

**Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#)
ar y [gweithlu Iechyd a Gofal Cymdeithasol](#)**

**This response was submitted to the [Health and Social Care](#)
[Committee](#) consultation on [Health and Social Care Workforce](#)**

HSC 29

**Ymateb gan: | Response from: Cymdeithas Siartredig Ffisiotherapi |
Chartered Society of Physiotherapy**



Date 08/10/21

Dear Colleague

Re: Health and Social Care, written Evidence for HEIW oral evidence session

Introduction

The CSP welcomes this opportunity to respond in writing to Health and Social Care committee request for our views on the Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW) joint strategy, [A healthier Wales: our workforce strategy for health and social care](#).

Our written briefing compliments the principles in 'A Healthier Wales' and, the stated aim of the Welsh Government, to "whole system approach to health and social care, which is focussed on health and wellbeing, and on preventing illness." In this light, we offer our comments and suggested areas of exploration in the workforce strategy.

Thank you for providing us with an opportunity to agree with the overall direction, while offering comment on specific areas which we see the physiotherapy and the profession making a significant contribution.

Comments from the CSP

1) Integration of Health and Social Care

Action 11 of the workforce strategy states that HEIW will "translate the workforce models being developed through Regional Partnership Boards into a good practice guide for integrated working. This will draw on the innovation being developed at local level and accelerate the transformation process by ensuring it leads to fundamental and sustainable changes in the workforce. This will include private and voluntary provider services, volunteers and carers." This statement

Regional partnership boards (RPBs) and GP clusters are relatively new arrangements in the NHS. We understand that RPBs are the future of social care and health integration based on current policy, and their role in transforming services is still developing. The committee should look into the function of the RPBs and how the workforce will be integrated into this model as the action states.

2) First Contact Physiotherapy (FCP)

First Contact Physiotherapy is a CSP priority, it ensures MSK expertise is available at the beginning of a patients pathway and provides extra capacity in primary care as physiotherapists become an added profession that can be a patients first point of contact. We are encouraged by the developments in this area over the last few years, and have seen a modest increase in the number of first contact physiotherapists up to a headcount of 92 practicing within GP surgeries. Regionally there are variances in recruitment and uptake, including a decrease in some areas. This national increase needs to be used as a springboard for transformation in primary care consistently across Wales, although we are now beginning to see the signs of a slowdown in some areas due to a lack of sustainable funding and clarity on the training routes emerging.

The workforce strategy makes reference to Person-centred care as a “driver for extended skills and advanced practice, ensuring that, where appropriate, health and social care professionals can work at the ‘top of their license/competence.’” FCP is a great example of where physiotherapy can meet this aim in the plan, FCPs have advanced skills in MSK specialist assessment, triage, and management options including non-medical prescribing and injection therapy. We would welcome a stronger commitment in the plan on how the number of FCP posts can be increased across Wales, and how HEIW will support the training of more FCPs.

In England, the Health Education England ‘FCP and AP in Primary Care: (Musculoskeletal) A Roadmap to Practice’ has been launched. This training pathway provides clarity on the standards of education and capabilities required for the FCP role. In light of the need for more training and recruitment of FCPs, HEIW’s plans to deliver a similar framework would be an area for the committee to explore in more depth.

Suggested Question: Does HEIW have plans to develop, fund and support the implementation an FCP training pathway and capability framework, similar to the HEE roadmap in England for FCPs in Wales, in consultation with the relevant professional bodies?

The post-graduate education commissioning to support FCP workforce and professional development is key. In England, there are FCP-specific MSc modules and E-learning modules available. Some of this education is under development in Wales, including a MSc FCP module at Cardiff University, however further training options are required. In light of the need to consider further online learning options, the committee could explore what work HEIW is doing to widen online access to training similar to that available through HEE in England.

Suggested Questions:

- a) *Could HEIW state the progress made in developing and funding a post-graduate training offer for the development of FCPs, similar to that available in England? Does HEIW have a view on how FCP funding for education and posts will be arranged on a more sustainable and consistent basis?*

3) Advanced practice

Action 12 of the strategy states HEIW will “develop a clear competence and capabilities framework for extended skills and advanced practice across professional groups”.

In our view, this is a key priority area for developing the workforce to meet the challenges of the future.

Suggested questions:

- a) What are HEIW's plans to ensure / commission more AHPs receive training and advanced practice opportunities?
- b) Does HEIW have any plans to set educational standards and training for advance practice community rehab roles?
- c) Does HEIW have a plan to deliver increased non-medical prescribing training for physiotherapists and AHPs? If not, are there milestones or objectives set to do so?

4) Support Workers

The support workers level 4 apprentice is currently under development. We support this workstream and hope it can be built on further. Support workers are key in meeting the workforce challenges.

Suggested questions:

- a) What are the plans to get an apprentice route to full registered qualifications?
- b) Is there a target number / aim of support workers to undertake the apprenticeship route?

5)) Education and training for long covid

The workforce strategy was written in October 2020, while the pandemic had already started in Wales. The impact of long covid is still being assessed, however it's clear patients in all health settings may be effected and need treatment.

Suggested Question:

- a) Does HEIW have any plans to develop long covid training for the workforce?

7) Clinical fellowships?

Clinical leadership fellowships are a key way of developing leadership in the AHP workforce.

Suggested question:

- a) Does HEIW have a target number of AHP fellowships over the next few years, and/or objectives in relation to developing this area of work?

6) Workforce planning, including Support workers and the bursary

Over the last few years, physiotherapy has seen an increase in both student numbers and education providers. We welcome the workforce growth and believe this planning for a larger workforce needs to continue. The committee could scrutinise the expected growth in the workforce and how this relates to the future needs of the population. Relevant questions to consider are:

- a) How do we ensure diversity of workforce training in the long term, while ensuring a system that keeps Welsh graduates?

7) Streamlining

An issue that could have a significant impact on recruitment of the AHP workforce in Wales is the bursary system. There is a policy in Wales of providing a bursary for training in Wales on condition

of a 2 year tie-in. The process of allocating available jobs to those graduates in receipt of the bursary is called “streamlining”, and has been piloted over the last 2 years. There have been significant administrative issues and worry about the long term impact of this system on recruiting into Wales. The system has been evaluated by HEIW; however it should be scrutinised by an external body such as the committee.

The CSP views the workforce as a UK whole workforce and does not support barriers within this. The streamlining system currently does not allow graduates who have trained outside of Wales to apply for a band 5 role and start their career in Wales, meaning there is a potential loss to the Welsh NHS of qualified physiotherapists. We have encountered a number of Welsh speaking graduates who have been unable to work in Wales due to this policy decision.

The committee should use this opportunity to scrutinise how streamlining meets the workforce strategy needs. In particular:

- a) How does the streamlining system ensure the best and most diverse group of graduates are recruited into the Welsh NHS workforce, and how do non-welsh bursary graduates access jobs in the Welsh workforce?
- b) How do the streamlining and commissioning numbers for professions align and has streamlining resulted in an increase in recruitment of recent graduates?

An area to explore for the committee is the relation between IMTPs and HEIWs workforce strategy. Clarity of the process and projection of workforce numbers is needed to ensure a sustainable and efficient growth in AHP recruitment.

About the CSP and Physiotherapy

The Chartered Society of Physiotherapy is the professional, educational and trade union body for the UK’s 58,000 chartered physiotherapists, physiotherapy students and support workers. The CSP represents 2,400 members in Wales.

Physiotherapists use manual therapy, therapeutic exercise and rehabilitative approaches to restore, maintain and improve movement and activity. Physiotherapists and their teams work with a wide range of population groups (including children, those of working age and older people); across sectors; and in hospital, community and workplace settings. Physiotherapists facilitate early intervention, support self management and promote independence, helping to prevent episodes of ill health and disability developing into chronic conditions.

Physiotherapy delivers high quality, innovative services in accessible, responsive and timely ways. It is founded on an increasingly strong evidence base, an evolving scope of practice, clinical leadership and person centred professionalism. As an adaptable, engaged workforce, physiotherapy teams have the skills to address healthcare priorities, meet individual needs and to develop and deliver services in clinically and cost effective ways. With a focus on quality and productivity, physiotherapy puts meeting patient and population needs, optimising clinical outcomes and the patient experience at the centre of all it does.

For more information, please contact

CSP Public Affairs and Policy Officer for Wales

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