood the off-the-job requirements of their apprenticeship, although most employers felt they knew what was expected of them. Despite employers stating in the survey that they knew what their role was in relation to apprenticeships, in interviews, several employers expressed uncertainty about what to expect from work-based learning. There was, however, evidence of developing good practice in this area.

"Lack of guidance around on the job and also the lack of governance."

Employer NHS

"We've kind of developed some separate kind of FAQs for managers and we do run, we have meetings with them and before every cohort of apprenticeship start."

Employer NHS

Survey results showed that less than half of employers agreed that the amount of time spent in off the job training was sufficient to meet the apprentice's needs.

- 5. Recommendation - CSP and systems:** Clearer guidance on off the job-requirements, with the aim of increasing standardisation. Guidance to include clarity surrounding what counts towards the 1,000 hours of practice-based learning.
- 6. Recommendation - CSP** to consider whether there are circumstances where structured off the job learning, within an apprentice's workplace, could count towards the 1,000 hours of practice-based learning.
- 7. Recommendation - CSP and systems** to develop best practice guidance on the requirements of physiotherapy apprenticeships for different groups within employing organisations. Including management, direct line managers, teams working with apprentices, and mentors.

Employers most frequently requested additional information, support, and guidance on work plans, followed by guidance on how to supervise apprentices.

- 8. Recommendation - CSP and systems** to develop best practice guidance to support the supervision of apprentices.

Although apprentices report that they know where to access support services, qualitative evidence suggests that when the need for these services arises, they look to more informal mechanisms (such as their line manager) for support, rather than accessing organisational or university support services.

"I know about some well-being support. But like, for example, when I sent an e-mail to my manager about being stressed..."

Apprentice

9. **Recommendation - systems:** Line Managers and mentors provided guidance on the likely support issues, mechanisms of support and how to support apprentices, particularly during pinch periods, such as exams and placements. Evidence suggests that even when overwhelmed, apprentices approach line managers rather than support services.
10. **Recommendation - systems and education providers:** Support services are tailored to the specific needs of apprentices and apprentices are made aware of what services are available to them.

Belonging

Many apprentices have been working for their employer for a long time prior to their course, and subsequently most apprentices report strong connections with their organisation. Despite this, apprentices often struggle with being recognised as an apprentice, rather than in their previous role. A key aspect of belonging was the extent to which learning felt like a continuation of work. Apprentices noted significant variability here, depending on the available opportunities to apply the specific learning they had undertaken recently at university, within the workplace. However, some apprentices did not feel well integrated within their organisation, which was mostly seen as a temporary issue, characteristic of the relatively new pathway.

Apprentices reported that they did not feel like they belonged to their university in a traditional sense, and this was driven by their lack of time spent on campus and did not vary by delivery model of the curriculum (day-release, block release). This issue is further exacerbated by geography. Opting in to any extracurricular activities (like sports societies) or support functions that require physical participation (such as academic writing workshops) have a very high opportunity cost. Despite this, apprentices do report having good relationships with other members of their cohort, and a number of them report a close bond.

Course

The majority of employers and apprentices were satisfied with the quality of teaching from the university. This was also reflected in comments made in the apprentice and employer interviews. Although a notable minority -- around one in five apprentices, and one in ten employers -- did report dissatisfaction with the quality of teaching, highlighting again the variability in experience. Most apprentices were satisfied with the amount of learning, the feedback they were given, and that the unit/module delivery feedback adequately prepared them for assessment modules -- however, again, a notable proportion disagreed.

"The model delivery, the actual content is really appropriate. I think it's they've been able to bring that into their practice."

Employer NHS

Nearly all apprentices reported receiving an induction from their education provider and that they found the content of these inductions useful. Employers are much less likely to provide an apprenticeship induction. Most mentors had received some form of induction from the university prior to the apprentice starting their training.

11. Recommendation - systems: Routine use of workplace inductions for apprentices and their teams, to help with the embedding of apprenticeships and clarity around roles and expectations.

Placement capacity continues to be a significant issue for apprentices, employers and education providers, many of whom expressed difficulty finding or arranging suitable placements. Many expressed that finding placements was "challenging", "stressful", and a "nightmare". Some employers said they had capacity to provide sufficient breadth of clinical experience for the apprentices themselves, and provided all placements internally, whereas others were reliant on reciprocal agreements.

Trusts with the capacity to deliver placements internally may do this to avoid the considerable administrative challenge of looking outside their organisation. Smaller employers were worried about their ability to secure the necessary diversity of placements.

"The difficulty is those reciprocal arrangements, because it's complex and there's a lot of politics and tariffs"

Employer NHS

"As we start to go and we start to say what are you lacking, what kind of work experience haven't you had? Then we start to be a bit more focused with the with the placement provision, but it's very, very difficult. I mean, we'd always start trying to get one of these placements, but then at the end of it, sometimes we're just saying anything anywhere."

Employer Independent provider

Evidence indicated a possible risk that low placement capacity may result in low placement diversity, and consequently a limited experience of the physiotherapy profession.

Employers also spoke of the different practices of education providers, with less than half of employers agreeing that they were sufficiently involved in organising placements. Some employers and apprentices reported apprentices were arranging

placements themselves, although this was normally in response to concerns about finding a placement rather than seeking out opportunities to meet individual needs.

There is evidence of an improving situation, placement planning was found to work best when organisations had a dedicated employee responsibility for placements, individuals, teams, or partnerships who were working at a system level to identify requirements and plan placements.

“Our university was very poor at arranging placements and seemed to insist on students not arranging them themselves.”

Employer NHS.

So, managing that capacity and finding the numbers of placements that we need, the numbers of practice education providers that we need, the number of teams that can host apprentices. Placements has been a bit of a challenge, so being able to address that as a system in XXXX has really helped with that.

Employer NHS

12. Recommendation - education providers and systems: Where not in place, regional / more strategic management of placements, including employers having a specific lead for AHP apprenticeships. In order to maximise placement capacity, improve the breadth of available placements, and minimise the burden of excessive travel for apprentices. Ensuring these meet HCPC standards.

When employers were asked what they saw as the best placement model, most employers felt that the breadth of placements was important. When interviewed, both employers and apprentices experienced a preference for clinical placements in contrast to learning, education, or research. All apprentices who had completed their apprenticeship agreed that they had the necessary breadth of placement available.

13. Recommendation - CSP, systems and education providers: Develop and promote a broader range of non-clinical placements including education, leadership, research and role emerging.

When looking at the types of placement apprentices had experienced, the vast majority had been in a clinical environment with one or more apprentice per educator. Only 5% of apprentices had undertaken non-patient facing placements, and 2% in simulated or role emerging environments.

14. Recommendation - education providers to develop and place a greater focus on simulated placements to respond to challenges with placement availability.

Most apprentices agreed that their work provided them with sufficient opportunities to consolidate their university learning. When asked what makes work-based learning

work well, both employers and apprentices spoke of being able to put into practice what had been learnt in university, or to help fill any gaps in knowledge.

“We would look at whatever topics he was doing at university, whatever modules he was doing and we would then try and line up the off, the job training or the joint sessions to progress that learning.”

Employer NHS

When asked what they would change about the content, structure, delivery or duration, nearly half of employers stated they would like closer alignment of the curriculum with workplace practices. In response to the survey, employers did not express a clear view on their ability to influence the structure, content, delivery or duration of the apprenticeship training, with half of employers neither satisfied or unsatisfied, and one third or dissatisfied. During the interviews, some employers did talk about being involved in programme design, particularly those who were involved in the setting up of apprenticeships, those looking to change providers, and those working with local providers in the development of courses.

- 15. Recommendation employers and education providers:** further collaboration between employers and education providers on programme design, in particular, aligning programmes with workplace practices.

Funding and sustainability

Funding apprenticeships through the Apprenticeship Levy was seen as essential by both employers and education providers. When asked about other areas where funding was required, interviewees from both stakeholder groups noted placement tariffs, which applies to undergraduate but not apprentice placements. This was additionally raised in the employer survey responses. Undergraduates being tariff-carrying lends a competitive edge to students on the traditional pathway, as organisations are able to take advantage of the tariff, resulting in a preference to take these students on placement rather than apprentices.

“The apprenticeship placements, although they work in exactly the same way in practice to a standard undergraduate placement, they don’t attract any tariff.”

Employer NHS

- 16. Recommendation - Government:** Review of placement tariffs for apprentices at a national level.

Other areas where funding wasn’t considered as sufficient was in relation to backfill, both for the apprentice and for mentors, where the lack of protected time for mentors

was highlighted by employers. This would enable apprentices to become effectively supernumerary and their absence from the rota not disadvantaging the team.

“We can't use it [Levy] of course for backfill... this is the single biggest constraint on being able to expand our apprenticeship programmes further and if we look at the targets within the NHS workforce plan.”

Employer NHS

17. Recommendation - systems: Create protected time for clinical supervisors to enable effective mentorship.

When asked about the financial barriers experienced by apprentices, two main barriers were apparent. Firstly, apprentices who had dropped a Band to gain a place on an apprenticeship, this should have been resolved by the update to the Agenda for Change terms and conditions handbook in July 2024.

Secondly, many apprentices and employers reported not being able to pay for travel and subsistence to support the apprenticeship, which was creating financial hardship for some apprentices. Again, this issue was also inconsistent; there was a lack of parity between apprentices due to differing travel requirements, depending on campus locations, variable public transport costs (rail highlighted as the key driver of high travel costs), and the placement lottery.

“There hasn't been any funding from NHS England to support any of the non-academic costs.”

Employer NHS

“If the apprenticeship levy can be used to also support wrap around services for apprentices, it would make a world of difference.”

Employer NHS

18. Recommendation - Government: Review the position at a national level on Apprenticeship Levy to expand its use to cover costs associated with apprenticeships including backfill, mentoring and supervision, travel and subsistence.

In terms of sustainability, education providers raised the issue of the administration and regulation associated with apprenticeships, which is in addition to the requirements for undergraduate degrees. Additional requirements include those of Ofsted and the Education and Skills Funding Agency. These processes also do not align which further increases the burden.

- 19. Recommendation - Government:** Review at a national level the additional administration and regulation associated with degree apprenticeships, with the aim of streamlining and reducing these.

Challenges and barriers

Work life balance for apprentices is challenging with over half of apprentices disagreeing that they are able to maintain a work/ life balance. Four out of five wanted additional advice on guidance, stating did they did not have enough information on the time commitment. Work-life balance for apprentices is also widely recognised as an issue by employers and education providers.

The apprentices are juggling work, learning, and the administration associated with receiving learning on the job. This is further compounded by the increased likelihood that physiotherapy apprentices have additional responsibilities typical of later life and post-education adults, usually financial or care related. These challenges are additionally dynamic, and spike in severity during pinch periods, when an apprentice's work, education, or personal life require significantly more attention to manage than normal.

"The barriers would be the work life balance. I can't stress that enough... especially having a young family and juggling everything."

Apprentice NHS

"The apprentice degree is really hard, because they're working full time, they have got all the extra work they have got to do and they have got to do the teaching weeks and the exams and everything, and like they did the whole of anatomy in a week."

Employer NHS

- 20. Recommendation - systems:** Planning and structuring of apprenticeship roles to meet the legal requirement to ensure that apprenticeship learning is completed during working hours.

- 21. Recommendation - employers:** Offering flexibility and additional study time around pinch periods such as assignment and exams to improve work-life balance.

Half of apprentices surveyed believed they were recognised as learners within the workplace; three in five were positive on whether or not their work was a continuation of their learning; and over half were happy with their ability to apply their learning on the job. However, in interviews, all stakeholder groups raised that apprentices were not being consistently recognised as learners within the workplace, and notably, the issue was characterised by high variance.

There was a perceived lack of guidance on competencies for physiotherapy apprentices, due to low awareness of the apprenticeship standard and the Knowledge, Skills, and Behaviours (KSBs) set out within. This was framed as a potential driver of apprentices being inadequately seen as learners on the job.

"I don't get the warm fuzzy feeling that they even understand what the apprenticeship is (...) They've kind of just said, do these Band 3 competencies and work within that scope."

Apprentice

22. Recommendation - CSP and systems: Promote the embedding of the apprenticeship standard and support the development of guidance which links the KSBs to the development of more consistent workplace responsibilities and Scope of Practice.

23. Recommendation - CSP and systems: Promote the embedding of guidance and standards for the delivery of physiotherapy degree apprenticeships with the aim of establishing minimum standards for providing learning in the workplace.

Notably, employers have different interpretations of the requirements of apprenticeships:

"Apprentices, officially, they're not meant to do any learning at home. It's all meant to be done at work, whereas now they've changed it. So, the off the job training, initially we were meant to do 6 hours a week of new learning, and now they're saying that their study weeks and when they go on placements that covers it. So now we're not to do it anymore."

Employer NHS

"Tends to be one day university and then we encourage kind of a 20% on the job, but off the job, kind of role based learning, and then a three day normal, their normal role and to be eligible in a field you've got to be a physiotherapy assistant. So, it should be the university day, the off job learning day and then the three days as a physio assistant".

Employer Independent provider

Employers also mentioned the lack of a clear route through to Degree apprenticeship, with physiotherapy not having the equivalent of the 2+2 model available for nursing and other AHPs. Employers also saw benefit in a Master route for those with a first degree including sports scientists and sports therapists.

24. Recommendation - education providers: Look to develop a 2+2 model that uses the L5 Assistant Practitioner apprenticeship (part one) and a 'top up' degree (part two).

25. Recommendation - education providers: Further development of the apprenticeship route for those who already hold related first degree e.g. sports science and therapy.

In terms of job planning, employers spoke of both planning for apprentices at an individual level as well as organisational planning. Often, no planning was carried out regarding what posts were suitable for apprenticeships. Where organisational planning was in place, this was often in its infancy.

. “(...) percentage share. So, they look at all the teams and then they based on the size of their team and the number of senior staff each of the team is then allocated a percentage of students, which includes the degree apprenticeships”

NHS Employer

Benefits and impacts

Overall, two thirds of apprentices and three out of five employers were satisfied with the delivery of physiotherapy degree apprenticeship. There is also clear evidence of the positive impact of apprenticeships, with apprentices, employers and education providers seeing benefits in the apprenticeship model.

At an individual level, physiotherapy degree apprenticeships have a huge impact on the career development of apprentices, with nearly all apprentices believing the apprenticeship will improve their career prospects. In addition, four in five apprentices agree their confidence at work has improved, and nine in ten agree they are better at doing their job.

Employers see apprenticeships as offering improved stability in the workforce, including the potential to improve staff retention, as well as contributing to new ways or working, and helping to meet organisational goals. Qualitative findings highlighted their role in staff development, as well as enabling the development of training pipelines as part of workforce planning. It was consistently highlighted by employers was the ability of apprentices to “hit the ground running”, being readily able to apply their knowledge and skills.

"a very good understanding of the how the NHS works they... they hit the ground running when they when they graduate."

Employer NHS

Survey results also highlighted the strong positive views of employers for apprenticeships, enabling learners to have a positive impact within the organisation and supporting organisational growth. Apprentices were also seen as less of a “flight risk”, as they had previously worked in the organisation, and were settled in the organisation and local area. This was seen in contrast to reported high turnover in the Band 5 Physiotherapists from the undergraduate route. Although some employers reported that they did not have issues with Band 5 recruitment.

“I think they already come with a kind of keenness to stay, potentially or they're quite wedded to actually the areas that they think that they would like to go in to.”

Employer NHS

Education providers at several institutions highlighted that apprentices develop well rounded professionals, and (substantially) outperform those from the undergraduate route. They also noted apprentices committed to their studies and how tutors are able to learn from the apprentices' experiences, with one institution asking apprentices to develop their own case studies for teaching.

“(...) our apprentices who graduated this summer the vast majority of them got first class honours, but they said I'd never have, I couldn't have got into physiotherapy through traditional routes. So, a lot of them are coming at it later in life, but I'd been working as therapy assistant, enabled them to see that employment and that progression, which is obviously the whole idea of it.”

Education provider

26. Recommendation - CSP and education providers: Promote and publicise the benefits of physiotherapy degree apprenticeships.

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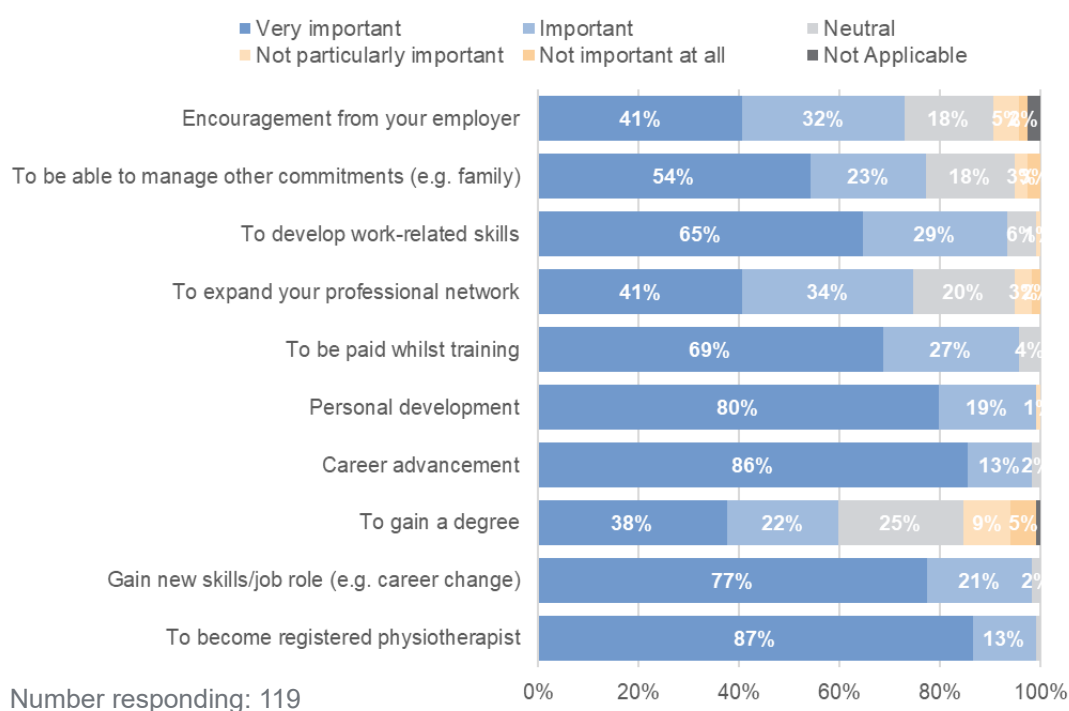
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8. Appendix – Summary of Survey Responses

Widening Participation and Recruitment

Why do apprentices train?

Question to apprentices: How would you rate the importance of the following factors in why you decided to enrol on a physiotherapy degree apprenticeship?



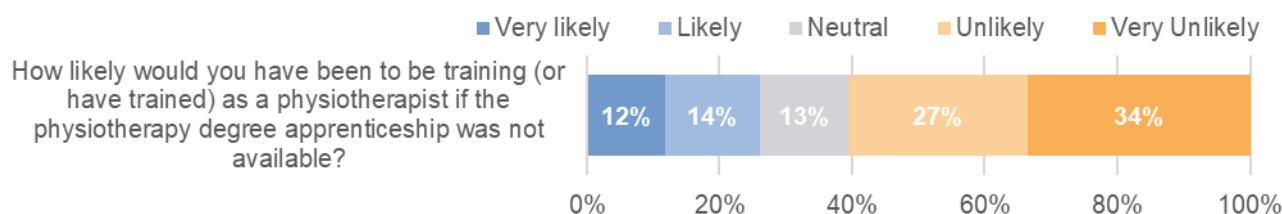
Why do employers offer apprenticeships?

Question to employers: Why does / did your organisation offer a physiotherapy degree apprenticeship?



An alternative route?

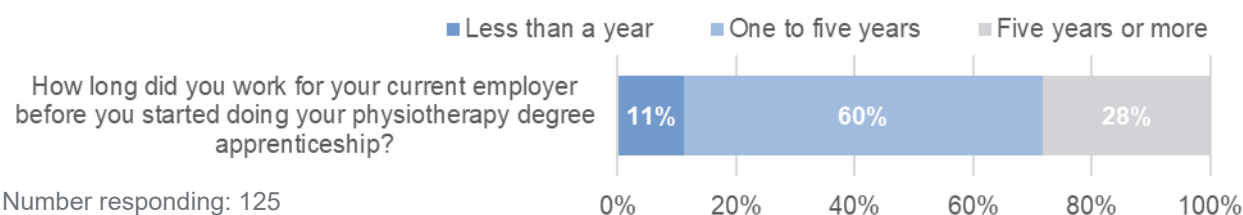
Question to apprentices: How likely would you have been to be training (or have trained) as a physiotherapist if the physiotherapy degree apprenticeship was not available?



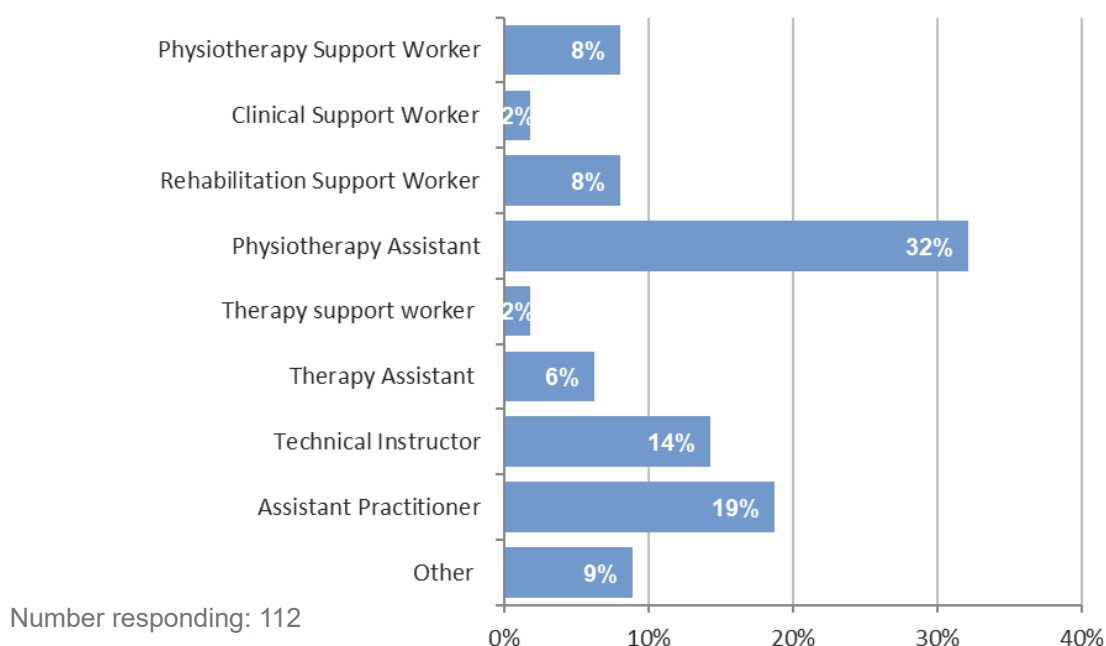
What did apprentices do before?

Immediately before starting the physiotherapy degree apprenticeship, 95% of apprentices were working for the same employer.

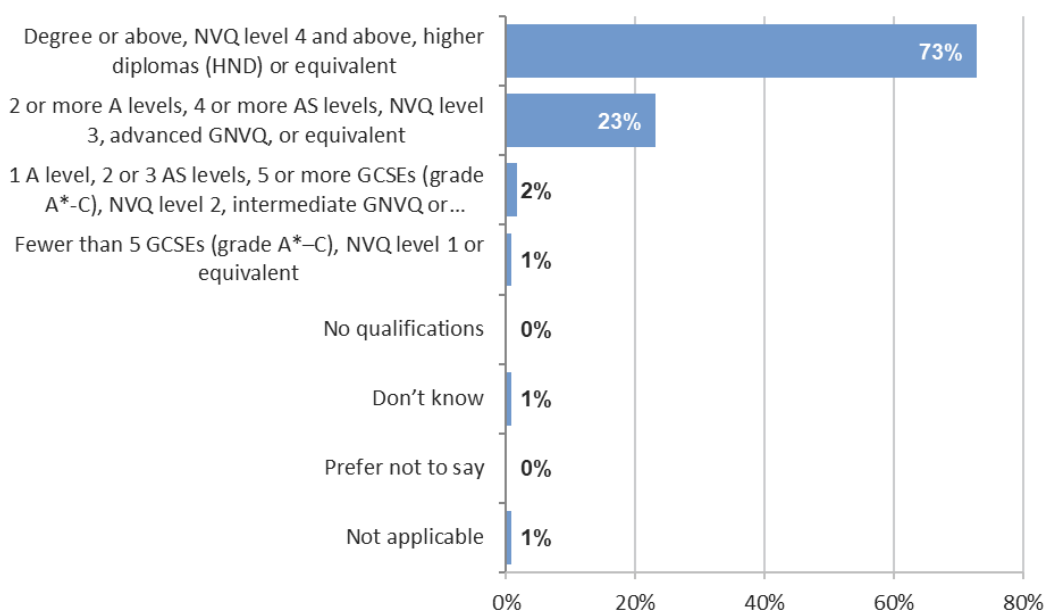
Question to apprentices: How long did you work for your current employer before you started doing your physiotherapy degree apprenticeship?



Question to apprentices: Which one of the following best describes your main role immediately before you started your physiotherapy degree apprenticeship?

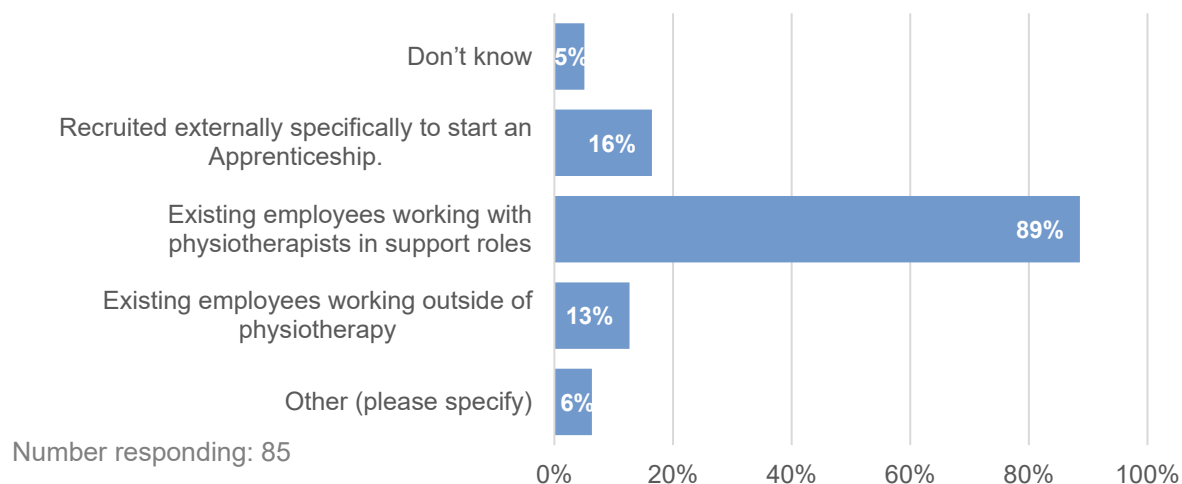


Question to apprentices: Before starting your physiotherapy degree apprenticeship what was the highest level of qualification you had achieved?

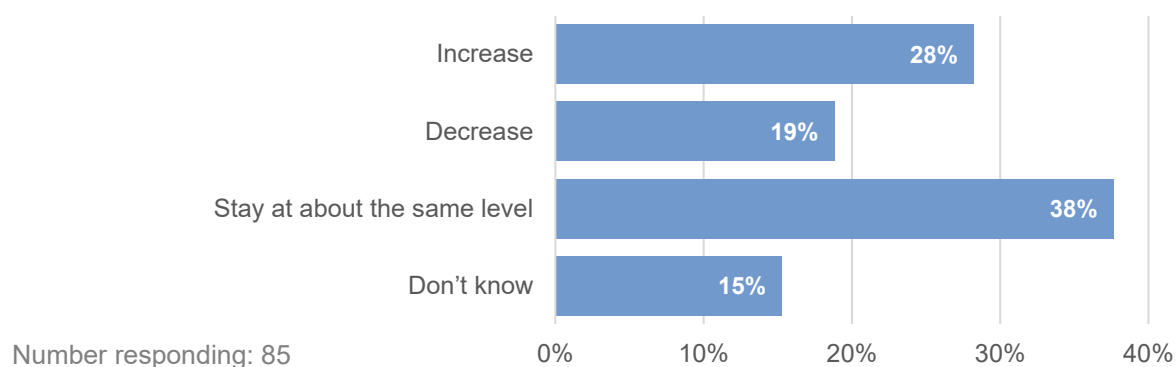


New recruits or existing employees?

Question to employers: Of the physiotherapy degree apprentices who are currently training / who were in training in your organisation were they (tick all that apply)



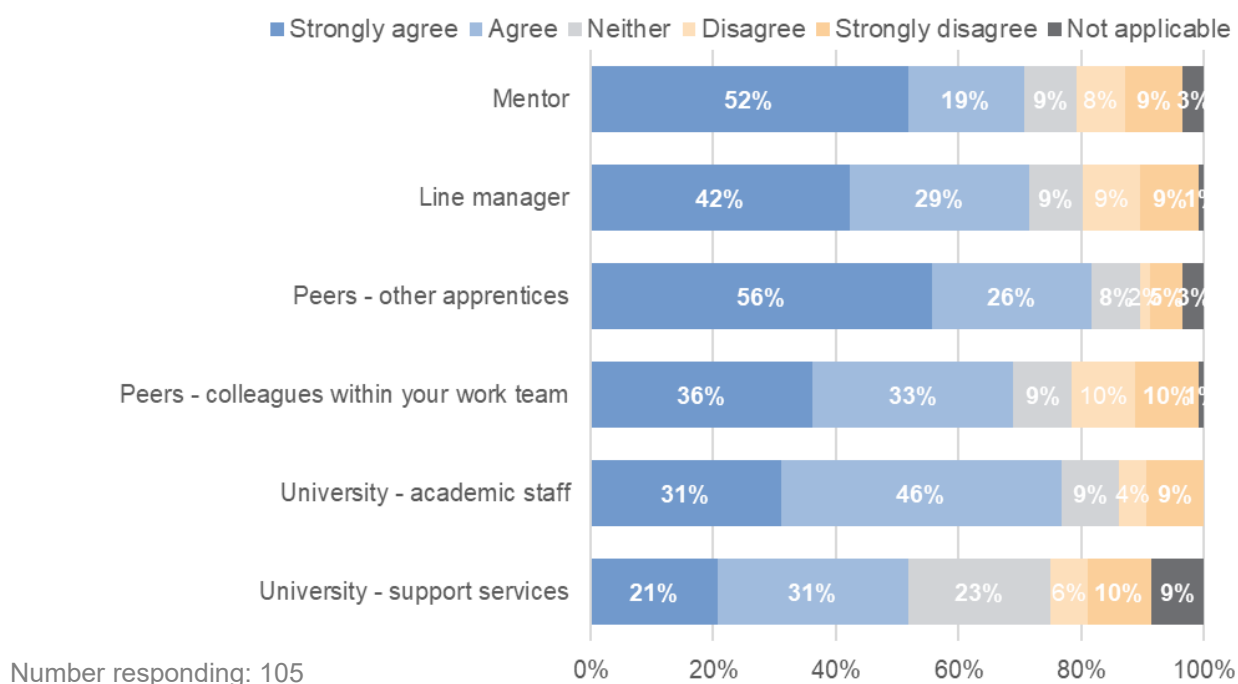
Question to employers: Do you expect the number of physiotherapy degree apprentices in your organisation over the next 2 to 3 years to:



Support

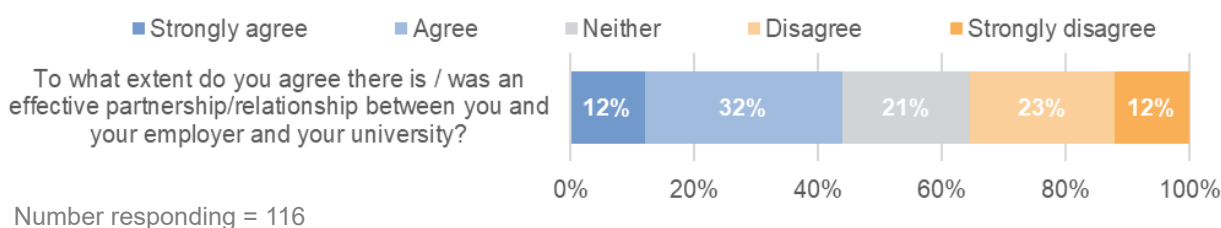
Support from line managers, workplace mentors, peers, and the university

Question to apprentices: To what extent do you agree that you felt supported during your physiotherapy degree apprenticeship, by your:

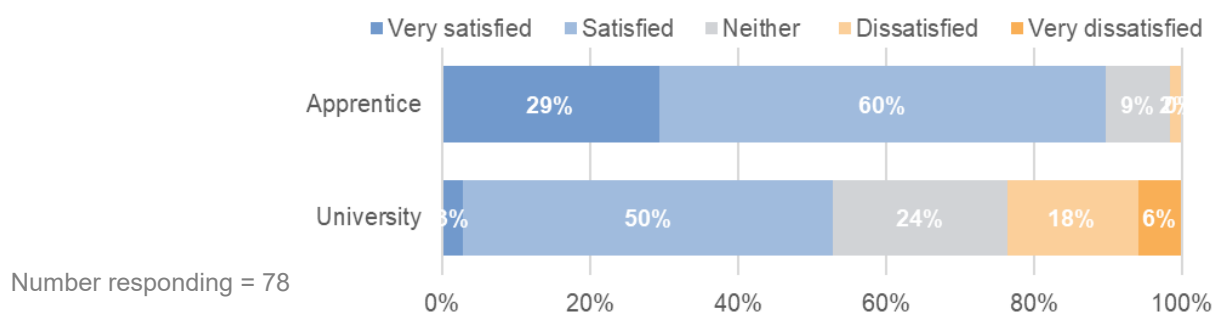


What is the partnership experience?

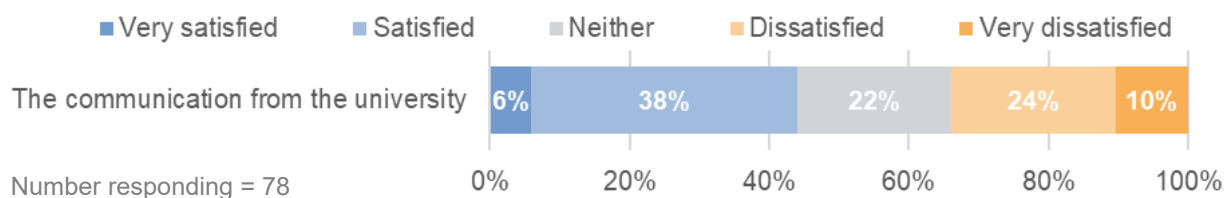
Question to apprentices: To what extent do you agree there is / was an effective partnership/relationship between you and your employer and your university?



Question to employers: How satisfied or dissatisfied are / were you with your partnership with the:

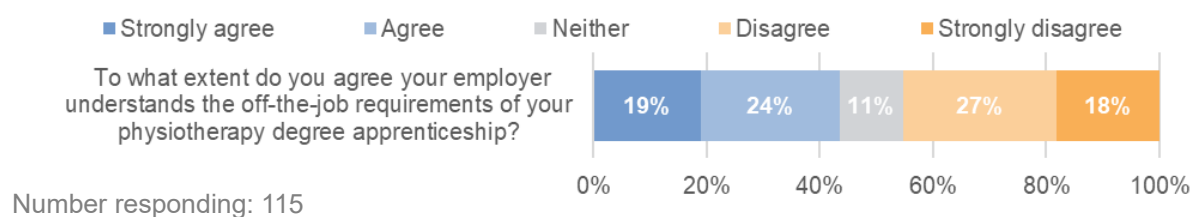


Question to employers: How satisfied or dissatisfied are / were you with the communication from the university?

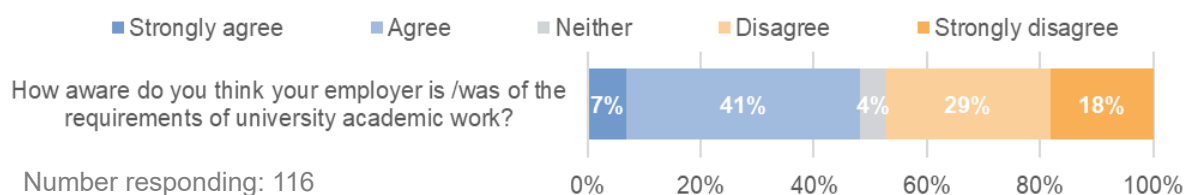


Support for work-based learning

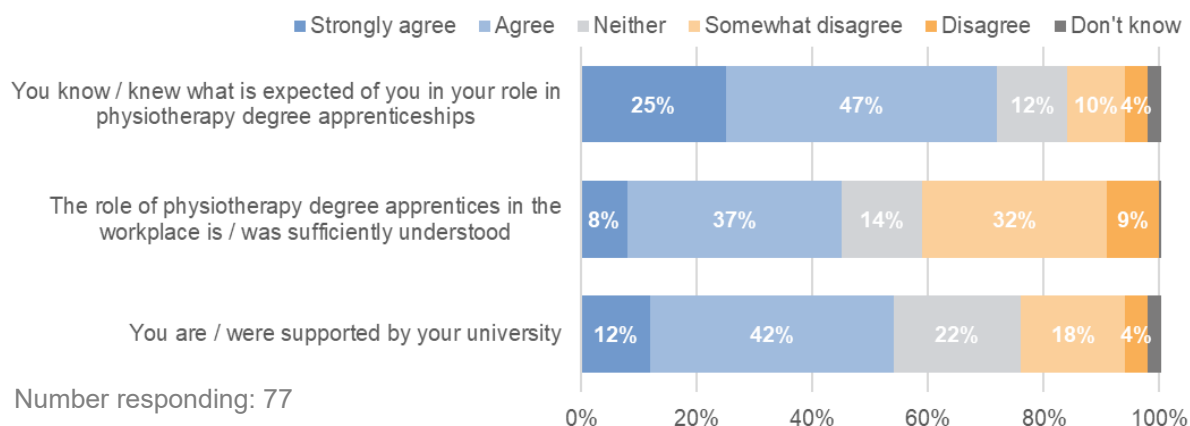
Question to apprentices: To what extent do you agree your employer understands the off-the-job requirements of your physiotherapy degree apprenticeship?



Question to apprentices: How aware do you think your employer is /was of the requirements of university academic work?

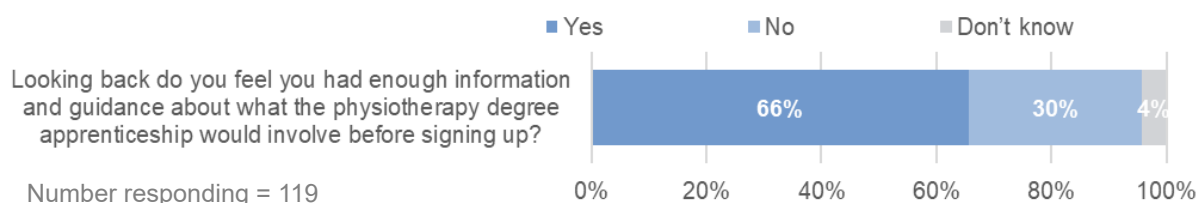


Question to employers: To what extent do you agree with the following:

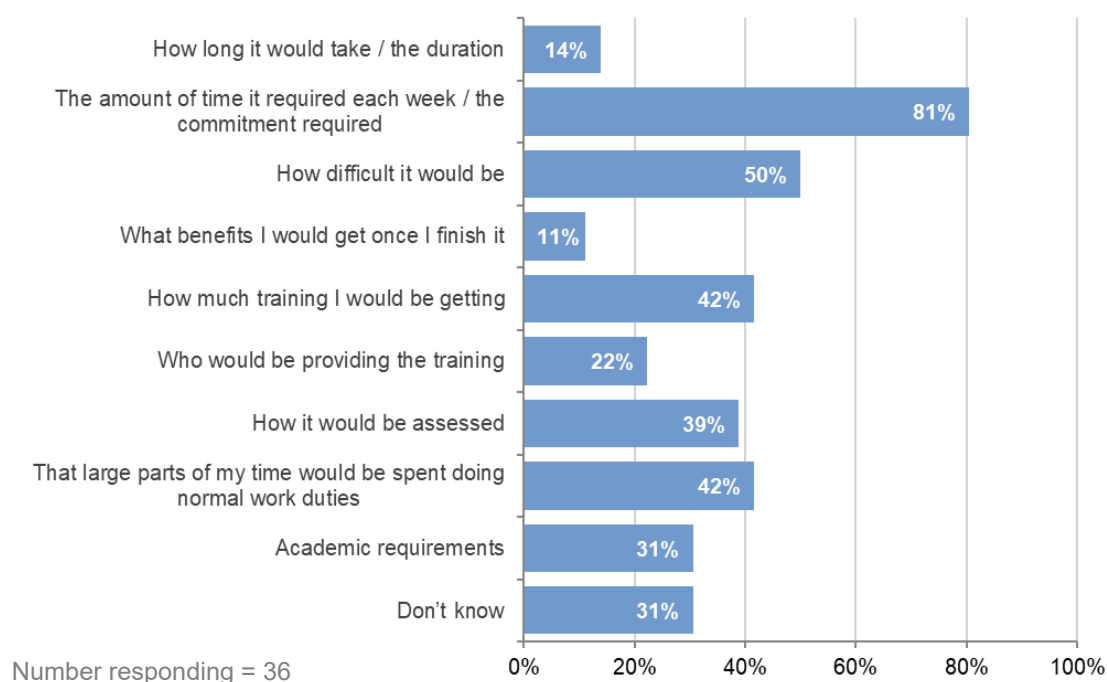


Is there sufficient information and guidance?

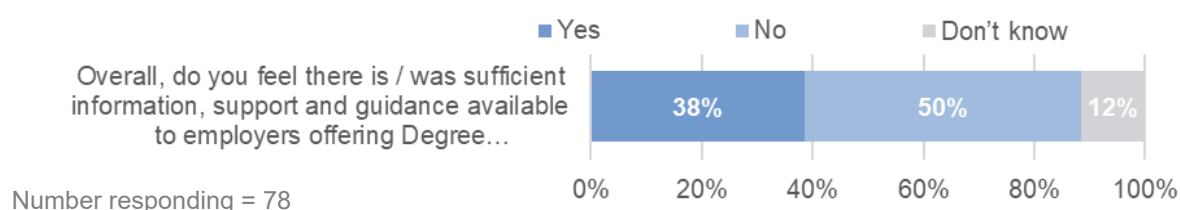
Question to apprentices: Looking back do you feel you had enough information and guidance about what the physiotherapy degree apprenticeship would involve before signing up?



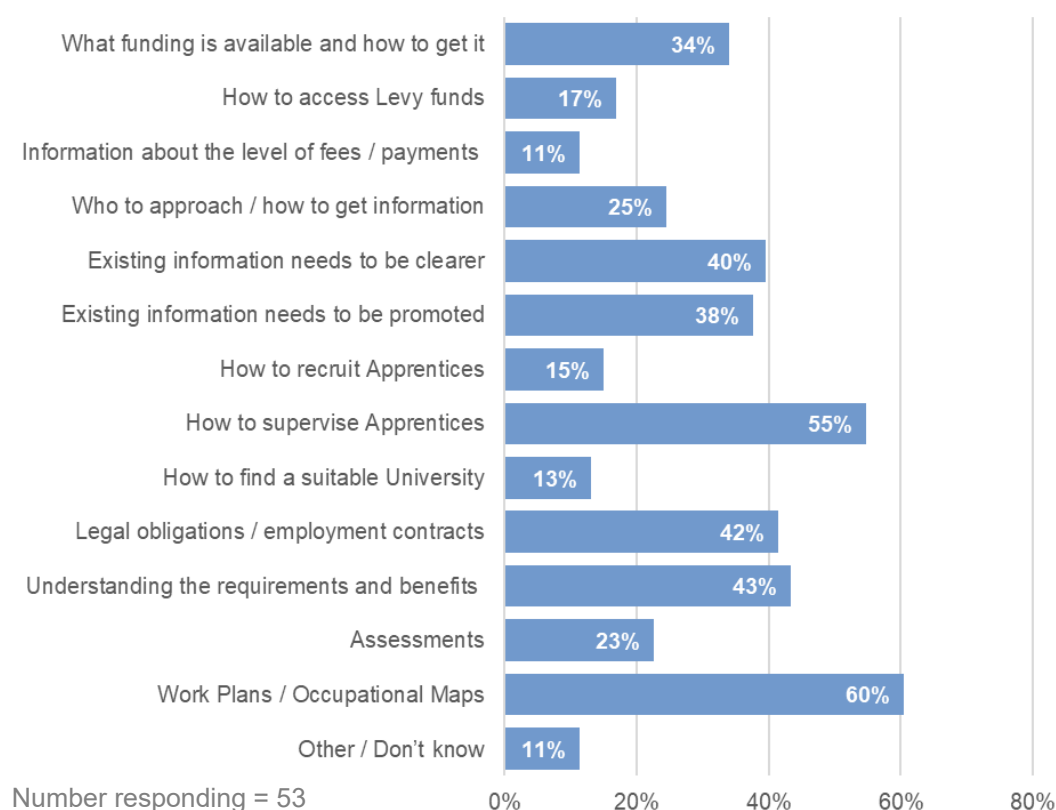
What employers would have like more guidance on:



Question to employers: Overall, do you feel there is / was sufficient information, support, and guidance available to employers offering Degree Apprenticeships?

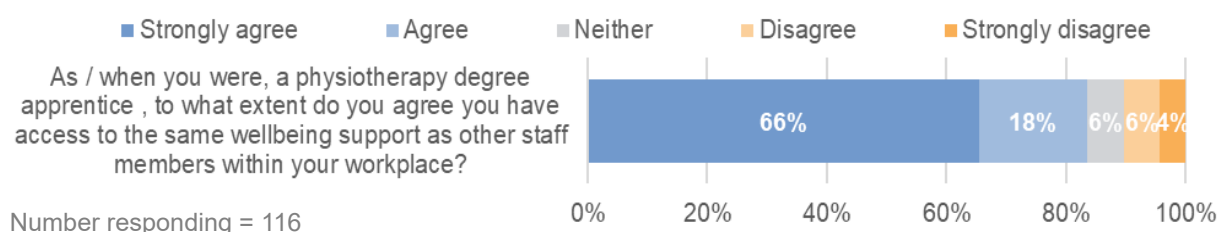


Question to employers: If no, what information, support, and guidance do you think is missing? (Please select all that apply)

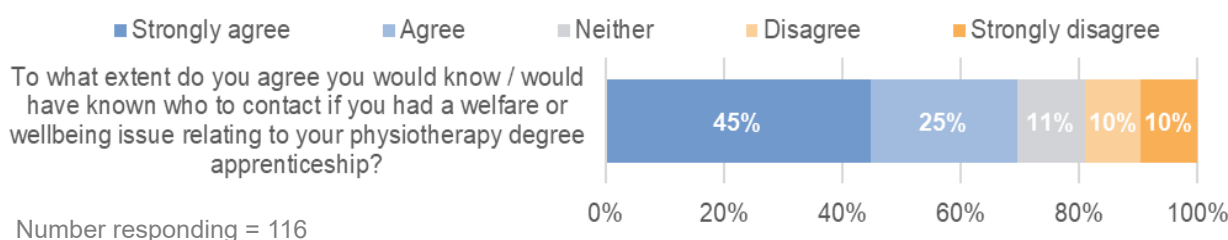


Access to health and wellbeing support

Question to apprentices: As / when you were, a physiotherapy degree apprentice, to what extent do you agree you have access to the same wellbeing support as other staff members within your workplace?



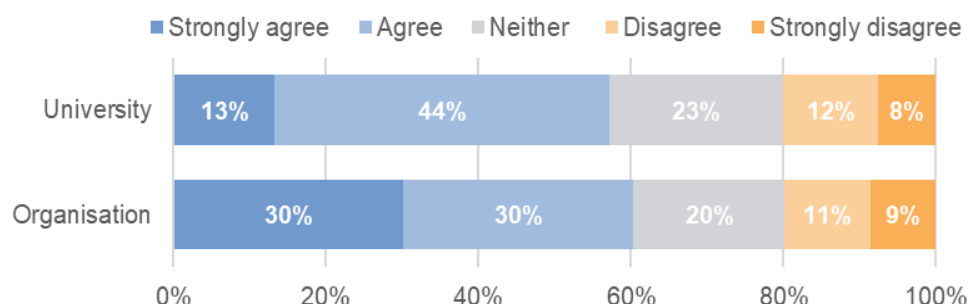
Question to apprentices: To what extent do you agree you would know / would have known who to contact if you had a welfare or wellbeing issue relating to your physiotherapy degree apprenticeship?



Belonging

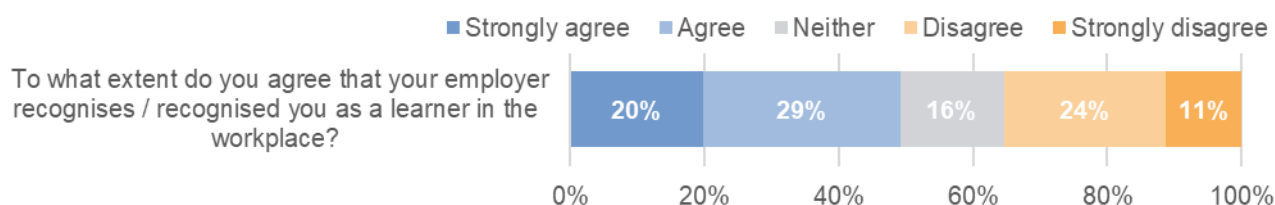
Feeling part of the organisation and university

Question to apprentices: Apprentices were asked to what extent they feel / felt part of their organisation / university.



Learning as a continuation of work

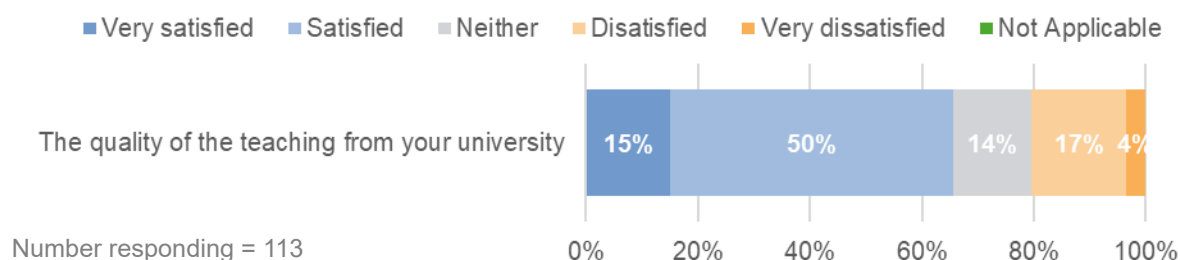
Question to apprentices: To what extent do you agree that your employer recognises / recognised you as a learner in the workplace?



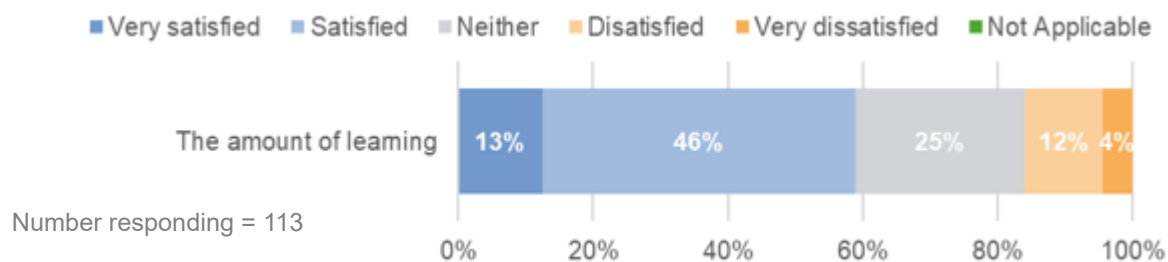
Course

Standard of teaching

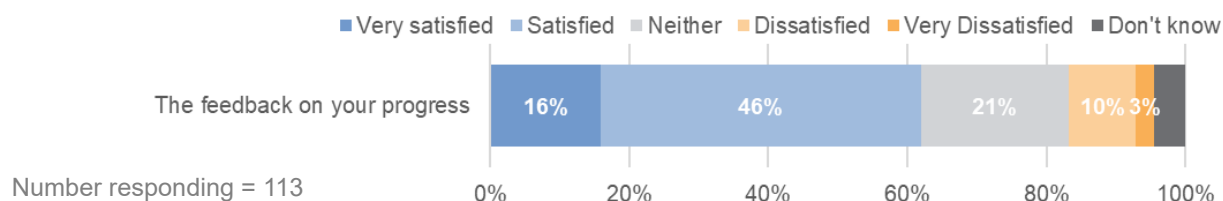
Question to apprentices: How satisfied or dissatisfied are / were you with the quality of learning delivered by the university?



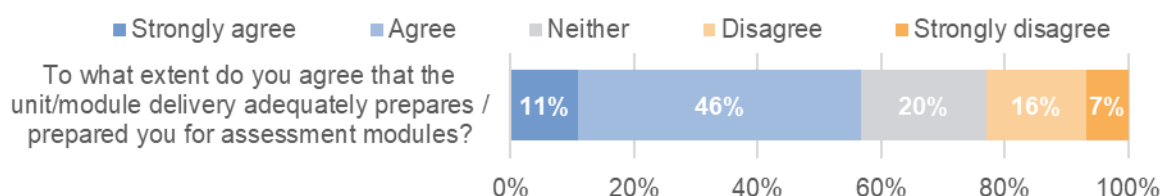
Question to apprentices: How satisfied or dissatisfied are / were you with the amount of learning?



Question to apprentices: How satisfied or dissatisfied are / were you with the feedback on your progress?

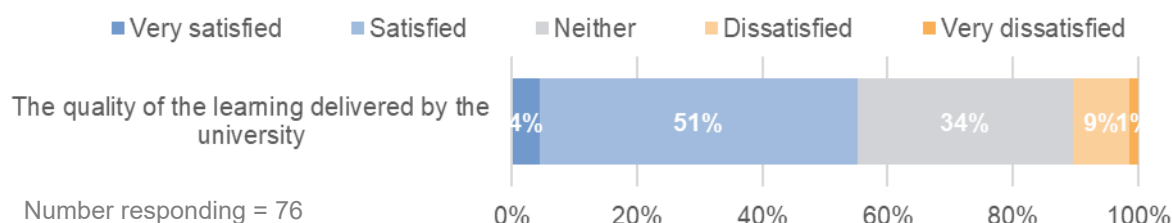


Question to apprentices: To what extent do you agree that the unit/module delivery adequately prepares / prepared you for assessment modules?



Number responding = 118

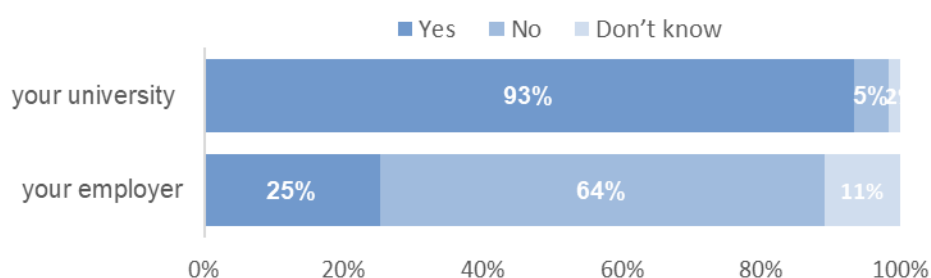
Question to employers: To what extent are you satisfied with the quality of the learning delivered by the university



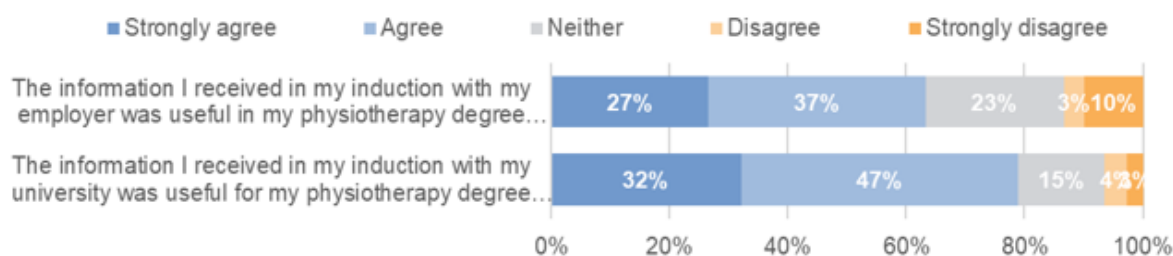
Number responding = 76

What is the induction experience?

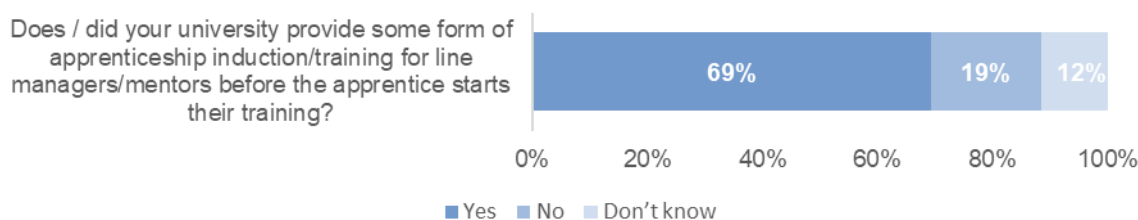
Question to apprentices: Did you receive an induction to your physiotherapy degree apprenticeship from:



Question to apprentices: The information I received in my induction with my employer / university was useful for my physiotherapy degree apprenticeship



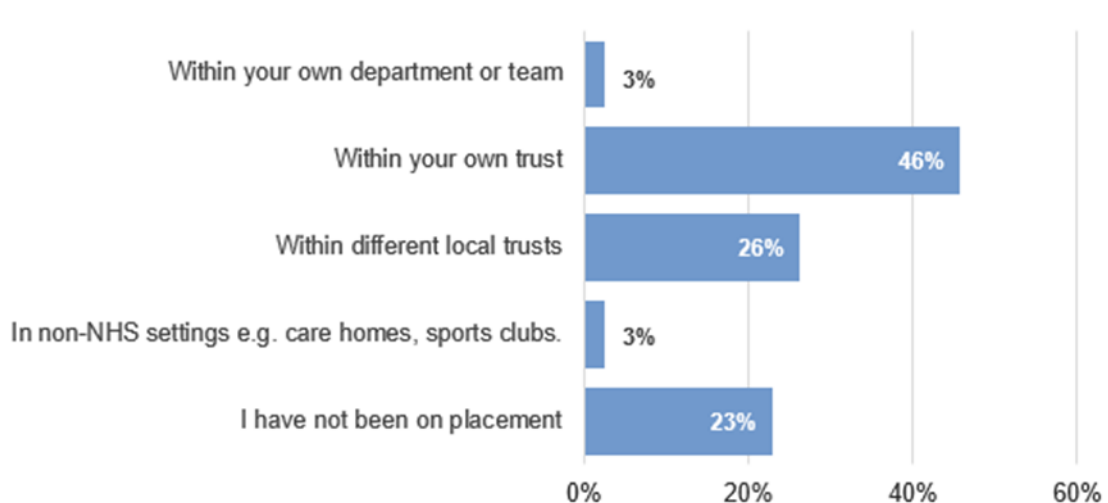
Question to employers: Does / did your university provide some form of apprenticeship induction/training for line managers/mentors before the apprentice starts their training?



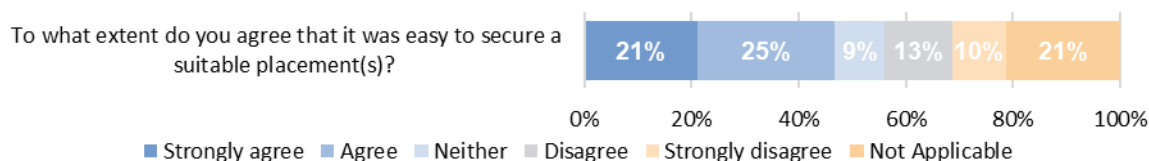
Placements

Nearly three quarters (73%) of employers said that their organisation offered placements to physiotherapy degree apprentices from other organisations, with only 17% saying that they did not. Nearly half (48%) of employers said that their organisation had reciprocal agreements with other NHS Trusts/organisations, with a quarter (25%) saying that they did not.

Question to apprentices: As a physiotherapy degree apprentice, where have you been on placement?

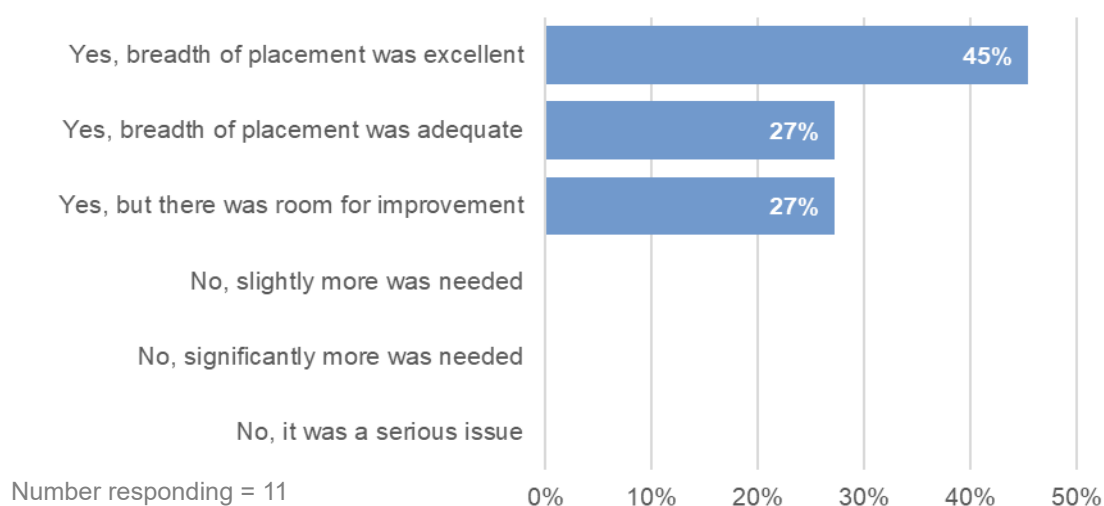


Question to apprentices: To what extent do you agree that it was easy to secure a suitable placement(s)?

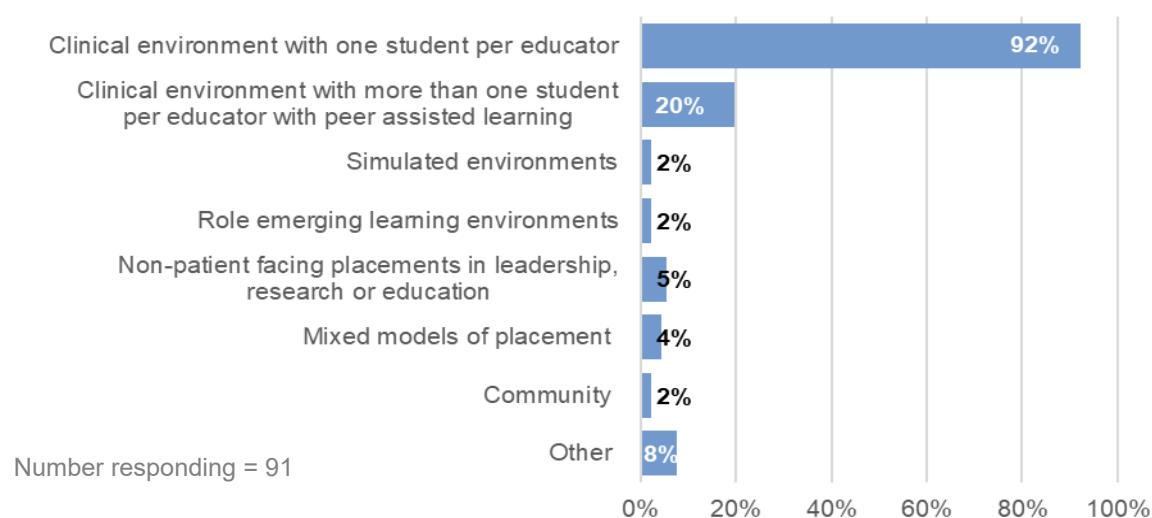


Number responding = 118

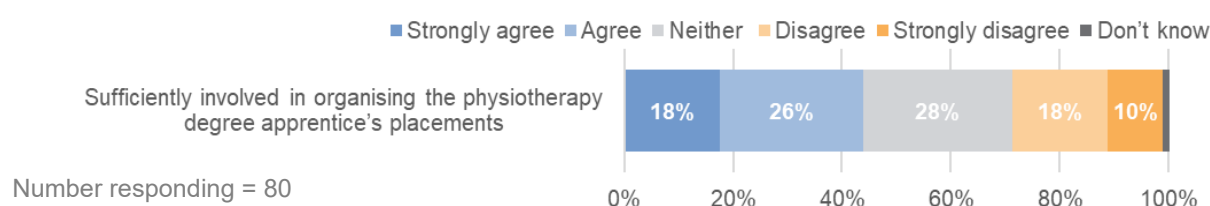
Question to apprentices who had completed their apprenticeship: Do you feel you had the necessary breadth of placement available to you during your apprenticeship studies to prepare you to be a registered physiotherapist?



Question to apprentices: What type(s) of placement have you undertaken? (Please tick all that apply)

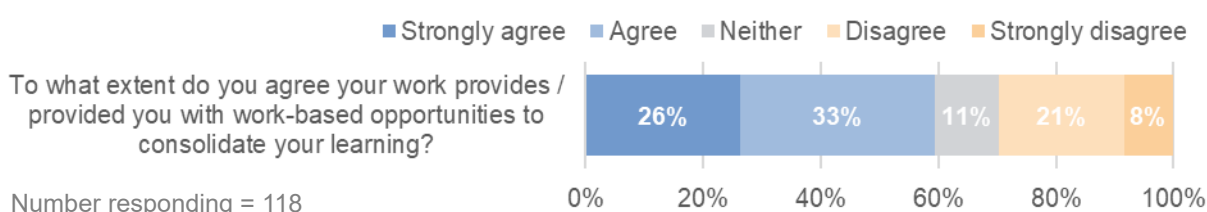


Question to employers: To what extent do you agree that you are sufficiently involved in organising the physiotherapy degree apprentice's placements

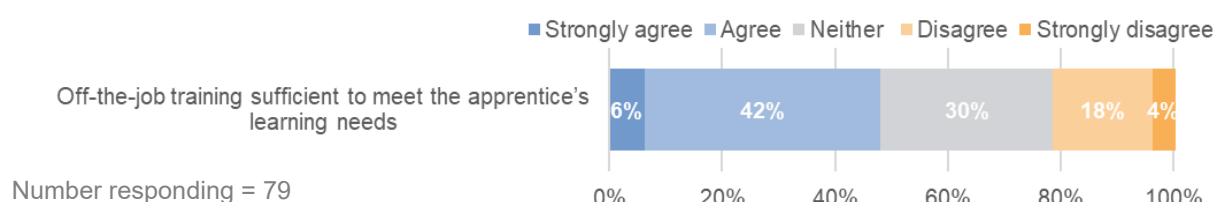


Work-based learning

Question to apprentices: To what extent do you agree your work provides / provided you with work-based opportunities to consolidate your learning to help you meet the requirements of your course?

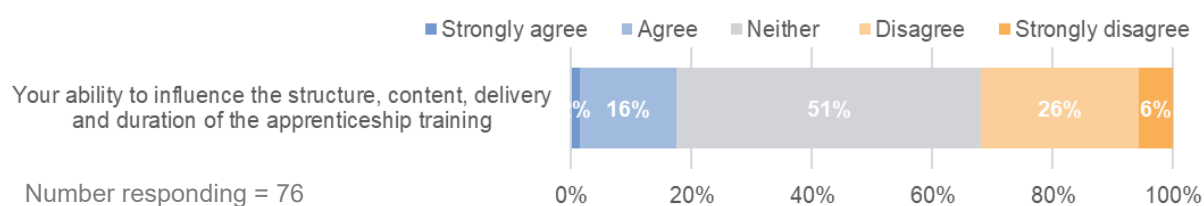


Question to employers: To what extent do you agree that the amount of time spent in off the job training is sufficient to meet the apprentice's learning needs?

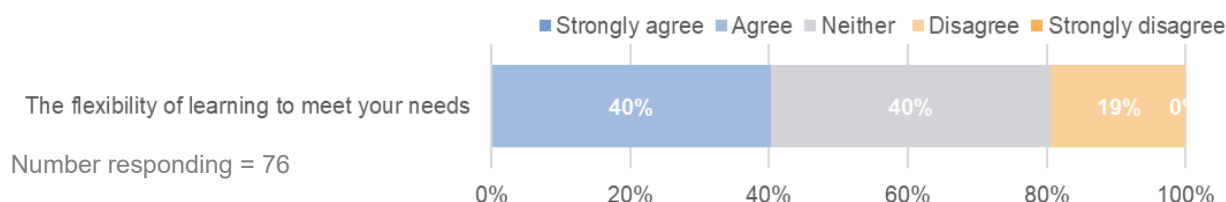


Involvement in programme design and workplace alignment

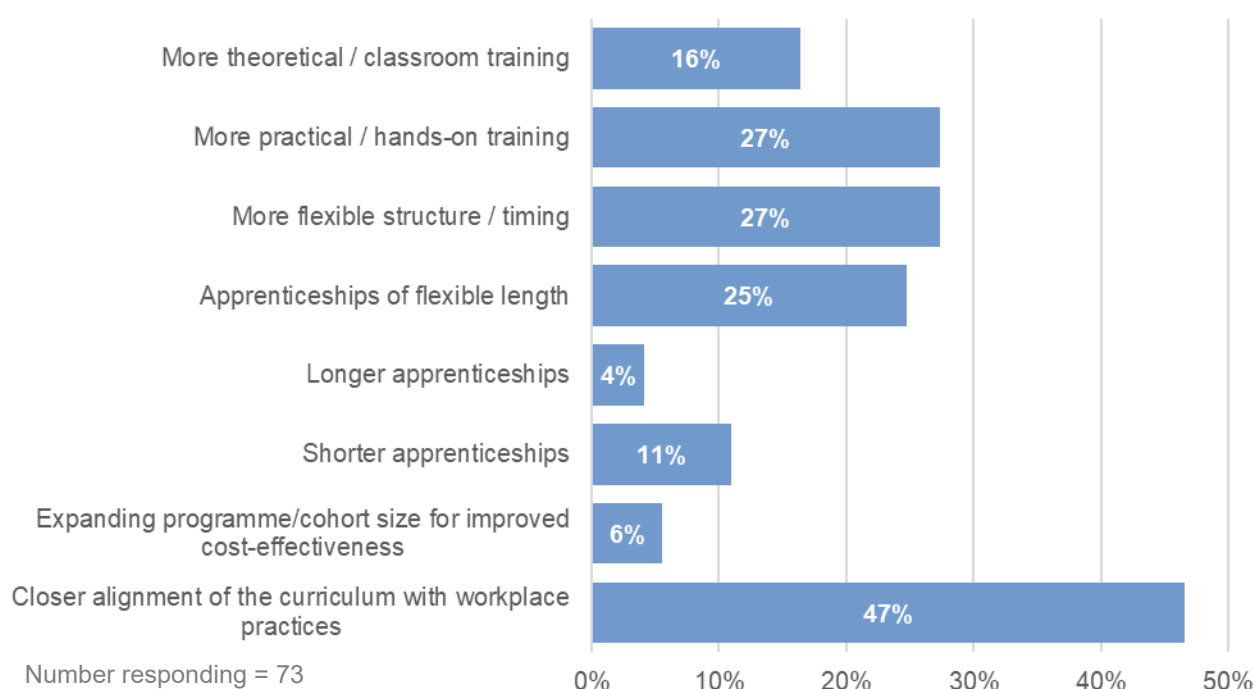
Question to employers: How satisfied or dissatisfied are / were you with your ability to influence the structure, content, delivery, and duration of the apprenticeship training.



Question to employers: How satisfied or dissatisfied are / were you with the flexibility of learning to meet your needs?



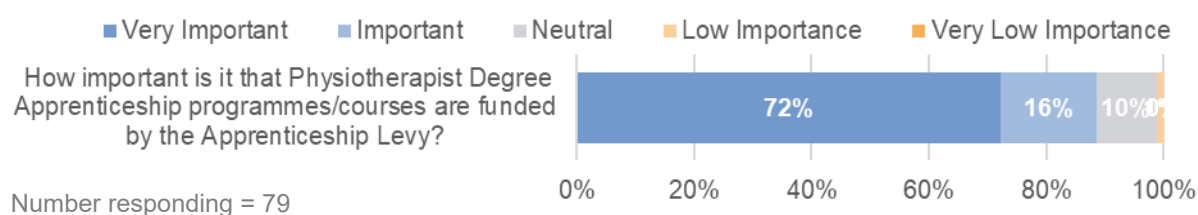
Question to employers: What would you like to change about the content, structure, delivery, or duration of the physiotherapy degree apprenticeship



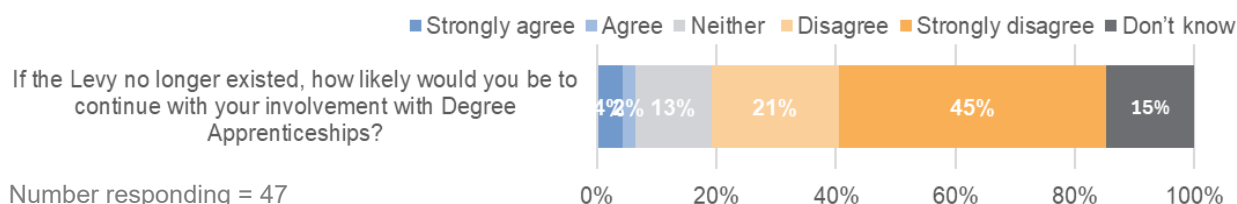
Funding and sustainability

Apprenticeship Levy funding

Question to employers: How important is it that Physiotherapist Degree Apprenticeship programmes/courses are funded by the Apprenticeship Levy?



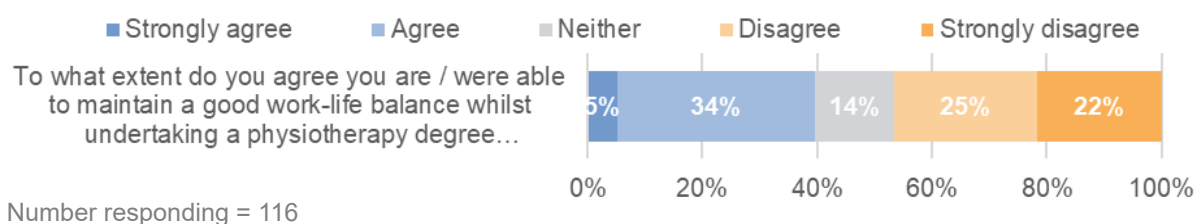
Question to employers involved in the management of apprentices / apprenticeships: If the Levy no longer existed, how likely would you be to continue with your involvement with Degree Apprenticeships?



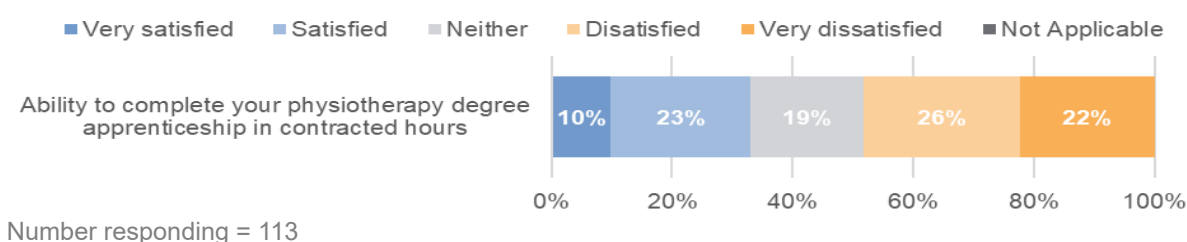
Challenges and barriers

Work life balance

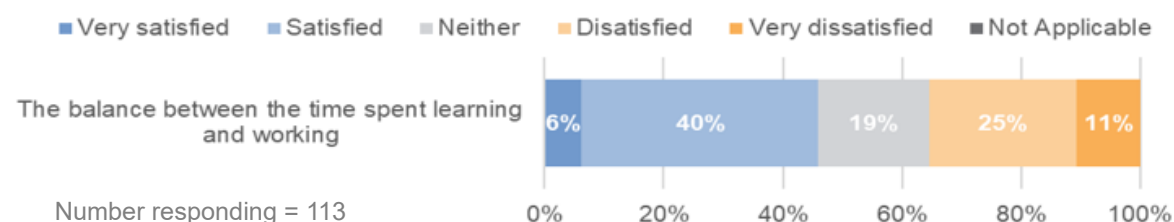
Question to apprentices: To what extent do you agree you are / were able to maintain a good work-life balance whilst undertaking a physiotherapy degree apprenticeship?



Question to apprentices: To what extent are you satisfied with your ability to complete your physiotherapy degree apprenticeship in contracted hours?

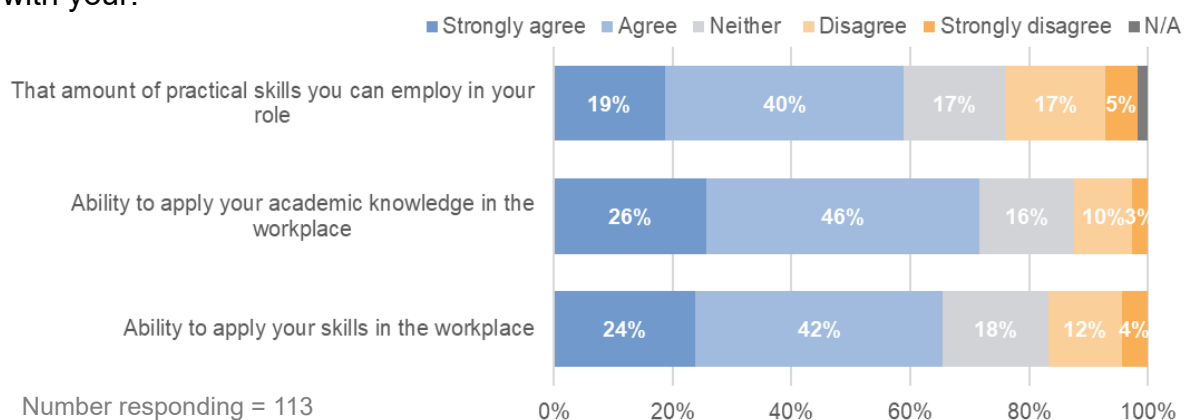


Question to apprentices: To what extent are your satisfied with the balance between the time spent learning and working?



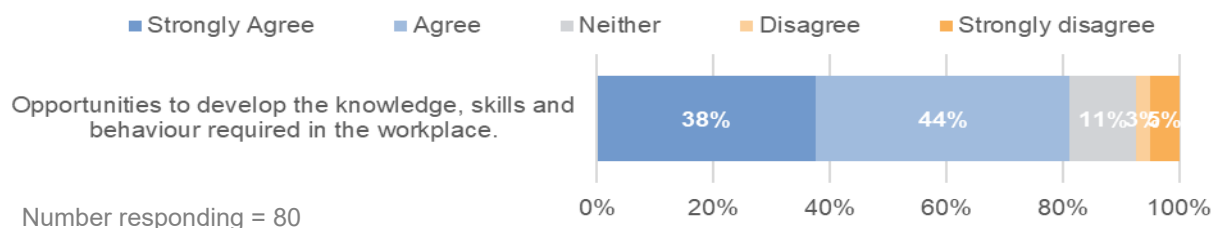
Ability to apply their skills and academic knowledge

Question to apprentices: How satisfied or dissatisfied have you been (or were you) with your:

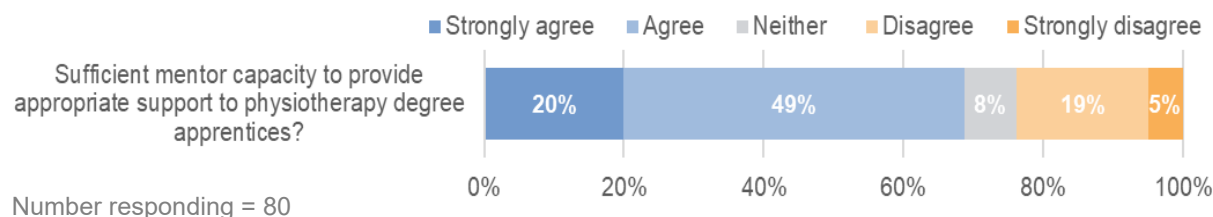


Organisational capacity

Question to employers: To what extent do you agree your organisation is / was able to provide physiotherapy degree apprentices with opportunities to develop the knowledge, skills, and behaviours required in the workplace?



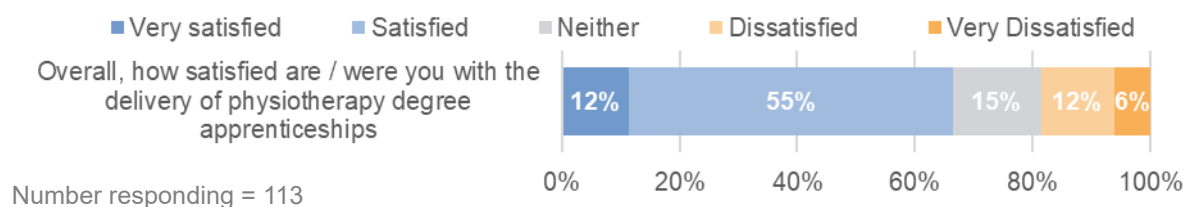
Question to employers: To what extent do you agree your organisation has / had sufficient mentor capacity to provide appropriate support to physiotherapy degree apprentices?



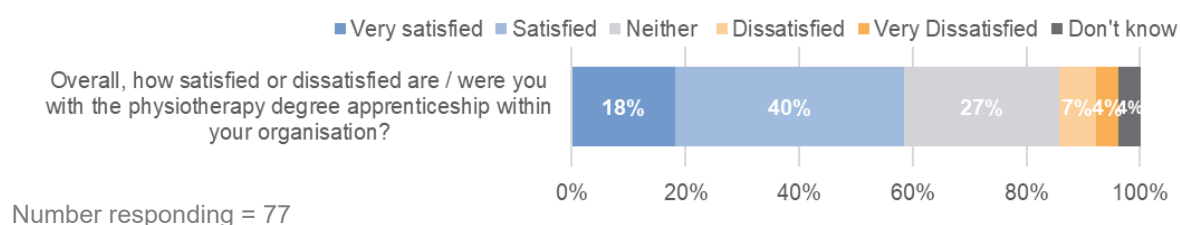
Benefits and impacts

Satisfaction and Benefits

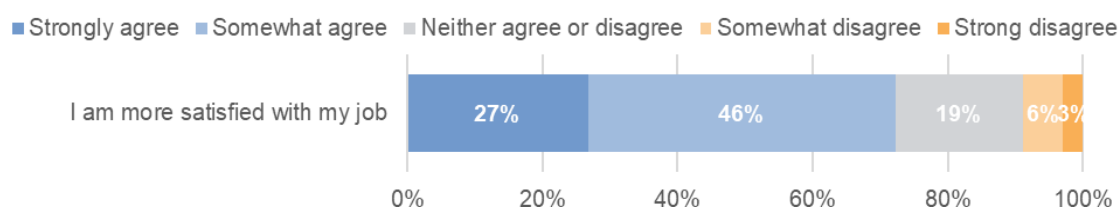
Question to apprentices: Overall, how satisfied are (were) you with the delivery of physiotherapy degree apprenticeships within your organisation/institution?



Question to apprentices: Overall, how satisfied are (were) you with the delivery of physiotherapy degree apprenticeships within your organisation?



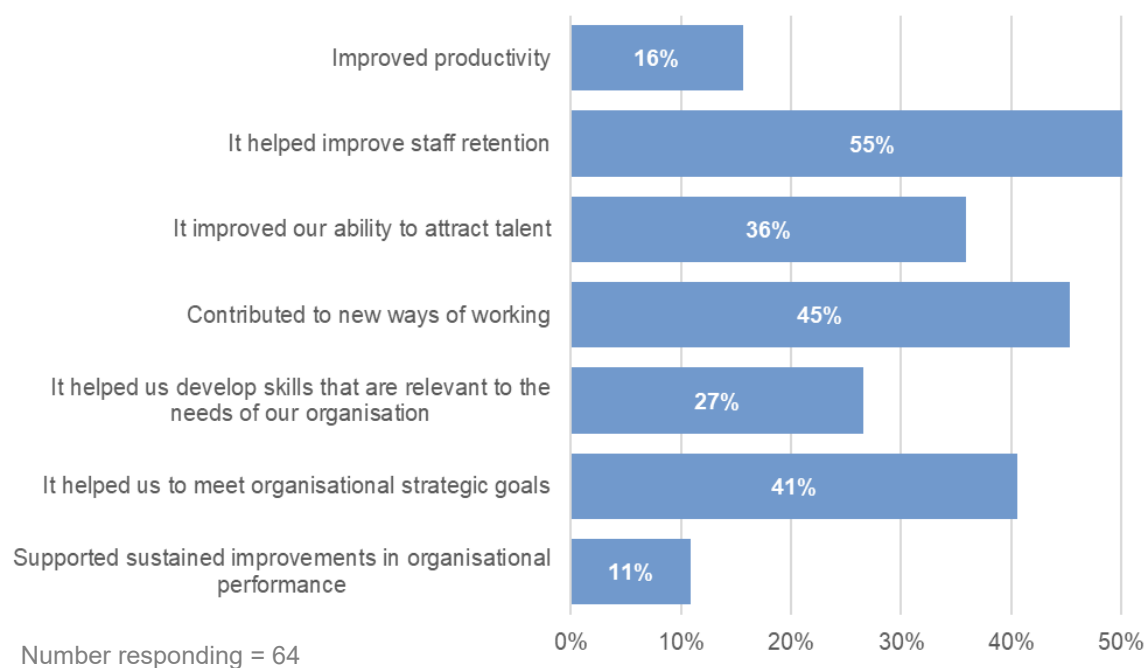
Question to apprentices: To what extent do you agree or disagree that since starting your physiotherapy degree apprenticeship you are more satisfied with your job?



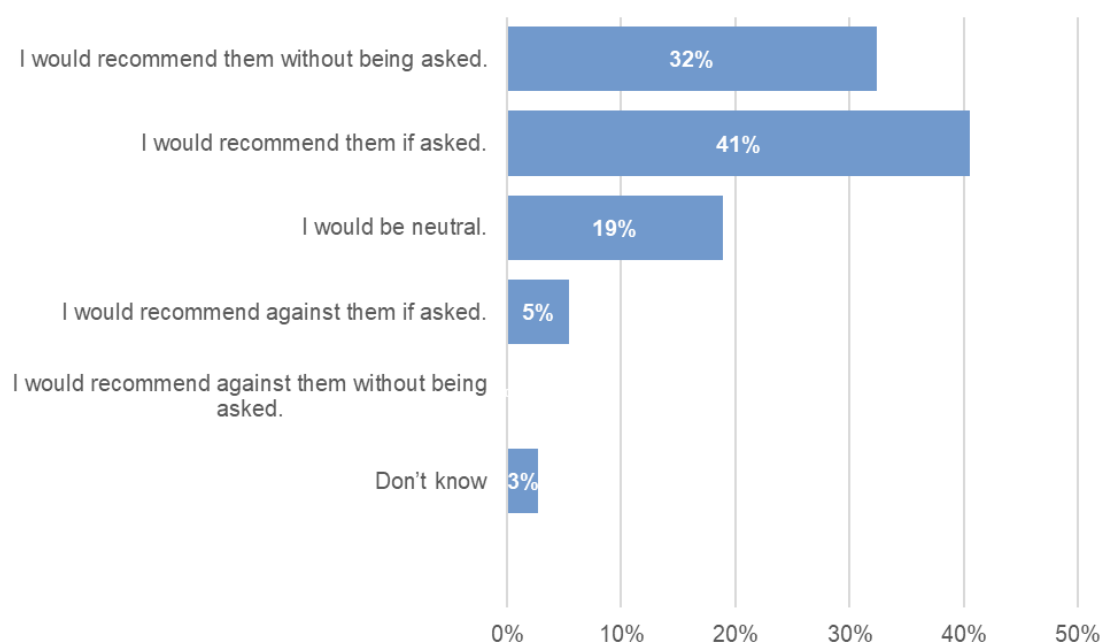
Question to employers: To what extent do you agree that the physiotherapy degree apprenticeships...



Question to employers: Which of the following benefits has your organisation experienced as a result of offering physiotherapy degree apprenticeships? (Please select all that apply)

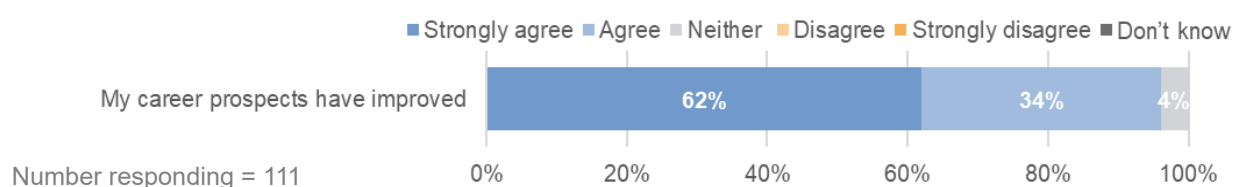


Question to employers: Which of the following best describes how you would speak about physiotherapy degree apprenticeships to other employers?



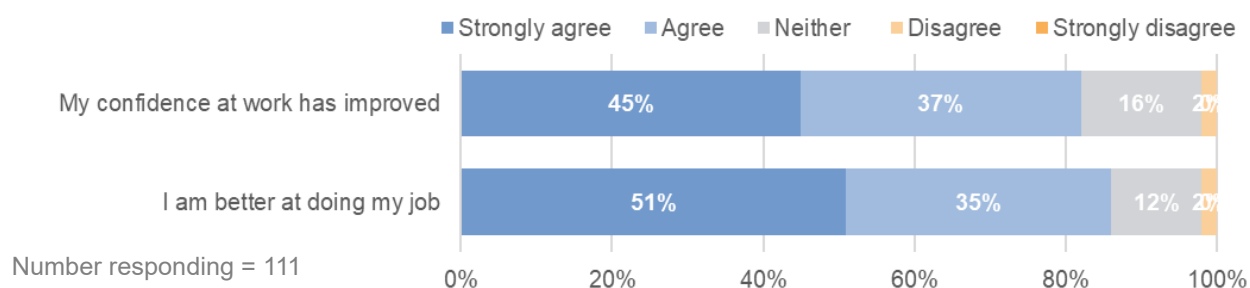
Career advancement

Question to apprentices: To what extent do you agree or disagree that since starting your physiotherapy degree apprenticeship:

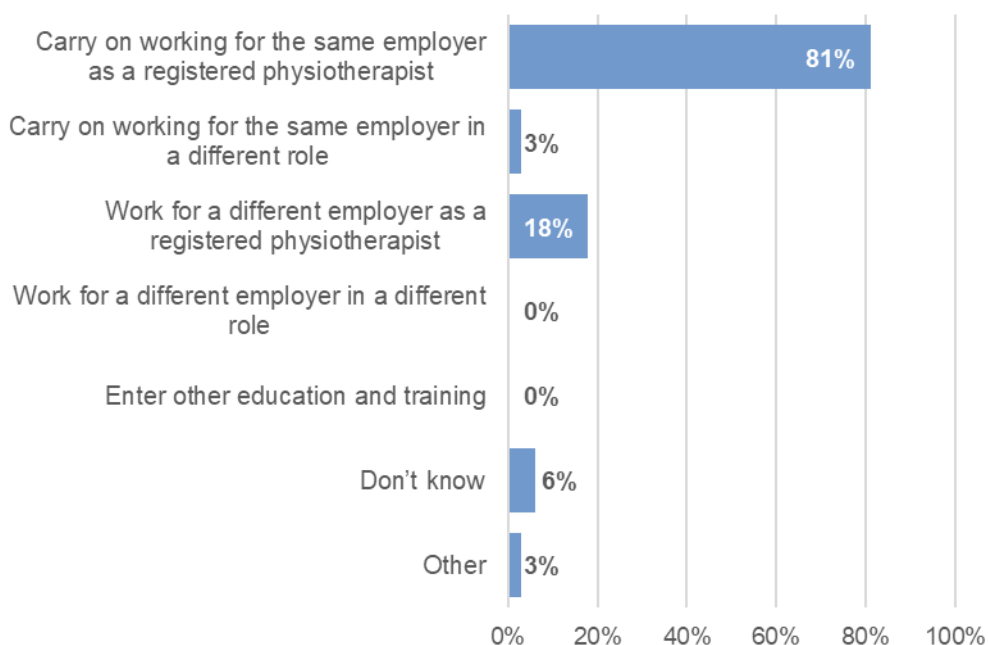


Tackling skills shortages / attracting talent

Question to apprentices: To what extent do you agree or disagree that since starting your physiotherapy degree apprenticeship:



Question to apprentices: What are you planning to do / did you do next after your physiotherapy degree apprenticeship ends/ ended?



The Skills for Health logo is a white rounded rectangle with the text "Skills for Health" in a dark blue sans-serif font. "Skills for" is in a smaller weight than "Health".

Skills for
Health

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Vertigo, Cheese Lane,
Bristol, BS2 0JJ
Tel: 0117 922 1155
skillsforhealth.org.uk



**The
Workforce
Development
Trust**

A smaller version of the Skills for Health logo, consisting of a white rounded rectangle with the text "Skills for Health" in dark blue.

Skills for
Health

The Skills for Justice logo, featuring a white rounded rectangle with the text "Skills for Justice" in a dark blue sans-serif font. "Skills for" is in a smaller weight than "Justice".

Skills for
Justice

The SFJ Awards logo, featuring a white rounded rectangle with a small crown icon above the text "SFJ Awards" in a dark blue sans-serif font.

SFJ
Awards

The People 1st International logo, featuring a white rounded rectangle with the text "People 1st International" in a dark blue sans-serif font. "1st" is in a smaller font size and is enclosed in a small circle.

People **1st**
International