

National Operating Department Practitioner (ODP) Workforce Programme 2021-22

Scoping the future of the ODP profession

Executive summary



Introduction

This document is an executive summary of the National Operating Department Practitioner (ODP) Workforce Programme project 'Scoping the future of the ODP workforce'. Please refer to the full report for further detail.

The project ran between September 2021 and April 2022 and focused on the ODP workforce in England.

This report has been prepared for Health Education England (HEE) but is relevant to anyone with an interest in the ODP workforce.

Key Messages

- The ODP workforce is uniquely skilled, valued, and vital to the delivery of care in England in the 21st century and elective care recovery
- The ODP workforce needs specific attention to thrive as a lack of profession specific attention has held back development of the profession in delivering its full value to population health
- The ODP profession needs to be better understood by the public, other health workers and workforce leads to enable employers to adequately recruit into the profession and optimally exploit the value and expertise of the profession
- ODP is uniquely connected across Allied Health Professions (AHPs), Nursing and other professions and these links must be respected and utilised to maximise support to the profession

Next steps

- Develop a national implementation plan for the priority recommendations in this report aligned to current policy and strategy
- > Implement the priority recommendations in this report
- > Raise the profile of the profession within healthcare and public domains
- > Create a national platform for sharing information about the profession
- > Strengthen ODP networks and the newly established national infrastructure

The operation ODP expert group and regional workforce action groups (WAGs) will be critical to driving the next steps forward over the next two years. Accountable to the ODP policy group, regional WAGs should be resourced to enable them to disseminate the outcomes of this project and implement the recommendations identified in this report and to ensure that ODPs and the training ODP workforce have a voice. By working in collaboration with local providers, workforce and clinical leads, the College of Operating Department Practitioners (CODP), the Association for Perioperative Practice (AfPP) and higher education institutes (HEIs), these groups will be able to drive forward workforce transformation and lasting change for the ODP profession, the services they provide and the patients they serve.

Project Overview

There are 14,933 registered Operating Department Practitioners (HCPC, Dec 2021), of which 9692 (8798 FTE) work in the National Health Service (NHS) in England. The aim of this project was to explore and identify the current position of the ODP profession in England, with the purpose of informing and underpinning the development of a profession specific strategy. The project was conducted between September 2021 and March 2022 and engaged with a diverse range of stakeholders, and used an iterative enquiry-based approach to explore and gather soft intelligence and build the knowledge base about the ODP profession. Themes such as workforce data and the impact of COVID on the profession were purposely explored whilst others emerged throughout the project. The project aligned to the NHS people plan and people promise, the NHS Long Term plan, the HEEs workforce transformation star alongside current HEE workstreams which led to collaborative meetings and events. The emergence of themes from the data, subsequently evolved the project to also encompass relevant workstreams related to perioperative services and COVID elective care recovery.

Strategic alignment

This project aligned to

- > The Allied Health Professions (AHP) Strategy for England: 2022 to 2027: AHPs Deliver
- > AHP Workforce supply project
- Reducing Pre-registration Attrition and Improving Retention (RePAIR)
- > AHP Retention
- > AHP Support Worker Competency, Education and Career Development Framework
- > AHP International recruitment
- The College of Operating Department Practice (CODP) projects including: The supply and administration of medicines using patient group directions (PGDs) for ODPs, ODP career trajectory, ODP Apprenticeships and ODPs in enhanced and advanced roles (CODP 2022)

This project led or supported

- > The National ODP Masterclass (Feb 2022) A briefing on the ODP workforce
- A network of regional groups focused on exploring region specific ODP workforce challenges and priorities and aligned to the national priorities (see Figure 1)
- > An ODP expert advisory group as part of 'Operation ODP'
- > An ODP Policy Group to govern and oversee current ODP workforce activity
- > The 'outstanding theatre teams' event (NHSE/I) focused on elective care recovery



The emerging national infrastructure connecting ODPs and driving workforce transformation, identifying ODP workforce action groups, current phase (March 2022)



Key Findings

The project was far reaching and fostered a breadth of findings with two themes consistently occurring. The first is reference to the perception that ODP is a 'hidden profession'. The second is disparity across several fields including the optimal use of workforce skill, placement opportunities for learners, career progression and pre and post registration education and training opportunities. Below is a summary of the key findings using headings from the HEE workforce star.

Supply

New electronic staff record (ESR) codes have been introduced for some ODP roles, and the national AHP workforce programme has improved awareness about the challenges with ODP workforce data. There remain challenges regarding accuracy of the ODP workforce data as this is often merged with Nursing or reported as perioperative workforce data. Improved accuracy of data about the profession will improve the ability to workforce plan and gauge ODP supply needs.

The ODP workforce is predominantly female (64%) and data suggests that the workforce profile is poor with 54% of ODPs working in Band 5 roles as compared to 21% for their AHP counterparts.

Retention data suggests an increase in leaver rates compounded by a 20-25% attrition rate in the training workforce on traditional entry undergraduate programmes. Reasons for attrition are abundant, but there is limited accurate data available. Retention on ODP apprenticeship programmes is reported as being high and there is significant interest from all regions to increase the number of ODPs training via the apprenticeship route.

The CODP report that there are 27 Higher Education Providers (HEIs), supplying 28 BSc (Hons) courses, 21 apprentices and 7 Dip HE programmes as routes into registration. Approximately half of ODP courses are endorsed by the College of Operating Department Practitioners (CODP), with approximately 900 learners entering the workforce each year as newly registered ODPs. The current CODP ODP curricula (2018) incorporates enhanced surgical skills, commensurate with a surgical first assistant (SFA). There is variation in the delivery of these skills by undergraduate courses and the utilisation of these skills in practice. On September 1st, 2024, the threshold level of qualification for ODP (SET 1) will increase to Degree from Diploma and with the introduction of new Standards of Proficiency (SOPs) in 2023 the profession must ready itself for these changes.

Clinical placements are competitive, due to the perioperative environment and the number of trainees in the system who require exposure to this clinical speciality. Placement backlog due to the impact of COVID continues to impact on placement capacity. Alternative placement models, placements in critical care and leadership/research placements could expand placement expansion.

International recruitment into the profession remains challenging with few countries providing practitioners with equivalent, transferable skills to enable them to register with the HCPC. Returners to practice in the field of ODP, have, so far been minimal.

ODPs are passionate to raise the profile of the profession. There is a need to increase public awareness about the ODP role and raise the profile of the profession in healthcare. Work experience for school aged pupils is challenging due to the environment in which ODPs work, however new technologies such as virtual reality may provide a solution to this. The profession may benefit from a dedicated publicity campaign.

New roles and Upskilling

The profession has transformed over the last 30 years. The response of the profession to support COVID surge capacity and critical care shone a light on the skill and expertise ODPs bring to patient care pathways in acute environments. Though ODPs have a history of working in critical care and other environments, COVID has enhanced the appetite for ODPs to work in critical care and areas outside of their 'traditional' operating theatre environment. More opportunities are required for ODPs to work in critical care and other environments.

The CODP has an ODP career site, however there is a need to develop a formalised career framework. Routes into to ODP via Bands 2-4 roles are ambiguous and routes into advanced and consultant level roles are limited and complex. The skill set of the ODP workforce lends

itself directly to career pathways leading to the surgical care practitioner (SCP), anaesthesia associate (AA) and other enhanced and advanced roles. 'Trailblazing' ODPs are working in advanced roles, but the profession often has limited opportunity to train and apply for such roles, and this is often attributed to being unable to independently prescribe. Some practitioners/Trusts have been innovative and work around the system, but there are examples are limited.

Changes in technology in the operating theatre, the ODP role, alongside the frequent changes to curricula content and level of qualification over the years has created generational, academic and skills gaps across the 4 pillars of practice. There are a range of qualifications held by the current workforce including City and Guilds, NVQ, DipHE and BSc. Bridging these gaps is possible, by giving qualified practitioners the opportunity to extend their skill and expertise and through the creation of a peer support or buddy system or a professional ODP advocate role. This may also improve retention of the trained and experienced workforce.

New ways of working

The impact of culture on the ODP profession is significant and manifests within, and external to, the profession itself. ODPs want to develop themselves but need opportunities and leaders who support them to thrive. The 'flaky bridge' acknowledged by RePAIR and early career leaver are evident. A more optimal culture would provide positivity, optimism and influence the profession regarding retention, productivity, and parity of opportunity. Poor culture in theatres drives disconnect between professions who work there and disparity of opportunity and retention of both the training and qualified workforce.

The recognition of, and optimal use of skill across the whole perioperative workforce in England and across all perioperative phases could enable transformational change and is essential to managing current and future theatre and critical care capacity and support elective care recovery and modern services. A collaborative team created at the ignition event in March 2022 have begun to explore and address perioperative culture.

The profession is fortunate to have two bodies representing it: The CODP and the Association for Perioperative Practice (AfPP), both of whom make significant contributions to advancing the profession. Whilst the AfPP focuses on the whole of the perioperative workforce, with some focused pieces of work led by ODPs (such as a student and early careers special interest group), the CODP, as the professional body for ODPs, pursues a focused ODP agenda. It is currently driving forwards changes to PGDs, supporting the implementation of apprenticeships, the development of perioperative support workers and ODP careers. Together, the CODP and AfPP are strong and a vital resource for the profession. It is vital that these bodies continue to work collaboratively to drive the profession.

Leadership

Leadership is embedded into the ODP standards of proficiency (Health and Care Professions Council) and the CODP curricula, though academic and clinical exposure to leadership content

during training is varied but some HEIs do embed leadership placements in their programme. There is evidence of ODPs in leadership roles, but this is limited. ODPs need to be represented at senior and board level. It is important that there is further investment in leadership at all levels for the ODP profession.

Recommendations

The following figure captures the recommendation from this project.



Summary of recommendations from the HEE ODP Workforce Project 2021 22

Supply

- Complete a deep dive into workforce data and retention of trained and training worforce
- Trial new placement models and share best practice, consider the use of a national practice assessment document and invest in digital technology to increase and enhance placement provision
- > Prepare for the changes to SET 1 and the new SOPs
- Ensure that the supply retention and development of the ODP workforce become a priority for workforce planners and expand numbers of ODPs in training
- Raise the profile of the profession in the public and healthcare domain

ODP New roles and upskilling

- Create an ODP career framework inclusive of bands 2-9 and apprenticeship routes, dovetail this with the KPMG event perioperative career framework output
- Ensure that opportunities for ODPs to progress into advanced roles are available by mapping skills to roles such as SCP and AA

Review the extent to which the SFA skills are being taught and utilised in practice and map these to the elective care recovery plan to optimise use of ODP surgical skills

ODP New ways of working

- Create a national platform for sharing information about the profession based on the 4 pillars of practice to improve the profile and to improve networking opportunities
- Strengthen ODP networks and infrastructure to drive forward change in all regions and ensure that ODPs and ODPs in training have a voice
- Complete a training needs analysis for the profession to inform the need for educational opportunities to upskill. Provide a network of peer support or professional advocate roles

ODP Leadership

- CODP and AfPP to continue to work in partnership to drive collaborative change for the profession
- Promote positive role modelling and provide parity of opportunity for ODPs to move into leadership and senior roles. Embed leadership training throughout the ODP career and offer leadership placements to pre-registration learners.

Priority Recommendations

- 1. ODPs career Framework Bands 2-9 and strengthens routes into ODP
- 2. A deep dive into ODP workforce data and retention
- 3. National focus on ODP placement capacity to enable an increase in the training workforce particularly through the ODP apprenticeship route
- 4. Address culture and the impact of this on the ODP workforce
- 5. Bridge educational and generational gaps to enable optimal use of skill and provide parity of opportunities for ODPs

Risks for the profession

Risk	Viable solution/enablers
Unable to grow the workforce due to limited clinical placement capacity and increased pressure on certain placement areas required for training e.g., Maternity services.	Alternative placement models, such as fair share model, rotational models, leadership placements, virtual reality, and simulation.
The emergence/introduction of perioperative local roles adding complexity and confusion into an already complex structure e.g., Band 4 Associate roles.	Escalate and share best models of perioperative care. Develop a career framework for ODP alongside a perioperative career framework.
A breakdown in collaboration between Association for Perioperative Practice (AfPP) and the CODP	Maintain current momentum working on collaborative projects for the ODP/perioperative workforce.
Preconceived/ uninformed perceptions about the role of the ODP and the impact of non-medical prescribing reducing opportunity e.g., Advanced Clinical Practice (ACP) routes for ODPs.	Raise the profile and awareness of the profession and what ODPs can do. Ensure PGD outcome is shared and rolled out across all healthcare providers.

An 'older' workforce, increasing trend in leaver rates, burnout, and high proportion of early career leavers. Deep dive into ODP retention, value and diversify the profession and provide career development opportunities.

Current risks which have been identified for the profession with viable solutions and enablers.

Limitations and enabler (project)

Limitations

- ➤ 6 months only
- England only
- Limited stakeholder engagement. It is recognised there is further data and examples of best practice to explore and report.

Enablers

- Online meetings/networking provided timely access to meeting teams/individuals in all regions in England.
- An open and inclusive culture. A culture of sharing and collaboration enabled change to happen at pace.
- The commitment from stakeholders to engage in this project and their passion and drive to lead change to shape the future of the profession.

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