

# Preparation for Work 2018-19



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Health Education England seek out, invest in and quality assure the best education and training for trainees, new roles, and current professionals; intervening to ensure quality, environment and supply meet the needs of learners and the NHS, using new evidence-based science, digital technology, skills, and knowledge to enhance individuals and multi-professional teams. We cooperate and collaborate with partners across health and education, respecting each other's role, expertise, and responsibilities. We bring workforce data, intelligence, and analysis, policy proposals, practical transformation and development tools and resources, both financial and people, to shared issues.

Health Education England commissioned Nursaw Associates to report on preparation for work programmes within the NHS in England.

## Foreword

Firstly, I would like to acknowledge and thank all staff and healthcare providers who are dealing with the challenges of Covid-19. I have never been prouder to work alongside such inspirational and dedicated colleagues.

People have always been our most important asset and at Health Education England we are committed to helping the NHS have a workforce that reflects the communities it serves and meets the needs of patients, both now and in the future.

When we move into the recovery phase, the NHS needs to use its unique position, leverage, and strength as an Anchor Institution, to play a vital role in reviving and restoring the health and wellbeing of communities and the economic opportunities for local people.

We know that those at the lower end of the economic and social scale have been hardest hit because of Covid-19. Health inequalities have been clearly exposed. Whilst everyone is affected to some extent by the pandemic, we know that those from better-off backgrounds are still more likely to be employed and be in a better position to take up wider opportunities.

Our actions alone will not address all the issues that those from disadvantaged and underrepresented groups face. However, through our people, our business and our influence we can begin to address, restore, and rebalance the impact of Covid-19 has on many communities. The Preparation to Work activities aim to achieve this by:

- Widening access and participation within the NHS by giving those from disadvantaged and underrepresented groups the opportunity to access, experience, education, training and employment in the NHS
- Assisting the NHS to adapt to the changing demographics of the population, to build a more diverse workforce and become more reflective of the communities it serves
- Creating a home-grown workforce supply pipeline that unlocks hidden talent and helps the NHS to tackle its greatest challenge: workforce supply.

Through this survey and our data collection, we are gathering crucial national and regional understanding, of how Preparation for Work activities support the NHS to build and add value to their future workforce. Furthermore, this provides the evidence base required to identify opportunities to upscale and share best practice, recognise areas that may require further development, make impactful recommendations, and effectively direct and target resources to the people and places that need it most.



During 2018-19, we worked with over 139,000 people - supporting them directly into jobs, helping them make decisions about their future career or sharing the opportunities of the health sector. The NHS programmes running under Preparation for Work are collectively the largest set of employer-led, pre-employment activities in England, helping to develop employees of the future, for years to come. These interventions show a long-term approach to building our workforce and provide a strong foundation for the future. This report provides some of the learning from employability programmes, work experience, and work-related learning in the NHS.

**Laura Roberts**

Director of Skills Development and Participation  
Health Education England

## Achievements since the last report

Following the recommendations made in our 2017-18 report we have:

- Appointed seven regional Talent for Care Relationship Managers and grown the Widening Access and Participation team.
- Funded 10 Step into Work programmes to support 400 unemployed people through pre-employment programmes.
- Engaged our Clinical Fellows and others to review and update our work experience toolkits.
- Continued to support the adoption of work experience quality standards. Health Education England has been awarded a Gold Standard as a facilitator.
- Supported the Prince's Trust Get into, Get started and mentoring programmes. The Prince's Trust aims to bring 10,000 young people into employment within health and social care by 2024.
- Developed a fast-track initiative to help people into employment in social services within the South East.
- Assisted in the development of Fast Futures, recruiting 1,000 young people into digital employment within health and social care.
- Promoted employability programmes with the pre-employment directory and through continued engagement with regional leads.
- Developed a national partnership agreement to work with the Careers Enterprise Company.
- Expanded the routes into medicine programme to include Allied Healthcare Professions and Pharmacy.
- Commissioned a return on investment report for employability programmes by Accenture<sup>1</sup>. The findings from the business case demonstrate that for every £1 spent on delivering employability programmes, an NHS Trust could recoup that £1 plus an additional £2.50 in financial and economic benefits.
- Continued to support Project Choice, which is moving out of its pilot phase and in 2020/21 will take 128 students, with targets of 90% to complete the programme and over 50% moving into an apprenticeship or other employment.
- Supported the development of Movement to Work's Youth Insight Tool.
- Through Skills for Life given employers access to multiple learning tools to support staff progress in numeracy, literacy, and digital skills. To date, this has seen 6,000 learners across 79 employers nationwide enrolled on self-directed study tools that we have commissioned.
- Supported employers to use check international qualifications against English equivalencies.

We commissioned independent evaluation of the Widening Participation: it Matters! Strategy and Action Plan<sup>2</sup> to establish the impact of the strategy and identify areas that may require further development. It concluded that work undertaken in each of the five goals delivered by an impressive mix of local, regional, and national activity underpinned by a central investment. The view from stakeholders is that HEE at a national level is having a key role in driving widening access and participation forward.

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<sup>1</sup> <https://www.hee.nhs.uk/our-work/work-experience-pre-employment-activity>

<sup>2</sup> [https://www.hee.nhs.uk/sites/default/files/documents/Widening%20Participation%20it%20Matters\\_0.pdf](https://www.hee.nhs.uk/sites/default/files/documents/Widening%20Participation%20it%20Matters_0.pdf)

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## Executive Summary

Every year we survey healthcare organisations across England to help us to better understand how careers and opportunities in the NHS are promoted and how people are supported into work.

The survey includes employability programmes, work experience and work-related learning activities. It is designed to help us understand how we can best support organisations in the future. The report is also designed to help healthcare organisations to benchmark themselves against others and understand practice across the NHS.

The fourth Preparation for Work survey sees further rises in the number of opportunities offered by the NHS across employability programmes, work experience and work-related learning. The respondents' organisation size was overwhelmingly large, with 89.3% employing over 1,000 staff. This means that the findings and recommendations we make invariably relate to large organisations.

- The NHS continues to offer one of the largest programmes in the UK, and it is still growing. During 2018-19:
  - 3,025 people took part in employability programmes
  - 15,995 undertook a work experience placement
  - 120,390 attended work-related activities including careers events, open days, talks and workshops.
- Widening participation was given as an important reason to offer preparation for work programmes.
- There continues to be a strong recognition by healthcare organisations to support the future of the NHS workforce.
- Capacity remains one of the most significant barriers to the growth of preparation for work programmes.
- There is limited targeting of participants. Rather than growth organisations should consider targeting programmes in response to gaps or underrepresentation in the NHS or their workforce – aligning with their own organisational composition and need and reflecting the communities they serve.
- Across all types of preparation for work programmes there is limited tracking and monitoring of participants. In particular, we do not appear to be tackling the large number of participants with unknown destinations who have undertaken employability programmes. This is also the case when healthcare organisations are working with external bodies. There needs to be better data monitoring and tracking of participants.
- The majority of the respondents to the survey were located within Human Resources or an Organisational Development/Learning and Development area. These are the key constituencies to engage with in considering the future development or growth of programmes.
- There is a significant amount of data already captured by Health Education England's quarterly data return. Consideration should be given to how this survey (which provides more qualitative information) can be more integrated with the quarterly return.

## Employability programmes

- Employability programmes continue to grow. There is a 13% increase from last year rising from 2,669 to 3,025.
- 59% of larger organisations say they offer employability programmes. This leaves a substantial number of larger organisations reporting not offering employability programmes.
- The main barrier to growing employability programmes was cited as limited capacity, followed by limited funding. This suggests there is limited organisational value placed this activity. Health Education England should consider developing further return on investment case studies.
- Widening participation was given as the most important reason to offer employability programmes (79.4%). It was listed as very important or important by 98.5%.
- 44% of participants move onto a positive destination (employment or further training). 12.7% of participants move into apprenticeships (this is a lower proportion than last survey). 18.5% moved into healthcare employment (excluding apprenticeships), this is less than the last survey (at around a quarter).
- Employability programmes continue to have a substantial proportion of participants with unknown destinations (55.7%). In order to understand the impact of employability programmes more needs to be done to track participant outcomes. Commissioned programmes should have localised impact data that is reported to healthcare partners.
- 55.6% (35 respondents) report targeting specific groups to their employability programmes. The main target groups are individuals not in education, employment or training (NEET), long-term unemployed and individuals with a learning disability. Individuals with learning disabilities, difficulties or autism are the third biggest target group. This is a significant shift from last year.
- 44.4% (28) of the respondents running employability programmes reported that they had no target group. However, there has been an increase in the number working with partners (for example, with organisations such as further education colleges). Health Education England need to further understand how employability programmes are organised within the NHS and how targeting can be enhanced.
- More organisations report offering traineeships (60.3%) compared to the last survey. However, the numbers of traineeships per organisation has dropped from an average 11 to 5.
- 46.7% of respondents offer supported internships. This is an increase from last year.
- Over 50% of respondents offered career change support.



## Work experience

- Work experience is the most common preparation for work programme offered. 97.2% offer work experience.
- 78% have a work experience policy.
- The most popular length of time is a one-week placement.
- Main partners are schools and further education colleges.
- The average number of placements is 2.98 per 100 employees. The maximum recorded was 16.7 per 100 employees.
- The main barrier to work experience is limited capacity within the organisation (75.3% of respondents, 55) this is an increase from last year. Capacity has always been cited as a barrier to growth. Consideration should be given to the development of collaborative work experience hubs to build capacity across a number of healthcare organisations.
- 85% do not target participants for the programme. Less well-connected students can find accessing work experience difficult and then feel disadvantaged in applications for employment and further or higher education. Consideration should be given to greater targeting rather than building further capacity. Case studies of work experience programmes targeting students from disadvantaged backgrounds would be helpful.
- Risk management (including health and safety) continues to be ranked highly as a barrier to offering work experience at 41.1% (30). This is an increase from last year's 34.4% and is the second main barrier for work experience. The work experience toolkits should enhance the risk management information, alongside further promotion of the toolkits.
- The destination of participants is often unknown.
- There is an increasing awareness about Fair Train's Work Experience Quality Standard, 70.3% (83) compared to last year's 59.6%. A further 29.6% (25) are working towards or have plans to gain the standard. This should be further encouraged.

## Work-related learning

- Work-related learning continues to have the largest volume of individuals engaged with 120,390 reported to be taking part in careers events, open days, talks and workshops.
- There is a 217% increase in participants from last year's survey. This could be due to an increase in activity and/or a better collection and reporting of data.
- The main activities provided are careers fairs, recruitment fairs and open days.
- To help the future workforce was listed as the most important reason for work-related learning. Widening participation is the next most important reason.
- Work-related learning was cited as the most important/important across all preparation for work programmes for:
  - Routes into apprenticeships by 79.8%
  - Building diversity within an organisation by 84.8%
  - Building community relations by 93.6%.
- 73.6% report no target group.
- The main target groups were young people from socially or educationally disadvantaged backgrounds, the long-term unemployed, young people not in education, employment or training (NEET) and armed service leavers. This is a change from last year as long-term unemployed or armed service users did not feature as heavily.
- Main partners are schools and further education colleges.
- The main barrier for work-related learning programmes was limited capacity. Limited funding was cited as the next main barrier. With these significant numbers it should be considered whether more targeted interventions and activities may have more impact.



## Recommendations

### It is recommended that Health Education England:

- Support the targeting of participants taking part in preparation for work programmes. For example, less well-connected students can find accessing work experience difficult and then feel disadvantaged in applications for employment and further or higher education. Consideration should be given to greater targeting rather than building further capacity. This will be particularly important as we move into the recovery phase of Covid-19 and efforts should be focused on those most affected and disadvantaged through the delivery of a wide range of preparation for work activity.
- Encourage greater numbers of large employers to offer employability programmes, through the further use of return on investment studies and case studies demonstrating impact.
- Provide case studies of work experience programmes that target students from disadvantaged backgrounds.
- Showcase best practice in collaborative work experience hubs to build capacity across a number of healthcare organisations.
- Enhance the risk management information within their work experience toolkits, alongside further promotion<sup>3</sup>.
- Encourage regional teams to support the adoption of work experience quality standards<sup>4</sup>.
- Require its commissioned partners (for example, the Prince's Trust) to feedback on the impact of its programmes to individual healthcare organisations.
- Consider how to effectively engage smaller organisations to complete the survey. This could be through a dedicated survey or support from the relevant Royal Societies and Health Education England's regional leads.
- Focus communications on human resources and organisational development teams to have the greatest impact on the development of preparation for work programmes.
- Consider further how to align this survey data with that captured by their quarterly data return.

### We recommended that healthcare organisations:

- Consider giving greater focus to targeting and monitoring/evaluation rather than increased capacity. This will ensure that the programmes that run are as impactful as possible.
- Target their preparation for work programmes on those under-represented in the NHS workforce and/or those that face more challenges to accessing jobs or opportunities.
- Require feedback and impact reports on employability programmes run by external organisations, including the Prince's Trust and Jobcentre Plus.

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<sup>3</sup> The work experience toolkits are available at [www.hee.nhs.uk/our-work/work-experience-pre-employment-activity](http://www.hee.nhs.uk/our-work/work-experience-pre-employment-activity)

<sup>4</sup> More information is available at [www.hee.nhs.uk/our-work/work-experience-pre-employment-activity](http://www.hee.nhs.uk/our-work/work-experience-pre-employment-activity)

## Methodology

The online survey was open from the 25 July to 22 September 2019. The survey was sent directly to work experience and apprenticeship leads in Trusts, previous respondents and Health Education leads. It was also promoted by Health Education England, NHS Employers, Health Apprenticeship Standards Online (HASO) and Royal College of General Practitioners who added it to their communications.

We asked organisations about:

- Employability programmes
- Work experience
- Work related learning.

We used the following definitions (which were also communicated within the survey):

- Employability programmes are typically aimed at people with qualifications at level 2 or below, and provide them with training to develop their skills and increased opportunities for employment, further/higher education opportunities in health-related subjects or moving into apprenticeships. This could include internships.
- Work experience describes opportunities for direct experience of healthcare work within an organisational setting, for example this could include role shadowing.
- Work-related learning gives exposure and insight into future careers, including an understanding of the skills and knowledge required in the workplace. Work-related learning could include careers/skills events, open days and tours.

We used a mixture of questions, qualitative including attitudinal (using the Likert scale), and quantitative. Where appropriate we have used questions that were in the previous surveys in order to ascertain change over the period.

The previous surveys covered the period 2016-17, 2015-16, and 2013-14. The 2013-14 survey only captured and reported on work experience. We have, where appropriate, compared the responses with previous years. 45% of the respondents completed the previous year's survey.

There was only one organisation that submitted more than one response. However, on closer analysis of these responses it appears that the respondents are dealing with different activities, in different parts of the organisation. We have, therefore aggregated their responses, whilst reducing the organisational numbers.

It should be noted that this is a snapshot from the 122 responses we received.

# Analysis

## Respondent information

121 organisations

90% employing over 1,000 staff

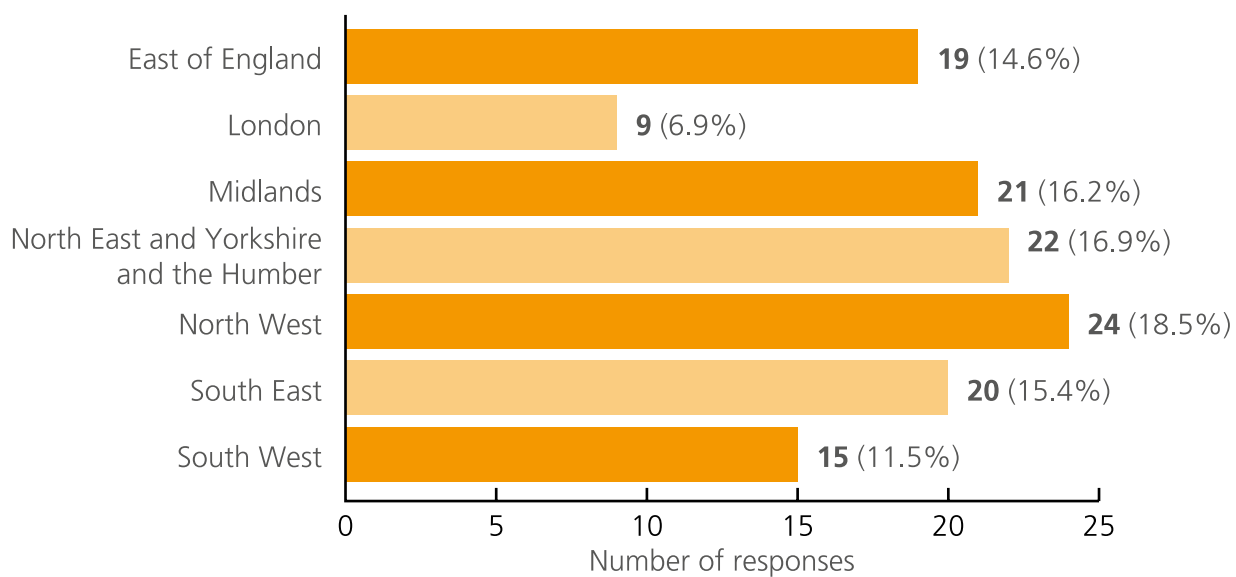
All regions represented

62% teaching hospitals / acute trusts

In total we received 122 responses, representing 121 organisations. This is similar to last year (119 responses, representing 116 organisations). 45% of respondents also completed last year's survey.

## Areas reporting

Figure 1: Respondents to the survey by area

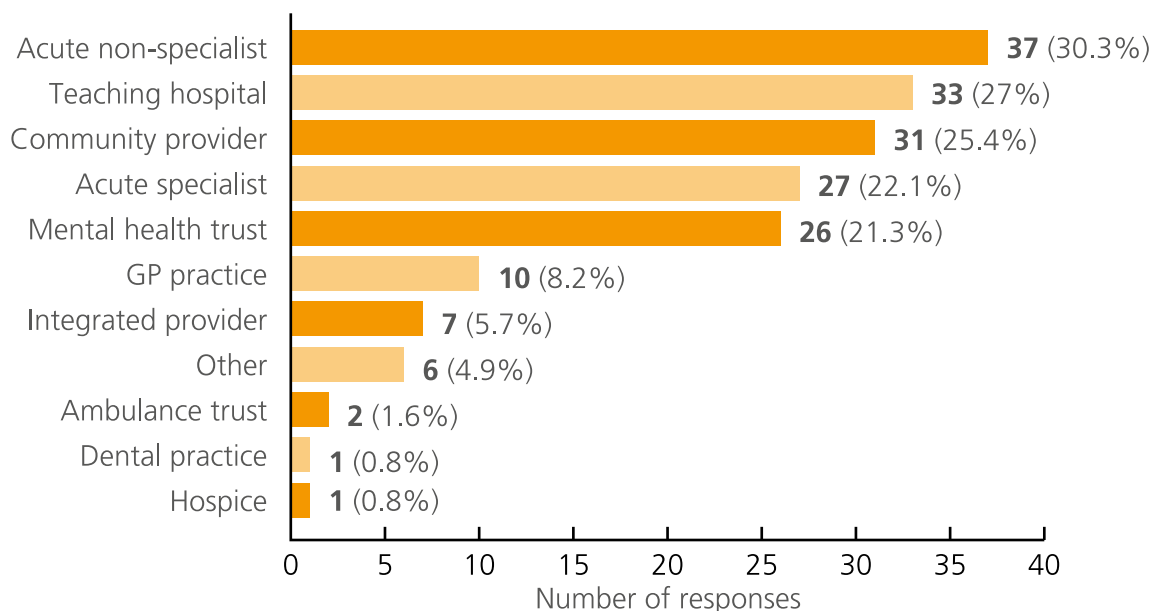


*Multi answer: Some organisations are operating in more than one area.*

There is a good spread across the regions demonstrating England-wide coverage.

## Type of organisation

**Figure 2: Type of organisation**



*Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)*

The majority of respondents (112) were from acute trusts or teaching hospitals (69, 62%). They also described themselves as other types of healthcare providers (for example, community providers (11), teaching hospitals (20), GP practice (3) and integrated providers (1)).

In addition (excluding those listed as acute trusts) we had 6 general practice, 9 community provider trusts, 5 integrated providers, 14 mental health trusts, 1 hospice, 2 Ambulance Trusts and 6 described as 'other'.

The organisation size was over-whelmingly large, with 89% (108) representing organisations employing over 1,000 staff. This is an increase from the previous survey which stood at 75% of employers with over 1,000 staff completing the survey.

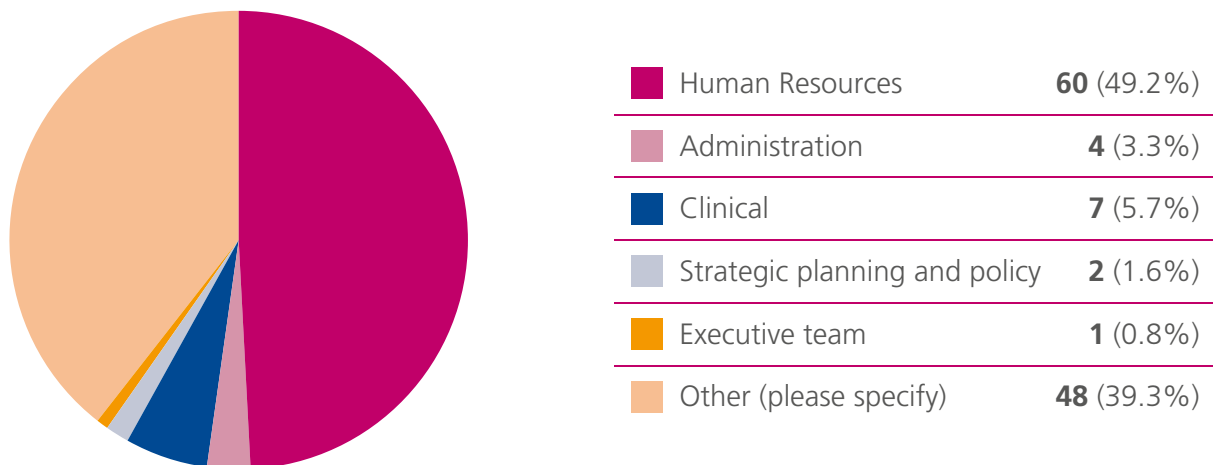
Only 11% (13) of respondents were from organisations with less than 1,000 staff. Due to the small sample size it is not possible to analyse the data with confidence therefore, this data will be separated from the main. Consequently, any recommendation made through this report are based on the findings from those employers with over 1,000 employees.

This is the second year the report has been unable to complete a separate analysis for smaller organisations. In 2015-16, 124 organisations with 100 or less employees responded. Health Education England should consider how to effectively engage smaller organisations to complete the survey.

## Respondents' role

The majority of the respondents (121) were located within Human Resources (60, 50%) or within an Organisational Development/Learning and Development area (47, 39%).

**Figure 3: Respondent's department**



## Employability programmes

Employability programmes are typically aimed at people with qualifications at level 2 or below, and provide them with training to develop their skills and increased opportunities for employment, further/higher education opportunities in health-related subjects or moving into apprenticeships. This could include internships.

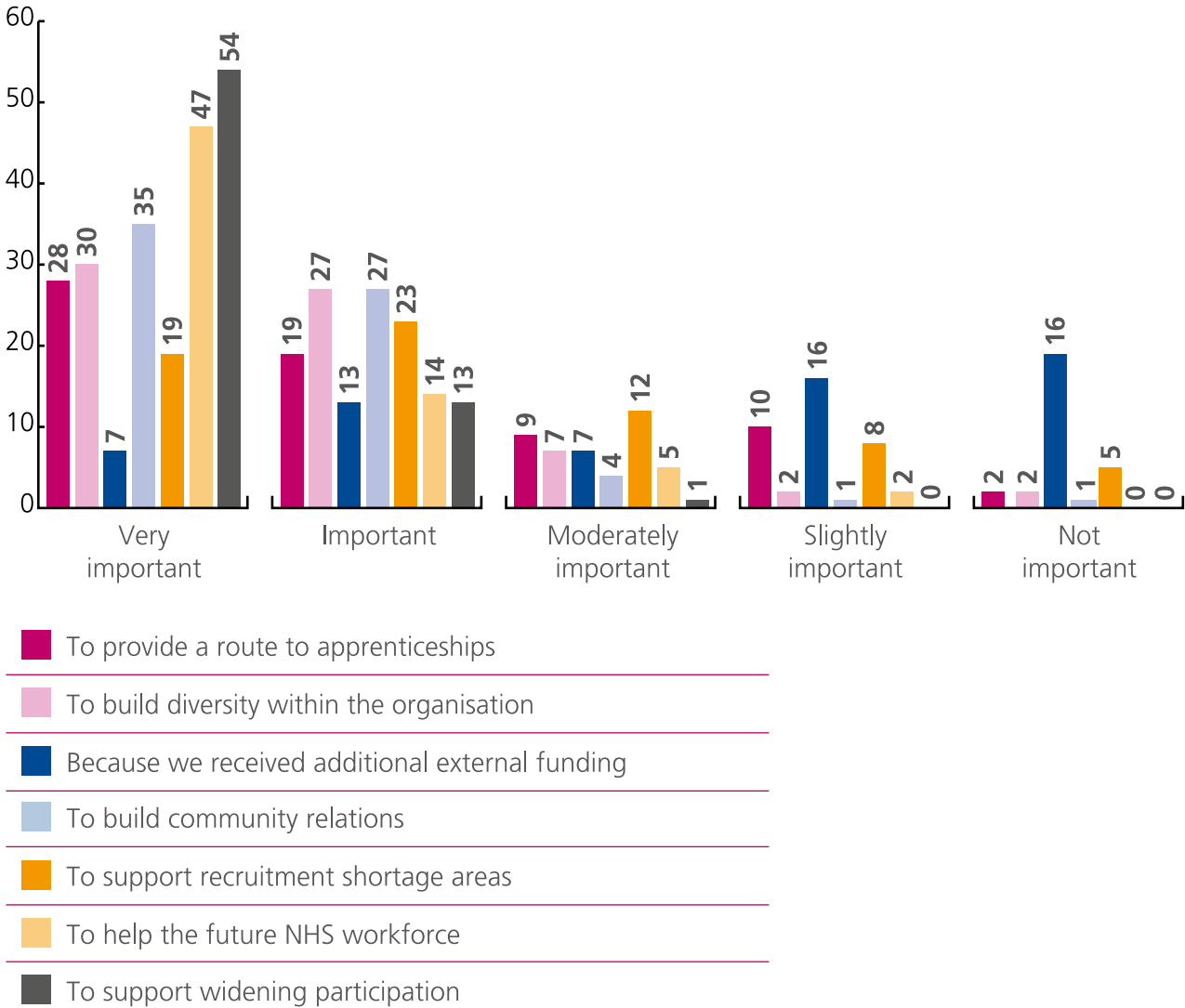
Employability programmes continue to grow. The results from this survey show a **13% increase** in numbers rising from 2,669 to 3,025.

- **3,025 attended employability programmes a rise of over 13%**
- **59% of larger organisations offer programmes**
- **Widening participation is given as the most important reason to offer employability programmes**
- **Main partners are further education colleges and Jobcentre Plus**
- **44% of participants move onto a positive destination (employment or further training). 12.7% of participants move into apprenticeships. 18.5% moved into healthcare employment (excluding apprenticeships), this is less than the last survey (at around a quarter)**
- **The destination of over 50% of participants is unknown to healthcare organisations including programmes run with Jobcentre Plus and the Prince's Trust**
- **More organisations report offering traineeships (60.3%). The numbers of traineeships per organisation has dropped from an average 11 to 5**
- **46.7% offer supported internships. This is an increase from last year**
- **Over 50% offered career change support**
- **55.6% (35) report targeting specific groups to the programme. The main target groups are NEET, long-term unemployed and individuals with a learning disability**
- **The main barrier for the organisation's support for employability programme is limited capacity followed by limited funding**
- **There has been a huge increase in the numbers establishing a sector-based work academy with Jobcentre Plus (from 15 to 36).**

From the 108 larger organisations responding to this section, 59% (64) of larger organisations are offering employability programmes. This compares to 56% in the 2015-16 survey and 68% in 2017-18.

Widening participation was given as the most important reason to offer employability programmes (79.4%). It was listed as very important or important by 98.5%. This continues to increase from previous surveys, in 2017-18 it was listed by 92.6%, and was listed as very important or important by 89.7%. This is a small decrease from the previous survey, which was at 90.1%.

**Figure 4: The reasons for running employability programmes**



The survey shows that we know that 44% of participants move onto a positive destination (employment or further training). The progression from employability programmes is, in the main, not known with 55.7% of participants' onward progression unknown (this is an increase from the previous survey's 46%).



**Figure 5: Progression from employability programmes**

	Apprenticeships within healthcare	Other employment at your organisation	Other employment at another healthcare organisation	Other employment outside of healthcare	Further training	Unknown	Total
<b>2018-19</b>	326 <b>12.7%</b>	416 <b>16.2%</b>	60 <b>2.3%</b>	100 <b>3.9%</b>	236 <b>9.2%</b>	1,429 <b>55.7%</b>	2,567
<b>2017-18</b>	526 <b>19.7%</b>	529 <b>19.8%</b>	94 <b>3.5%</b>	85 <b>3.2%</b>	210 <b>7.9%</b>	1,225 <b>45.9%</b>	2,669

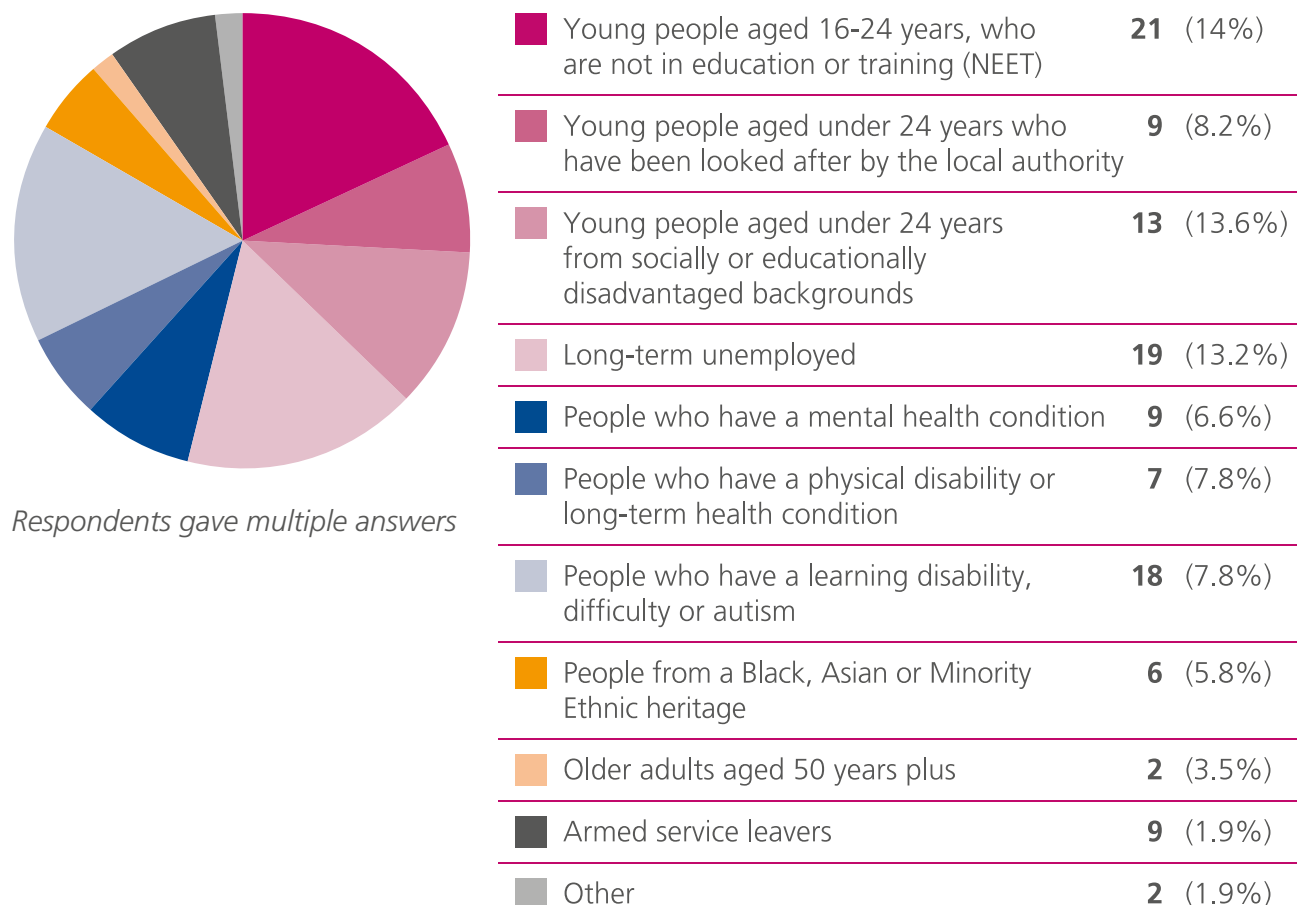
We do not appear to be tackling the unknown destinations within employability programmes.

12.7% of participants move into apprenticeships. This is a lower proportion than the previous survey.

18.5% moved into healthcare employment (excluding apprenticeships). This is less than last year (which stood at around a quarter).

There continues to be a significant number of employability programmes running that do not target particular groups. Only 55.6% report targeting particular groups. The main groups targeted are NEET (21), long-term unemployed (19) and individuals with a learning disability, difficulty or autism (18). For others (2 respondents) these included in-service users and 18-30 years not in employment, education and training.

**Figure 6: Target groups for employability programmes**

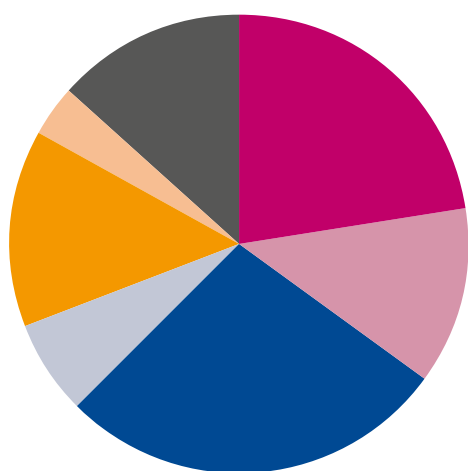


*Respondents gave multiple answers*

The destination of 55.7% of participants is unknown including programmes run with external partners. When healthcare organisations are working with external bodies there appears to be a lack of information on onward progression or numbers available. Those reporting over 100 unknowns (three organisations) are all bar one working with

Jobcentre Plus and the Prince’s Trust. Healthcare organisations should work with Jobcentre Plus and the Prince’s Trust to gain feedback and receive impact reports on the programmes run. Health Education England should support through the contracting and commissioning of their programmes.

**Figure 7: Partners in employability programmes**



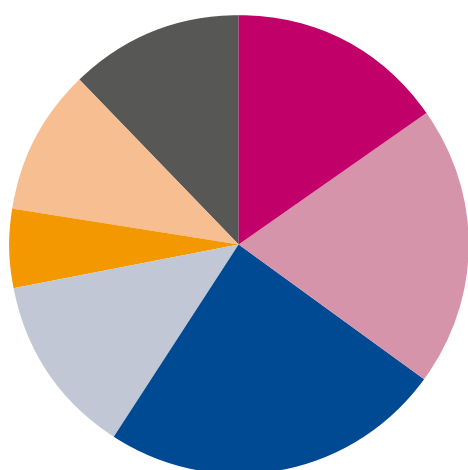
Jobcentre Plus	31 (22.6%)
Prince's Trust	17 (12.4%)
Further education college	38 (27.7%)
Higher education institution	9 (6.6%)
Local authority	19 (13.9%)
Local enterprise partnership	5 (3.6%)
Other	18 (13.1%)

*Respondents gave multiple answers*

There has been an increase in the partnerships across healthcare organisations. The main partners working with healthcare providers continue to be further education colleges and Jobcentre Plus.

The promotion of programmes tends to be through partners.

**Figure 8: Recruitment methods**



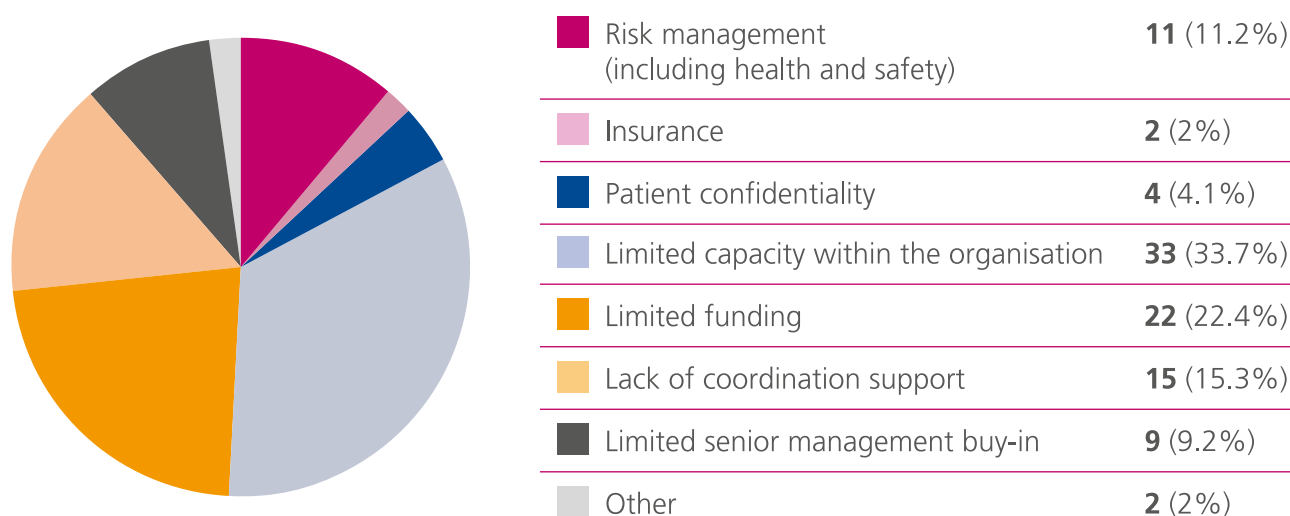
Advertising on our website	24 (15.3%)
Direct promotion with post-16 education providers	31 (19.7%)
Jobcentre Plus	38 (24.2%)
Prince's Trust	20 (12.7%)
Through careers companies	9 (5.7%)
With local education-business link organisations	16 (10.2%)
Other	19 (12.1%)

*Respondents gave multiple answers*

The majority (62.7% of 67 respondents) felt there were barriers affecting the organisation's support for employability programmes. The main barrier listed was limited capacity (33 respondents). Limited funding was cited as the next main barrier by 22 respondents.

Consideration should be given as to whether organisations should seek to increase capacity or ensure that there is more effective monitoring and evaluation, ensuring that the programmes that run are as impactful as possible.

**Figure 9: Barriers affecting the organisation's support for employability programmes**



*Respondents gave multiple answers*

61% (36) have established a **sector-based work academy**<sup>5</sup> with Jobcentre Plus. This is a huge increase from the previous survey's 18.8% (15). From the 16 providing numbers they report 449 participants on the programme. An average of 28 participants per programme.

81.5% (44) have established a **Step into Work**<sup>6</sup> programme with Jobcentre Plus. From the seven providing numbers they report in total 91 participants, an average of 13 per programme.

32 (53.3%) offer **internships**. From the five organisations providing numbers they report in total 30 participants, an average of 6 per programme.

60.3% (35) offer **traineeships**. This is the same number of organisations that reported in the previous survey. From those that provided numbers they report 82 participants on the programme. The number of traineeships on offer at each organisation is small, on average 5 (this is a reduction from the previous year's 11).

46.7% (28) said they offered **supported internships**. This is an increase from 25 organisations last year. The numbers reported were 227 internships (a 76% increase from 129 internships last year), with an average of 10 per organisation (an increase from 7 last year).

39% of organisations used **Project Search**, one used **Project Choice** and the rest used 'other'.

<sup>5</sup> Established with Jobcentre Plus a sector-based work academy can last up to six weeks and has three main components:

- pre-employment training – relevant to the needs of the business and sector
- a work experience placement – of great benefit to both the individual and a business
- a guaranteed job interview

<sup>6</sup> Step into Work<sup>6</sup> lasts around nine months and offers participants an opportunity to prepare for a career within the NHS through training, a work placement and recruitment support.

66.7% (38) organisations said they worked with the Prince's Trust. They reported 268 numbers, an average of 14 per organisation.

56.3% (36) said they offered formal support to those looking for a career change. This is a decrease from the number of organisations reporting last year (39).

69.1% (47) report that their employability programmes are evaluated. This is a decrease from last year 76.3% (61).

Employability programmes are, in the main coordinated by the learning and development department (that is consistent with the previous year's finding).



## Work Experience

Work experience describes opportunities for direct experience of healthcare work within an organisational setting, for example this could include role shadowing.

Work experience continues to flourish with **15,995 placements reported.**

- **15,995 work experience placements reported**
- **Work experience is the most common preparation for work programme offered. 97.2% offer work experience (an increase from the last survey)**
- **Majority offer a one-week placement**
- **The average number of placements is 2.98 per 100 employees. The maximum recorded was 16.7 per 100 employees**
- **78% have a work experience policy**
- **Main partners are schools and further education colleges**
- **85% do not target participants for the programme**
- **The destination of participants is often unknown**
- **The main barrier to work experience is limited capacity within the organisation (75.3%, 55); this is an increase from the last survey**
- **96.5% felt it was very important / important to offer work experience to support the future workforce**
- **70% of respondents are aware of Fair Train quality standard. This is a greater awareness than the last survey.**

Work experience continues to be the most common programme offered. 97.2% (105) offer work experience (compared to the previous survey's 90.8%).

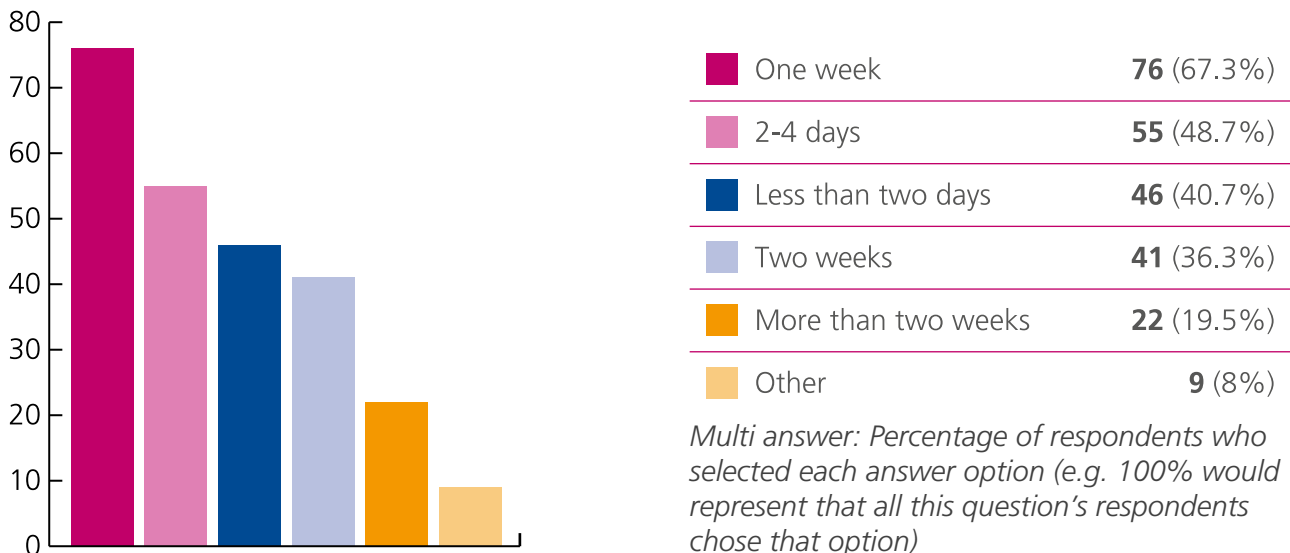
There was a large variance when we calculated the number of work experience placements compared to the organisation's headcount. The mean average was 2.98 placements per 100 employees. The maximum was 16.7 placements per 100 employees.

The programme is coordinated by learning and development (50.8%, 60) or human resources (20.3%, 24).



The majority offer one-week work experience 67.3% (76). This is an increase from 56.5% last year.

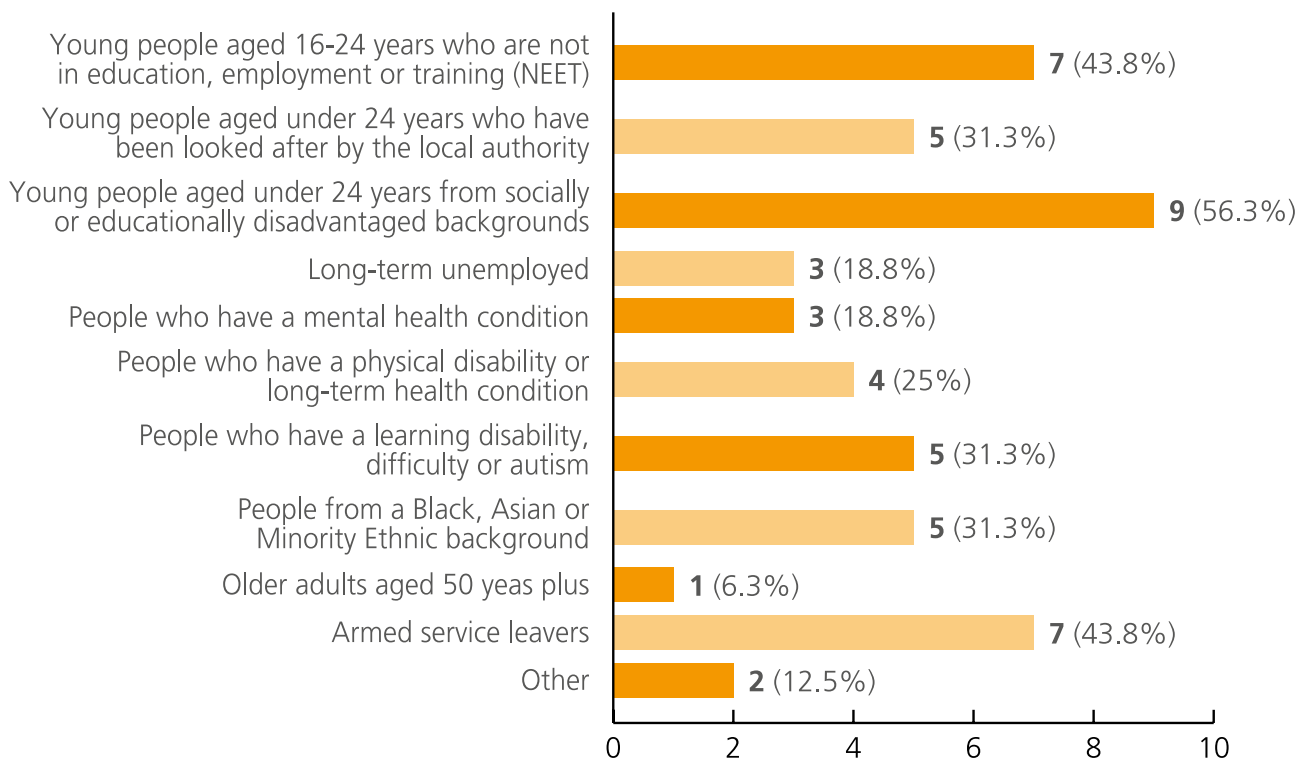
**Figure 10: Length of work experience placements**



There is a lack of targeting in work experience (85% do not target). For work experience the main target group listed was young people from socially or educationally disadvantaged backgrounds (9), young people not in education employment or training (7) and armed service leavers (7). Others listed (2 respondents) said they included in-service users and welcome all applicants.

Work experience continues to give cause for concern particularly as less well-connected students find accessing it difficult and feel disadvantaged in further or higher education applications.

**Figure 11: Target groups for work experience**



*Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)*

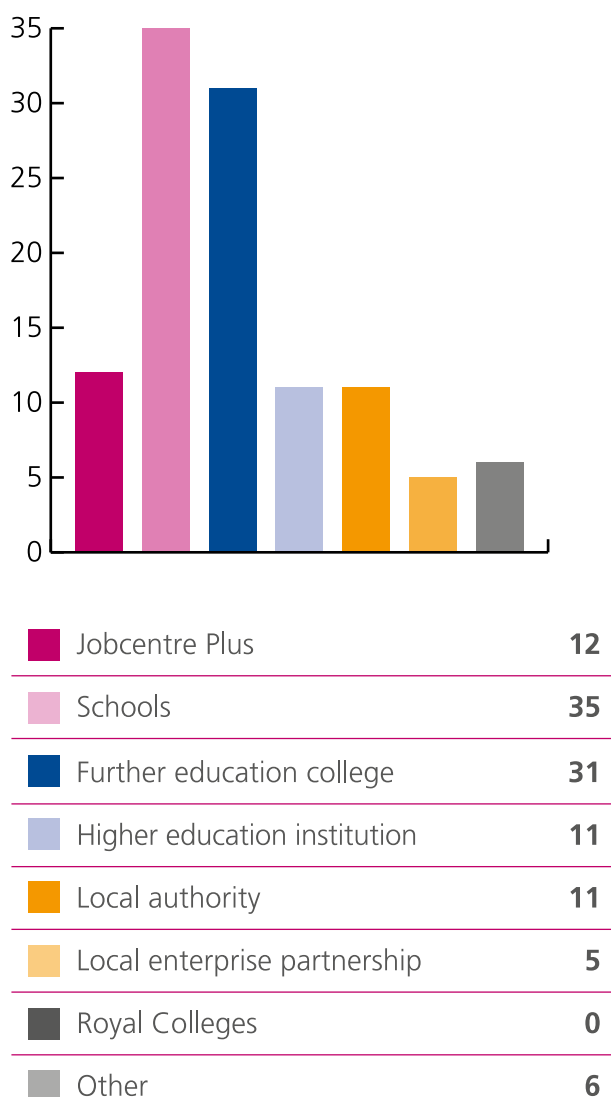


78% (78) have a work experience policy. This is a decrease from the previous survey's 88.1%, yet is a similar figure to the 2015-16 survey.

For work experience it appears that working with partners is less important than for employability programmes. Schools (81.4%, 35)

and further education colleges (71.2%, 31) are the main partners. More organisations engage with higher education as part of their work experience than employability or work-related learning programmes.

**Figure 12: Partners in work experience programmes**

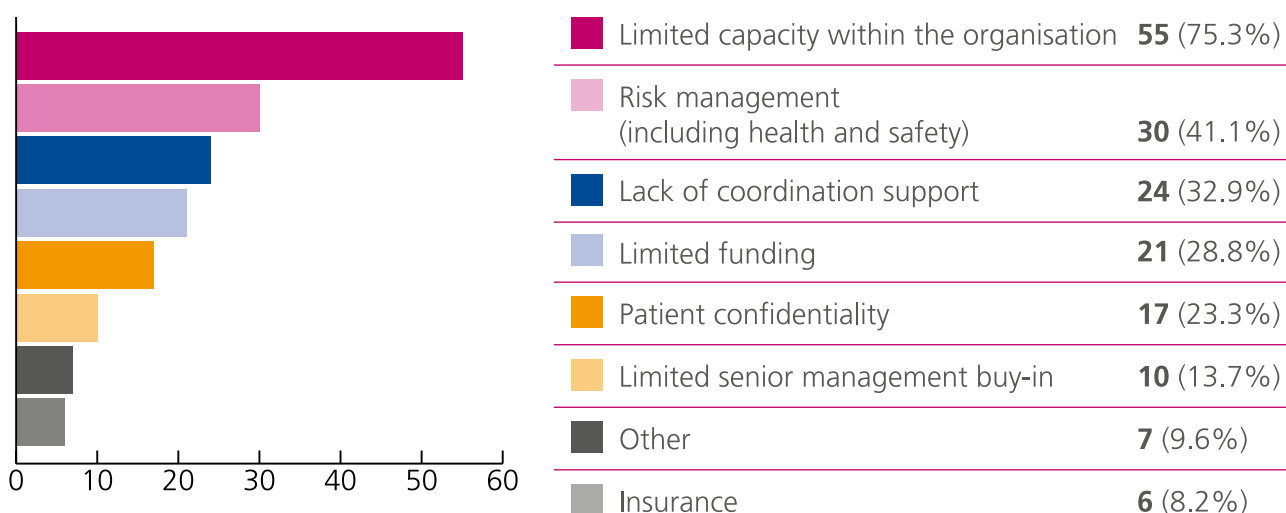




The main barrier to work experience is limited capacity within the organisation (75.3%, 55), this is an increase from last year. Risk management (including health and safety) continues to be ranked fairly highly at 41.1% (30) and this is an increase from last year's 34.4%.

Capacity has always been cited as a barrier to growth. Improving capacity is key if there is to be growth in the number of individuals involved in preparation for work programmes. Administration and management capacity has the potential to grow with greater collaboration between healthcare organisations. There are particular benefits that can be gained in work experience from partnership to build capacity through, for example, collaborative hubs. However, it should be recognised that it is not just about size and we need to deliver programmes that are high quality and targeted.

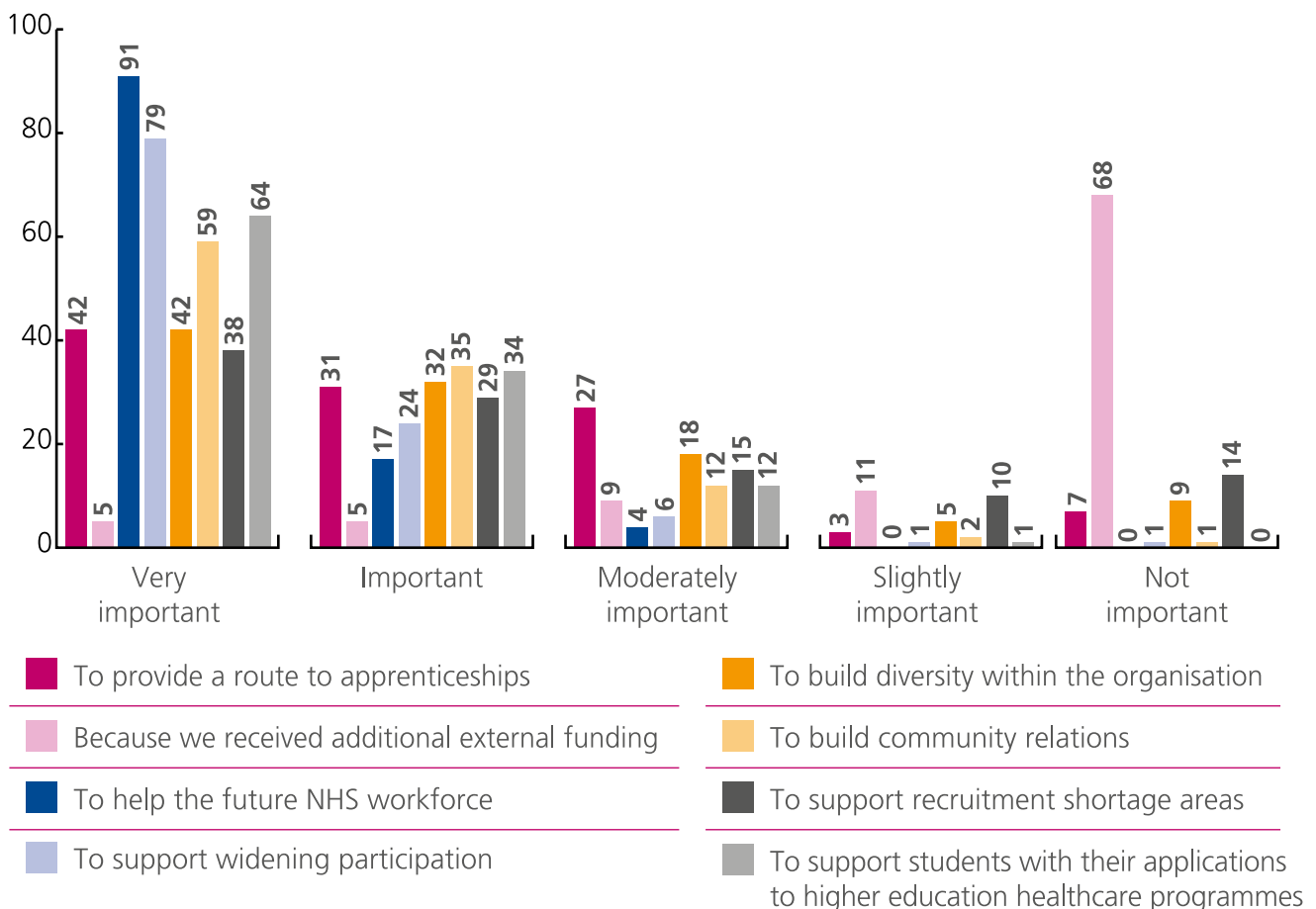
**Figure 13: Barriers affecting the organisation's support for work experience**



*Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)*

To support the future workforce was the most important reason to offer work experience (81.3%) and was listed as very important or important by 96.5%. This is a small increase from last year's survey at 95.3%. We asked this year about the importance of applications to higher education, and work experience was felt to be most important to 88.3%.

**Figure 14: The reasons for running work experience programmes** Respondents gave multi-answers



**Figure 15: Progression from work experience programmes**

Apprenticeships within healthcare	Other employment at your organisation	Other employment at another healthcare organisation	Other employment outside of healthcare	Higher education in a healthcare subject	Higher education not in a healthcare subject	Further education	Other work-based training?	Unknown
10	18	1	0	870	97	1,361	87	12,400

There is very limited understanding of what happens to individuals after work experience. There is increasing awareness about Fair Train's Work Experience Quality Standard, 70.3% (83) compared to last year's 59.6%. 33.3% (27) of respondents say they have been awarded the Fair Train Quality Standard (this is an increase of one more organisation from last year). 37% (30) have no plans to work towards the Quality Standard. A further 29.6% (25) are working towards or have plans to gain the standard.

70.8% evaluate their work experience. This is a slight decrease from the previous survey (78.1%) but is around the same level of 2015-16 survey (70%).

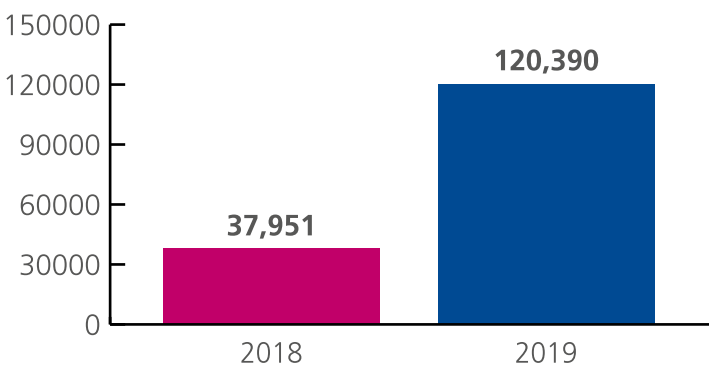
## Work-related learning

Work-related learning gives exposure and insight into future careers, including an understanding of the skills and knowledge required in the workplace. Work-related learning could include careers/skills events, open days and tours.

- **120,390 attended a work-related event**
- **Main activities are careers fairs, recruitment fairs and open days**
- **73.6% report no target group**
- **Main partners are schools and further education colleges.**

Work-related learning continues to have the largest volume of individuals engaged with 120,390 reported who are taking part in careers events, open days, talks and workshops. This is a 217% increase from the previous survey. This could be due to an increase in activity and/or a better collection and reporting of data.

**Figure 16: Number of participants - year on year comparison**



There has been a decrease in those offering work-related learning; of the 121 respondents 77.7% (94) offered work related learning. This compares to 84.9% (101) in the previous survey. Of those that do not offer work-related learning 21 are in organisations employing over 1,000 staff.

**Figure 17: Type of work-related learning activities**

The type of work-related learning offered is:

Careers fair at a school	<b>87.4%</b> (83)
Careers fair at own organisation	<b>69.5%</b> (66)
Recruitment fairs	<b>66.3%</b> (63)
Open days	<b>61.1%</b> (58)
Events run by Jobcentre Plus	<b>46.3%</b> (44)
Tours of the organisation	<b>42.1%</b> (40)
Other	<b>15.8%</b> (15)

*Respondents gave multi-answers*

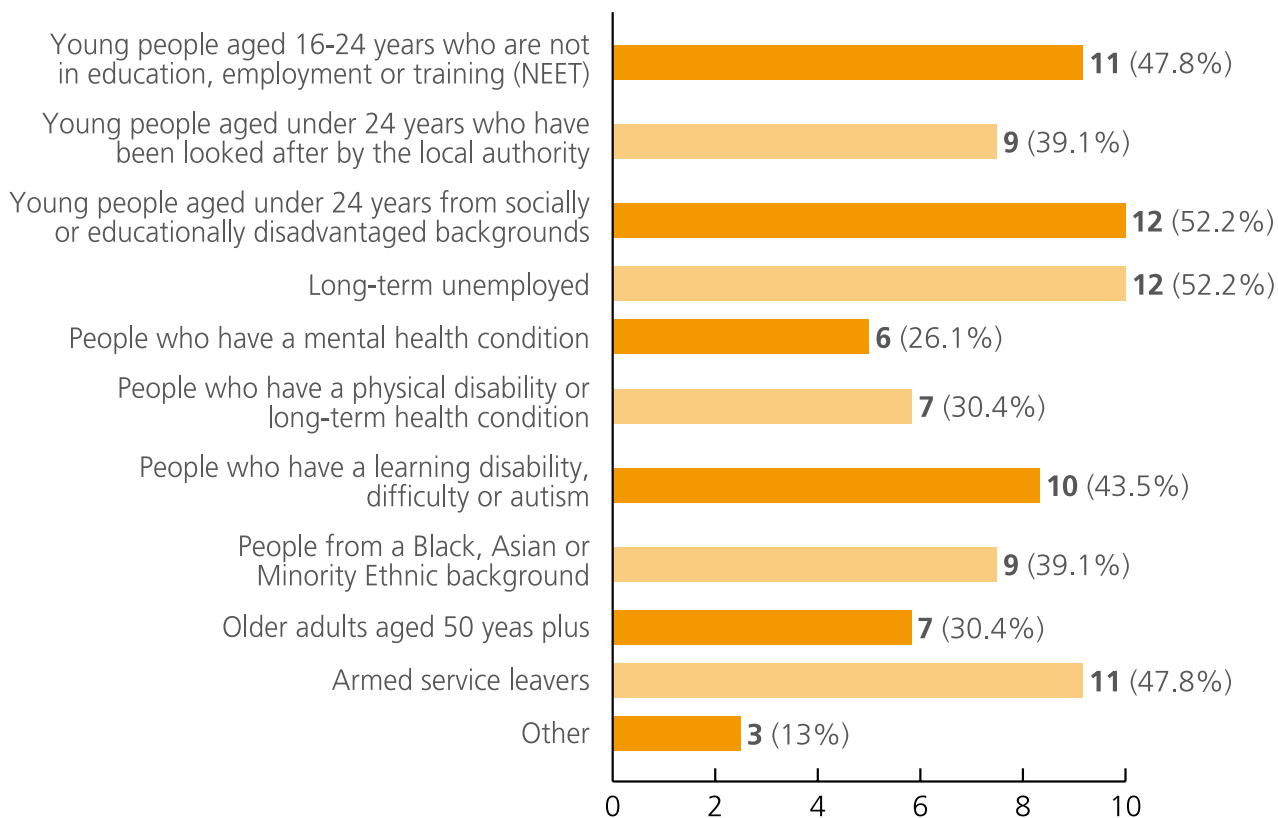


Coordination of work-related learning was by Learning and Development 57.4% (54) and Human Resources 16% (15).

73.6% (67) of respondents say they have no specific target group. This is a significant percentage increase from the previous survey, but a similar number of respondents.

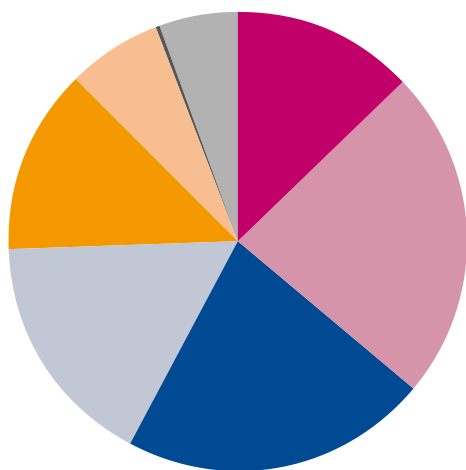
The main target groups were young people from socially or educationally disadvantaged backgrounds (12), the long-term unemployed (12), young people not in education, employment or training (11) and armed service leavers (11). This is a change from last year as long-term unemployed or armed service users did not feature as heavily. Others said that they are open for all (2) and one offered support for young parents.

**Figure 18: Target groups for work-related learning**



*Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)*

**Figure 19: Partners in work-related learning programmes**

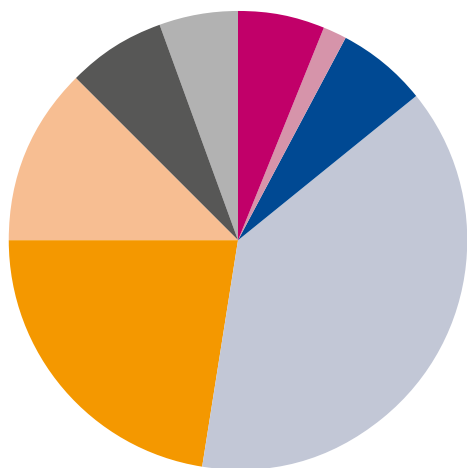


Jobcentre Plus	36 (13%)
Schools	64 (23.2%)
Further education college	60 (21.7%)
Higher education institution	46 (16.7%)
Local authority	36 (13%)
Local enterprise partnership	18 (6.5%)
Royal Colleges	1 (0.4%)
Other	18 (13.1%)

*Respondents gave multiple answers*

Schools and further education colleges were the main partners in work-related programmes. The main barrier for all preparation for work-related learning programmes was limited capacity. Limited funding was cited as the next main barrier. With these significant numbers it may be that more targeted interventions and activities may have more impact.

**Figure 20: Barriers affecting the organisation's support for work-related learning**



Risk management (including health and safety)	7 (6.3%)
Insurance	2 (1.8%)
Patient confidentiality	7 (6.3%)
Limited capacity within the organisation	43 (38.4%)
Limited funding	25 (22.3%)
Lack of coordination support	14 (12.5%)
Limited senior management buy-in	8 (7.1%)
Other	6 (5.4%)

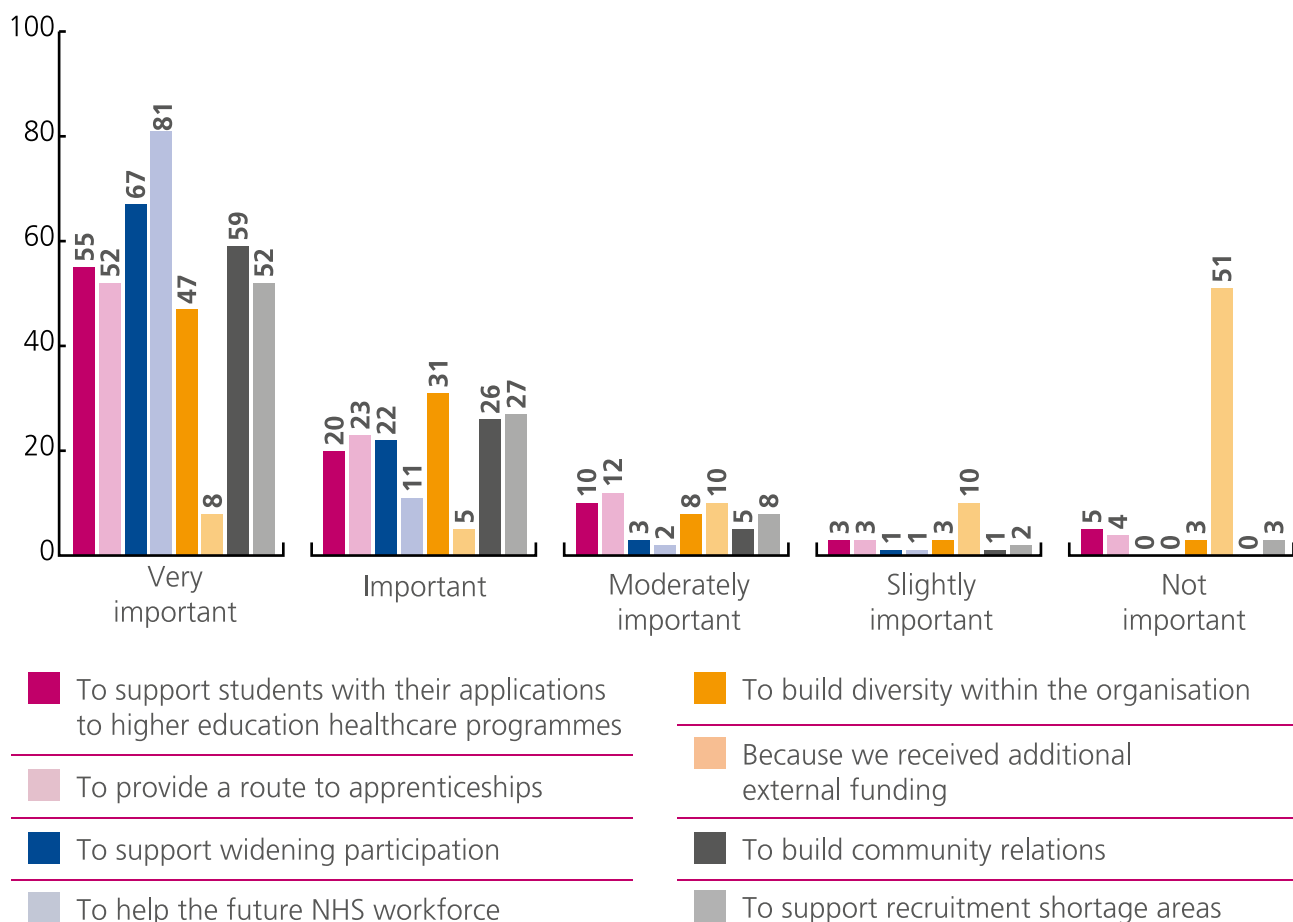
*Respondents gave multiple answers*

To help the future workforce was listed as the most important reason for work-related learning (85.3%) and was listed as very important or important by 96.9%. This is similar to the last survey (97.9%). Widening participation is the next most important reason. It was listed as the second most important reason to offer work-related learning (72%) and was listed as very important or important by 95.7%. This is an increase from the previous survey at 91.7%

For some of the reasons for offering preparation for work programmes, work-related learning was cited as the most important/important for:

- Routes into apprenticeships by 79.8%. However, this is a decrease from the previous year (89.4%).
- Building diversity within an organisation work-related learning was felt to be most important 84.8%.
- Building community relations is seen as most important/important by a 93.6% (an increase from last year's 90.6%).

**Figure 21: The reasons for running work-related learning programmes**



*Respondents gave multiple answers*

# Thematic analysis

## Extent of engagement

There is significant engagement across the healthcare sector in preparation for work programmes.

**Figure 22: Numbers involved in preparation for work programmes**

	2018-19	2017-18	2015-16
Employability	3,025	2,669	1,250
Work experience	15,995	15,246	19,871
Work-related learning	120,390	37,951	

Work-related learning continues to have the largest volume of individuals engaged with 120,390 reported who are taking part in careers events, open days, talks and workshops. This is a 217% increase from the previous survey. This may demonstrate an increase in activity and/or a better collection and reporting of data.

**Over 120,390** individuals are engaged in work-related learning across England.

Employability programmes continue to grow. The results from this survey show a 13% increase from the 2015-16 survey with numbers more than doubling from the first survey from 1,250 to 3025.

There has been a **13% increase** in numbers attending employability programmes from the previous year.

This is against a decrease in number of organisations reporting offering programmes.

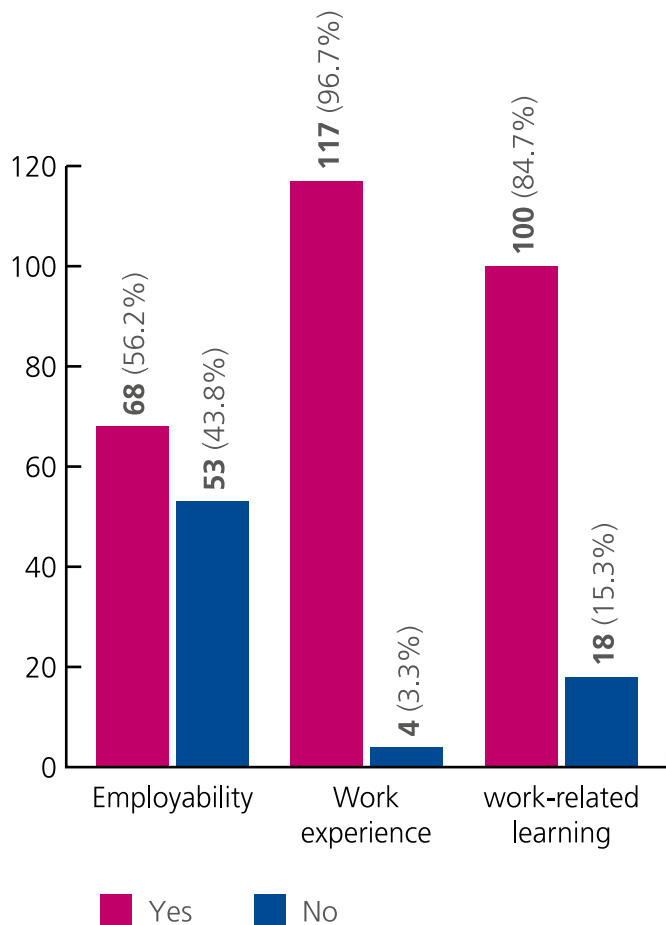
Work experience continues to flourish

We have seen a steady increase in the number of work experience placements offered from 15,246 to 15,995 from the previous survey, although not up to 2015-16 levels.

Work experience continues to be the most common programme offered by all organisations. Of the larger organisations responding (108) 97.2% (105) offer work experience – an increase from the previous survey's 90.8%. For all organisations, of 121 respondents 97% (117) offer work experience. Of those not offering work experience they were in a community interest company and three were in Foundation Trusts.



**Figure 23: Respondents offering preparation for work programmes**



For those that do not offer employability programmes, 36% are from large employers (more than 1,000 staff). Out of the 108 large organisations responding to this question 43 said they did not offer employability programmes – nearly 40%. More work needs to be done with larger employers regarding the benefits of running employability programmes.

The large employers not offering employability programmes are located across England. The largest number reporting no employability programmes are located in the South East (11), Midlands (10), East of England (10) and North East and Yorkshire and the Humber (9). Of those that do not offer employability programmes the majority offer work experience (96%) but only a small proportion offer work-related learning (24.1%).

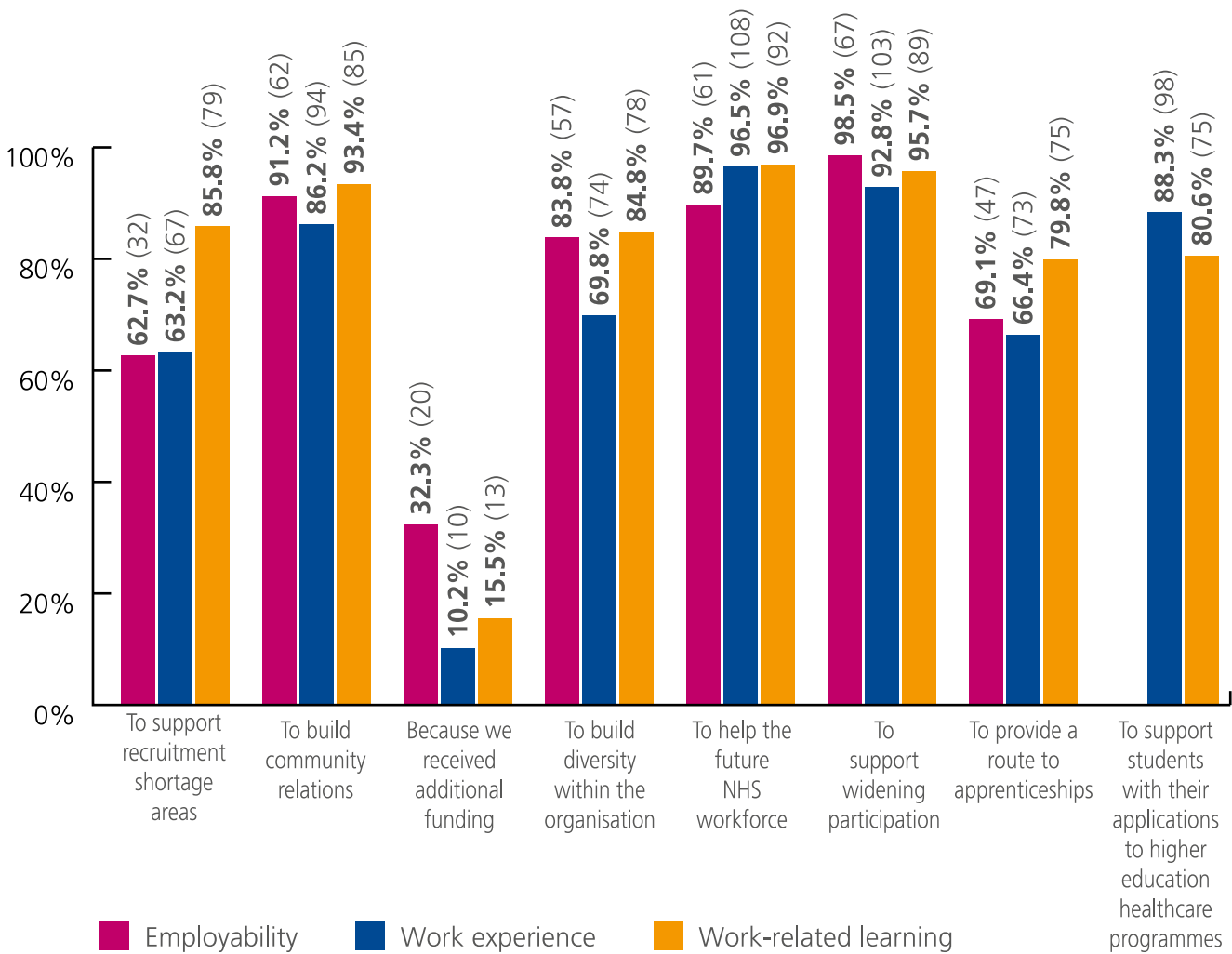
There has been a decrease in the number of organisations who offer work-related learning, of the 121 respondents 78% (94) offered work-related learning. This compares to 84.9% (101) in the previous survey. Of those that do not offer work-related learning 21 (77.8%) are in organisations employing over 1,000 staff.

More work needs to be done with large employers to encourage their engagement in employability programmes.

## Reasons for running programmes

We wanted to understand the motivations of organisations for running preparation for work programmes. Figure 24 shows the responses where they have been listed as most important or important.

**Figure 24: Reasons for running preparation for work programmes** (most important and important aggregated).



*Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)*

**Widening participation was given as the most important reason to offer employability programmes.** It was listed as very important or important by 98.5%. This continues to increase from previous surveys, in 2017-18 it was listed by 92.6%. It was listed as the second most important reason offer work experience (71.2%) and was given as very important or important by 92.8%. This is small decrease from the previous survey (91.2%) It was listed as the second most important reason to offer work-related learning (72%) and was listed as very important or important by 95.7%. This is an increase from the previous survey at 91.7%.

**Since the 2015-16 survey there continues to be a recognition by healthcare organisations to support the future of the NHS workforce.** To help the future workforce was given as the second most important reason to offer employability programmes (69.1%), and was listed as very important or important by 89.7%. This is a small decrease from the previous survey, which was at 90.1%. It was the most important reason to offer work experience (81.3%) and was listed as very important or important by 96.5%. This is a small increase from the previous survey at 95.3%. It was listed as the most important reason for work related learning (85.3%) and was listed as very important or important by 96.9%. Again a small and insignificant decrease from the previous survey 97.9%.

The receipt of additional funding is not important for 69.4% for work experience, 60.7% for work-related learning and 30.6% for employability programmes of respondents – which was the highest response for elements that are deemed not important.

For routes into apprenticeships work-related learning programmes are listed as most important/important by 79.8%. However, this is a decrease from the previous survey (89.4%). Similarly there was a decrease in the use of work experience 66.4% from 72.1%. Employability programmes are at 69.1%.

For building diversity within an organisation work-related learning was felt to be most important 84.8% and employability programmes at 83.8% (this is a slight increase from the previous survey 78.2%). Work experience was at 69.8%.

We asked this year about the importance of applications to higher education. Work experience was felt to be most important at 88.3% and work-related learning at 80.6%. (We did not ask this in employability.)

Building community relations is seen as most important/important by a large number of respondents. Work-related learning was the most important/important at 93.4% (an increase from the previous survey 90.6%). Employability programmes at 91.2% an increase from last year's 83.5%, and work experience 86.2% again an increase in the previous survey (83.5%)

The findings suggest that the value of employability programmes is not as well understood, as respondents continue to suggest that funding is needed. It is suggested that Health Education England consider further return on investment case studies and/or any additional funding should be channelled into employability programmes.

## Target groups

There appears to be an increase in the lack of targeting across employability, work experience and work-related learning. A large proportion of work experience and work-related learning programmes do not target particular under-represented groups (85% and 73.6% of respondents respectively). The lack of targeting under-represented groups is particularly significant given the focus of employability programmes. Work experience continues to give cause for concern particularly as less well-connected students find accessing it difficult.

**Figure 25: Organisations that target**

	Yes	No
Employability	<b>55.6%</b> (35)	<b>44.4%</b> (28)
Work experience	<b>15%</b> (16)	<b>85%</b> (91)
Work related learning	<b>26.4%</b> (24)	<b>73.6%</b> (67)

We would encourage greater targeting. We would encourage organisations to target groups in response to gaps or under-representation in their workforce – aligning with their own organisational composition and need.

The main target group listed for all preparation to work programmes are young people not in education or training (NEET) followed by the long-term unemployed. This shows greater targeting of the long-term unemployed from last year which was second to young people from socially or educationally disadvantaged backgrounds.

The main target groups across all preparation to work programmes are **NEET** (Not in Employment, Education or Training) and the **long-term unemployed**

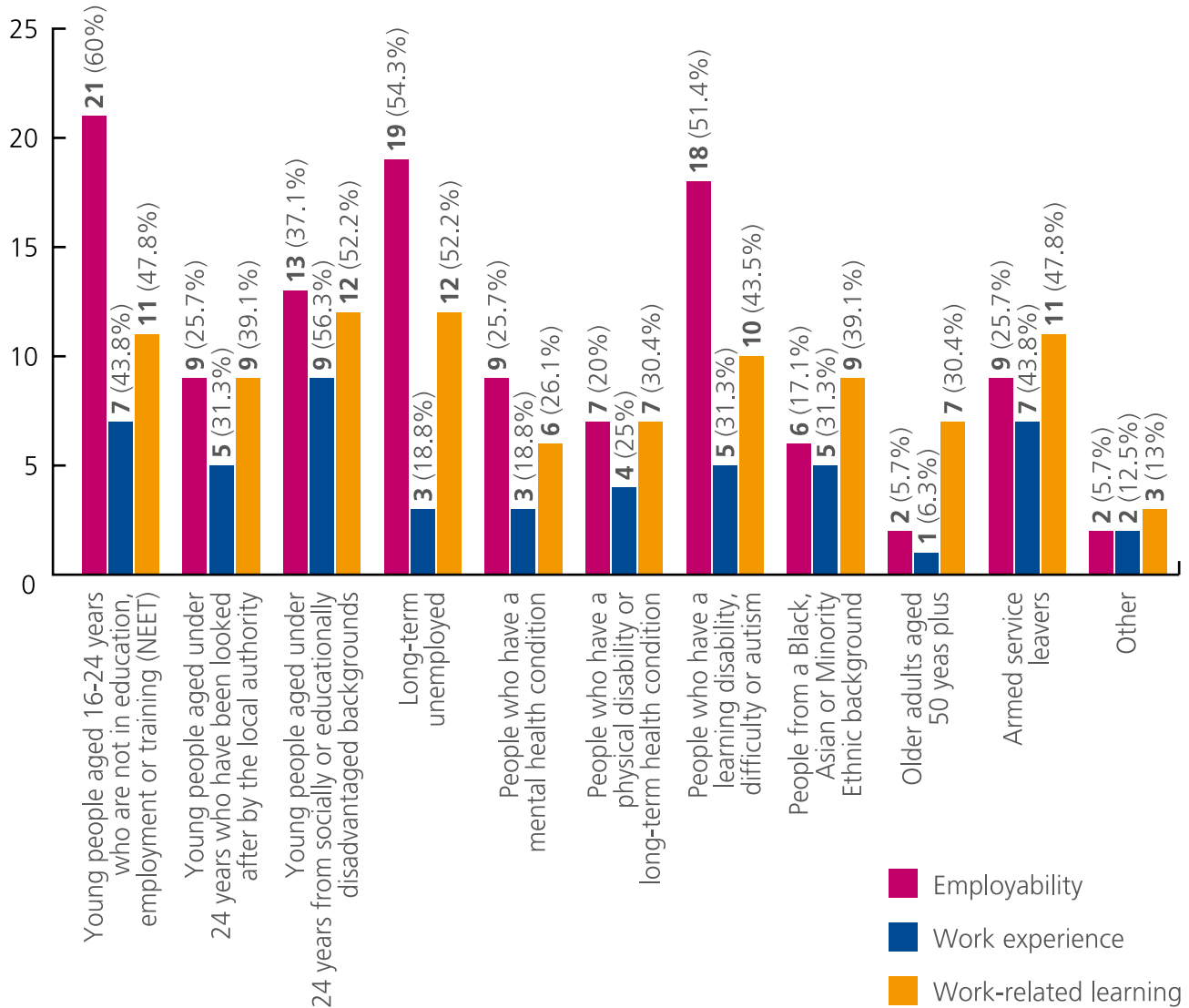
Those aged under 24 and from socially or educationally disadvantaged backgrounds feature particularly strongly in work experience and work-related learning.

Long-term unemployed feature strongly in employability and work-related learning programmes.

The armed service leavers feature strongly in work experience and work-related learning.

Those aged over 50 years are the least targeted in employability and work experience.

Figure 26: Target groups



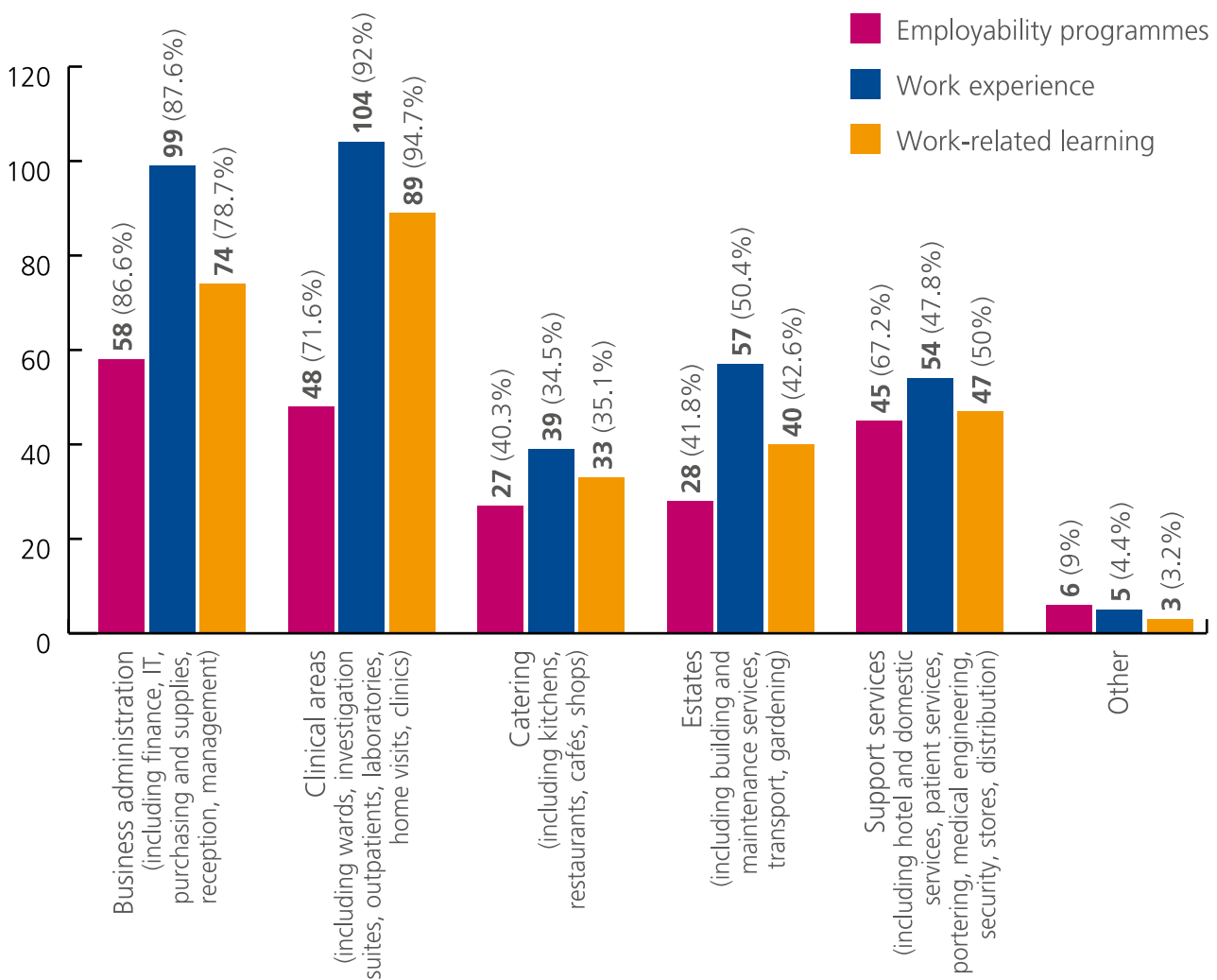
Within employability programmes people with learning disabilities, difficulties or autism are the third highest target group. This is a significant shift from the previous survey.

## Host areas

Across all Trusts and the healthcare organisations there is representation from all clinical and administrative areas hosting individuals on preparation for work programmes. This is a positive and continuing trend from the last survey.

Business administration and clinical areas host the most preparation for work activities. It still remains that catering is one of the least represented areas across all Preparation for work activities. Healthcare organisations are encouraged to increase the engagement in this area.

Figure 27: Host areas



Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

## Barriers to engagement

We wanted to understand the barriers to organisations in running preparation for work programmes.

The main barrier for all preparation for work programmes was limited capacity. Limited funding was cited as the next main barrier for employability programmes and work-related learning. However, risk management (including health and safety) was the second main barrier for work experience. We need to promote and communicate Health Education England's toolkits and resources.

Capacity has always been cited as a barrier to growth. Improving capacity is key if there is to be growth in the number of individuals involved in preparation for work programmes. Administration and management capacity has the potential to grow with greater collaboration between healthcare organisations. Organisations can work together to build their capacity to grow preparation for work programmes. Internal placement capacity may be able to grow, particularly with employability programmes if the benefits to the organisation are perceived more directly. There are particular benefits that can be gained in work experience from partnership to build capacity through, for example, collaborative hubs. However, it should be recognised that it is not just about size and we need to deliver programmes that are high quality and targeted.

**Capacity remains the main barrier to growth.**

**Limited funding** is listed as a barrier for employability programmes and work-related learning.

Insurance has very little impact on the barriers to organisation participating in these activities.





## Acknowledgements

Thank you to all those that completed the survey. The information you provided has allowed us to have a unique insight into the preparation for work programmes offered across the health service in England.

Thank you to all those that promoted and circulated the survey. Your efforts have helped us to produce a meaningful survey that shows the work in the health service in England. Thank you to all those on the Talent for Care and Widening Participation Implementation Group – your insights and comments helped shape the survey and report.

Thank you to Katie Adams, Catriona Curry, Becky Orton and Rachel Wright for their support and advice during the survey and report development. Report written and produced by:

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