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Introduction

This case study shares the development of a bespoke curriculum between a Partnership Trust and a Higher Education Institute (HEI) in the South East of England. The partnership reflected the true ethos of Work-Based Learning whereby the process was led by the employer in order to address a clearly identified local workforce requirement (Barrie et al. 2010). The programme, a Certificate of Higher Education, was driven by a need to reconsider how Support Workers within the Mental Health workforce were developed and the need to create clear and attractive career pathways. This case study shares the perspective of: the Head of Learning and Development; a Support Worker studying on the programme; and the HEI Programme Director.

Background

Recruitment of registered staff within Mental Health is a challenge according to a report by Health Education England (NHS Employers, 2014) which details poor geographical location and lack of local skills as inhibitors in recruitment to the sector. This is particularly noticeable within Registered Mental Health Nursing positions with an annual reduction of 1.2% equating to 2,908 jobs since 2003 according to the Health and Social Care Informatics Service (HSCIS, 2014). This is in stark contrast to the number of Support Workers across healthcare which has risen by 5,072 since 2012 (HSCIS, 2014). This increase of support workers combined with the decrease in Nurses has compelled many NHS trusts to review skills mix and reconfigure services (NHS Employers, 2014).

One proposed solution is the development of established support workers to enable them to access Nurse education, however all-graduate entry into Nursing since 2013 (Nursing and Midwifery Council, 2010) poses challenges for support workers to climb the career ladder due to lack of correct entry qualifications. Therefore there is a demand on NHS Trusts to develop an attractive career ladder that allows staff to enter the profession in a support worker role and develop vocationally through work-based learning (Cavendish, 2013).

Method

This paper contains the experiences of the three authors: the Head of Learning and Development from the Partnership Trust; a Support Worker studying on the programme and employed by the Partnership Trust; and the HEI Programme Director. Each contributor was asked to write a short case study based on the perceived benefits and challenges of the Cert HE programme. The authors were selected based on their direct involvement with the programme. A case study approach has limitations as it cannot be generalised to the wider population however it seeks to appeal to other Trusts in a similar position to learn from this initiative and employ an approach of developing staff from within.

Head of Learning and Development Perspective

For us as a Partnership Trust being surrounded on three sides by the sea does not help when it comes to recruiting, it certainly reduces the numbers of people to choose from; neither is it helpful being on the border of greater London as staff can achieve pay enhancements if they travel closer to the centre.

Anecdotally within our Trust there appeared to be evidence to suggest that those of our staff who have been sponsored to undertake professional training stayed with us once qualified; so developing our unregistered workforce seemed to be the way forward. With the advent of an all degree workforce, NVQs and other similar vocational qualifications no longer provide the required entry points into professional careers, therefore if the Trust was to continue to develop its own support staff into registered nurses and occupational therapists, an alternative route was required.

The Foundation Degree route has existed for some time and had always been promoted within our organisation as a qualification for those people seeking associate practitioner roles rather than as a route into Degree courses. Sponsorship (study leave and funding for tuition fees) to undertake the Foundation Degree was available for a few lucky staff and although we had some interest we also found more staff enquiring about the one year Access to Nursing programme instead of the two year Foundation Degree.

Access programmes have been available through further education colleges for over forty years (Quality Assurance Agency 2014). They currently cost in the region of £1,600 for those who are not eligible for funding support and they are traditionally full time. While our staff were interested in the Access course they were reluctant to resign their post and risk financial hardship without the confidence of knowing that they would succeed in their end goal.

Historically, Strategic Health Authorities provided ring-fenced funding to support widening participation in education for staff in Agenda for Change Bands one to four (Jan Walmsley Associates, 2008). However with reconfiguration and changes to funding, all cash to spend on external training is now in one allocation. This leaves anyone wishing to seek sponsorship for an Access course in a competitive arena with everyone else - Bands one to nine. Support workers needed help to overcome these barriers (Lovegrove et al 2013).

This situation required us to think more creatively. Working in partnership with Canterbury Christ Church University and the Local Education and Training board seemed to be a logical next step. The programme we created was a one-year Certificate of Higher Education which had the potential to open up many opportunities for staff. My primary intention was to use this as a route to pre-registration nursing (where candidates did not have the correct entry qualifications). However we acknowledged that some staff would not be ready to go on to a Degree programme straight away for a number of reasons and therefore it was important to us that the course was not simply an exercise in gaining UCAS points but would truly enhance care within our settings. For this reason a programme needed to have sufficient flexibility to provide for the needs of students from a wide variety of work settings whilst still being commercially viable.

The programme was validated in a way that work-based projects would allow subjects relevant to our workplace to be studied, such as assessment and management of clinical risk in mental health, management of dementia etc. Students needed to be taught generic principles whilst still seeing the relevance and application to their own workplace by having specialist assignments marked by subject experts.

By using Local Education and Training Board (LETB) sponsorship formerly allocated for Foundation Degrees we were able to support twice the number of support workers to get on to their chosen pathway. Our LETB, Health Education Kent Surrey and Sussex has been very supportive of this project as it fits with the national agenda of creating career progression routes for the support worker workforce (Health Education England 2014a). With the introduction of educational placements, apprenticeships, higher apprenticeships and the new Care Certificate programme (Health Education England 2014b) it is essential that a clear progression route exists which continues through to Degree entry for those who are suitable, strengthening the bridge between support worker education and pre-registration programmes.

Access programmes are still available, as are traditional "A" levels and Foundation Degrees and each approach has its advantages to the individual, however developing an alternative one year route has been extremely popular with our staff and increases opportunities for those who have already shown their commitment to a career in caring and to working in the mental health sector. Studying at university from level four, allows a gradual building of confidence and means that those who go on to Degree programmes can do so seamlessly, already having confidence in the University, its IT and Library systems and by knowing many of the tutors.

Workers in Agenda for Change Bands 1 to 4 make up 40 per cent of the NHS' workforce and are responsible for an estimated 60 per cent of contact with patients (Cavendish, 2013). Therefore it is important to us that our staff have as many opportunities as possible to advance their careers. Having chosen staff for their caring nature and seen them develop as support workers, we are keen to retain them and develop them into registered professionals whenever we can. Anyone who does not have the appropriate equivalence qualifications in Maths and English is assessed before they commence the Certificate in Higher Education programme and given support to develop the required skills prior to completion so that they can then easily pass the university's own tests equivalence tests.

The Certificate in Higher Education programme offers an important opportunity to overcome potential barriers faced by our support staff (Health Education England, 2014a), it also assists us with retention and recruitment issues by enabling us to “Grow our own” registered professionals through high quality education (King’s Fund, 2013).

Support Worker Perspective

My career began in the area of mental health in 2011 after securing a position as a Support Worker in an in-patient rehabilitation unit. After completing all mandatory training and a Level 2 Diploma in Health and Social Care I felt ready to take the next step. Following a discussion in clinical supervision the Certificate of Higher Education in Health and Social Care was being offered through the Trust. The course is now in its final term and it seems a good opportunity to reflect on the journey so far and the way in which my life, and the lives of those around me, have changed.

It is inevitable to feel a mixture of excitement and apprehension at the start of a course like this. It was the beginning of a journey full of possibility, but at the same time doubts about my ability to produce work to an appropriate standard troubled me. However, the support offered by the University, Trust and my fellow students filled me with hope and confidence for the future. At times over the course of my studies, the amount of work involved has been intimidating and fears of not being able to cope have been a constant presence. However, with support from the university and my peers and was able to continue. Now as the end of my journey approaches, I feel empowered by the skills and knowledge gained and am excited at the prospect of going on to achieve even more.

On reviewing my journey so far it has been an essentially positive experience, aided by family, colleagues and my cohort, and as a result have had a wealth of experience and advice to draw upon. My initial hope to use the opportunity to improve my clinical practice and as a stepping stone to further study have been proved correct. Despite moments of self-doubt it is the new confidence and ability that has allowed me to enjoyed the opportunity to expand my horizons.

The main challenge has been effective time management. At times the problem of balancing work, home and study commitments has seemed insurmountable. However, with planning and organisation, this problem has been overcome.

Looking back, it is clear to see my progress and the impact this has had on both my professional and personal lives. Though my journey has certainly been an interesting one, the transition has been smoother than I initially thought. My role as a Support Worker on a rehabilitation unit had often involved working beyond traditional role boundaries and as a consequence the role has developed to take on a number of additional responsibilities. As the course progressed it became increasingly difficult to fulfil these additional responsibilities which is consistent with the findings of Selfe (2008) who details the impact of higher education on the workplace. However, my manager was able to reallocate tasks which allowed me to focus on completing workplace evidence. This sense of not being able to "fit everything in" was mirrored in my personal life also, finding it difficult to maintain family and social commitments while attempting to stay on top of self-directed study.

In order to present a broader picture, it was important to get feedback from my workplace manager about her perception of my progress and its effect on my practice. She thought I had gained greater insight into the service-user experience and had clearly developed professionally as a result. She felt that although I had been efficient and innovative before entering higher education my approach to workplace challenges had improved. She also considered my level of conversation with members of the multi-disciplinary team had altered, improving my participation in meetings. But she was particularly impressed by the use of my new found skill of reflective practice; a tool I have embraced with enthusiasm. I contemplate my actions in practice more acutely than I did previously as described by Schon (1983). I feel that I am more confident in my professional role as a result of my studies and this correlates with the results of NHS North West's report into the outcome of Foundation Degrees in the workplace (Selfe, 2008). Although ours was a diverse group with some strong personalities and differing outlooks and abilities, the feedback provided by my peers was broadly similar.

My initial hope when beginning this journey was that I pass the course and progress on to a Degree in Occupational Therapy. However, I find that as a result of my experience, my intention has changed and I now wish to explore a career in counselling. Although I have certainly faced challenges along the way, I have identified my strengths and weaknesses and feel confident that I am able to accomplish whatever academic and professional goals I aspire to. There is no doubt my journey into Higher Education has been a transformative experience. I am not the same person I was at the beginning. Perhaps the most significant consequence of my journey is not only that I have more choice in my future development, but also the self-belief to achieve it.

My goal is to continue my journey by researching and undertaking new challenges. I intend to undertake a counselling qualification and utilise this skill in my professional role. My experience so far has shown me that if I plan and continue to work hard I can achieve this goal. I consider myself to be very much a “work in progress” and hope to further expand my horizons with new experiences and improved professional development.

HEI Programme Director Perspective

When reviewing the needs of this sector we quickly realised that a traditional approach of validating named mental health modules (with pre-agreed aims, learning outcomes, content and assessment) would not allow the flexibility and responsiveness required by the Partnership Trust. Traditional validation processes have been known to impose lengthy timescales for implementing change often resulting in curriculums that are continually trying to ‘catch up’ with changes in practice (Child et al. 2010). Therefore the challenge we faced in designing a curriculum of this nature was to ensure: currency; sustainability and flexibility. In addition we needed to create a curriculum that could be responsive to changes in practice which has posed a historical challenge for all health and social care programmes (Barrie et al. 2010).

We achieved this by using ‘Negotiated’ (or open) modules, validated in such a way that the content is left open to the student and employer to select. The learning outcomes are generic in nature and allow the content of the curriculum

to be fluid and reflective of work-force agendas. The Partnership Trust were able to commit a cohort of students who were then provided with bespoke learning tailored to the needs of the trust. This learning package can be adjusted and improved in a timely fashion without the need for lengthy modifications. Therefore if a group of students from a rehabilitation setting have specific requirements for 'enablement' then this can be offered by staff within the faculty who have the relevant area of expertise, similarly if students from an acute setting need more learning on substance abuse the programme can respond accordingly.

Conclusion

The development of a bespoke education package between the Partnership Trust and the HEI had benefits on multiple levels. Firstly, the programme addressed a specific work-force requirement to allow the unregistered workforce the opportunity to develop. Secondly, the programme was transformative for those who have undertaken it, broadening horizons and enabling individuals to flourish. Finally, it has had a positive impact on workplace practices, including the care delivered to patients.

It is vital that NHS trusts strive to meet service demands in the face of uncertainty of future funding (Centre for Workforce Intelligence, 2013) and the investment in existing staff who are developed from within seems a sensible option. This is in line with Cavendish's (2013) recommendations to invest in the experienced and 'known' members of the caring team and importantly make caring a career opportunity that attracts and retains staff.

According to Dewing (2011) an employer who nurtures its work-force through investment, opportunity and creativity achieves a healthy and sustainable workforce who are engaged and valued. HEI's must be open to new ways of working that challenge traditional procedures that can often inhibit the quality and currency of programmes offered.

Future longitudinal research is needed to assess the impact of this type of programme on the recruitment to nursing posts and the mobility of those members of staff following education.

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