

Healthcare Sector interviews: Thematic Analysis

DORSET LSIP

INSIGHTFUL RESEARCH TEAM

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Introduction

This report will outline the findings of the Dorset Local Skills Improvement Plan (LSIP) research in the healthcare sector. These findings will provide valuable insight into the current feelings of employers in Dorset and what they desire from education providers. The research methodology used to gather these findings was based on best practices from current literature and is briefly outlined below.

Healthcare executive summary

On review of the interview transcripts, it became clear that it would be beneficial to split the analysis into two sub-sectors: healthcare and medical provision. The main challenge faced by both sub-sectors is a general shortage of labour. Having said this, participants also elucidated several other challenges and skill needs that can be directly addressed in post-16 education.

Within health and social care, the top priorities were the need for higher level soft skills — to ensure a patient centred approach to care, and for increasing the experience opportunities available to prospective employees throughout their education. Employers highly value college and training courses but would like to see the incorporation of direct education into interpersonal skills and the provision of more experience opportunities. Other key skills that employers would like to see on courses include safeguarding and dementia focused care.

The needs of the medical provision sub-sector were quite different to those described above and were specific to different roles. Within pharmacies there has been rapid development and pharmacists are required to provide more services and take on a managerial role while the roles of dispensary staff are becoming automated. In response to

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this, there is a need for specific courses on pharmacy management and to increase the clinical teaching provided to dispensary staff. More generally in the sub-sector, the main challenges being experienced are a lack of pathways available for upskilling and the accessibility of courses. There is a desire for more courses to be made available at a lower cost and for existing courses to be updated.

Table 1.

Overview of most frequent interview content

Healthcare					
Technical Skills		Non-technical Skills		Causes of Technical Skills Deficits	
Dementia-focused care	4	Patient-focused skills	11	A shortage of staff	15
Healthcare Support Workers (or HCA)	4	Having Experience	10	Job Difficulty	7
Clinical Knowledge	4	Communication Skills	9	Patient Centred Focus	7
Safeguarding	3	Attitude	8	Easier work elsewhere	6
Health and Safety	2	Emotional Intelligence	6	funding	6

Medical Provision					
Technical Skills		Non-technical Skills		Causes of Technical Skills Deficits	
Clinical Knowledge	7	Desire to learn	5	A shortage of staff	10
Clinical Skills	7	People Skills	5	Pathways for upskilling	6
Higher level dispensary staff	4	Customer Service	4	Basic training courses	4
IT Literacy	4	Managerial Skills	4	Courses too expensive	4
Nurses	3	Patient Management	3	Availability of training opportunities	4

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Cross sector methodology

Firstly, a psychometric survey was created and distributed to employers to assess their satisfaction with employee skill levels. This survey was carefully developed in a 3-stage process of item generation, theoretical analysis, and psychometric analysis. The aims of these stages respectively were to generate items that are clearly understood and relevant, to ensure the items have clear definitions and measure the intended construct, and to test the item's reliability and validity. This resulted in a final survey of 12 questions measuring employee's technical skill level, employee's non-technical skill level and the organisation's preparedness for the transition to net-zero. This survey was distributed by the research team and Dorset Chamber resulting in 386 responses. In follow up to this survey, several employers were invited to participate in a qualitative 1:1 interview. For a survey response or interview to be eligible it had to meet the following criteria: the individual must be responsible in some way for ensuring staff have the skills required, the business must operate within Dorset and it must fit into one of the targeted sectors. Interview recruitment was challenging, so to supplement the number of interviews and target specific areas that were underrepresented, direct interview recruitment was used in conjunction with leads and partners provided by Dorset Chamber. The interviews were semi-structured and 19 interviews were conducted from the healthcare sector between 09/01/23 and 28/02/23.

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Survey responses:	54	B.C.P	31
		North Dorset	6
		East Dorset	3
Interview responses:	18	South Dorset	7
		West Dorset	7

The interviews were transcribed and anonymised by the research team increasing familiarity with the data. An inductive 'bottom up' process of thematic analysis was used to identify themes from the interviews and involved two rounds of coding. The first round organised data into meaningful groups, and the quotes from these groups were used to create a code book which was then applied during the second round of coding. Additional codes were added as needed during the second round of coding and the whole process was collaborative and iterative. During this process it became obvious that there were distinct differences between the skill deficits and the needs of employers in different areas of the healthcare sector. Due to this the sector was split into two distinct sub-sectors:

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health and social care, and medical provision, and themes were identified for each sub-sector. 6/18 interviews were grouped under medical provision and 12/18 of the interviews were grouped under health and social care as seen in table 2. After the second round of coding was complete, themes were identified by multiple researchers individually, reviewed collaboratively and then finalised.

Health and Social Care			Medical Provision		
Interview	Participant Description	Date	Interview	Participant Description	Date
5	Delirium expert in a hospital setting	25/01/23	1	GP practice manager	09/01/23
6	Care Home for people with learning disabilities	30/01/23	2	Physio	19/01/23
7	Social work and community care	31/01/23	3	Pharmacist manager	24/01/23
9	Care agency	08/02/23	4	Assistant practice manager and pharmacy technician	24/01/23
10	Domiciliary care	08/02/23	8	NHS scientist	08/02/23
11	Healthcare support	08/02/23	17	Physio	09/02/23
12	Care provider	08/02/23			
13	Care coordinator	09/02/23			
14	Domiciliary care	09/02/23			
15	Loneliness companion	09/02/23			
16	Care home	09/02/23			
18	Domiciliary care	28/02/23			

Table 2: Description of interview participants and the sub-sector they fall under

The following report describes the final themes in detail and provides a clear representation of the views of employers regarding skill deficits, the causes of these deficits, potential solutions and where they are in the transition to net-zero.

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Health and Social Care Interview Analysis

1.1 Skill Needs

1.1.1 Priority Skills

Healthcare Support Workers and Care Assistants

Where a key focus of the interviews for healthcare was the general shortage of staff affecting the industry, key roles that are needed are healthcare support workers and care workers. Many more people are needed within these roles to combat the imbalance between growing demand on the sector and a shortage of staff. It was also noted that currently, the community training courses, for example at Boots, are thought to be of a higher quality than the standard courses.

Transcript 13 "What kind of the skills that you struggle to find in the door area at the moment personally Obviously it's you know we're looking for coordinators and carers"

Transcript 18 "So just going back to the training side of it. So what role, what are the job titles that you're often recruiting for? Care assistants."

*Transcript 6 "I: Are there any roles you find that you have a shortage of workers in?
P: I would say support worker, I mean I'm not sure at the moment but the turnover for these people can get quite hectic, sometimes if I might lose two or three of that anyone time then I'm struggling."*

Digital Technology Use is important and will become more important

Digital technology use is important within the healthcare industry in a variety of ways, such as using basic IT, making digital care records, and the use of assisted living technology. However, there is the feeling that employees in this industry can be lacking in the skills to use such technology.

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Transcript 7 *“think the use of technology moving forward needs to be considered in education because it is going to be becoming more and more important to people returning and living at home more often than going into supported settings. So having an understanding of the types of technology that support and individual to stay at home I think is really good.”*

Transcript 10 *“There are some IT skills gaps, so for example, a lot of the work we do we use an app called one-touch which you log in and clock in and out of and it's got client information and you have to make notes on it to say what you've done and tick of medication forms and that sorts of thing. And that's all done online now as opposed to being paper-based before. So occasionally there are some IT literacy gaps, especially with those that don't have experience in that area.”*

Safeguarding

Safeguarding is currently a task assigned to higher level employees. Having said this, several businesses said it is very important for everyone in the care profession to be capable of spotting and raising safeguarding concerns. There is a desire for this to be taught on a wider range of courses including those for lower-level roles such as care assistants.

Transcript 7 *“Whereas I think they need to be more aware of what's going on. Have these ... you know if there's tablets on the side where have they come from, why is there no hot water. I just think there's an assumption that if someone else has done that piece of work they don't need to worry about. I think safeguarding and risk assessment is everyone's responsibility.”*

Dementia focused care

Dementia focused care was found to be important across a number of businesses, however there are no standard training courses available that develop the specific skills needed for such complex care. Dementia is a neurological disease of high concern in Dorset, with one

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business stating Dorset is home to the highest concentration of people with dementia in Europe.

Transcript 5 *"I think that's a great idea, especially, I mean, Bournemouth's got the highest concentration of people living with dementia in the whole of Europe. From our aspect, people with dementia aren't often treated as well because it's a general hospital."*

Transcript 16 *"dementia isn't on it that really should be on it. Dementia should definitely be on it."*

Clinical Skills and Knowledge

While not as important as in medical businesses, some employers have indicated a need for more employees to have more clinical skills and clinical knowledge in the workplace, and there will be a need for more training in this area. Ideas noted here are, however, very general and lack specifics on what exact clinical skills would be important.

Transcript 16 *"But it's a really hard question for me to answer what training are people going to want in 5 years time because it just depends what sector you're talking about. Nurses for arguments sake they will need to have all their clinical training"*

Transcript 18 *"Well it's knowledge in both the theoretical and the practical really they need to have two. We have the clients that would expect the best service, so that's what we obviously aim to provide and we also have course registration with CQC, where we can do more clinical things"*

Transcript 18 *"It sounds like you're putting a lot of value on those NVQs, what is it good about them? What does it give new employees? Because they've got the better knowledge and that comes across to the clients. They're better at knowing what to do and obviously they've got the experiences as they've had to been doing the job to do the NVQ."*

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Patient-focused care and patient management need to be more of a focus

An important area highlighted by employers is having more skills in patient-focused care and patient management. There is the general feeling that patients themselves are becoming less of a focus in the industry, and there is a need to get back the human element of working in healthcare and dealing with patients. Therefore, skills are needed in ensuring that patient-focused care and care navigation is of high quality so that it translates across to the patients well.

Transcript 5 "They're very good at certain things, but dare I say, things that you and I would find easy, like talking to patients, like feeding a patient, like being that friend when somebody's scared, they're often lacking in those skills"

Transcript 10 "So, the human element. What it is like to administer personal care on somebody. What it's like to deal with someone on a bad day. Someone with additional learning needs because everyone is different. So having the time to... yeah having those difficult conversations with somebody about it really, I would say."

Transcript 7 "So lets think about really putting ... thinking about that person as an individual rather than just an extra job so bringing that persons care to the forefront."

Interpersonal Skills

Within healthcare, employers have outlined interpersonal skills to be extremely important, and this will feed back into improving patient-focused care. Within those interpersonal skills, communication, being able to handle difficult conversations, and emotional intelligence have all been outlined as extremely important by healthcare employers. In

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order to continue to provide high-quality care, better skills within these domains will be necessary.

Transcript 14 *"Because I think sometimes those conversations are the most vital piece, and how to then actually say to people, maybe you're not doing it the right way - those difficult conversations that people have to have."*

Transcript 5 *"I think the communication skills is really lacking. Certainly in my area, where I work as a mentor in delirium, they really struggle to put somebody who doesn't communicate always the same as they do"*

Transcript 7 *"So whilst you may be going out to kind of prepare someone's meals or undertaking their personal care we need to be looking out for safeguarding concerns we need to be providing that emotional support, so it's kind of how can we develop the work force in terms of their emotional intelligence when working with older people."*

Transcript 9 *"So the skills are empathy, collaboration, communication, creativity, listening and these are really really important skills"*

Experience

Experience is highly valued and thought to be crucial to excel at a range of levels. This can be broken down into two crucial areas: learning on the job and increased job awareness. Due to the nature of the work, it is thought that much more is gained from learning on the job compared to text book knowledge. Additionally experience at an earlier level, even if that is only personal experience caring for family, is thought to be very valuable. This can be attributed to wanting staff who know what the role entails and are prepared for it.

Transcript 5 *"And I think people have gone through the HCA and being an HCA prior to being staff nurses, head and shoulders above somebody who's just come*

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straight from school into uni, into that job role. They've got far more skill set because they've done the job previously."

Attitude

Employee attitude is very important in the care side of the sector with a strong emphasis on being able to teach the technical skills required but not the attitude. A good employee needs to have the desire to learn, a good work ethic, an ability to deal with difficult situations and creativity in the way they provide care. The right attitude towards care is also essential to providing personal patient focused care.

Transcript 9 "It is not about certificates and training course we've got the in-house resources to do that like training videos. It's more about the attitude towards care and saying that it's more than just personal care."

Transcript 10 "So it sounds like what you're more concerned with is the general, are they willing to work, their attitude all that type of thing. P: Yep"

Transcript 12 "Care is a massive commitment. So you don't just need to be calm, you you definitely need to commit to it in the way that it has to be delivered and a lot of people don't they provide that commitment, I think they see as a bit of an employment that they can, you know, jump into and jump out as opposed to, you know, a proper service, which is what it needs to be. So I don't think there's a problem with skills, we can teach them skills but what we can't teach is people, I guess not being fully committed, you know?"

Transcript 5 "And timekeeping, it's a simple thing, but very, very important. "

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1.1.2 Future Skills Needed

Understanding of Technology

The main future skill required in care is understanding new digital technology with emphasis on assisted living technology. This is going to become more prevalent, and carers need to understand how it can be used best.

Transcript 7 “Creatively thinking about the ways, they can do that themselves and the use of assistive technology to promote their well-being.”

1.2 Employer perspective on challenges and causes

The healthcare sector is suffering due to the general labour shortage

A major finding, and one that is not unexpected, is the extensive labour shortage being experienced in the healthcare industry. Employers have outlined that there is not enough available staff to recruit, and many find it extremely difficult to retain employees. Within this aspect, some businesses have highlighted struggles in being able to keep up with the rate of pay both in and out of the industry in order to retain employees.

Transcript 5 “Definitely, staff-attrition. One of the main recruiters who trained me, actually just left because she said, “I’m so sick of training these people, investing my time, my energy, my enthusiasm in these people for them to leave within six months.””

Transcript 7 “(speaking on staff shortages) I think locally yeah. We ... so we’ve got quite a stable foundation but I know from speaking to a friend that works in the industry that it is quite dire out there across the whole spectrum really.”

Transcript 10 “I don’t know if it’s necessarily a skills gap it’s more a human gap. As I’m sure you’re aware, recruitment at the moment is tough, especially in the sector”

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Transcript 14 *"I: So what are the skills that you struggle most to find in health care?
P: I don't think it's so much the actual skill set, I think it's more the actual individuals themselves due to you know, due to a lot of other companies at the moment as you probably know, are just throwing money at people because of short skill shortages everywhere and you can't always keep up with the rate of pay, I think that's the other thing, the other big area"*

Funding for Training Programmes

Employers have outlined that while they would be very interested in putting employees through training courses, but there is the concern that these training courses are often too expensive, particularly when they are already short on staffing numbers to fill in for those away on training. Furthermore, some employers have outlined a lack of training funding as a challenge when it comes to being able to put employers through training and college courses to improve skills.

Transcript 6 *"Well I wouldn't say it's difficult to get, but the training are getting a lot of expensive now and you know a lot of my budget so that I dedicate to my training is growing up all the time, which is a bit unfair when we're not getting any more money from the local authority for the residents."*

Transcript 10 *"Not necessarily. We are bound by Skills For Care with what's mandatory training so we do what we have to do. There are lots of different things we could do additionally but from a financial point of view it wouldn't be possible because we pay our staff for their training and we appreciate that you need the expertise in those areas but budgets are so tight."*

Transcript 7 *"I: Are there any kind of skills that you find people lack in the social care sector. Is there anything more ... anything missing there. P: I think yes and no. I think the main issue is the lack of funding if I'm honest"*

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Job Difficulty

Job difficulty was mentioned 7 times by individuals in the health and social care side of the health sector but not at all in the medical provision side. It is thought of as a main cause of the skill deficit in the sector. The difficulty and nature of the job coupled with the jump from classroom learning to actually caring for someone and the fact there is often easier work available is thought to be contributing to the current shortage.

Transcript 5 "I've had three staff I've just recently trained to work for an agency. They got out because they said they couldn't do it anymore. And because they only get a 15 minutes slot, that poor patient needs that extra time because the family aren't visiting due to COVID or whatever reason, and if you haven't got that patient happy and settled and clean in that 15 minutes, you just have to leave them, and it can be quite heartbreaking. Because there's not enough care and so you can't spend any more time... You know the next person is waiting for you to change their bed, or wash them, or feed them or whatever else, and it's like a hamster wheel, which is moving faster and faster. I've had three staff recently in the last month coming through and that's what they said to me."

Undervalued Staff

There is the feeling that existing staff within healthcare are currently undervalued both in businesses and by the public, especially considering the difficulty of these roles. This is resulting in staff attrition and there is a need for more employee support to alleviate these issues.

Transcript 5 "It's feeling valued, I think. I think people look down on people who work in healthcare. I think we need to change the whole image to make it a valued, respectful job."

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Lack of experience opportunities

There are concerns that learners in formal education and on training courses are not being provided with enough hands-on learning experience to develop key skills. There are noted difficulties in the jump between learning and doing, particularly when it comes to patient-centred care.

Transcript 7 “So I think there's more of a focus on learning like, so I'm a qualified social worker and how I always describe it is when I did my training you get the theory and the knowledge base and when you actually go out into the world itself there's not, there's not enough of a bridge, and that transfers to kind of support worker type role as well. If you may be in college learning the foundation, you know what does good care look like, but actually what does that really look like in practice, what the real challenges are that are facing people doing this job today”

Transcript 6 “And so that is that so they know what the role is like? I think yeah and where that classroom knowledge actually happens because I mean you and I might know you know with these courses regardless if it's NVQ level or degree level it will give you that knowledge, but it will only give you written knowledge, it doesn't always give you reality.”

Transcript 7 “They get given the knowledge through university but their actual experience isn't great because you do two or three placements in different areas. So you may do your children with adults and then work with children or vice versa. So there is that gap there in that as well. But maybe that is just the case for everything. You have to learn on the job don't you.”

Transcript 5 “And I think people have gone through the HCA and being an HCA prior to being staff nurses, head and shoulders above somebody who's just come straight from school into uni, into that job role. They've got far more skill set because they've done the job previously.”

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Perception of unglamorous and undervalued roles in healthcare

Employers have the perception that roles within healthcare can look unglamorous to the outside. They feel that this aspect is limiting the number of people willing to come in to work in healthcare, and this is one aspect influencing the general labour shortage across the sector.

Transcript 5 "P: No, it's not a very good job. People don't think highly of it. "Oh, you're just a care worker, you just wipe arses." I think we need to change the whole concept of... It's a valued and very, very important job. And done right and you- I: It's life changing, isn't it? P: It is. I always give people the care like my own parents have, but people don't seem to value that nowadays."

Transcript 11 "I think at the moment people are just spoiled for choice. There's just so many jobs out there that being a healthcare worker is really not at the top of anybody's list."

Transcript 16 "Right across the board, well it's just getting staff in the door for one. People don't want to work in the sector because it's poorly paid and had bad press, COVID is still here. So you know its literally getting people through the door."

1.3 Employer perspectives on preferred solutions

Experience Opportunities and hands-on learning are vital to developing skills

Employers greatly value employees having gained the necessary experience to carry out roles in healthcare. Due to this, many employers have outlined that there is a need for more experience opportunities and hands-on learning to be provided to learners on courses. Increased opportunities to gain valuable experience are seen to be vital to developing the

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necessary skills needed in the workplace, such as interpersonal skills and patient-centred care, while providing learners the chance to understand what care work is in practice.

Transcript 5 *“P: I think people have gone through the HCA and being an HCA prior to being staff nurses, head and shoulders above somebody who's just come straight from school into uni, into that job role. They've got far more skill set because they've done the job previously. I: Time on the shop floor then? P: Oh, definitely. It's certainly the way forward.”*

Transcript 7 *“I: than the actual how are we going to get around this, how are we going to think P: Yeah and having opportunities during your education to see what that kind of looks like. I think you can understand it in a bigger context.”*

Transcript 14 *“With the people skills itself generally they have what I call that, the classroom based knowledge, I would always like somebody to have some external reality of that as well, so you've got the best of both worlds rather than just being pure academic training, I think they would need to have that hands on skill at the same time.”*

Transcript 18 *“Okay, so that's the problem with the certificate is that it might be theoretical and really they need that hands-on experience to make it make sense? Yeah.”*

Increased use of apprenticeships

While not as common in healthcare when compared with other industries, employers have expressed that they would be interested in more apprenticeships being offered in the industry. They feel that this could be a way of attracting more people into the industry, while also offering learners greater opportunities to build both the theoretical and practical skillsets needed.

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Transcript 5 *“I: What makes the apprenticeships good then? They're spending time with the patient, more time? P: They've got a well-rounded approach which they've learned right from the bottom upwards.”*

Transcript 7 *“P: They get given the knowledge through university but their actual experience isn't great because you do two or three placements in different areas. So you may do your children with adults and then work with children or vice versa. So there is that gap there in that as well. But maybe that is just the case for everything. You have to learn on the job don't you. I don't know how you can make that easier. I: Yeah okay. I guess the kind of answer to that is the apprenticeship route. P: Yeah”*

Transcript 8 (speaking to apprentice provider) *“They want to “grow our own” on the apprenticeship programme to overcome the recruitment issues and retain desired skills in the NHS”*

Transcript 6 *“So just finally, I think one thing to touch on is the apprentice schemes you say you offer that, what would that be? Would that be a nurse apprenticeship? Yes, it will be a social care. When you say nurse then you have to be very specific, general training for learning disability. But in my, in my case it is for learning disability.”*

College courses are valued highly

When it comes to recruitment, many employers value candidates who have experience and who have gone through relevant NVQ courses to develop needed skills. It is felt that these NVQ courses are important for providing employees with the necessary skill sets, both in knowledge and practical ability.

Transcript 18 *“our preference is to have people with NVQs in care so that they know what they're doing. So as a new employee, they hit the ground running rather than having to tell them loads of stuff that they need to know”*

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Transcript 14 (discussing recruitment) *“Again, I think it does depend on what job they're applying for, if there are any specific needs and if that relates to their NVQs or health and social care diplomas etcetera.”*

Transcript 6 *“Yes, and I've got on my staff group, I've got all together about 25-30 members of staff and most of them are qualified in NVQ's up to level three, except for my manager is level five and we are constantly looking at the untrained staff going for training”*

Training courses are currently helpful for upskilling

While some employers have outlined some challenges related to the inability to afford to send employees on training courses, there is the perception that current training courses are helpful for improving skills, but they need to be more accessible for employers. There is a range of different types of training courses used by employers, including in-house training, online courses, and more specific, tailored courses.

Transcript 14 *“But for us we try and tailor our training to our clients, so if somebody has a specific need, we would bring that carer in to do that part.”*

Transcript 6 *“Pretty good. I mean obviously we outsource the training and some of the training as well can be done online but pretty good.”*

Transcript 7 *“I: But is that training available at the moment? P: So it's through different routes. It's not necessarily through the traditional college. Its like level 2 and level 3 online learning that's available.”*

Transcript 11 *“We've got the training facilities to ensure that everybody in, you know the skills can be taught”*

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Employee Support and Mentoring

Employee support and mentoring are both thought of as good solutions to the skill deficit. Mentoring is a good way of teaching new skills in a hands-on way and supporting staff is crucial to ensure they feel valued and want to stay in the industry or business.

Transcript 5 "It's feeling valued, I think. I think people look down on people who work in healthcare. I think we need to change the whole image to make it a valued, respectful job."

Transcript 7 "yeah definitely because I think actually the role is really hard and you can get paid more to work in Tesco's. So the fact that people kind of still want to do that role. They see the value in it. We want to reflect that you know they work hard, and we think they should be paid, you know, a fee to reflect that."

Transcript 14 "I think we have to look at actually giving people the tools to do the job. You don't want to set somebody up to fail and I think sometimes and not actually, you know, we've been quite lucky in our business, but I've seen it happen before, you go "oh there you go, you go manage 10 or 12 people" and they go," oh my goodness, I've never managed a person in my life, how do I do it?" But yeah, I think companies sometimes now have to make sure that they've got that training needs and the tools to be able to allow that person to at least go out and try it to succeed rather than initially going "well, crack on" and they fail by no fault of their own."

Integration of people skills into courses

Interpersonal skills and emotional intelligence have been outlined as extremely key skills for healthcare businesses but are often missing. Because of this, there have been suggestions from employers that having more focus on developing these people skills in training and college courses could be valuable to improving this aspect of employee skill sets.

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Transcript 5 *"I: Just doubling back onto that comm skills, because that sounds absolutely vital if you're working with patients. Is that not taught at the moment? P: It is. I teach it, but often they don't seem to understand the concept. I: So you think there needs to be more training on that? P: Yeah"*

Transcript 10 *"I: If you could do one of those million things what would it be? If it was in budget say? P: So, the human element. What it is like to administer personal care on somebody. What it's like to deal with someone on a bad day. Someone with additional learning needs because everyone is different. So having the time to... yeah having those difficult conversations with somebody about it really, I would say."*

1.4 Business needs and recruitment focuses

Formal Qualifications are important when recruiting

When recruiting, employers look for people who have completed formal qualifications. They feel that these formal qualifications are a good indication that people have developed the needed skills to carry out roles.

Transcript 18 *"our preference is to have people with NVQs in care so that they know what they're doing"*

Transcript 10 *"So for younger people coming through, they tend to already have some experience, they've done college courses level 2 or level 3, in adult social care and may have been interested in it."*

Transcript 7 *"So they could've done a health and social care diploma or they may have come from a non-traditional route doing A levels"*

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Previous experience and personal experience stand out

As has been discussed extensively in the previous sections, experience is important for roles in healthcare. Employers not only value previous hands-on experience in work or through placements, but also personal experiences related to healthcare. In some cases, employers value experience more than qualifications.

Transcript 7 "I: So what you're saying is you'd rather have someone with real work experience than qualifications P: Yeah"

Transcript 7 "We don't just say no you don't have any experience. We kind of want to know what was life like growing up when you were growing up. Did you look after, you know, sibling or whatever. How have you ... what's brought you to this role in the first place and what experiences have you had that you think can contribute to you being an effective worker."

Transcript 10 "So for younger people coming through, they tend to already have some experience, they've done college courses level 2 or level 3, in adult social care and may have been interested in it."

Transcript 13 "they should have experience with this role to be honest because for a new person coming, it is too difficult"

Regulated Medical Provision Interview Analysis

2.1 Skill Needs

2.1.1 Priority Skills

Pharmacy

Clinical Skill

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The level of clinical knowledge and skill required in the pharmacy setting is increasing. Clinical skills such as conducting and interpreting blood tests, medication knowledge and administering vaccines are all needed by pharmacists and potentially dispensary staff in the future. There is a desire for courses that can teach these skills to the existing workforce and for these skills to be incorporated into the standard education pathways.

Transcript 3 “So what are the kind of things they’ll be doing in a couple of years that they won’t be doing now. Person 2: I reckon you’ll have a lot of dispensary staff being able to be qualified to do a lot of these services as well Person 1: Which services Person 2: Like the vaccinations and all sorts”

Transcript 3 “Yeah for example the branch I was in before I took on the areas management role ... I did travel vaccines, I did blood pressures, I did chicken pox vaccines, I did the COVID jab, Flu jab, blood pressure checks, microsuction of the ear so earwax removal and we also done like a weight loss program with and assisted weight loss drug as well as everything else we normally do. Person 1: Right Person 2: So the HPV vaccine as well. So its a lot of stuff that doctors used to do that a lot of doctors now aren’t doing so pharmacies are doing it either as an NHS or private service.”

Managerial Skills

There is a lack of quality managerial skills among pharmacists and there is a desire for specific courses to address this. Pharmacists now act as managers in addition to undertaking their technical clinical role, and many don’t have the skills to do both effectively.

Transcript 3 “But also because the pharmacist does not have the managerial skills to be able to manage those staff”

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Basic Maths and English

For some roles the only requirement was good basic maths and English skills. This was the case for rehab assistants. English skills were also mentioned as being needed to write reports.

Transcript 1 *"I think yesterday we were looking at her maths and there is online courses available by a butterscups for maths like a zoom classroom but they're all full up and I was like well why they full up their online surely."*

Transcript 17 *"there is no set requirements for physiotherapy assistants, employers expect good numeracy and literacy and some experience and qualifications in health and social care. Employers may ask for a GCSE in English or Maths, they may ask for a BTEC in a vocational qualification. But there is no set path or qualification."*

IT literacy

Within medical businesses, there was the feeling that some staff are lacking in general IT literacy. There is a need for more skills in using word, excel, and basic IT applications in the workplace.

Transcript 4 *"let's talk about like receptionist dispensary staff. What some of the things what would you say is the skills that they need to excel in their role more? So basic skills - word, excel"*

Transcript 1 *"But the basic the main thing is computer skills and I.T. Literacy. So I find I spend a lot of time training just on the basics really, email sending attachments using the systems."*

Nurses, Pharmacists, GPs

There is a general staff shortage across the whole sector. Of this, specific roles that were mentioned were nurses, pharmacists and GPs.

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Transcript 4 *“So what would some of those clinical roles be then? Nurses definitely, pharmacists at the moment as there's a big drive and there's a lot more competition out there for them now. GPs is the big one.”*

Patient management and people skills

As within healthcare, people skills are of high importance. It is important to have high-quality people skills to ensure that patient management and patient care can be of a high level. Thus, there is a need for more focus on developing skills for this area.

Transcript 2 *“So the skills we're looking for are human skills, first of all human skills, dealing with customers and people. That's the baseline.”*

Transcript 4 *“What skills is that you find they lack? Well if they've never had patients then it's just the basics sometimes. How they treat people, is somebody is upset then how they deal with that.. Just care navigating.”*

Transcript 1 *“But I also think on the job is really important because at the end of the day, you are going to be working with patients and people and then you get a feel for whether you like it or not as well.”*

Attitude and Desire

When it comes to what employers like to see within their employees, they value employees who have good, positive attitudes and who demonstrate a desire to learn. This 'desire to learn' aspect is important when it comes to upskilling and can make the challenge of softening work deficits easier.

Transcript 1 *“Yeah or people who are keen to do it right. They're willing, they want to take their career further.”*

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Transcript 2 *“so it's just about bringing the right people in here willing to learn and want to learn, then taking them through that”*

Transcript 2 *“More attitude motivation than technical ability? Absolutely because they can learn stuff if they want to learn it they take on information easily if they want to learn it.”*

2.2 Future Skills Needed

More flexible skill sets

Within medical businesses, employers expressed a need for more flexible skill sets within the workplace. For instance, pharmacies will require higher-level dispensary staff who can take on more tasks as part of their role. Therefore, there will be a need for staff to have more flexible, well-rounded skill sets.

Transcript 3 *“So what are the kind of things they'll be doing in a couple of years that they won't be doing now. Person 2: I reckon you'll have a lot of dispensary staff being able to be qualified to do a lot of these services as well Person 1: Which services Person 2: Like the vaccinations and all sorts”*

Transcript 3 *“So 'A' you either eventually run on potentially one pharmacist and maybe 1 or 2 dispensers depending on the size of your pharmacy. Or you have the 3 but the dispensers are equally trained to provide the services and you'd do even more services”*

Transcript 4 *“So you think the future will be like dispensary staff and other roles picking up more of the work of what would traditionally be a pharmacist? Yes”*

Transcript 1 *“trying to up skill other members of staff like clinical staff to say pharmacists to become prescribers technicians to be able to reconcile medications”*

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2.3 Employer perspective on challenges and causes

Pharmacy

Change/Developments in Pharmacy

In recent years there has been a lot of development in pharmacies which is still ongoing. There is a big move towards automation of dispensing resulting in a reduction in the amount of human dispensing required. This is coupled with a need to provide more clinical services and the loss of the pharmacy manager role. These changes are driving the requirement for more clinical and managerial skills within pharmacies.

Transcript 3 *“Person 2: Well there’s a lot of automation in pharmacies now.”*

Outdated courses

One pharmacy manager mentioned that the current courses are outdated and have failed to keep up with development. They still teach topics that are no longer relevant but fail to teach the new key skills.

Transcript 3 *“A lot of the process they go on about in the training pretty much are defunct now... some of them are.”*

Lack of management training

Currently, there are no management training courses available that are tailored to professionals in medical or healthcare sectors. The available courses are too general and there is a need for specificity in management training. Additionally, it is thought that it is important that management training is conducted in conjunction with the opportunity to gain experience in a management role to apply what you are learning in real time and see the difference between the classroom and real applications.

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Transcript 3 *"I don't think, personally, there's many forces out there that, particularly for pharmacist that teach you the management skills. Unless there is, I might have just missed it. For me, I've been in pharmacy for 11 years now, I never had a course that taught me management. I've kind of learnt along the way and picked things up and that made me the manager/area manager that I am now."*

Lack of pathways for upskilling

Within the medical provision side of the healthcare sector there is a drive to upskill members of the workforce to reduce the strain on other clinical roles such as GPs. Currently there are not enough pathways to do this and it is not clear to employers what is currently available.

Transcript 1 *"Definitely. Obviously we know there's a shortage of GPs and they're trying to up skill other members of staff like clinical staff to say pharmacists to become prescribers technicians to be able to reconcile medications. And I think more in house training should be available for the staff we've got so we can up skill them"*

Shortage of Staff

As with healthcare employers, the medical sector is also suffering from a shortage of staff numbers in the business and the availability of candidates in recruitment to suit needs. Roles such as pharmacists, GPs, and nurses are all in short supply, and due to this there is a need for lower-level staff to develop higher skillsets to be able to complete some of the tasks and fill in gaps in the workplace.

Transcript 1 *"Obviously we know there's a shortage of GPs and they're trying to up skill other members of staff like clinical staff to say pharmacists to become prescribers technicians to be able to reconcile medications."*

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Transcript 3 *“So straight into the kind of body of it. What are the skills or roles that you find most difficult to recruit for? Person 2: The most difficult role to recruit for we find is actually the pharmacists.”*

Transcript 4 *“So what would some of those clinical roles be then? Nurses definitely, pharmacists at the moment as there's a big drive and there's a lot more competition out there for them now. GPs is the big one.”*

A mix of courses being too basic or too expensive

Employers have outlined challenges faced around training and college courses being too basic and outdated for the skills they need, while other employers have stated that courses are often too expensive. These challenges are limiting the extent of skill development possible in the industry,

Transcript 1 *“Well I can only speak from NVQ2 qualified dispensers. I think it could be a bit more information. I find them really basic. So yes they're easy to pass and you know people are NVQ trained and you know you've got the qualification behind you but I don't think you really get the quality of staff really. I don't think it's difficult enough in a way. I don't think you get real professionals.”*

Transcript 3 *“I: And what is the quality of that like say from somebody like buttercup. P: It's getting better. But I think there is still room for improvement. I think they don't necessarily cover a lot. They don't cover everything that should really be covered in it from my point of view.”*

Transcript 3 *“A lot of the process they go on about in the training pretty much are defunct now”*

Transcript 1 *“P: Yes so a mix of video E learnings I think that would be useful. I: Is there not that already available? Like to some extent it surely is. P: there is but some*

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of it is online but then you're paying what £200 for it and it's like well it's online and why are we paying so much for it?"

2.4 Employer perspectives on preferred solutions

Apprenticeships

Greater use of apprenticeship schemes would be beneficial for medical businesses.

However, one employer noted that apprenticeships might only be beneficial for younger people coming into the industry due to the general lower pay of apprentices.

Transcript 1 "I: So what do you think the solution is. Is it people spending less time at college or and then having better mentors or apprenticeships? What do you see the kind of the solution here? P: I think almost like apprenticeships,"

Transcript 8 (Speaking to apprenticeship provider) "Looking to start apprenticeship The normal route would be A levels then degree There is a desire to capture post college via an apprenticeship programme"

Transcript 4 "It might be an apprenticeship but I think if people are already in the job they wouldn't want to take on an apprenticeship as its less money and they can't live off it."

Experience Opportunities

Similar to the healthcare industry, there is a need for more experience opportunities to be provided to learners in medical industries. There is a lack of these currently, while employers feel that experience opportunities are vital for building the real-world application of skills.

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Transcript 1 *"I: That sounds like a really defining feature then the fact that you're able to work along ... work in the role to actually be trained on the job as such, so get real work experience. P: Yes"*

Transcript 3 *"The thing is while you're at uni you've never worked in pharmacy before, or being a doctor you've never at this rate worked on the wards, same with a nurse."*

More Accessible Training and College Courses

Where some employers have outlined concerns around a lack of pathways for upskilling, employers have expressed a need for more accessible training and college courses. In this is the desire for a mix of more online courses, more specific training courses, and more college courses to allow for effective upskilling.

Transcript 1 *"I: You say it would be more helpful to have like... for training to have more of an online basis then? P: Yes so a mix of video E learnings I think that would be useful"*

Transcript 4 *"I: Right okay. And what would the answer be to that? How could that be changed more? P: Just more changes, because that's a bit much. I suppose if you're learning soft skills, you don't want to learn them over a whole day. You want to do bite size training, like just an hour even if it's learning online but an hour almost regularly."*

Transcript 4 *"Person 1: What would they be exactly those training courses? Person 2: So training courses specifically for the role"*

Transcript 1 *"An NVQ2 at least is really helpful and then we can look at pathways going on to NVQ3s but sometimes when we've got a person now who's doing an NVQ3 in pharmacy technician"*

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In-house training and Employee Mentoring

Some employers have outlined that they value the use of in-house training. This allows skills development to be specifically tailored to needs. Along with this, employee mentoring has been outlined as a solution that can help new employees through the help of more experienced staff. This is seen as particularly helpful for the non-technical side.

Transcript 1 "And I think more in house training should be available for the staff we've got so we can up skill them."

Transcript 17 "We externally do it, In our practice, we have someone come in every two years to do moving and handling with everyone. I: Alright, so you can bring someone in-house for training? P: Yep."

Transcript 4 "I guess all those soft skills as they would be called? How do you think they're best taught them? Just shown them really, So first off they would refer to an experienced colleague who would deal with it and then we'd both reflect on it and what went well what went wrong, how you do it different. Like a role play."

More Online Courses

Currently online training is used as a training tool and is generally thought of as valuable and quite good quality. There is potential for increased use of online learning to allow for widespread education in a cost effective way.

Transcript 1 "I know the training is out there but I think because it's so costly or it's not online people are less likely to take it out. Person 1 Yeah. Okay. Sure. You say because it's not online? Person 2: Yeah most of it like they still want face to face meetings and it's like well in the era where we've just gone past well through the pandemic where a lot more meetings were online. Person 1: Yeah Person 2: it's like why can't they continue that?"

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2.5 Perspectives on Net Zero

Lack of knowledge

In general, businesses in medical have a lack of understanding and knowledge on what it will take to meet the transition to net zero. Businesses feel that there is not enough support out there to help with understanding the transition to net zero.

Transcript 1 "I: Do you have the skills you need to start thinking about the net zero transition? P: Oh no, I because it's more of recent policy. I don't think there's been any not really any support how we can make it work in the workplace. So I don't think is it as much understanding on that"

Transcript 4 "I know about the target for carbon neutral targets.. well, we use inhalers but I don't know much about it."

Transcript 4 "So are you aware of the skills that you're going to transition to Net zero? No, I'm not aware of what it needs or anything"

2.6 Business needs and recruitment focuses

Staff numbers to meet growing business demands

Staff shortages are really affecting the medical sector. There is the feeling that the growing demands for healthcare are not being supported by staffing numbers, and this results in staff being overstretched beyond their means. Thus, businesses need more staff numbers to help deal with these difficulties.

Transcript 2 "Obviously our systems have been growing, growing growing the whole time, so we're just taking on more and more patients, but we don't have the bodies all right to treat them."

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Transcript 3 *“And I think its two fold. I think the problem is ... I think the NHS has grown in terms of its customer patient base but at the same time its reduced in terms of its work forces. Which, if you think about any other industry, it wouldn't happen. If you were running your business you'd put more man power in to cope with that.”*

Formal Qualifications

In recruitment for medical businesses, formal qualifications are extremely important. While some roles highlighted within this sector will be out with post-16 provision, qualifications are highly valued for lower-level roles.

Transcript 17 *“there is no set requirements for physiotherapy assistants, employers expect good numeracy and literacy and some experience and qualifications in health and social care. Employers may ask for a GCSE in English or Maths, they may ask for a BTEC in a vocational qualification. But there is no set path or qualification.”*

Transcript 8 *“Good scientific A levels are required to enter at band 4 or if an individual has a degree they can start at band 5 The prospective course would be post A level as there is a requirement to be 18 to work in the NHS”*

3.0 Conclusion

Overall, the findings provide clear next steps that could be taken to resolve current skill shortages within the healthcare sector. Firstly, the findings within the healthcare and social care sub-sector will be discussed followed by the medical provision sub-sector.

3.1 Health and Social Care Conclusions

Firstly, a key role that is currently in high demand is that of healthcare support workers and care assistants. Furthermore, within this role there are several skills deficits that should be

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targeted in post-16 education. It is also worth noting that the current community courses, for example the one run by Boots, were said to be of better quality than the standard pathways, so should be looked upon as a good example.

There were 4 key areas or skill deficits that should be directly addressed. The first two are safeguarding and dementia-based care. These two areas are currently not on standard courses but are essential skills needed to excel as a carer. The third skill deficit is in clinical skills and knowledge. The clinical skills required were not presented as clearly compared to the medical provision side of the sector and it came across as a more general need for an increased base level of knowledge in this area. The fourth skill to implement into training courses is the use of technology. This is a broad skill ranging from the use of standard IT software, to more specific patient record software to assisted living technology which is thought to be an important future area for the sector. There is a need for this area of teaching to be implemented in standard courses but also to be made available in an easily accessible form to upskill current staff.

One of the most important aspects of care to employers, was the patient centred approach and the holistic consideration of a patients needs and well-being. Among employers it is thought that newer employees are becoming increasingly task orientated which is detrimental to the patient and business. Going forward, employers would like to see the integration of interpersonal skills combined with patient centred attitudes to care into the available courses.

Experience is extremely valuable to employers with many stating that even personal (non-professional) caregiving experiences are highly valuable and something that is looked for when recruiting. Unfortunately, at present the availability of experience opportunities during education are very limited. If implemented effectively, the ability for students to gain practical experience and a hands-on understanding of the requirements of a career in healthcare, will significantly improve the quality and employability of students finishing their education.

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Finally, the difficulty of the job and the unglamorous perception of care-based roles is a real challenge for the sector. This was stated as a major cause of staff attrition and is something that needs to be combatted. A solution suggested by employers was increased support for employees. Although this is something that is the responsibility of the employer it could be encouraged on higher level courses taken by those in managerial positions.

Overall, there are many actionable takeaways to improve the quality of new employees and the ability for the healthcare industry to improve the standard of care they can provide.

3.2 Regulated Medical Provision Conclusions

There were several findings specific to pharmacies that are applicable to post-16 education even though pharmacists require degree level education. The industry has rapidly developed and the training available has become outdated. This has led to skill gaps in managerial skills of pharmacists and clinical skills of both pharmacists and dispensary staff as it is likely that dispensary staff will start providing services. There is the desire for the development of a specific course to effectively teach pharmacists the management skills required to run a pharmacy while also performing their clinical duties. Additionally, there is potential for a course to upskill current dispensary staff to be qualified to provide some of the more basic services to allow pharmacists to provide an increased array and level of services.

More generally within the sector, IT and people skills are in need of improvement. It is a general IT ability that is lacking and is something that could be easily taught in an online format. At present it appears that most IT education is done informally on the job, which can be time consuming and inefficient. There is the potential for the delivery of a basic course on fundamental IT skills tailored to the type of software commonly used in the sub-sector. People skills and patient management is another area in need of improvement. This is something that needs to be widely incorporated into training at all levels as almost everyone working in a healthcare setting will be talking to patients.

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The main solutions suggested by employers revolved around the idea of increasing the training options available and how accessible they are. There is the desire for more online courses, the utilisation of apprenticeships and the continued use of in-house training and mentoring. It is likely that education providers will need to work with employers and regulatory bodies to determine how best to implement more online courses or new apprenticeship programmes to meet the needs of the sector.