HOUSE OF LORDS

Public Services Committee

1st Report of Session 2022–23

Fit for the future? Rethinking the public services workforce

Ordered to be printed 13 July 2022 and published 19 July 2022

Published by the Authority of the House of Lords

HL Paper 48

Public Services Committee

The Public Services Committee was appointed by the House of Lords on 13 February 2020 to consider public services, including health and education.

Membership

The Members of the Public Services Committee are

Baroness Armstrong of Hill Top (Chair)
Lord Bichard
Lord Bourne of Aberystwyth
Lord Davies of Gower
Lord Filkin
Lord Hogan-Howe
Lord Hunt of Kings Heath (until 16 June 2022)
Baroness Morris of Yardley (from 16 June 2022)
Baroness Pinnock
Baroness Pitkeathley
Lord Porter of Spalding
Baroness Sater
Lord Willis of Knaresborough

Declaration of interests

See Appendix 1.

A full list of Members' interests can be found in the Register of Lords' Interests:
https://members.parliament.uk/members/lords/interests/register-of-lords-interests

Publications

All publications of the Committee are available at:
https://committees.parliament.uk/committee/430/public-services-committee/publications/

Parliament Live

Live coverage of debates and public sessions of the Committee's meetings are available at:
http://www.parliamentlive.tv

Further information

Further information about the House of Lords and its Committees, including guidance to witnesses, details of current inquiries and forthcoming meetings is available at:
http://www.parliament.uk/business/lords

Committee staff

The staff who worked on this inquiry were Sam Kenny (Clerk), Tristan Stubbs (Clerk), Mark Hudson (Policy Analyst), Daphné Leprince-Ringuet (Policy Analyst), Tom Burke (Policy Analyst), Claire Coast-Smith (Committee Operations Officer) and Aimal Fatima Nadeem (Committee Operations Officer).

Contact details

All correspondence should be addressed to the Public Services Committee, Committee Office, House of Lords, London SW1A 0PW. Telephone 020 7219 8654. Email: hlpublicservices@parliament.uk

Twitter

You can follow the Committee on Twitter: @LordsPublicSCom.

CONTENTS

	Page
Summary	3
Chapter 1: Introduction	5
Workforce shortages	5
Box 1: Staffing shortfalls	6
Increasing demand for public services	6
Ageing population	7
Figure 1: Population growth	8
Figure 2: Pensionable and working age population increase by 2045	8
Change in health profiles causing increased demand	8
Public services demand and young people	9
External pressures	9
Our inquiry	10
Our plan for action	10
Box 2: Action strategy	10
Chapter 2: A long-term approach	11
A strategic approach	11
The role of data in developing strategies	12
Drawing out the untapped potential of the workforce	13
Deploying staff	13
Delegating decision making	14
Involving service users in workforce and service planning	15
Barriers to co-designing services and plans	16
Embedding the use of technology in workforce planning	17
Challenges with increasing the use of innovative technology	19
Prioritising preventative services and early intervention	21
Improving engagement with the voluntary sector and social enterprises	22
Chapter 3: Experiences in the workforce	25
Impact of staffing shortfalls	25
Disempowerment	26
Bullying	27
Discrimination	27
Recognition	28
Chapter 4: Recruiting people	30
Efforts to boost staff numbers	30
Pay	31
Enhancing "the offer"	32
Pensions	32
Flexible working	33
Packaging the offer	35
Refining the message	35
Reaching candidates	37
Alternative routes into public service careers	38
Apprenticeships	39
Local initiatives	42
Making it easier to apply	43

Chapter 5: Train to retain 45
New requirements 45
Retention 45
Challenges to accessing training and development 46
Funding 46
Culture 46
Rethinking development 47
Broad training 47
Exploring other roles 48
Accreditation of prior learning 49
Developing effective leaders 51
Digital tools 52

Summary of conclusions and recommendations 54

Appendix 1: List of Members and declarations of interest 57

Appendix 2: List of witnesses 59

Appendix 3: Call for evidence 65

Appendix 4: Summary of visit to Anglia Ruskin University 69

Evidence is published online at https://committees.parliament.uk/work/6403/designing-a-public-services-workforce-fit-for-the-future/publications/ and available for inspection at the Parliamentary Archives (020 7219 3074).

Q in footnotes refers to a question in oral evidence.

SUMMARY

The public service workforce is facing a crisis. Staff shortages are significant, and having a serious impact upon service users. Morale is very low, and employers are not doing enough to make public service careers attractive to prospective staff. There is considerable difficulty in recruiting.

This vicious circle will get worse. The inescapable demographic fact is that demand for services will rise far faster than the working-age population. The proportion of the population with multiple and complex needs will rise further, even as the labour market available will be smaller. The challenge is substantial: the public sector will have to deliver the same or better outcomes with less labour available.

This is not an unsolvable problem, but current efforts are at far too small a scale. Solutions will need to look at how demand can be kept at manageable levels by intervening earlier; and rethinking who (or what) delivers services, and when. At present, little action is being taken towards the transformative changes that are needed: rethinking staff deployment; making the most of the highly skilled people within the workforce; and ensuring that they want to enter—and stay in—public service work. Recruitment targets are ambitious, but they are not coupled with equally ambitious action plans to make them deliverable. The Government is not even equipped with the hard data it needs to plan ahead.

We have developed recommendations which would, if implemented, make a substantial difference, and secure a more sustainable public services workforce for the future. These recommendations all have one thing in common: they urge flexibility. Flexibility in deploying teams; flexibility in allowing them to make the decisions they are equipped to; flexibility in the use of technology and in external engagement; in what qualifications are needed and how they are accessed; and flexibility in how to retain the people the workforce will need for the future.

From our recommendations, we have distilled an action plan, which can be seen in Box 2 on page 10. These are our priorities for securing the sustainability of the workforce, and are reflected throughout our report.

Chapter 1 sets the demographic scene, outlining the foundation for our finding that demand will rise significantly faster than the workforce (supply). We have also set out the starting point: alarming vacancy rates in a variety of crucial services.

Chapter 2 looks at long-term planning, and how it needs to change to deliver the services users need. It looks at why a plan is needed, and what it will need to consider. As a starting point, our recommendations on data would ensure that the Government develops a solid understanding of current and projected needs: this will be crucial in meeting them, now and in the future. On managing demand, we are clear that prioritising preventative services will be crucial in ensuring that the workforce can meet the challenge of the future. We also found significant untapped potential in the workforce, which only flexibility and the empowerment of staff can rectify. In all fields, employers could and should empower decisions at the lowest possible level: empowering, for instance, a physician associate to prescribe medicine rather than engage a general practitioner, or a teaching assistant to perform more, ot different tasks.

Technology could be used to free up resources and improve services, and the public sector is not currently making enough use of this to make the important changes that are needed. The great potential of the voluntary sector, and the expertise of people with lived experience are also being underutilised.

For people to stay in the public service workforce, they need to have a good experience in it. Chapter 3, finds that, unfortunately, overwork and under-appreciation creates an atmosphere where this cannot be relied upon. Bullying and discrimination are also all-too common. The public sector should be setting an example, but for minority groups in particular, it cannot be relied upon to be a good employer.

Chapter 4 expands on this theme, looking at how public services attract the right staff. The 'offer' of public service careers is not yet sufficiently appealing, and in a competitive market, it will become increasingly difficult to attract people. Pay cannot compete with that offered by the private sector. The public sector must, therefore, enhance their offer by looking more creatively at pensions (a barrier for many), and flexible working. We look also at branding—for so long stale and unappealing—and how a new exciting message about public service careers could be spread more widely, and attract underrepresented groups.

This message will have limited impact if the only way to enter certain roles is through training that takes years or (particularly in the context of a cost-of-living crisis) costs many thousands of pounds. We have therefore looked at alternative ways people could be supported to enter public service careers. Again, public sector employers, professional bodies, regulators, and universities should be far more flexible in how they recruit and train. Inspiring examples at the local level have shown us hope for how apprenticeships and local talent pools could be used to attract, recruit and train the next generation of public and civil servants.

Completing this picture is a step-change in how people view careers: a job for life with a good pension is no longer a strong enticement. Instead, young people seek roles where they can grow, where their skills can be developed and brought to bear in their roles, and where they can ready themselves for their next steps. Chapter 5, "Train to Retain" argues that, if people are to stay in the public service workforce, roles must be rewarding, challenging, and constantly enable development. Employers and regulators also need to get better at recognising skills, wherever they are developed, and finding a way to record and register them. At present, if you have years of experience as a medical associate, none of that highly relevant experience 'counts' if you wanted to become a GP. There are ways to rectify this, but they require flexibility and, as we have recommended, a system for logging experience.

We believe our action plan will go a long way to addressing the problems we have identified. We have not approached the problem on the cheap, but. our recommendations and action plan would set the workforce on a more sustainable footing.

We are not talking only to Whitehall. Government (national and local), regulators, representative and professional bodies, individual team leaders and all other relevant parties will have to think together how the increasing and inescapable challenges the public service workforce faces can be addressed.

Fit for the future? Rethinking the public services workforce

CHAPTER 1: INTRODUCTION

1. The resources of public services are at breaking point. Common themes are insufficient staff, high levels of workforce stress or burnout and, as a result, sometimes slow or inadequate service delivery. Long waiting times for vital services are often reported in the NHS, but the problem is broader than this. Staff in sectors including education, policing, and the justice and care systems are overstretched, and are sometimes unable to meet the needs of people who require support urgently. Robin Wilkinson, Chief of Corporate Services at the Metropolitan Police, stated that: "Every day the demand for public services, the demand for policing, far outstrips our ability to meet that demand and the demands of the public and of victims".[1]

2. Changes in the demographic make-up of the UK will worsen this situation: population increases in both older people and people of working age who need support from public services mean an unavoidable rise in demand for services, and the working population will not keep pace.

3. The COVID-19 pandemic has put pressure on all public services and demonstrated the need for a workforce that is stronger and more sustainable. But it has also shown that more flexible approaches to public service delivery (whether that be in ways of working, training or regulation), are possible and desirable. Moving forward, public service employers need to embrace a far more flexible approach to the workforce.

4. There are two important questions relating to service provision: how can demand be reduced? How can delivery change so that more can be achieved by fewer people? Our inquiry related primarily to the workforce, so we have not considered the former question on demand in detail. On the latter question though, we have looked at the question of deploying staff (and technology) creatively, finding this to be a crucial component of any workforce strategy.

Workforce shortages

5. Capacity is a key issue within the public service workforce, now and for the future. Over and again, we heard of a lack of staff. Solace, for instance, which represents local government professionals, found that 33% of council chief executives and senior managers in England did not have enough skilled staff to run services to an acceptable standard.[2] Sarah McClinton, Director of Adult Services at the Royal Borough of Greenwich, and now President of the Association of Directors of Adult Social Services, described "growing demand" coupled with "increasing vacancy rates and increased turnover".[3]

---

1 Q 76 (Robin Wilkinson)
2 Written evidence from Solace (FFF0044) and Solace, 'Spending Review Must address Local Government Workforce Crisis' (September 2021): https://solace.org.uk/news_and_press/spending-review-must-address-local-government-workforce-crisis/ [accessed 8 July 2022]
3 Q 19 (Sarah McClinton)

6. In the context of overstretch, burnout and increasing future demand, calls for additional resource were unsurprisingly strong. Evidence called for a "public sector jobs drive",[4] "significant investment",[5] and for capacity to be afforded and built in by "central, strategic planning".[6] Hiring (and keeping), more staff is critical.

Box 1: Staffing shortfalls

Education—in 2021–22, the Department for Education (DfE) missed its teaching recruitment target for science, technology engineering and maths (STEM) subject teachers by almost 30% and missed the physics teacher recruitment target by almost 80%.[7]

The NHS—between 2015–21, NHS England and NHS Improvement reported an average nursing vacancy rate of 10.5%.[8]

Adult social care—Skills for Care reported that, in April 2022, 10% of social care posts remained vacant, up from 6% in March 2021.[9]

Prisons—nearly one in seven prison officers left the prison service in the year before May 2022, with three quarters of them resigning.[10]

Local government—in September 2021, local government body Solace reported that 33% of local authority chief executives and senior managers did not have enough staff with the appropriate skills and qualifications to run services to an acceptable standard.[11]

7. Any drive to recruit more people should be ambitious and avoid historical patterns whereby workforce planning has "tried to land 'a jumbo jet on a pin'", with strategies aiming to recruit precisely the required number of people, and no surge capacity.[12] The Chartered Management Institute also noted that this had been the approach, and argued that the need for "redundant capacity" had been shown throughout the pandemic.[13]

---

4 Written evidence from Unison (FFF0022)
5 Written evidence from the NHS Confederation (FFF0029)
6 Written evidence from Shared Lives Plus (FFF0031)
7 In 2021–22 only 73% of the STEM teacher target was recruited (5,908 recruited, with a target of 8,070). In Physics, 22% of the teachers forecast were recruited (567 recruited, with a target of 2,530). See Department for Education, 'Initial Teacher Training Census' (December 2021): https://www.gov.uk/government/statistics/initial-teacher-training-trainee-number-census-2021-to-2022 [accessed 12 July 2022]
8 NHS, 'Vacancy Statistics England April 2015–September 2021: Experimental Statistics' (September 2021): https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey/april-2015---september-2021-experimental-statistics [accessed 12 July 2022]
9 Skills for Care, 'Vacancy information tracking': https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/Topics/COVID-19/Vacancy-information-monthly-tracking.aspx [accessed 6 June 2022]
10 Prison Reform Trust, 'New figures reveal exodus of prison staff' (19 May 2022): https://prisonreformtrust.org.uk/new-figures-reveal-exodus-of-prison-staff/ [accessed 8 June 2022] and Ministry of Justice, *HM Prison and Probation Statistics* (March 2022): https://www.gov.uk/government/statistics/her-majestys-prison-and-probation-service-workforce-quarterly-march-2022/her-majestys-prison-and-probation-service-workforce-quarterly-march-2022 [accessed 8 June 2022]
11 Solace, 'Spending Review must address local government workforce crisis': https://solace.org.uk/news_and_press/spending-review-must-address-local-government-workforce-crisis/ [accessed 8 June 2022]
12 Written evidence from the Nuffield Trust (FFF0042)
13 Written evidence from the Chartered Management Institute (FFF0019)

Increasing demand for public services

8. Whatever the causes for overstretch historically (they are varied, widely reported and differ depending on the service), the changing composition of the UK population is likely to make it worse.

Ageing population

9. While the UK population is expected to grow over the coming decades, this growth varies significantly between different age groups, which has implications for public services. The Resolution Foundation report that:

> "The ageing of the baby boomers, in combination with longevity improvements, means that the number of people in older age (65 and above) is expected to increase by around 2.5 million (20%). Projections indicate that between 2025 and 2035, the number of people in early working age (16–29) will also grow, albeit by a smaller amount (+860,000 or 7.4%). Meanwhile, due to falling fertility rates, there will be fewer children by the end of the decade, with the number of people aged 15 and under projected to decline by 1.1 million (-9%)."[14]

In the longer term, the Office for National Statistics (ONS) predicts that the number of older people in the UK is increasing faster than for any other age group.

10. ONS statistics show that the number of people of pensionable age will grow by 28% between 2020–45, while the number of working age people will grow by just 5%. By mid-2020 there were 42.5 million working age adults and 11.9 million adults of pensionable age. By 2045, the number of working-age adults is projected to be 44.6 million (a rise by less than 5%), and the pensionable age population is expected to be 15.2 million (a rise of almost 28%), see Figures 1 and 2. It is also worth noting that in February 2022, the Royal College of Nursing reported that a fifth of nursing registrars were 56 years of age or older. [15]

11. The rising number of older people in the UK strongly suggests an increasing demand for public services, particularly in health and social care sectors.[16] However, the UK's labour supply, which public services can recruit from will not increase proportionally. This means it will not be possible to meet increasing levels of demand through recruiting more staff alone.

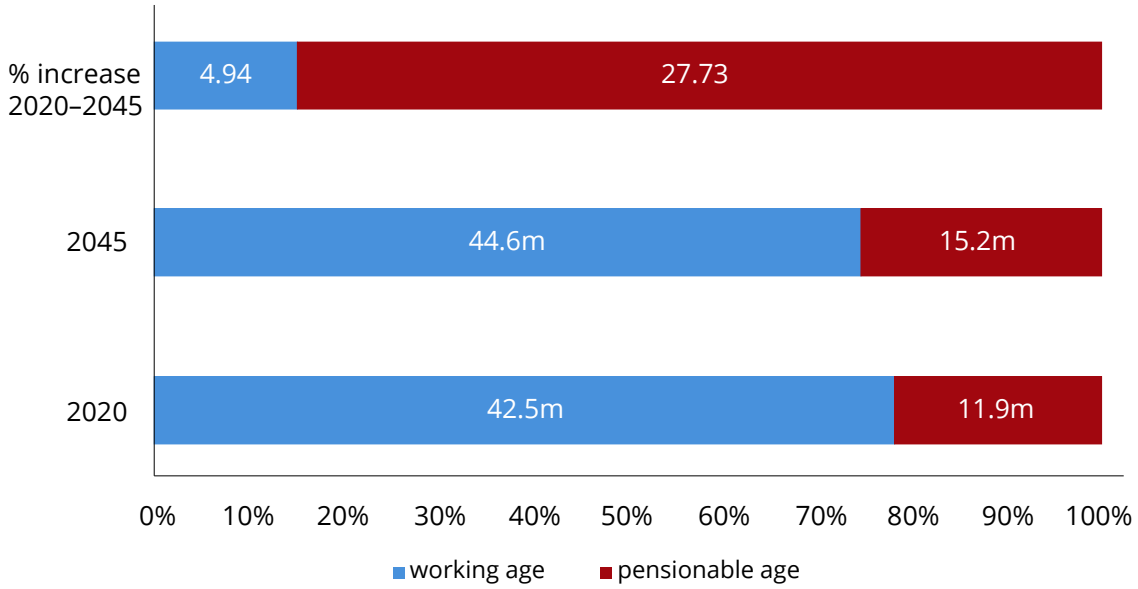
---

14 The Centre for Economic Performance and the Resolution Foundation, *Big welcomes and long goodbyes: The impact of demographic change in the 2020s* (June 2022): https://economy2030.resolutionfoundation.org/wp-content/uploads/2022/06/Big-welcomes-and-long-goodbyes.pdf [accessed 24 June 2022]

15 Royal College of Nursing, *UK Staffing for Safe and Effective Care: State of the nation's nursing labour market* (February 2022), p 5: https://www.rcn.org.uk/-/media/Royal-College-Of-Nursing/Documents/Publications/2022/February/010-108.pdf [accessed 24 June 2022]

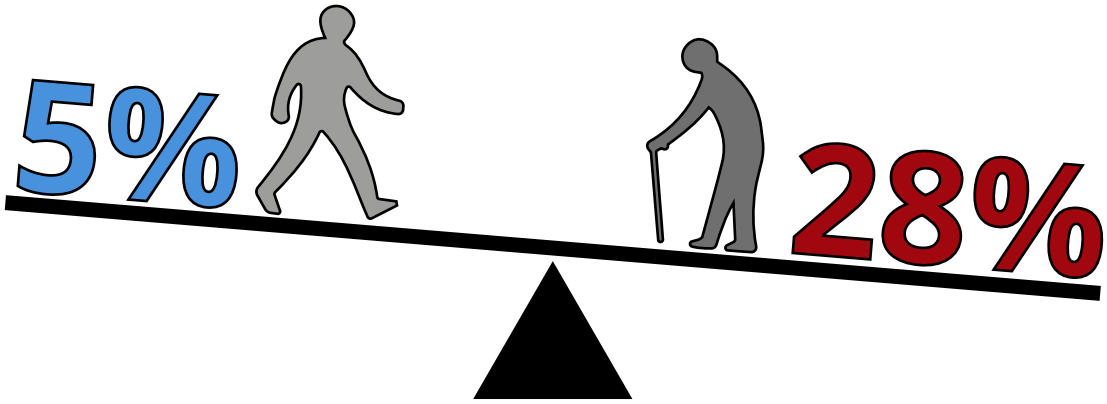
16 Resolution Foundation, *Big welcomes and long goodbyes: The impact of demographic change in the 2020s* (June 2022): https://economy2030.resolutionfoundation.org/wp-content/uploads/2022/06/Big-welcomes-and-long-goodbyes.pdf [accessed 24 June 2022]

Figure 1: Population growth



Source: ONS, National population projections: 2020-based interim (January 2022): https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/nationalpopulationprojections/2020basedinterim#changing-age-structure [accessed 21 June 2022]

Figure 2: Pensionable and working age population increase by 2045



Source: ONS, National population projections: 2020-based interim

Change in health profiles causing increased demand

12. Alongside an increase in the population of older people who will likely need to draw on public services for support, the public services workforce (both in health and care and beyond it), will need to respond to the changing health profile of the UK population.

13. As of 2022, a quarter of people in England have multiple health conditions. This is substantial, and has been growing: the Richmond Group of Charities believed that multimorbidity (the presence of two or more long-term health

conditions) is the "new normal".[17] This is supported by data from the Office for National Statistics which show that, over the last eight years, the number of disabled people of working age in the UK has risen by almost 35%, from 6.7 million in 2014 to around 9 million.[18]

14. When considering demographic changes in both age and health profile in December 2020—before current rises in inflation and the Government's proposals for reform of the social care system—the Care Policy and Evaluation Centre estimated that the spend on social services would almost double between 2018–38, and would continue to rise rapidly in the following decades.[19]

Public services demand and young people

15. Changes in demographics will also affect services supporting younger people. For example, the number of primary school pupils is expected to drop by over 300,000 in the next four years, while the number of secondary school pupils will increase by over 210,000.[20] Due to historic over-recruitment in primary education this may mean too many primary school teachers but a shortage of secondary school teachers.[21]

16. Other factors will influence demand. Despite the number of children in the UK being forecast to shrink over the next two decades, the number of children in care settings is likely to increase, due to children staying in care for longer.[22] Without "a dramatic whole system reset", the Independent Review of Children's Social Care in England projected that the number of children in care would rise from 20,000 to 100,000 by 2032.[23]

17. **In the coming decades, public services will see a significant increase in demand which will not be met with a corresponding increase in the supply of staff.**

---

17 Written evidence from the Richmond Group of Charities, (FFF0007). See also The Health Foundation, *Briefing: Understanding the health care needs of people with multiple health conditions* (November 2018): https://www.health.org.uk/sites/default/files/upload/publications/2018/Understanding%20the%20health%20care%20needs%20of%20people%20with%20multiple%20health%20conditions.pdf [accessed 5 July 2022].

18 The ONS report that in Jan–March 2022 there were 8,966,828 disabled people in the UK, compared with 6,710,860 in Jan–March 2014. See ONS, *A08 Labour market status of disabled people* (17 May 2022): https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/datasets/labourmarketstatusofdisabledpeoplea08 [accessed 8 June 2022]

19 CPEC, *Projections of Adult Social Care Demand and Expenditure 2018 to 2038* (December 2020), p 10: https://www.lse.ac.uk/cpec/assets/documents/cpec-working-paper-7.pdf [accessed 24 June 2022]. See also Department of Health and Social Care, *People at the Heart of Care* (December 2021): https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1061870/people-at-the-heart-of-care-asc-reform-accessible-with-correction-slip.pdf [accessed 24 June 2022].

20 ONS, *National Pupil Projections* (July 2021): https://explore-education-statistics.service.gov.uk/find-statistics/national-pupil-projections#releaseHeadlines-tables [accessed 8 July 2022].

21 Q 86 (Robin Wilkinson)

22 ONS statistics forecast that the number of children in the UK will drop from 12.7 million in mid-2020 to 11.6 million in mid-2030, then 11.2 million by mid-2045. See ONS, 'National population projections: 2020 based interim': https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/nationalpopulationprojections/2020basedinterim#changing-age- [accessed 6 July 2022]

23 Josh MacAlister, *The independent review of children's social care* (May 2022), p 10: https://childrenssocialcare.independent-review.uk/wp-content/uploads/2022/05/The-independent-review-of-childrens-social-care-Final-report.pdf [accessed 12 July 2022]

External pressures

18. The pressures on our public services are not limited to demographic changes: the costs of simply doing business are increasing. Two examples are fuel and food. Rising fuel prices will increase the costs of running ambulances, buses, and keeping care homes warm. Rising food prices will increase the costs of running schools, staff canteens, community groups and events. These are only limited examples, and they do not touch upon the elephant in the room: as costs rise for individuals who may already be struggling, their recourse to public services increases.

Our inquiry

19. We launched our inquiry on 24 January 2022. In addition to taking oral and written evidence and holding a private seminar, we visited the Chelmsford campus of Anglia Ruskin University to view their medical training facilities (see Appendix 4). We are grateful to all who helped us with this inquiry.

20. Throughout this inquiry, we received a significant amount of evidence concerning the health and adult and children care workforces, and we have explored workforce challenges in the civil service, local government, and in the prison and police services. While, reflecting the balance of our evidence, this report includes a greater emphasis on health, care and local authority workforces, its findings and recommendations apply across other public services.

21. As many of these are devolved matters, our recommendations apply primarily to England. Many will, however, be of interest to devolved governments in the constituent nations of the UK.

Our plan for action

Box 2: Action strategy

- Understand the problem by collecting and sharing workforce data
- Get the most out of the workforce by empowering them and thinking imaginatively about where they could be deployed
- Make services work for users through meaningful consultation
- Use technology in the most productive and informative ways
- Prioritise preventative services
- End the culture problems driving people to leave
- Make the offer of public service careers more attractive by fixing pensions and offering flexible working
- Fix the broken brand of public service careers, and get an appealing message out
- Create new and accessible entry routes, and properly use those that already exist
- Train to retain: rethink development so that skills can be recognised and used more effectively across broad careers

CHAPTER 2: A LONG-TERM APPROACH

A strategic approach

22. Given the long-term demographic challenges and the likelihood of persistent difficulties in recruiting sufficient staff, long-term thinking and strategic approaches to workforce planning, are required. These approaches will necessarily consider public service design and delivery which set the requirements the workforce must meet.[24]

23. Contributors argued that long-term thinking must consider different ways to boost workforce numbers, such as UK training routes and immigration,[25] but should also examine how to boost efficiency in public services, through improved development and use of data, more flexible and creative deployment of staff and technology, better engagement with people with lived experience, and investment in preventative services.

24. In some areas, the Government is already taking steps to develop workforce plans to meet changing demand. For example, the Department for Education uses the 'Teacher Workforce Model' as a projection tool for teacher and pupil demographics.[26] Health Education England has also been commissioned to develop a 'Long-Term Strategic Framework for Health and Social Care Workforce Planning'.[27]

25. These though, are usually limited to a single Government Department, and do not constitute a comprehensive look at future workforce needs nor, crucially, how to address them. Sarah McClinton though, stated that "what is missing is a long-term strategy for what we will need in10 years and how we get from where we are now".[28] The Royal College of Nursing has also criticised the Government for the "absence of a proper health and care workforce strategy".[29] We heard that the Government's focus on workforce planning has been "on short term management, muddling through and firefighting, with longer-term planning and development not a priority."[30] Robin Wilkinson emphasised the need for a long-term view, telling us that "maintaining quality and supervision at pace brings some challenges, so long-term planning is vital."[31]

26. Agency working is one example of such short-termism in workforce planning, and it was raised repeatedly.[32] Without available staff, some teams

24 See Q 76 (Robin Wilkinson), Q 83 (Robin Wilkinson), written evidence from the Royal College of Surgeons of Edinburgh (FFF0002), the Police Superintendents' Association (FFF0004), the Richmond Group of Charities (FFF0007), the General Medical Council (FFF0009) and NHS Providers (FFF0010)

25 Written evidence from NHS Providers (FFF0010), Skills for Care (FFF0024) and the Nuffield Trust (FFF0042)

26 Written evidence from the Department for Education (FFF0056)

27 Written evidence from Health Education England (FFF0032) and the Department of Health and Social Care (FFF0055)

28 Q 22 (Sarah McClinton)

29 RCN, Royal College of nursing responds to Government claim on nursing workforce target' (7 March 2022): https://www.rcn.org.uk/news-and-events/press-releases/royal-college-of-nursing-responds-to-government-claim-on-nursing-workforce-target [accessed 8 June 2020]

30 Written evidence from Prospect Trade Union (FFF0028)

31 Q 76 (Robin Wilkinson)

32 QQ 51 and 59 (Joanne Roney), Q 65 (Jade Hamnett), written evidence from the Local Government Association (FFF0012), Solace (FFF0044), the Trades Union Congress (FFF0045), Chartered Institute of Environmental Health (FFF0053). See also written evidence from Wigan Council (FFF0035).

are compelled to turn to consultant or agency staff, at a higher cost. Joanne Roney, President of Solace and Chief Executive at Manchester City Council summarised:

> "We could do better with the money that we currently spend. We have 112,000 vacancies in the care sector and 5,800 agency workers. About 15% of the children's service workforce is agency and 8% of the adult care service is agency. We pay more for agency than we would pay were we retaining, developing and growing our own."[33]

Reasons for the use of agency staff may vary, but evidence indicated a lack of resource or timely recruitment was the driving issue in some areas. The Chartered Institute of Environmental Health reported that:

> "Teams [delivering environmental health services] at 87% of local authorities told us that agency staff were used because of shortages in resources or delays in recruitment rather than due to unprecedented demand for services (30%) or due to specialist knowledge not being available in-house (23%)."[34]

27. **Changes in the needs of the UK population will mean long-term growth in demand for public services which will outstrip the growth of the potential workforce. This presents a long-term challenge which requires long-term, strategic solutions. To ensure a truly sustainable workforce, these solutions will need to go beyond attempts to recruit and retain more staff: flexibility, creativity, and imagination will be key.**

The role of data in developing strategies

28. Daniel Gerson, Head of Unit Public Employment and Management, in the Directorate for Public Governance at the Organisation for Economic Cooperation and Development stated that: "Improving workforce data is … huge in order to be able to map and understand where our workforce is, what skills they have, how we can address them and bring them together to address a pandemic or any kind of crisis".[35]

29. However, such data is not always readily available to public services providers or Government departments. Prospect, the second largest trade union in the civil service, said that:

> "Government and public service employers have too often failed to gather the workforce data or develop the planning tools necessary to identify and prepare for future workforce needs … [Prospect] often found employers unable to provide detailed or reliable information on their own workforce, and has sometimes found employers turning to the union for intelligence and insight into skills shortages or demographic risks."[36]

30. Data will be needed on current and future needs, the make-up and deployment of the workforce and recruitment and exit data. More qualitative information is needed too, including on reasons for leaving. This last point

33 Q 55 (Joanne Roney)
34 Written evidence from the Chartered Institute of Environmental Health (FFF0053)
35 Q 71 (Daniel Gerson)
36 Written evidence from Prospect Trade Union (FFF0028)

is crucial to enable the public sector to address these problems and thereby improve retention.

31. The lack of information was apparent when looking at specific sectors, too. For example, Age UK argued:

> "The absence of current, reliable data on our health and care workforce is a real impediment to effective planning, and the ability to identify service and skills gaps and take early action is limited by these data gaps."[37]

Such concerns extended to data held around social enterprises and other third sector bodies.[38]

32. Alongside concerns around public services providers lacking accurate workforce data, witnesses raised concerns about a lack of coordination or understanding in how data was gathered, held, and deployed across Government.[39]

33. **The Government does not yet have sufficient, reliable data on the public services workforce, nor projections for future demand. Developing this capability will be essential in developing effective workforce strategies for the future.**

34. ***The Cabinet Office should work with all Government Departments, and particularly the Department for Levelling Up, Housing and Communities to promote best practice on developing and sharing workforce data at a local and national level.***

Drawing out the untapped potential of the workforce

Deploying staff

35. We were told that, within the workforce, "the scale of the untapped potential capacity is evident". Allowing staff, particularly staff in frontline roles and at more junior levels to deliver more services, and to identify needs would, we were told, improve service provision. This is particularly the case in enhancing access to early and preventative measures, and in many cases, delegation of services would free other staff to provide services only they are able to.[40]

36. A number of examples were provided to us.

    (a) Staff working with children, such as teaching assistants, youth support workers, health visitors, personal advisors and welfare officers, all of whom have established training, "could be trained further to help meet the early mental health needs of … children and families". This, we were told, could help in managing multiple and complex circumstances and better support children and families in early intervention.[41]

    (b) During the pandemic, Wigan Council developed a "reservist model" which allowed council staff to be deployed to frontline roles to meet

37 Written evidence from Age UK (FFF0033)
38 Q 60 (Andrew O'Brien)
39 Written evidence from the Open Data Institute (FFF0040)
40 Written evidence from the Anna Freud National Centre for Children and Families (FFF0052)
41 *Ibid.*

staffing shortages. They intend to retain this model, which they say provides an understanding of the "assets we have [within] our own workforce".[42]

(c) As part of the Loneliness Strategy, the Home Office have trialled a "Safe and Connected" scheme where postal workers call in on lonely older people to check on their needs and share this with local authorities.[43]

(d) During the pandemic, hospice and palliative care staff took on additional tasks to support the wider health and care system, including in upskilling and educating other health and social care professionals.[44]

Delegating decision making

37. We heard that empowering staff through increasing decision making at junior levels would improve outcomes for staff and service users.[45] Wigan Council thought that staff should have "permission to work more imaginatively and more creatively; to leave behind traditional ways of thinking".[46] Jade Hamnett, a representative of the care organisation Social Care Future, thought that: "There can be a lot more imagination" for how people are deployed, and how different groups can be engaged.[47]

38. Professor Catherine Mangan, Professor of Public Management and Leadership at the University of Birmingham, outlined the priorities she thought that change managers face, saying they should:

> "… champion agility, open-mindedness, creativity and flexibility, recognising the potential of people who are perhaps slightly different from them, and designing roles where people feel they can make a difference and have autonomy".[48]

39. Some examples of effective delegation of decision making and further opportunities included:

(a) In June 2022, a "community pharmacy cancer diagnosis pilot" was announced, which will enable pharmacists the power to refer patients directly to cancer specialists, without need to refer to a GP.[49]

(b) When we visited the Anglia Ruskin campus, we were told that in some paediatrics teams nursing staff have a "veto" over discharge. This enabled factors outside the strictly medical condition to be considered in discharge decisions.[50]

---

42 Written evidence from Wigan Council (FFF0035)

43 Department for Culture, Media and Sport, *A connected society: A strategy for tackling loneliness – laying the foundations for change* (October 2018): https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/936725/6.4882_DCMS_Loneliness_Strategy_web_Update_V2.pdf [accessed 16 June 2022]. See also written evidence from the Social Market Foundation (FFF0048), and Polly MacKenzie, 'Confronting Covid's impossible cost: an alternate path' (September 2021): https://www.centreforpublicimpact.org/insights/confronting-covid-s-impossible-cost-an-alternate-path [accessed 15 June 2022].

44 Written evidence from Marie Curie (FFF0026)

45 Written evidence from Skills for Care (FFF0024) and Q 107 (Richard Lee)

46 Written evidence from Wigan Council (FFF0035)

47 Q 67

48 Q 45

49 NHS England, 'High street pharmacies spot cancers in new NHS early diagnosis drive' (15 June 2022): https://www.england.nhs.uk/2022/06/high-street-pharmacies-spot-cancers-in-new-nhs-early-diagnosis-drive/ [accessed 15 June 2022]

50 See Appendix 4.

(c) The DHSC have committed to increase the number of "appropriate clinical interventions social care workers can safely carry out by developing a national delegation framework of healthcare interventions."[51]

40. Delegating decision making to boost productivity and empower staff should not only be examined for frontline roles. Kate Caulkin, Director of the People and Operational Management Hub at the National Audit Office shared an example of self-organising teams at the independent police conduct authority. Teams handling complaints were allowed to manage their own workloads rather than having cases allocated to them by management. This resulted in productivity rising by 33%.[52]

41. This is sensible flexibility. But regulation can act as a barrier and be slow to change. Medical Associate Professionals such as physician associates are unable to take on some tasks such as prescribing, which are regulated powers. This is despite having extensive training and skills. This is changing, with some skills and responsibilities being taken on by professionals who had not previously done so. The General Medical Council described these changes as a "major step forward". Further progress though, for example on prescribing powers was described as "long overdue". The Director of the NHS Workforce, similarly, expressed frustration that it had not been rectified "at the pace we would all like."[53] We agree with our witnesses that when regulation and rules become constraining, "it is devastating for morale, and both pushes people out of the profession and builds a reputation that deters others from applying."[54]

42. We also consider it likely that career protectionism plays a part in the difficulty in removing, or making more permeable, these barriers. Gavin Larner, Director of the NHS Workforce, shared his frustration that rules on the responsibilities and abilities of physician associates were difficult to change, but without going into detail as to why.[55]

43. **The potential of many staff to deliver services is largely untapped. There is a need for far more imagination and flexibility in how public services staff are deployed, the tasks they can undertake, and the decisions they are empowered to make.**

Involving service users in workforce and service planning

44. Our previous work has argued strongly for users to be involved in the design and delivery of public services at every level because a lack of consultation embeds fundamental weakness in the service.[56] Evidence to this inquiry confirmed that improved engagement of service users, including in workforce planning, would enable providers to better meet user need. Consultation should, we were told, extend to people with protected characteristics, and those with knowledge of their local communities. Dr Bryan McIntosh, Senior Lecturer in Healthcare Management, asked: "Who knows their communities

51 Supplementary written evidence from Edward Argar MP, Minister of State for Health, Department for Health and Social Care (FFF0059)
52 Q 33 (Kate Caulkin), written evidence from Skills for Care (FFF0024) and Q 35 (Sian Elliott)
53 Q 97 (Gavin Larner) and written evidence from the General Medical Council (FFF0009)
54 Written evidence from Frontline (FFF0034)
55 Q 97 (Gavin Larner). See para 191, where this is discussed in more detail.
56 Public Services Committee, *A critical juncture for public services: lessons from COVID-19* (1st Report, Session 2019–21, HL Paper 167)

best but the people who live in them?"[57] Debra Baxter, a service user with 22 years of experience in the public and charity sector, including 15 years as a trainer, stated that:

> "Working together in partnership with 'the experts' is also cost-effective … because there will be less time/money spent of people returning with more issues and working together results in better outcomes for the public and services funding."[58]

45. The danger of failing to grasp the needs of service users and how to address them was acknowledged by witnesses from the Government, with Rob Smith, the Director of Workforce Planning and Intelligence at Health Education England stating: "Trying to do workforce planning without that clear vision about the service users' need and the service to meet it is, frankly, doomed to failure".[59]

Barriers to co-designing services and plans

46. Challenges and barriers to effective co-production included:

    (a) Fear of losing support: When representing Social Care Future, a network which campaigns to improve social care including through greater involvement of people with lived experience, Jade Hamnett stated that:

    > "Fear is a massive issue that just cannot be overstated … Every time I speak to any service that has power over me, there is that terror: 'You could ruin my life if you wanted to. You could take away half my care plan in an email'".[60]

    (b) Accessibility: Local authorities do not always consider service users' needs when creating opportunities for engagement. Jade Hamnett noted that before the pandemic she had not been allowed to participate virtually in meetings organised by the council, and that meetings had not been organised for times or in ways which were accessible to her.[61]

    (c) Financial barriers: Jade Hamnett commented that a person with lived experience participating in a policy development meeting may receive minimal or no compensation for their time or expertise.[62]

    (d) Structural barriers: Dr Bryan McIntosh argued that in some cases introducing or increasing elements of co-design face structural barriers, such as requiring employee contracts to be redesigned or renegotiated, including through trade unions or legal barriers.[63]

    (e) Cultural barriers: Dr Bryan McIntosh argued that: "If you really recognise the value and worth of that user and what they can contribute,

57 QQ 64–65, written evidence from Shared Lives Plus (FFF0031), Debra Baxter (FFF0036), the College of Policing (FFF0057), the Maternal Mental Health Alliance (FFF0005), the Richmond Group of Charities (FFF0007) and Shaw Trust (FFF0008).
58 Written evidence from Debra Baxter (FFF0036)
59 Q 7 (Rob Smith). See also supplementary written evidence from Edward Argar MP, Minister of State for Health, Department for Health and Social Care (FFF0059).
60 Q 67 (Jade Hamnett)
61 *Ibid.*
62 Q 68 (Jade Hamnett)
63 QQ 6–9

that multiplies their voice. We often have the exact opposite of that. That user voice is diminished or we do not recognise it."[64]

47. Marie Curie, a provider of end of life care, argued that training needed to incorporate engagement with people with lived experience, stating that: "by integrated cultural awareness into training, the health and social care workforce will be more equipped to provide culturally appropriate care".[65] Alongside improving training for staff, the importance of engaging with service users in the design and delivery of programmes needs to be communicated from leaders in public services providers.

48. ***The Government should set the clear expectation that engagement with service users and people with lived experience must be embedded in the design and delivery of services, strategies, and workforce planning, and should strongly encourage regional and local bodies to do the same. The Government should outline best practise to ensure that such engagement is meaningful and rewarding for those service users consulted.***

49. ***The Government should prioritise developing training programmes in partnership with service users and organisations which support service users, to ensure they are preparing the workforce to meet user needs. Service users and people with lived experience should also be involved in the delivery of training.***

Embedding the use of technology in workforce planning

50. The increasing role of technology in the planning, design and delivery of public services was something raised in numerous submissions to the inquiry.

51. There was a broad consensus from contributors that the increased use of technology has significant potential to improve efficiency in public services and support the workforce, both in reducing workloads through automation, or changing how services are delivered, and in making services more flexible.[66] The Police Superintendents' Association stressed that "technology should be harnessed in every way, where it can improve on the mission to protect the public",[67] and Prospect stated that "digital technologies have a key role to play in improving the effectiveness and accessibility of public services".[68] Membership organisation NHS Providers argued :

> "New innovative digital ways of working–from advanced robotics right down to simply upgrading computing hardware–have the potential to free up staff to spend more face-to-face time with patients. Along with other transformations underway, this will lead to a more sustainable health service".[69]

52. Duncan Shrubsole, Director of Policy Communications and Research for Lloyds Bank Foundation, stressed the importance of developing technology with the user in mind and accompanying the development of technology with efforts to build relationships and trust. While he acknowledged that "public

64 Q 68 (Bryan McIntosh), Q 67 (Jade Hamnett) and written evidence from Debra Baxter (FFF0036)
65 Written evidence from Marie Curie (FFF0026)
66 Written evidence from the NHS Confederation (FFF0029) and NHS Providers (FFF0010)
67 Written evidence from the Police Superintendents' Association (FFF0004)
68 Written evidence from Prospect Trade Union (FFF0028)
69 Written evidence from NHS Providers (FFF0010)

services … are littered with databases that people built … without starting with who was going to use it and why", when such steps are taken they can be highly effective. He gave an example from Norfolk where service user information could be shared across different services, meaning the service user did not have to repeatedly share the same information and could access different kinds of support faster.[70]

53. Specific ways increased use of technology has or could improve service delivery and support the workforce included:

- The improved use of data to enhance planning for service demand or need. One example given was the analysis of crime data and forecasting crime hotspots.[71]
- Increasing the speed at which demand is met. Dr Aveek Bhattacharya, Chief Economist at the Social Market Foundation, shared that, "Small money cases and civil proceedings are increasingly online, and the average time taken to settle those has gone from 14 weeks to five weeks."[72]
- Robin Walker MP, the then-Minister for School Standards, spoke about the Oak National Academy, an online school which was set up in April 2020 as a good example of technological innovation being deployed in schools. He thought that technology held great potential for educational settings and emphasised the potential in particular for it to aid in curriculum planning and lesson development. He was clear that he recognised the role of technology to "reduce workforce and maximise the impact of the workforce being available".[73]
- Greater accessibility of services for remote service users. Healthcare services such as Livi have supported the development of measures such as remote GP consultations.[74] Similarly, in schools, virtual parents' evenings can be more convenient for both parents and staff.[75]
- Duncan Shrubsole noted that in the domestic abuse sector innovations had enabled "people to seek help through mobile phones and do alerts", and shared that services focused on honour based violence had been able to reach more people and people they had not been able to before.[76]
- Increased automation, such as the use of robots in social care settings in Japan, has the potential to alleviate workforce shortages, and provide greater flexibility for workers.[77]

---

70 Q 63 (Duncan Shrubsole)
71 Written evidence from the College of Policing (FFF0057). For further examples, see Q 42 and written evidence from the Open Data Institute (FFF0040).
72 Q 42. Dr Bhattacharya also reported that education technology in Estonia had reduced the amount of time teachers spent on administration by 45 minutes per day.
73 Q 93
74 Written evidence from McIntosh *et al.* (FFF0016)
75 Q 13 (Caroline Pusey)
76 Q 63 (Duncan Shrubsole)
77 National Bureau of Economic Research, 'The Impact of Robots on Nursing Home Care in Japan', (June 2021): https://aparc.fsi.stanford.edu/news/robotics-and-future-work-lessons-nursing-homes-japan [accessed 17 June 2022]. See also National Bureau of Economic Research, 'Robots and Labor in the Service Sector: Evidence from Nursing Homes' (January 2021): https://www.nber.org/papers/w28322 [accessed 17 June 2022].

- The Department for Work and Pensions has explored increasing the use of artificial intelligence in welfare services, including in "assessing fraud and error risks, monitoring cyber-security, tailoring non-financial support offered to customers and reducing verification demands".[78] If implemented with clear priorities and an opportunity for human intervention, this could more effectively identify potential cases of fraud and make more efficient the process for claims.

- Responding to crises: The Organisation for Economic Cooperation and Development argued that: "Having a workforce that is capable of using digital technologies and data to be proactive and seamless in those services means that the service continues to work effectively when crisis hits."[79]

- There is substantial potential for technologies to be deployed in training and development, and we examine this closely in Chapter 5.

Challenges with increasing the use of innovative technology

54. A common concern raised in submissions around the increased use of technology in service delivery was digital exclusion. One in ten people in the UK do not have access to the internet,[80] and a significant proportion of the UK population lacks basic digital skills, with this including people in public service roles, and increasing in certain marginalised communities.[81]

55. Professor Catherine Mangan argued that some technologies, including those using algorithms, could be biased. She shared an example where face-recognition software used in a university was unable to identify non-white faces due to not being coded or developed properly.[82] The House of Lords Justice and Home Affairs Committee report, *Technology Rules? The advent of new technologies in the justice system*, acknowledged this, finding that the use of some technologies in the justice system presented "a real and current risk to human rights and to the rule of law".[83]

56. In some areas there is a lack of basic infrastructure needed to support the increased use of technology. NHS Providers stated that: "It is proving difficult to embed [ambitious digital agendas] when basic issues, such as ensuring reliable Wi-Fi across all buildings, remain unsolved."[84] This may account for a lack of uptake in technology—in a speech last year, Secretary of State for Health and Social Care Sajid Javid acknowledged that:

> "Too much of the system doesn't currently have the basics in place, which frustrates patients and makes life harder for colleagues on the

78 Written Answer HC41871, 3 September 2021
79 Q 71 (Benjamin Welby)
80 Q 44 (Catherine Mangan)
81 Written evidence from FutureDotNow (FFF0049) and Lloyds Bank, *Essential Digital Skills Report* (September 2021), p 30: https://www.lloydsbank.com/assets/media/pdfs/banking_with_us/whats-happening/211109-lloyds-essential-digital-skills-report-2021.pdf [accessed 13 June 2022]. See also Q 59 (Jon Rowney), Q 63 (Duncan Shrubsole), Q 44 (Ana Canhoto), QQ 46–47 (Ana Canhoto), and written evidence from Lloyds Bank Foundation (FFF0006), the National Council for Voluntary Organisations (FFF0050), Euroship (FFF0011), Health Education England (FFF0032), the Social Market Foundation (FFF0048), Dr Bryan McIntosh *et al.* (FF0016) and Shared Lives Plus (FFF0031).
82 Q 44 (Catherine Mangan)
83 Justice and Home Affairs Committee, *Technology Rules? The advent of new technologies in the justice system* (1st Report, Session 2021–22, HL Paper 180)
84 Written evidence from NHS Providers (FFF0010)

front line. One in 10 NHS trusts are still largely operating on paper-based systems. And in social care, research shows 71% of the sector has no digital access to information on the medication of people in their care."[85]

57. Despite this acknowledgement from the Government, evidence from NHS Providers suggested such barriers were caused by a lack of longer-term thinking, in favour of a bidding funding model which:

> "… encourages a feast and famine cycle that incentivises one-off expenditure on systems and 'solutions', while inhibiting long term, strategic approaches that provide sustained operational funding for teams."[86]

58. Concerns about ensuring technology was deployed in a way to support staff and service users effectively was also raised. Service users may find it harder to secure face to face time with providers,[87] and digital tools aimed at sharing relevant information may not adequately meet their needs.[88] Professor Mangan also questioned the impact that an increased use of technology could have on public services staff, suggesting that losing face-to-face time with service users could mean staff "losing a big chunk of the reason they came into public service in the first place."[89] Similar concerns were raised by Dr Ana Canhoto, Reader in Marketing at Brunel University, who stated that by automating "those boring parts of our job … [staff] end up with a much more stressful job because they are always dealing with the difficult cases."[90]

59. During our visit to Anglia Ruskin university, we saw how technology can be used for training purposes, including in artificial intelligence simulations, and advanced dummies. It was clear to us that these added value in many ways, enabling practise without encountering patients. They were not, though, a cost-saving measure, nor did they reduce the number of staff required to supervise trainees. Evidence highlighted that the introduction of new technology must be accompanied by comprehensive training for staff, to ensure staff are empowered to use technology autonomously with confidence.[91] Such training will need to evolve alongside technology and would need to be available to staff throughout their careers, which would have cost implications.

60. **Where new technologies are used in the delivery of public services, substantial attention will need to be paid to safeguards against bias.**

61. ***Technology has great potential to ensure the sustainability of the public services. Government departments should conduct horizon scanning exercises to examine how technology can improve forecasting and planning, improve efficiency, and reduce demand for the public services within their portfolio. This must not be***

85 Department for Health and Social Care, 'Speech: Using the power of technology to make the world a safer and healthier place' (September 2021): https://www.gov.uk/government/speeches/using-the-power-of-technology-to-make-the-world-a-safer-and-healthier-place [accessed 14 June 2022]
86 Written evidence from NHS Providers (FFF0010)
87 Written evidence from the Social Market Foundation (FFF0048)
88 Q 42. See also written evidence from Shared Lives Plus (FFF0031), Debra Baxter (FFF0036) and Skills for Care (FFF0024).
89 Q 42 (Professor Catherine Mangan)
90 Q 42 (Dr Ana Canhoto). See also Q 74 (Daniel Gerson) and written evidence from the College of Policing (FFF0057), which highlighted concerns about morale and digitisation.
91 Written evidence from Skills for Care (FFF0024)

limited to short-term cost saving measures but should consider service-user experience and improving public services in the long-term. Horizon scanning should consider digital literacy, inclusion and bias, and basic infrastructure issues, and should bring forward feasible, realistic opportunities for technological innovation.

Prioritising preventative services and early intervention

62. We have previously stressed the importance of preventative services in our principles for public services reform. They can help reduce deep and ongoing inequalities and benefit service users.[92] As it relates to the workforce, their role in cutting demand was a common refrain from contributors, who argued that preventative services can boost workforce capacity by catching problems before they become too complex.[93] Sian Elliott, Senior Policy Officer at the Trades Union Congress, reflected that without effective prevention services:

> "What happens is that the temporary problems that families face become entrenched, immutable and very difficult to resolve. That creates very complex caseloads … that then become very difficult and lengthy to resolve. They require more and more different services to be involved, and that puts a huge strain on lots of different workloads. If we could invest again in those early prevention services, we could nip problems in the bud."[94]

63. Arguments around the value of preventative services in supporting the workforce were not limited to boosting capacity. Smart Social Ltd argued that: "prevention is what most employees actually want to do vocationally, and they don't so they leave".[95]

64. Despite the value of preventative services in reducing demand and therefore increasing workforce capacity to address other issues, we heard that funding for prevention services fell by 47% between 2010–11 and 2019–20.[96] This echoes the findings of our previous inquiries.[97] The nature of preventative services can leave them vulnerable to being cut. The Police Superintendents' Association reflected that: "crime prevention is difficult to measure in terms of impact, and in a Service that is often driven by resourcing challenge and value for money, efforts in this area can suffer".[98]

65. **Greater investment in preventative services would reduce demand for public services, supporting the workforce to address the high level of demand services currently face and resolving issues before they become complex and entrenched. This must be recognised and embedded as a key part of future workforce planning.**

66. ***At all levels of service design and service and workforce planning, providers should prioritise preventative services.***

---

92 Public Services Committee, *A critical juncture for public services: lessons from COVID-19* (1st Report, Session 2019–21, HL Paper 167)
93 Written evidence from Ian Jones, Volunteer Cornwall and partners (FFF0001), the Police Superintendents' Association (FFF0004), Lloyds Bank Foundation (FFF0006), the Richmond Group of Charities (FFF0007), the Local Government Association (FFF0012) and Place2Be (FFF0013)
94 Q 33 (Sian Elliott)
95 Written evidence from Smart Social Ltd (FFF0003)
96 Q 33 (Sian Elliott) and written evidence from Lloyds Bank Foundation (FFF0006)
97 Public Services Committee, *A critical juncture for public services: lessons from COVID-19*, paras 18–52
98 Written evidence from the Police Superintendents' Association (FFF0004)

Improving engagement with the voluntary sector and social enterprises

67. Contributors stressed the importance of working with Voluntary, Community and Social Enterprise groups (VCSEs) when looking to develop strategies for the public services workforce. Ian Jones, Chief Executive of Volunteer Cornwall, a charity focused on boosting social capital and wellbeing, argued that working with the VCSE sector should be "fundamental to any reform of public services".[99]

68. The value of the voluntary sector was highlighted by many contributors, who noted that the voluntary sector could better engage with local communities, work creatively, and develop specialist expertise alongside playing a key role to meet service shortfalls.[100] Duncan Shrubsole highlighted that small charities had developed innovative practice around addressing honour-based violence and domestic abuse,[101] and could also boost engagement of people with lived experience in decision making.[102]

69. The Government has acknowledged the vital role volunteers play in delivering public services, for example in the NHS[103] and libraries.[104] There are an estimated three million volunteers in health and social care,[105] and their contributions can also be seen in education and the justice system.[106] The power of partnerships with the voluntary sector has been highlighted during the pandemic, where skilled volunteers for organisations such as St John Ambulance administered vaccines.[107]

70. While it can be challenging to quantify the economic value of volunteering, Andrew Haldane, former Chief Economist of the Bank of England, suggested it could exceed £50 billion per year, noting that "very few sectors add more value".[108] Figures from the Institute for Volunteering Research indicated that every £1 invested in a volunteering programme yielded an average return of between £3.38 and £10.46, but that high costs can be faced in early years.[109]

---

99 Written evidence from Ian Jones, Volunteer Cornwall and partners (FFF0001). See also written evidence from St John Ambulance (FFF0039) which calls for the inclusion of voluntary sector in local and national emergency planning.

100 Written evidence from Lloyds Bank Foundation (FFF0006), the National Council for Voluntary Organisations (FFF0050), Ian Jones, Volunteer Cornwall and partners (FFF0001), and the Richmond Group of Charities (FFF0007).

101 Q 63 (Duncan Shrubsole)

102 Q 64 (Duncan Shrubsole)

103 NHS England, *Integrated Care* (January 2021): https://www.england.nhs.uk/wp-content/uploads/2021/01/integrating-care-next-steps-to-building-strong-and-effective-integrated-care-systems.pdf [accessed 23 June 2022]

104 Department for Digital, Culture, Media and Sport, 'Policy Paper: Government Response to Danny Kruger MP's Report: Levelling Up Our Communities: Proposals for a New Social Covenant' (February 2022): https://www.gov.uk/government/publications/government-response-to-danny-kruger-mps-report-levelling-up-our-communities-proposals-for-a-new-social-covenant/government-response-to-danny-kruger-mps-report-levelling-up-our-communities-proposals-for-a-new-social-covenant [accessed 23 June 2022]

105 Written evidence from the Institute for Volunteering Research (FFF0030)

106 *Ibid.*, written evidence from Debra Baxter (FFF0036) and St John Ambulance (FFF0039)

107 Written evidence from St John Ambulance (FFF0039) and the National Council for Voluntary Organisations (FFF0050)

108 Bank of England, *In giving, how much do we receive? The social value of volunteering: Speech given by Andrew Haldane* (September 2014): https://www.bankofengland.co.uk/-/media/boe/files/speech/2014/in-giving-how-much-do-we-receive-the-social-value-of-volunteering [accessed 23 June 2022]

109 Written evidence from the Institute for Volunteering Research (FFF0030)

71. Contributors emphasised the importance of including volunteers in public services planning, to ensure that volunteers can take on appropriate roles, foster positive relationships with staff, and have a good experience, encouraging them to keep volunteering.[110] This is particularly important given that volunteers also provide a potential pool of engaged, experienced candidates for public services roles. We discuss this further in Chapter 4, but we heard evidence that there were "cultural barriers" to the integration of volunteers. Andrew O'Brien, Director of Public Affairs at Social Enterprise UK, told us that:

> "… sometimes when the state considers [social enterprise], it thinks it is all just about a bunch of people coming together with coffee and biscuits … the parity of esteem is not there, and the willingness to understand, integrate and identify that workforce is not always there."[111]

72. We heard concerns that there can be an over-reliance on the voluntary sector, and that it should not be viewed as "an 'army' or as a large-scale workforce to be deployed by central command".[112] There is also a clear need for training: despite many volunteers being highly skilled,[113] almost half of public sector volunteers who were already receiving training wanted further training.[114]

73. Government approaches to working with the voluntary sector were seen as, in some places, limiting the potential of the voluntary sector. Multiple contributors raised concerns, including that approaches to commissioning and funding are siloed and short-term.[115] Others argued that they can compromise place based approaches and effectively shut out small, specialist charities.[116] Government's efforts to develop more integrated services through innovations such as integrated care systems were seen as "giving power and money to the same statutory providers" and withdrawing public service contracts from small, specialist providers who could provide high quality, innovative services.[117]

74. Andrew O'Brien stressed the need for "collaboration rather than integration", with third sector expertise being retained in public service delivery. His experience with charities was that he had "had to fight tooth and nail to get social enterprise and charities as potentially allowed to be members of integrated care boards."[118] He had also found that:

> "Sometimes our members experience a bit of condescension, a sense of empire building and protection of delivery of services—people saying, 'We do not want to work with you, because we want to keep the money here, even if you are delivering a really good-quality service and having high impact'… 'thanks very much for innovating and creating these great services. Now we will bring it back in'."[119]

110 Written evidence from the National Council for Voluntary Organisations (FFF0050), Institute for Volunteering Research (FFF0030) and Ian Jones, Volunteer Cornwall and partners (FFF0001)
111 Q 60
112 Written evidence from the Institute for Volunteering Research (FFF0030) and the National Council for Voluntary Organisations (FFF0050)
113 Written evidence from St John Ambulance (FFF0039)
114 Written evidence from the National Council for Voluntary Organisations (FFF0050)
115 Q 60 (Duncan Shrubsole), and written evidence from the Richmond Group of Charities (FFF0007)
116 Written evidence from Lloyds Bank Foundation (FFF0006) and Ian Jones, Volunteer Cornwall and partners (FFF0001)
117 Q 62 (Andrew O'Brien
118 *Ibid.*
119 Q 60 (Andrew O'Brien)

75. **The voluntary sector can add immense value to public service delivery through their local and specialist expertise. Current approaches risk alienating and excluding third sector providers from public service delivery, and are a significant waste of talent and capacity.**

76. ***There is a need for a fundamental shift in how the public sector works with voluntary partners. Voluntary sector bodies should be more fully included in, and flexibility introduced into commissioning to ensure that the work of voluntary partners is not artificially limited by inflexible processes.***

CHAPTER 3: EXPERIENCES IN THE WORKFORCE

77. Public services employers have a responsibility to ensure the wellbeing and job satisfaction of their staff. This is important to recruitment and retention. Positive experiences in the workplace make employers more attractive and means people are less likely to leave. As noted by the Police Foundation: "a healthy, happy and motivated workforce needs to be seen as a strategic capability".[120]

78. We set out to establish what could make people want to join—and stay in—the public service workforce. Addressing some common cultural issues could have a significant impact. First, though, we examined the impact of staffing shortfalls on staff.

Impact of staffing shortfalls

79. Staffing shortfalls increase pressure on public services workers in post. With no reduction in the amount of work, an increase in vacancies creates overwork and burnout. "Intense pressure" and "suffering" was widely acknowledged, including by government officials.[121] Healthcare workers were reported as being "exhausted and overstretched",[122] and the Police Foundation reported "low morale, poor wellbeing, and unmanageable workloads".[123] Similar comments were made about staff working in children's social work,[124] adult social care,[125] education,[126] and prisons.[127]

80. Overstretch is a key cause of staff turnover; creating more vacancies and exacerbating the problem. The Local Government Association said: "Many health and care staff are now struggling with burnout, leaders are delivering services with increasing vacancies, and retention rates are at an all-time low."[128] Lloyds Bank Foundation for England and Wales stated:

> "The level of unfilled vacancies … adds pressure to an already overstretched workforce, as services are forced to operate at lower capacity, reducing the number of people who can access support. In many cases, existing staff have to step in to fill the capacity gap and meet demand for services, which in turn can lead to burnout or further staff turnover".[129]

81. We were told that this was a "vicious circle"[130] which "constrain[s] further progress".[131] Skills for Care referred to "impossible decisions about care

120 Written evidence from the Police Foundation (FFF0051)
121 Q 19 (Matthew Lewis) and Q 1 (Mike Haslam)
122 Written evidence from NHS Providers (FFF0010), the Royal College of Nursing (FFF0062), the General Medical Council (FFF0009) and the Nuffield Trust (FFF0042)
123 Written evidence from the Police Foundation (FFF0051)
124 Written evidence from Shaw Trust (FFF0008) and Q 19 (Matthew Lewis)
125 Written evidence from the Nuffield Trust (FFF0042)
126 Written evidence from Place2Be (FF0013)
127 The POA, the trade union for prison, correctional and secure psychiatric workers, report that 85% of POA members report feeling burnt out. See POA, 'Working in UK Prisons and Secure Hospitals during the COVID-19 Pandemic', (June 2021): https://poauk.org.uk/news-events/news-room/posts/2021/june/working-in-uk-prisons-and-secure-hospitals-during-the-covid-19-pandemic/ [accessed 8 June 2022]
128 Written evidence from the Local Government Association (FFF0012) and Shaw Trust (FFF0008)
129 Written evidence from Lloyds Bank Foundation (FFF0006)
130 Written evidence from Shaw Trust (FFF0008)
131 Written evidence from NHS Providers (FFF0010), the General Medical Council (FFF0009), Prospect Trade Union (FFF0028), Shared Lives Plus (FFF0031) and Solace (FFF0044)

delivery that frontline staff are having to make daily due to workforce shortages".[132] This leads to negative impacts on people using services. In May 2022, the Auditor General for Wales, Adrian Crompton, reported that it could take seven years to bring NHS Wales waiting lists back to 2020 levels, leaving many unable to access treatments.[133]

82. A contributor who worked with vulnerable children provided an example of the human impact of a churn of staff on individual children and young people. They said service users:

> "… face frequent changes of the key people supporting them … This creates instability and disjointed care and support in their lives, contributing to and exacerbating feelings of abandonment, and undermining their emotional wellbeing".[134]

83. **Many of those who deliver crucial public services feel overworked. This has a direct impact on staff turnover and creates a vicious circle which ultimately affects service users.**

Disempowerment

84. Lack of staff empowerment and autonomy was a common complaint in services including the police and local authorities, in both senior and frontline roles.[135] When reflecting on leadership in public services, contributors from Brunel University argued that there was "a focus on compliance, performance and efficiency that often overrides empowerment, care and compassion".[136]

85. Empowering staff can also enhance innovation. Those staff on the front line know the changes that are needed to reduce bureaucracy and provide the best service possible. Ian Jones from Volunteer Cornwall, and his co-contributors, emphasised this point:

> "… leadership has to be distributed downwards and allow for the emergence of new ideas to build on innovative practice that works. It also requires an understanding of when to call in the necessary professional to undertake distinct pieces of work and yet not allow the dominance of the professional to govern from the top down. We have to draw down the expertise from the bottom up when required."[137]

86. Tom Surrey, the DHSC's Director for Adult Social Care, linked staff empowerment with boosting retention.[138] When gathering evidence of effective workforce management in the private sector, we heard from Richard Lee, Chief People Officer at Willmott Dixon, a construction and property development company. He attributed low people turnover (6%) to a focus on empowerment: "Our people feel valued and trusted, and they feel trusted because we empower them. We give them autonomy to take local decisions to improve efficiency and to serve our customers better."[139]

---

132 Written evidence from Skills for Care (FFF0024)
133 BBC News, *NHS waiting lists: Seven years to clear Covid backlog warning*, (May 2022): https://www.bbc.co.uk/news/uk-wales-61634380 [accessed 12 July 2022]
134 Written evidence from Shaw Trust (FFF0008)
135 Q 55 (Jon Rowney), written evidence from SAS Institute (FFF0046) and the Police Foundation (FFF0051)
136 Written evidence from McIntosh *et al.* (FFF0016)
137 Written evidence from Ian Jones, Volunteer Cornwall and partners (FFF0001)
138 Q 100 (Tom Surrey)
139 Q 107 (Richard Lee)

87. Similar comments were made by Andrew O'Brien, who stated: "Social enterprises have very high rates of retention and happiness, because the workers and staff feel empowered about the services they are delivering". However, he went on to say that such empowerment was often lost when services were delivered by government bodies rather than by partner organisations.[140]

Bullying

88. We received reports of a bullying culture in certain public services. The General Medical Council (GMC) stated that bullying was an important factor in doctors leaving the NHS.[141] Reflecting on challenges in the care sector, other contributors noted that "the public sector reports exceedingly high levels of managerial bullying".[142] In the Civil Service People Survey, 7% of respondents reported having been bullied in the last 12 months. Reports include staff being humiliated in front of colleagues, excessively controlled and intimidated.[143]

89. Gavin Larner acknowledged that bullying was an issue in the NHS: "Pre-pandemic, our primary focus was on things like bullying, harassment, [and] workplace culture."[144]

Discrimination

90. We heard some evidence of direct and indirect discrimination in the workplace against staff from minority backgrounds. NHS Providers wrote, "whilst the NHS is the UK's largest employer of Black, Asian and minority ethnic people, it is not always a good employer of people from minority communities".[145] The General Medical Council went into more detail, stating that despite increases in the number of BAME doctors, "these doctors are more likely to face barriers around indication, career progression, and to end up in disciplinary or regulatory processes".[146]

91. Similar concerns were raised by the NASUWT, the Teachers' Union, who in their 2017 report *Invisible Teachers* found that 31% of teachers from black and minority ethnic backgrounds reported experiencing discrimination in the workplace.[147]

92. Discrimination linked to ethnicity was also experienced by service users. The Maternal Mental Health Alliance referred to disparities in health outcomes, including the finding that "maternal mortality is more than four

140 Q 60 (Andrew O'Brien)
141 Written evidence from the General Medical Council (FFF0009)
142 Written evidence from McIntosh *et al.* (FFF0016)
143 Crown Prosecution Service, *Civil Service People Survey 2021 Highlights*, p 9: https://www.cps.gov.uk/sites/default/files/documents/publications/CSPSPeopleSurveyHighlightReport2021.pdf [accessed 7 June 2022]
144 Q 100 (Gavin Larner)
145 Written evidence from NHS Providers (FFF0010)
146 Written evidence from the General Medical Council (FFF0009)
147 NASUWT, *Visible Minorities, Invisible Teachers* (2017), p 6: https://www.nasuwt.org.uk/static/uploaded/6576a736-87d3-4a21-837fd1a1ea4aa2c5.pdf [accessed 7 June 2022]

times higher for Black women, two times higher for mixed ethnicity women and almost twice as high for Asian women compared with white women."[148]

93. Academics from Brunel University London highlighted evidence that women faced barriers to accessing training and career progression if they took career breaks or moved to part-time working, for example due to childcare responsibilities. They argued this was caused by "organisational values that prioritise full-time working as the desire and preferred form of working".[149]

94. Disability discrimination was also reported. The Department for Health and Social Care stated that disabled staff "face greater challenges when it comes to violence and abuse, bullying and harassment, and career progression."[150] The GMC highlighted similar concerns, reporting that doctors with a disability "were less likely to feel supported by colleagues and senior staff and were nearly twice as likely as non-disabled doctors to have taken 'hard steps' towards leaving the medical profession."[151] Outside the health service, trade union Unison said that disabled workers fear resistance from managers when requesting reasonable adjustments such as flexible working.[152]

95. These findings are supported by various Government documents. In the 2021 Civil Service People Survey, 7% of civil servants said that they had been discriminated against at work in the previous 12 months, including discrimination on the basis of disability, gender or ethnicity.[153]

96. **Discrimination, in the form of increased barriers to promotion and a lack of support for staff, remains at unacceptable levels in the public service workforce. This will continue to act as a barrier for the recruitment and retention of talented people.**

Recognition

97. While the work of the NHS received national appreciation during the pandemic, we were told that there is relatively little public recognition of workers outside the NHS. This was particularly highlighted in relation to adult social care. Sarah McClinton commented:

> "Our staff have shown huge commitment and compassion. They do very skilled jobs that support people to live the lives that they want to lead in crisis and in the longer term … but care staff often feel they are forgotten, undervalued and not always recognised."[154]

98. A lack of public recognition was not restricted to social care. The Education Policy Institute's Director of Schools Workforce saw a need to improve the status of teaching as a profession,[155] while the Chief of Corporate Services at the Metropolitan Police, Robin Wilkinson, suggested that work in the public

148 Written evidence from the Maternal Mental Health Alliance (FFF0005). See also MBRRACE-UK, *Improving Mothers' Care, Mother and Babies: Reducing Risk through Audits and Confidential Enquiries across the UK* (November 2021): https://www.npeu.ox.ac.uk/assets/downloads/mbrrace-uk/reports/maternal-report-2021/MBRRACE-UK_Maternal_Report_2021_-_FINAL_-_WEB_VERSION.pdf [accessed 7 June 2022].
149 Written evidence from McIntosh *et al.* (FFF0016
150 Written evidence from the Department for Health and Social Care (FFF0055)
151 Written evidence from the General Medical Council (FFF0009)
152 Written evidence from Unison (FFF0022)
153 CPS, *Civil Service People Survey 2021 Highlights*, p 9
154 Q 19 (Sarah McClinton)
155 Q 79 (James Zuccollo)

sector is "less valued, less respected … than it was 30 years ago."[156] Similar concerns were raised about social work[157] and children's homes.[158]

99. Political challenges in recognition in the civil service were highlighted, with the Trades Union Congress stating that anonymous criticism of civil servants by government ministers undermines "the careers and lives of individuals who are constitutionally unable to defend themselves", "lead[s] to a demoralised workforce and act[s] as a deterrent to anyone considering a career in the civil service".[159]

100. There are also concerns about whether public services and the public sector recognise the value of their own staff. We were told that staff expertise or specialism is not always recognised, with the civil service trade union Prospect arguing that public servants face "a fragmented career landscape that fails to adequately recognise the value of specialist knowledge, skills and experience", and stating that specialists need to be "regarded as integral elements in multidisciplinary teams rather than the 'hired hand' or 'technical support'".[160] Lack of recognition of workers' capabilities also leads to disempowerment, covered earlier in this chapter.

101. **The public service workforce cannot be sustainable until the experiences of staff are broadly positive. Due to chronic overstretch and cultural issues which include persistent discrimination and a lack of recognition, this is not currently the case.**

156 Q 79 (Robin Wilkinson)
157 Written evidence from Frontline (FFF0034)
158 Written evidence from the Department for Education (FFF0056)
159 Written evidence from the Trades Union Congress (FFF0045)
160 Written evidence from Prospect Trade Union (FFF0028)

CHAPTER 4: RECRUITING PEOPLE

Efforts to boost staff numbers

102. The Government has set targets to address certain staffing shortages, including:

- 50,000 more nurses in England by 2024;[161]
- 6,000 more doctors in general practice; and[162]
- 20,000 new police officers.[163]

103. The planned trend towards increased staff numbers is not consistent across the public sector. In May 2022, for example, the Prime Minister announced an intention to cut 91,000 jobs across the civil service over three years.[164]

104. Taking the nursing target as an example of an upward trajectory, a complicated picture of increasing demand emerges. In March 2022 there were 27,000 more nurses working in the health service than in September 2019, suggesting strong progress towards the Government's target, although as of June 2022 there was some debate around this.[165] Despite the increase in recruitment, the nursing vacancy rate rose from 34,700 in March 2021 to 39,700 in December 2021.[166] Possible reasons for this discrepancy include an increase in workloads which has led to vacancies.[167]

105. Public service careers can be interesting, rewarding and personally fulfilling. However, many public service employers are falling short and failing to make an offer of employment that is appealing enough to a sufficient number of candidates.

106. This is particularly important in the context of the current labour market: a difficult environment in which to attract candidates. For the first time since records began, there are fewer unemployed people than job vacancies.[168] This

161 Department of Health and Social Care, *Outcome Delivery Plan: 2021 to 2022* (15 July 2021): https://www.gov.uk/government/publications/department-of-health-and-social-care-outcome-delivery-plan/department-of-health-and-social-care-outcome-delivery-plan-2021-to-2022 [accessed 12 July 2022]

162 *Ibid.*

163 Ministry of Justice, *Outcome Delivery Plan: 2021–22* (15 July 2021): https://www.gov.uk/government/publications/ministry-of-justice-outcome-delivery-plan/ministry-of-justice-outcome-delivery-plan-2021–22 [accessed 12 July 2022]

164 Civil Service World, *Prime minister announces plan to cut 91,000 civil service jobs* (13 May 2022): https://www.civilserviceworld.com/news/article/government-plans-to-cut-91000-civil-service-jobs [accessed 12 July 2022]

165 Department of Health and Social Care, 'Government over halfway to delivering 50,000 more nurses by 2024': https://www.gov.uk/government/news/government-over-halfway-to-delivering-50000-more-nurses-by-2024 [accessed 12 July 2022]. It should also be noted that since these analyses, leaked NHS modelling has indicated that the target could be missed by over 10,000. See 'NHS will miss target for 50,000 more nurses by 2024, leaked data shows', *The Independent* (18 June 2022): https://www.independent.co.uk/news/health/nurses-nhs-boris-johnson-election-pledge-b2103364.html [accessed 24 June 2022]

166 NHS Digital, 'NHS Vacancy Statistics England April 2015-December 2021': https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey/april-2015---december-2021-experimental-statistics#chapter-index [accessed 12 July 2022]

167 The King's Fund, 'Is the NHS on track to recruit 50,000 more nurses? Hitting the target but missing the point': https://www.kingsfund.org.uk/blog/2022/04/nhs-recruit-50000-more-nurses [accessed 8 June 2022]

168 ONS, *Labour market overview, UK: May 2022* (May 2022): https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/uklabourmarket/may2022 [accessed 5 June 2022]

creates competition for qualified candidates, which applies to all employers.[169] We heard that, "everybody has problems" in hiring and retaining staff and that private sector bodies (including investment banks) struggle with "hiring [and] retaining".[170]

Pay

107. We heard a lot about public sector pay. Comments such as: "you will not fix these things without pay,"[171] and pay "is a huge issue"[172] were representative.[173] Along with overstretch, low pay contributes to turnover: Mark Adam, Chief People Officer at the Ministry of Justice, described a high turnover of prison officers as being partly "pay driven".[174] The Police Superintendents' Association said that, since pay cannot keep up with the private sector, "we therefore lose countless skilled, talented individuals who cannot see a reason to stay within policing."[175] Trade unions were vocal on this. Without action on pay we were told that employees will "vote with their feet and look for work elsewhere".[176]

108. Skills for Care said that some care workers earn 21 pence less per hour than other low-paying (and potentially less stressful) occupations such as sales and retail assistance.[177] Unison said that their survey of school support staff found that 96% said their pay isn't enough for them to cope with increasing prices.[178]

109. **Without action to address pay, it will continue to constitute a significant barrier to the sustainability of the public service workforce.**

110. Pay is part of the attraction of any career and the public sector in general does not match private sector pay. There are "entrenched" pay disparities between public and private sectors.[179] Witnesses characterised the situation as "an uneven playing field".[180] Witnesses argued that the public sector "will never compete with the private sector on pay",[181] particularly when looking at specialisms or those roles that require technological expertise.[182] However, many witnesses acknowledged that the purse strings are too tight to match

169 Q 84 (Robin Walker MP). See also written evidence from Prospect Trade Union (FFF0028), Q 5 (Alan Robson) and Q 28 (Matthew Lewis).
170 Q 108 (Stephen Isherwood)
171 Q 32 (Steven Littlewood)
172 Q 19 (Sarah McClinton)
173 See, for example, written evidence from NHS Providers (FFF0010) and the Local Government Association (FFF0012)
174 Q 4 (Mark Adam)
175 Written evidence from the Police Superintendents' Association (FFF0004)
176 Written evidence from Unison (FFF0022), Marie Curie (FFF0026), Prospect Trade Union (FFF0028), and the First Division Association (FFF0018)
177 Cited in written evidence from Skills for Care (FFF0024). See also Skills for Care, *State of the adult social care sector and workforce 2021* (Oct.ober 2021), p 20: https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2021.pdf [accessed 8 June 2022] and written evidence from Chris Pope (FFF0041) who discusses the life changing decisions made by junior public services staff.
178 Written evidence from Unison (FFF0022)
179 Written evidence from the First Division Association (FFF0018)
180 QQ 27–28 (Matthew Lewis), Q 108 (Stephen Isherwood) and Q 91 (Robin Walker MP)
181 Q 80 (Robin Wilkinson)
182 Written evidence from the Police Superintendents' Association (FFF0004)

the "golden hellos" offered by some companies.[183] Any approach must recognise the limits of what the taxpayer can afford.

Enhancing "the offer"

111. Multiple witnesses referred to "the offer" that employers present prospective employees. This refers variously to training and progression, salary, culture, and terms and conditions.[184] Collectively, these were described as "vital", a "key issue" and "key drivers" for a loss of staff in public service delivery.[185] We have not attempted to address all aspects, but focus on two elements of the terms and conditions of employment which could significantly enhance "the offer".[186]

Pensions

112. Public sector pensions are often seen as being attractive, with Joanne Roney describing them as "a hugely significant part" of why public service careers were appealing.[187] We heard though, that they are inflexible and that difficulties in transferring them present "as much of a barrier … as an incentive" to some who may otherwise move into public service.[188]

113. Public sector pensions work differently from private sector pensions, and pension arrangements are not uniform across the public sector. While there is some consistency across central government departments, every non-centralised public sector employer seemingly has a different set of rules. Transferring pensions from one scheme to another can incur exit penalties, transfer costs or loss of existing benefits. The terms may change between schemes, meaning that those changing jobs may face different benefit structures and contributions.[189] Some public sector pensions simply cannot be transferred.

114. Mark Adam described this as "a real challenge".[190] He gave the example of prison officers who, as civil servants, would not readily be able to transfer their pensions to another public service role (such as a police officer).[191] If the aim is to attract staff from the private sector (which includes many in social care roles), there is a need to address barriers to doing so: "they may be put off if they cannot move their previous pension with them."[192]

115. The Local Government Association (LGA) suggested a "public sector transfer club" which would ensure that benefits accrued in one role would be protected, and that some would be able to remain in their previous scheme.

---

183 Q27 (Matthew Lewis). Mr Lewis was referring to a particular initiative by Amazon to attract warehouse workers in a specific area. See Business Live, 'Amazon offers £3k golden hello as South West job vacancies hit record high' (October 2021): https://www.business-live.co.uk/economic-development/amazon-offers-3k-golden-hello-21836855 [accessed 5 May 2022]

184 Q 5 (Alan Robson), Q 67 (Paul Fotheringham), Q 76 (James Zuccollo), Q 98 (Tom Surrey), Q 103 (Edward Argar MP), and written evidence from Our Time (FFF0021)

185 Written evidence from NHS Providers (FFF0010), Skills for Care (FFF0024) and the Nuffield Trust (FFF0042)

186 Training and progression are examined in Chapter 5.

187 Q 59 (Joanne Roney) and Q 80 (Robin Wilkinson)

188 Q 3 (Mark Adam)

189 Written evidence from the Local Government Association (FFF0012)

190 Q 3

191 Q 3 (Mark Adam)

192 Written evidence from the Local Government Association (FFF0012)

They also argued that those transferring from the private sector should always be allowed to keep their private sector pensions.[193]

116. With 30% of nurses expecting to retire in the next ten years, we were also attracted to the idea of flexibility in pensions for those who may be incentivised to return to the workforce part-time after official retirement.[194] Joanne Roney thought that there was potential to have a more "agile, flexible working offer … that does not get tied up with bureaucracy that limits the capacity to bring people in short term, fixed term, or for short periods at points of capacity."[195]

117. She did, though, caution us against "mess[ing] around" with the offer, and warned that requiring uniformity in public sector pensions could run the risk of adhering to the lowest common denominator.[196]

118. The importance of this issue was noted by the Government, and officials referred to a "a shared view … that this is something we are going to have to consider."[197] Little action is apparent, however. The Civil Service Pensions Board have commissioned work on the issue,[198] though it is the Government, rather than that Board, who has responsibility for setting the relevant policy.[199]

119. ***There should be a comprehensive review of how pensions operate across the public services workforce. The goal should not be uniformity but flexibility to enable those coming to—or moving between—public service roles to do so without a financial penalty.***

Flexible working

120. We heard evidence on various models of flexible working, which encompassed remote or hybrid working, job shares and flexible hours. We were told that this was a significant benefit that could be made available to people working in public services, and that "if the public sector is to compete with the private sector it must offer flexibility and a form of hybrid working".[200] The Department for Education wrote:

> "Flexible working practices can help schools to recruit, retain and motivate staff. They can also improve staff wellbeing, promote equality of opportunity and diversity in the workforce and play a central role in ensuring that staff are deployed effectively and efficiently."[201]

Other witnesses described flexible working as a "huge benefit",[202] and noted that it had the potential to widen the "talent pool", with the attraction of flexible working being particularly strong for some groups.[203] Joanne Roney felt that the traditional working culture of 9 to 5, Monday to Friday, "does not fit with modern young people".[204] Sian Elliott told us that, where employers

193 *Ibid.*
194 Written evidence from the Royal College of Surgeons of Edinburgh (FFF0002)
195 Q 59
196 Q 59 (Joanne Roney)
197 Q 3 (Mark Adam)
198 *Ibid.*
199 Civil Service Pensions Board, 'About Us': https://www.civilservicepensionscheme.org.uk/about-us/civil-service-pensions-board/ [accessed 5 June 2022]
200 Written evidence from the First Division Association (FFF0018)
201 Written evidence from the Department for Education (FFF0056)
202 Q 32 (Steven Littlewood)
203 Q 31 (Matthew Lewis)
204 Q 59 (Joanne Roney)

advertise flexible working: "employers report a huge increase in women and disabled workers applying".[205] Such flexibility need not be limited to a remote working offer, but could examine other approaches, including compressed hours, a four-day week where workers take on 80% of their usual hours at full pay,[206] or allowing workers to take on extra hours and be paid overtime.

121. As with flexibility in pensions, more flexible forms of working could be used to retain public services staff approaching retirement. Joanne Roney emphasised the value of "flexible retirement", allowing people to come back into the workforce at a later stage or take on more flexible working later in their careers.[207] Richard Lee's company, Willmott Dixon, acknowledges the potential of flexible working for those people approaching retirement to increasingly work part-time.[208]

122. Such flexibility could also be used to attract people nearing retirement in other sectors to work in public services. The Government has shown interest in this possibility, with then-Minister for Schools Robin Walker sharing that:

> "I have been discussing with colleagues having more of a 'teach last' approach to attract more people who have other life experience and may want to come into teaching towards the end of their careers. In a world in which people undertake more careers and work across more sectors, we need to make sure that the offer of teaching is there for people at all stages in life as well."[209]

Richard Lee suggested private sector partnership could facilitate this—reflecting on the different roles Willmott Dixon employees had taken on when approaching retirement: "[staff had] gone to be governors for schools, people who are doing paid work in the NHS… people who have gone back into the Armed Forces as reservists".[210] The Government could also explore options of how to encourage staff to work beyond retirement age, for example through tax incentives.

123. Steven Littlewood, Assistant General Secretary of the First Division Association, a trade union for public sector managers, noted that the move to flexible working has, over the pandemic, been "effectively done for us".[211] The Police Superintendents' Association said that their workforce had "shown without question that it can deliver without the restrictions of office-based hours".[212]

124. We heard concern, though, that there is no central commitment to flexible working and that understanding varies. Matthew Lewis, UK and Ireland Director for Public Services within the recruitment firm Hays Recruitment,

---

205 Q 36 (Sian Elliott), see also written evidence from the First Division Association (FFF0018), the Trades Union Congress (FFF0045) and the Department of Health and Social Care (FFF0055).

206 This approach is currently being piloted, with proponents suggesting it will boost productivity to the point where a four-day worker produces the same amount as a five day worker in fewer hours. For more information see BBC News, 'The Workers getting 100% pay for 80% of the hours' (6 June 2022): https://www.bbc.co.uk/news/business-61570021 [accessed 23 June 2022].

207 Q 59 (Joanne Roney)

208 Q 108

209 Q 90 (Robin Walker MP)

210 Q 108

211 Q 32 (Steven Littlewood)

212 Written evidence from the Police Superintendents' Association (FFF0004) and the First Division Association (FFF0018)

thought that "for a lot of organisations flexible working is often part-time".[213] Jade Hamnett noted that even some voluntary roles which were directly seeking people with disabilities were limited in flexibility. Having looked at a call for magistrates with disabilities, she found:

> "… you had to commit to full days. If I could have done that part-time, I would have loved to have been involved … reading the form, I thought, 'They don't genuinely want people with disabilities, because they're not willing to put the adjustments in place to allow that to happen'. I know that is a specific example, but that kind of thinking blocks us from getting involved."[214]

Dr Bryan McIntosh expressed a similar view:

> "Some of these changes, such as offering the agility of part-time working, are so simple. Often we see rules as if they have come down from Mount Sinai with Moses. We take them like holy writ, and we do not use independent judgment in their application".[215]

125. Despite this reported inflexibility, we heard indications that hybrid working is under consideration as a permanent fixture for many council employees. There is a case for extending this ambition more ambitiously across public service careers.[216] In some areas the Government has embraced this. For example, the Places for Growth programme enables civil servants to work remotely as part of efforts to move civil service jobs out of London, and the Ministry of Justice advertises vacancies and allows non-operational jobs to be done from anywhere to England and Wales.[217] Joanne Roney said: "It is perhaps about making sure that we are not putting barriers in ourselves around the hours of work, the terms of work".[218]

126. ***The Government should encourage public service employers to offer a broad range of flexible working options by default, with this provision being unavailable only if it would have a negative impact on service users.***

Packaging the offer

Refining the message

127. The importance of public perceptions in recruitment was repeatedly emphasised to us. Recruitment relies (in part) on the ability of public services to develop an identity which potential candidates are attracted to. Some witnesses characterised this as employer "brand" and argued that the public sector was not doing enough to present the offer of public service careers in an appealing way, creating a "value proposition that candidates can buy into".[219]

128. James Darley, founder of Transform Society (a network of social transformation organisations) spoke about the perception of a teaching career: "if you did brand perception research at the moment, I do not think

213 Q 31 (Matthew Lewis) and written evidence from Shaw Trust (FFF0008)
214 Q 67 (Jade Hamnett)
215 Q 67 (Dr Bryan McIntosh)
216 Written evidence from the Local Government Association (FFF0012)
217 Written evidence from the First Division Association (FFF0018)
218 Q 59 (Joanne Roney)
219 Q 27 (Matthew Lewis). See also Q 29, Q 108, and written evidence from Unison (FFF0022).

you would necessarily get lots of people, particularly at that senior level, saying 'yes, that's the sector I want to move into.'"[220] We were told that there was an opportunity to take "control of the narrative"[221] because "the public sector has a huge awareness and brand appeal issue". Referring to his work on the charity Now Teach, James Darley said: "we need to reposition what the public sector is and can offer".[222]

129. One successful "branding" exercise was cited as an example from which the whole public sector should learn. Teach First is a teacher training programme credited with bringing "an injection of dynamism" into education.[223] Despite being highly selective, it attracts more than double the applicants of other teacher training courses.[224] James Darley led the development of Teach First, and he told us that these successes had been achieved by focusing on "brand profile and brand appeal".[225] There had been intensive research and creative thinking on how to attract candidates, resulting in a promotion which asked: "Are you the kind of person who can succeed at this challenging career of teaching?"[226]

130. Similarly, the NHS was described as having "a strong national brand … close to the hearts of the British people".[227] Unison thought that this "nationally known, and highly respected brand" created a "sense of identity, of pride, of belonging" which has been partially responsible for attracting prospective employees.[228]

131. This, however, had the consequence of creating a difference in perception between professions in the NHS and in social care. Health Education England was among those who thought that perceptions of disparities between different areas of the public sector had a negative impact on social care recruitment. It argued for a "joined up and integrated approach" to recruitment between the NHS and the care sector.[229] While an interesting approach, whereby the care sector could benefit from the positive messaging on NHS careers, the problem of public services branding is broader.

132. One potential tool for public sector branding is the idea of a "vocational calling" to public service.[230] Public service and social impact are powerful differences between the public and private sector and, we were told, had potential to attract candidates.[231] The Police Foundation argued: "the service needs to nurture and promote a strong value proposition to its potential future workforce, as an agency of authentic public service and a force for positive social change."[232] Others felt that there is an opportunity to present "the contribution that people make and the purpose of these organisations as

220 Q 108
221 Q 26 (Matthew Lewis)
222 Q 108 (James Darley). Now Teach is a charity that helps career changers to become teachers. See 'Now Teach': https://nowteach.org.uk/ [accessed 12 July 2022]
223 Written evidence from Solace (FFF0044) and Q 9 (Caroline Pusey).
224 Q 80 (James Zuccollo)
225 Q 108 (James Darley)
226 Q 80 (James Zuccollo)
227 Q 29 (Sarah McClinton)
228 Written evidence from Unison (FFF0022)
229 Written evidence from Health Education England (FFF0032) and Q 19 (Matthew Lewis)
230 Written evidence from Shaw Trust (FFF0008)
231 Q 108 (Richard Lee), written evidence from the Police Superintendents' Association (FFF0004), Place2Be (FFF0013) and the Anna Freud National Centre for Children and Families (FFF0052)
232 Written evidence from the Police Foundation (FFF0051)

an attractive proposition".[233] Based on the understanding that a motivation of public service staff is "a sense of giving back to their community", New Zealand's Public Service Commission has promoted (and legislated to embed) a "spirit of service" in public service work.[234]

Reaching candidates

133. We heard that, typically, the public sector had a "single-dimensional approach to candidate engagement". Positions are often advertised in only one place: "if you are in the NHS you will put a posting on NHS Jobs; if you are in the Civil Service you will post on Civil Service Jobs". Clearly, this reaches only those individuals who are actively monitoring those sites and therefore limits the talent pool. We were told that employers need to consider a multichannel approach to candidate engagement, with "video content, social media, constant noise in the background".[235] This would reflect shifts in media consumption, particularly for young people. Richard Lee gave an example: a TikTok video by a female bricklayer had been viewed millions of times and succeeded in changing the perception of women in the construction industry.[236]

134. Boosting young people's awareness of public services careers was also raised. Skills for Care, a workforce planning body, wrote that "there is a general lack of careers advice in schools about the social care sector and minimal opportunities for school-aged children to engage with the sector".[237] Alongside the role of social media in reaching young people, Richard Lee stressed the value of "influencing the influencers" of young people, particularly careers advisors, teachers, parents and Science, Technology Engineering and Mathematics advisors. Reflecting on how public services staff could boost young people's awareness of such careers, he asked:

> "Could they get into secondary schools and talk about the one thing perhaps that the public services have over and above the private sector: the sense of putting something back and making a difference. That appeals to young people".[238]

Inclusivity

135. The messaging around public service careers should come with the acknowledgement that certain public services, such as the police, face a perception issue with minority communities who are often also underrepresented in the workforce.[239] It was clear that the public service workforce should be made up of people that reflect an area: a workforce that is representative of the local community can better respond to that area's

233 Q 27 (Matthew Lewis)
234 Q 71 (Hannah Cameron). See also Te Kawa Mataaho, 'New Public Service Act underlines Spirit of Service' (August 2020): https://www.publicservice.govt.nz/spirit-of-service/new-public-service-act-underlines-spirit-of-service [accessed 12 July 2022].
235 Q 27 (Matthew Lewis)
236 Q 108 (Richard Lee). See also BBC News, 'Norfolk TikTok builder Darcie Richards inspires female bricklayers' (May 2021): https://www.bbc.co.uk/news/av/uk-england-norfolk-56986697 [accessed 12 July 2022].
237 Written evidence from Skills for Care (FFF0024) and Marie Curie (FFF0026)
238 Q 108 (Richard Lee)
239 Q 108 and written evidence from the Police Foundation (FFF0051)

needs.[240] The Local Government Association (LGA) emphasised that, in working towards this, there is a need to: "continue challenging stereotypes … changing wider perceptions about who should do particular roles".[241] The LGA's *Diverse by Design* guide encourages employers to consider equality, diversity and inclusion in job descriptions and adverts, challenging stereotypes by carefully considering the photographs and language used.[242]

136. We were told that understanding of underrepresented communities is crucial to attracting them as part of the workforce. Employers need to know "where to look" to find candidates for roles.[243] Social work charity Frontline's *Inclusive Recruitment Principles* recommend that recruiters and organisations develop an understanding of the needs of "target communities"; this was valuable in enabling employers to craft images and to "personalise" recruitment approaches.[244] This could include targeted discussions to examine the perspectives of existing staff from underrepresented groups, or those from working-class backgrounds who, we were told, are much less likely to be represented within senior management.[245]

137. This sort of flexible, local approach can be more impactful than national efforts. Operation Uplift, which aims to increase the proportion of minority ethnic police officers, has had mixed reviews. The Police Foundation says it is "too soon to judge" the extent of success but so far it has had "negligible impact on BME representation".[246] The College of Policing differed, saying that Uplift has had "relative success" with some evidence of higher ethnic minority police officer representation.[247]

138. **The lack of a cohesive national brand to public service work is a missed opportunity for the Government to convey careers which have a positive social impact in a way that will attract candidates.**

139. ***Teach First has demonstrated the potential of imaginative branding to attract people into public service work. Prior to recruitment campaigns, public sector employers should conduct in-depth research to establish what messages will resonate most with potential candidates. Guidance on developing compelling messaging should be agreed centrally and distributed widely.***

Alternative routes into public service careers

140. We heard calls to broaden access to public service careers, which often referred to reducing or changing the required training or qualifications. As it stands these can take years and cost the future employee many thousands of pounds, because many public services career pathways require degree qualifications.

141. Witnesses referred to training and entry requirements as significant barriers to opening routes to public service careers. Teaching, for example, requires a

240 Written evidence from the NHS Confederation (FFF0029). See also Q 27. Richard Lee told us that: "88% of teenage girls and 66% of teenage boys use some form of social media as their prime form of communication and disseminating information."
241 Written evidence from the Local Government Association (FFF0012)
242 *Ibid.*, and written evidence from Frontline (FFF0034)
243 Written evidence from Shared Lives Plus (FFF0031)
244 Written evidence from Frontline (FFF0034) and the Open University (FFF0014)
245 Q 37 (Sian Elliott) and Q 66 (Paul Fotheringham)
246 Written evidence from the Police Foundation (FFF0051)
247 Written evidence from the College of Policing (FFF0057)

degree. People with disabilities, BME people and people from lower-income backgrounds are all less likely to hold a degree, which presents an obvious issue: a degree requirement makes it less likely that people with these characteristics will become teachers.

142. It is unclear that a degree is required to become a good teacher. Without endorsing any particular viewpoint, James Zuccollo, Director for School Workforce at the Education Policy Institute, asked:

> "… do you really need a degree to go into teaching and be a good teacher? There is lots of evidence from the US that it is very difficult to know who will be a good teacher before they become a teacher. Their grades, whether they have a degree and that sort of thing, do not really tell you much about how good a teacher they will end up being."[248]

143. There are time considerations arising from requirements to undertake lengthy training, including degrees. Joanne Roney used the example of town planners. This profession requires a three-year qualification; but in order to deliver levelling up priorities, she needed them in "one, or two [years]". She argued that "we could find faster pathways through to a high level of expertise".[249] Place2Be agreed that "training mental health professionals at the current pace and using existing formats cannot be scaled sufficiently."[250]

144. The same issues (barriers, time, and relevance) can apply in healthcare, social work and the civil service. We were told that providing a more diverse range of routes into public service careers would maximise the number of people available for the future workforce.[251] While "removing or adapting degree requirements is ultimately a decision for professional regulators to make"[252] as pointed out by then-Minister for Health Edward Argar MP, the Government could encourage regulators to urgently address this issue.

Apprenticeships

145. Apprenticeships provide an opportunity to maximise the number of public service professionals.[253] Witnesses described them as "vital", stating that they had enhanced the ability of various services to attract wider groups of people who would be able to qualify, including attracting more women into policing.[254]

146. It was pointed out that self-funded training or pursuit of degree qualifications through traditional routes "is not realistic for many workforce groups".[255] Apprenticeships, conversely, enable people to earn money whilst qualifying, rather than self-funding and often getting into debt.

---

248 Q 80 (James Zuccollo)
249 Q 57 (Joanne Roney)
250 Written evidence from Place2Be (FFF0013)
251 Written evidence from the Open University (FFF0014)
252 Supplementary written evidence from Edward Argar MP, then-Minister of State for Health, Department for Health and Social Care (FFF0059)
253 Written evidence from the Open University (FFF0014), see also Q 107 (Stephen Isherwood), Q 108 (James Darley), written evidence from NHS Providers (FFF0010), Place2Be (FFF0013) and the Chartered Management Institute (FFF0019).
254 Q 77 and written evidence from the Chartered Management Institute (FFF0019)
255 Written evidence from Place2Be (FFF0013)

147. Apprenticeships can also be an effective way to boost representation from different communities. Joanne Roney stated that:

> "Local apprenticeships are incredibly important. They are how we end up with a workforce that represents the communities that we serve. We need to do more about apprenticeships across all aspects of public service, and we should do more about apprentice pathways giving people the opportunity to experience different aspects."[256]

Contributors thought that apprenticeships "should be used to entice" talented people to public service careers, removing financial barriers.[257] Matthew Lewis noted that they could be used to reach people who were economically disadvantaged and needed an "opportunity to get into the workplace, get a leg up and begin to acquire skills".[258] Apprenticeships can widen the talent pool and allow public services to benefit from the skills and capacity from communities who may not be able to access public service careers through more traditional routes.

148. Apprenticeships can be utilised in a range of skilled professions including environmental health officers, town planners and social workers. Health Education England supported the development of flexible routes into healthcare professions, such as apprenticeships, which widen participation and enable progression from varied educational backgrounds.

149. Contributors outlined several instances where apprenticeships were being or will be used.

(a) Mark Adam explained how they had been used in developing existing staff and noted that there was consideration of expanding their use in initial training for prison officers.[259]

(b) Alan Robson, Deputy Director of the NHS workforce, was "truly excited" about proposals for an apprenticeship to provide a different route into qualification as a doctor. There had been resistance to the idea: "everyone said that it was not doable—it is doable."[260]

(c) Nursing apprenticeships were underway and were presented as a key method of reaching the Government's target of 50,000 more nurses.[261]

(d) A social worker degree apprenticeship programme was launched in March 2019.[262]

(e) The Police Degree Apprenticeship provides a route for non-graduates to enter the police force and receive a degree after completing a three-year programme.[263]

---

256 Q 54 (Joanne Roney)
257 Written evidence from the Chartered Management Institute (FFF0019) and the Chartered Institute of Environmental Health (FFF0053)
258 Q 24
259 Q 3 (Mark Adam)
260 Q 5 (Alan Robson)
261 Q 1 (Mike Haslam)
262 Written evidence from the Department for Education (FFF0056)
263 Written evidence from the College of Policing (FFF0057)

(f) Teaching apprenticeships are a paid way to train as a teacher. There is, though, a degree requirement.[264]

150. The extent to which apprentices are used was questioned, with one witness saying they were "underutilised by the public sector". We were told that their use, at least by local authorities, was falling.[265] Though the Public Sector Apprenticeship Target required public sector bodies with 250 or more staff to aim to employ an average of at least 2.3% of their staff as new apprentices, the average in 2018–19 was 1.7%.[266]

Support for apprenticeships

151. Since April 2017, public sector bodies in England had been required to "have regard to" the target, and to publish information annually on their progress towards it. The target came to an end in March 2022, having been extended for a year longer than originally planned, but bodies are still asked to gather, and later report, certain top-line information. A question that had been asked, which requested reasons for not meeting the target: "what challenges have you faced?" will not now be required.[267]

152. The Government's analysis shows that the two most frequently cited areas of challenge in 2018–19 were financial and regulatory barriers (51% of respondents) and the requirement to have 20% off the job training (46%). The regulatory barriers appear to be around public procurement rules. Budget limitations (particularly notable among schools and local authorities) continued as a concern for 39% of respondents—an increase from 25% the previous year. Respondents felt flexibility should be available with the levy for additional expenses, including to pay wages.[268]

153. We heard reference to flexibility in our evidence. The Chartered Institute of Environmental Health suggested that Government should provide funding to pay for apprentice salaries and that this would "put the future of the profession onto a sustainable footing".[269] The Royal College of Nursing identified a number of issues holding back successful implementation of nursing degree apprenticeships in England, including "the increased pressure on staff and the system, to deliver high quality placements while receiving insufficient funding support through the apprenticeship levy."[270] These are not insurmountable difficulties, but overcoming them will require the input and willingness of relevant unions, regulators, and central government.

154. Matthew Lewis also suggested that flexibility with the apprenticeship levy could mean a redeployment of where it is spent. He suggested that there was

264 UCAS, 'Postgraduate Teaching Apprenticeship': https://www.ucas.com/teaching-option/postgraduate-teaching-apprenticeship [accessed 6 June 2022]

265 Written evidence from the Open University (FFF0014) and the Local Government Association (FFF0012)

266 Written evidence from the Open University (FFF0014), see also DfE, *Meeting the Public Sector Apprenticeship Target* (March 2021), p 7: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/606955/Public_Sector_Statutory_Guidance.pdf [accessed 7 June 2022].

267 DfE, 'Public sector apprenticeship target': https://www.gov.uk/government/publications/public-sector-apprenticeship-target [accessed 12 July 2022]. For the previous requirements see DfE, *Meeting the Public Sector Apprenticeship Target*, p 7

268 DfE, *Public Sector Apprenticeship Target Reporting* (October 2020), p 11: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/927971/Public_sector_apprenticeship_target_reporting_Oct_2020.pdf [accessed 7 June 2022]

269 Written evidence from the Chartered Institute of Environmental Health (FFF0053)

270 Written evidence from the Royal College of Nursing (FFF0062)

a "terrific opportunity" to "focus on the sectors of the talent pools that are not currently engaged in these kinds of roles and are not attracted into this environment: the underrepresented, the disadvantaged, the people who need an opportunity to get into the workplace".[271]

155. The current apprenticeship system may also prioritise large providers over small and medium organisations that deliver public services. Department for Education statistics indicate that in 2020–21, the majority of apprenticeship starters in public administration, health and social work, and education were in large organisations, with the largest percentage being in public administration (99%) followed by education (66%).[272]

156. **There is huge potential for apprenticeships to widen the talent pool by increasing diversity in the public services workforce. The Government should therefore be providing further support and encouragement to public sector bodies to incentivise their use. By removing the apprenticeship target, and ceasing to search for and combat challenges, it is doing the opposite.**

157. ***The Public Sector Apprenticeship Target and associated reporting requirements should be reinstated. Further consideration should be given to additional funding for apprentice salaries.***

Local initiatives

158. There is an understanding that public sector bodies have a duty to improve employment prospects for local people, and that doing so can enhance public trust in institutions.[273]

159. Debra Baxter thought that local authorities were in a strong position to improve local prospects, since they understand the needs of the community. She called for local areas to "be allowed to find their own 'local' way of recruiting people from 'challenged' backgrounds".[274] While national approaches such as apprenticeship schemes play an important role in doing so, we were told of initiatives on a smaller scale.

160. Camden Council has created a local talent pool. This was an "attempt to employ local residents who have a deep knowledge of their community and borough but who are also on the end of council services." Camden Council supports people to secure public service jobs locally, including by working with individuals to write CVs, and where possible, Camden Council also advertise jobs to the talent pool before opening the application process up to other applicants.[275] One witness called for increased career entry routes for people with lived experience of using services, which talent pools like this have the potential to address.[276]

161. Such initiatives have the potential to draw local volunteers and a more representative cohort into paid public services roles. The skills, experience

271 Q 24
272 HM Government, 'Apprenticeships in England by industry characteristics': https://explore-education-statistics.service.gov.uk/find-statistics/apprenticeships-in-england-by-industry-characteristics [accessed 14 July 2022]
273 Written evidence from NHS Providers (FFF0010) and Debra Baxter (FFF0037)
274 Written evidence from Debra Baxter (FFF0036)
275 Q 53 (Jon Rowney)
276 Written evidence from Smart Social Ltd (FFF0003)

and value of volunteers was emphasised in much of our evidence,[277] and the Richmond Group of Charities argued that "the system needs to better support volunteers into jobs and careers in public services". They reported that a significant proportion of volunteers said volunteering made them think about pursuing a career in public services, and that many were currently seeking work—suggesting there is a potential untapped pool of workers for public services to draw on.[278] Clearer frameworks to support volunteers into public services employment could also help address concerns raised in evidence the blurring of lines between voluntary and paid roles.[279]

162. The Government has committed to developing policies to "identify and support best recruitment practices locally."[280] NHS Providers indicated a need to encourage funding for local councils and businesses in areas of high deprivation to invest in communities and improve employment opportunities.[281] The Department for Education's Opportunity Areas programme runs local projects to increase teacher supply in areas where recruitment is difficult. This, we were told, has reduced costs in schools and succeeded in filling teacher and role vacancies. While this programme in part aimed to bring high quality teachers into remote areas, it demonstrates the potential of grants in supporting local recruitment.[282]

163. The Levelling Up White Paper, published in February 2022, proposed the development of a national leadership college to develop future leaders.[283] Solace, which represents leaders in local government, acknowledged that this would be a powerful tool which would encourage collaboration for many public service leaders, but noted that it would not address the training needs of those in local government. To do so, they recommended establishing a new scheme (similar in design to Teach First) which would attract high quality candidates to work in local government, perhaps by offering a career path with support to develop into more senior roles. Schemes like this could, Solace argued, deliver "a more geographically diverse Civil and Public Service that will better serve the public and ministers."[284]

164. ***Local authorities should invest significant resources in developing local talent pools to support people with lived experience of using local services to enter public sector careers. These would create diverse pipelines of talented staff to deliver public services they have themselves experienced.***

Making it easier to apply

165. In a "hugely competitive environment", where public services struggle to fill vacancies, we heard that public sector recruitment, far from being "efficient

277 Written evidence from National Voices (FFF0017), the Institute of Health Visiting (FFF0020), Marie Curie (FFF0026), the Institute for Volunteering Research (FFF0030), St John Ambulance (FFF0039) and the National Council for Voluntary Organisations (FFF0050).
278 Written evidence from the Richmond Group of Charities (FFF0007)
279 Written evidence from Lloyds Bank Foundation (FFF0006) and the Institute for Volunteering Research (FFF0030)
280 Written evidence from the Department of Health and Social Care (FFF0055)
281 Written evidence from NHS Providers (FFF0010)
282 Written evidence from the Department for Education (FFF0056)
283 Department for Levelling Up, Housing and Communities, *Levelling up the UK*, CP 604, February 2022, p 132: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1052706/Levelling_Up_WP_HRES.pdf [accessed 7 June 2022]
284 Written evidence from Solace (FFF0044)

and slick"[285] could take "a number of weeks", and even "six months … from the point of application to onboarding".[286] Many strong candidates will have been recruited by that point by private sector organisations who are more able to, as one witness put it, "look at a CV or whatever and say, 'Yes, let's go'".[287]

Box 3: Case study Wigan Council

Wigan Council's children's services struggled with retention and recruitment in March 2020. They wrote: "we knew we needed to do something differently". Following a consultation, they designed a workforce strategy combining work flexibility, management supervision and a dedicated Academy Team to "nurture and develop" new staff.

On recruitment they worked to transform the "candidate experience" for new starters with virtual events, fast-track interviews and a shorter application form. This was accompanied by a new induction programme which made one applicant "feel valued before I walked through the door".[288]

Following these changes, the use of social work agency staff reduced from 32% to 25% of the workforce. There was a 55% reduction in social worker turnover.

Source: Written evidence from Wigan Council (FFF0035)

166. By comparison, Richard Lee, Chief People Officer at construction firm Willmott Dixon, told us that a job application to work there "takes two minutes and 17 seconds".[289] Caroline Pusey, Director of the Teaching Workforce at the Department for Education, told us about the new process for applications for initial teacher training. This had recently been relaunched and had been "designed with user need at the heart".[290] Early evidence that it has been successful (positive feedback and a reduced drop-out rate) is promising.

167. ***The Government should impose a duty on all public sector employers to set ambitious targets for recruitment timeframes.***

285 Q 28 (Matthew Lewis)
286 *Ibid.*
287 *Ibid.*
288 Written evidence from Wigan Council (FFF0035)
289 Q 108 (Richard Lee)
290 Q 16 (Caroline Pusey)

CHAPTER 5: TRAIN TO RETAIN

168. Alongside boosting recruitment and improving different routes into public services, we heard about how to realise the potential of the current public services workforce, and how to retain skilled, committed public servants.

169. As outlined in Chapter 1, it is likely that the skills needed for public services will shift in the coming years, due to fewer staff being asked to deliver the same or greater levels of services and because of the changing needs of users of public services. The public services workforce needs access to training throughout their careers to enable them to meet these shifting needs.

170. Staff development is key to attracting and retaining staff. 'Stay interviews' conducted with individuals in Camden council asked: "what would it take for you to stay?" Joanne Roney reported: "In all cases, it is about an expanded scope of role, or the opportunity for personal and professional development".[291] Demonstrating a culture of learning and development in recruitment messaging would ensure that employers delivering public services can begin as they mean to go on.

New requirements

171. Shifts in the UK's demographics mean that in some sectors, such as health and care, staff will need new skills to meet the needs of service users. Such challenges are not limited to the increasing issue of multimorbidity: Place2Be, for example, argued that teachers will need to develop a stronger understanding of children's mental health.[292]

172. Public services are drawing on digital tools to deliver or design services. As the use of digital tools increases, staff will need to be able to use these tools and better understand where such tools can be used. A need for digital literacy is therefore increasingly important for both staff and service users.[293]

Retention

173. Improving access to training at different stages of careers is key to retaining staff, as it can support them to gain new skills and experiences and further their careers within a service or sector. This was acknowledged by the Government, with Caroline Pusey referring to the Department for Education's 'Early Career Framework'. This is designed to improve access to training in teachers' early years and "ensures we are investing in [continuous professional development] which we know improves retention."[294]

174. Continuous professional development is important for morale and can prevent a situation which Health Education England described where staff, "see themselves as 'rota fodder' rather than a future resources to be nurtured".[295]

175. Training provision should acknowledge that new job seekers "are coming into a portfolio career world", in which people move around more in their careers and stay in roles for shorter periods, with the average graduate spending only

291 Q 52 (Joanne Roney). 'Stay interviews' are interviews conducted to maximise retention. They aim to find out from employees what would prevent them from searching for, or accepting, external job offers.
292 Written evidence from the Richmond Group of Charities (FFF0007) and Place2Be (FFF0013)
293 Written evidence from the Social Market Foundation (FFF0048)
294 Q 10 (Caroline Pusey)
295 Written evidence from Health Education England (FFF032)

two and half years in their first job.[296] A desire for more flexible careers was highlighted by NHS Providers, who had seen "a growing staff preference for career pathways which do not follow traditional, linear routes".[297]

176. Another factor driving staff towards portfolio careers may be bottlenecks in senior staff positions, meaning that if staff wish to develop or progress in their careers, a change in (or expansion of) their existing roles may be necessary.[298]

177. **There is an increasing desire for broad careers in and beyond public services. In order to improve the status of public services, boost staff recruitment and secure better retention, it is essential that the public sector adapts to support these preferences.**

Challenges to accessing training and development

Funding

178. Prospect, a civil service trade union, argued that: "cuts to departmental training funds over the past decade have led to a loss of in-depth and in-person continuous training". They shared challenges faced by different public services bodies, including the UK Health Security Agency, which stated that "when it comes to additional training, let alone refreshers, to maintain your knowledge and enhance your skills then there is not money or appetite for that".[299]

179. Alongside a general lack of investment, there appears to be a lack of targeted investment in digital skills training in some sectors. A group of academics from Brunel University London noted that "enhanced digital training up-skills the workforce", and that there was a constant demand for employees with high-level digital skills. This demand, they said, was often met through recruitment of new staff with the requisite skills rather than by investing in existing staff.[300]

Culture

180. Evidence suggested an ambivalence about training, with public services providers failing to prioritise it or to see the value of continuous training. The Police Foundations' Review of Policing in England and Wales emphasised:

> "Continuous Professional Development (CPD) is too often viewed as an inconvenient abstraction from duties, rather than an essential investment in the workforce. One recent study characterised police training as 'transactional' and 'reactive', and as being directed towards immediate problems (such as responding to new legislation), rather than changing the way officers do their job or raising their skill set. Staff surveys show that more officers are dissatisfied than satisfied with the training they receive and Professional Development Review (PDR) processes are typically seen as a 'bureaucratic exercise'".[301]

---

296 Q 110 (James Darley)
297 Written evidence from NHS Providers (FFF0010)
298 Written evidence from Place2Be (FFF0013) and the NHS Confederation (FFF0029)
299 Written evidence from Prospect Trade Union (FFF0028)
300 Written evidence from Dr Bryan McIntosh *et al.* (FFF0016)
301 Written evidence from the Police Foundation (FFF0051). See also The Police Foundation, *Review of Policing in England and Wales* (March 2022): https://www.policingreview.org.uk/wp-content/uploads/srpew_final_report.pdf [accessed 12 July 22].

181. Another cultural barrier to accessing training was a concern that service providers may not benefit from developing staff, due to high turnover. When reflecting on barriers to accessing training, James Zuccollo thought that one key barrier was:

> "… the person who pays for it, who is usually your employer, and the time they have to give up, does not get all the benefits, because probably in a year or two you move onto another employer and someone else gets the benefits".[302]

The National Council for Voluntary Organisations noted that, "where charities do offer training and development, some report staff taking advantage of this training then moving on to higher paid yet similar roles in local authorities".[303]

182. However, since the labour market is becoming more permeable, employers are more likely to benefit from the experience (and the development and training opportunities) that people bring with them from previous roles. If an individual leaves a role but remains in the same sector, or uses their skills to move to another public services sector, there is likely to be a net gain for the public sector as a whole. James Zuccollo noted that "the benefit [of accessing more training throughout careers] for the whole profession, for society … could be greater than the benefit to any one school".[304] Steven Littlewood told us: "You might lose them from social care but you might gain them in the NHS, then they might come back to social care with an extra set of experiences and a different perspective."[305]

183. **Cultural and financial barriers prevent public services staff from accessing sufficient training and development throughout their careers. The public sector's approach to training fails on two fronts: it will not retain people and it will not give them the skills they need for the future.**

Rethinking development

Broad training

184. Broader training opportunities and potentially joint training between and within public services sectors could support staff development.

185. Joint training could address concerns around silos in public services. Health Education England noted that silos in working can limit the quality of care if staff were not "trained (or allowed) to work across organisational or sector boundaries."[306] Frontline argued that "a period of joint training which takes place before professionals are rooted in their specialisms may support a more joint up approach", noting existing siloed approaches to supporting children by the police, schools, social workers and health workers.[307] When we visited Anglia Ruskin campus we noted that student paramedics took part in joint training with student social workers, student doctors and student teachers. This initial training enables students to understand the broad and varied

302 Q 82 (James Zuccollo)
303 Written evidence from the National Council for Voluntary Organisations (FFF0050)
304 Q 82 (James Zuccollo)
305 Q 19 (Steven Littlewood)
306 Written evidence from Health Education England (FFF0032), Frontline (FFF0034) and the College of Policing (FFF0057)
307 Written evidence from Frontline (FFF0034)

perspectives of a range of professionals, helping them to grasp 'the whole picture'.

186. Support for broad training was not universal: the Department for Education argued that there was not significant demand for education professionals to work with other sectors, and there were also concerns that training might be "diluted".[308] This contrasted with calls from Frontline and Place2Be for improvements in joined up training for workers supporting children.[309] Frontline wrote:

> "Facilitating a period of joint training early on in their careers would support workers from across public services to build strong connections and foster a collaborative approach from the outset. Ongoing opportunities to work and train together will be necessary to maintain these strong multiagency links. It would also provide opportunities for prospective professionals in different areas of public service to learn about their respective roles and develop a shared knowledge of tools and approaches that can achieve the best outcomes for children and families."[310]

187. Despite concerns, organisations such as the Chartered Institute of Environmental Health argued that "there are generic areas where more joint training would be valuable" with a focus on leadership, working with the media and financial training.[311] Moreover, there are opportunities to gather a range of professionals in a room to view a scenario from different perspectives.

Exploring other roles

188. The University Hospitals of Derby and Burton NHS Foundation Trust provided an example of where supporting staff to pursue flexible careers had benefited the service. They designed an internal transfer programme, offering staff "the opportunity to move to a different ward or clinical speciality in order to share their skills and develop learning." This resulted in improved retention of staff under 35, who went from making up 35% of all leavers to 26%.[312] Secondments were thought by Solace to be especially beneficial for director level and policy teams in local authorities, who could develop a deeper understanding of the wider context of their roles.

189. The value of giving staff the opportunity to explore other roles was highlighted by Wigan Council, who during the pandemic developed a 'reservist model', redeploying council staff to frontline roles. The council plans to retain this model, because it boosted the resilience of services and will "provide opportunities to work across directorates and the wider system to build new skills, develop new relationships/partnerships, [and it] generates interests in new careers and the development packages for staff working in team Wigan."[313] The council is also looking to develop secondments to other public sector bodies and partner organisations, an approach advocated for by

308 Written evidence from Prospect Trade Union (FFF0028)
309 Written evidence from the Department for Education (FFF0056)
310 Written evidence from Frontline (FFF0034)
311 Written evidence from the Chartered Institute of Environmental Health (FFF0053). See also written evidence from Solace (FFF0044) and the First Division Association (FFF0018).
312 Written evidence from NHS Providers (FFF0010)
313 Written evidence from Wigan Council (FFF0035). As discussed in Chapter 2, we were told that this model also demonstrates the skills and capabilities held by existing staff.

Place2Be, who suggested that the private sector could support secondments as part of their social value commitments.[314]

190. Witnesses stressed the value of staff exploring a period of work in another context, including in the private sector. James Darley reflected:

> "The public sector needs to be supportive of a portfolio career world. Be open to the fact that people might leave, but, you know what, they come back … , a couple of years ago there were more Teach First-ers [sic] teaching in 2003 than there were in 2005. Many of them had gone away, done some corporate work and had a family, but they were coming back."[315]

Stephen Isherwood, Chief Executive Officer of the Institute of Student Employers (ISE), a membership organisation for student employers, reflected on civil service fast streamers who had been seconded to the ISE saying he could "see the learning they are taking back into their organisation" following secondment outside of the public sector.[316]

Accreditation of prior learning

191. It can be challenging for staff to demonstrate their skills in a way that makes sense across the sector, and a lack of accreditation can compromise user trust in services.[317] The Government have partially acknowledged this issue, with Health and Care White Paper setting out a plan to develop a 'Care Certificate' which would be portable between care services, though it should be noted this does not necessarily translate to recognition in the NHS (this could instead be addressed through an 'Integrated Skills Passport'—see paragraph 194).[318] Ensuring all public services have such frameworks would support staff to develop their careers within and between services and boost user confidence in services.

192. Even where workforces have developed accreditation and recognised qualifications, these are not always recognised outside their current career path. At Anglia Ruskin University (see Appendix 4), we met a physician associate who could take on some responsibilities of a general practitioner, but if she wished to become a GP she would need to undergo six years of training, essentially starting at entry level for the training, as her current qualifications were not transferable. This regulatory barrier makes very little sense: her skills would be eminently transferable. A system in place for recognising and logging previous experience (whether professional or—as in the case of someone who has cared for an older or disabled relative—personal), would also be a logical approach and allow the public sector to make use of the prior experience of new and existing staff. Prospect argued that altering the regulation of certain medical associate professionals and

314 Written evidence from Place2Be (FFF0013)
315 Q 110 (James Darley)
316 Q 109 (Stephen Isherwood)
317 Written evidence from Age UK (FFF0033)
318 Written evidence from the Department for Health and Social Care (FFF0055), Q 99 (Tom Surrey), supplementary written evidence from Edward Argar MP, then-Minister of State for Health, Department for Health and Social Care (FFF0059). See also Shape of Caring review, *Raising the Bar: Shape of Caring: A Review of the Future Education and Training of Registered Nurses and Care Assistants* (March 2015): https://www.hee.nhs.uk/sites/default/files/documents/2348-Shape-of-caring-review-FINAL.pdf [accessed 24 June 2022].

providing greater authority in those roles (for example, prescribing powers) "is now long overdue".[319]

193. As noted in Chapter 2, supporting lower-level staff to take on different tasks could increase workforce capacity and mean user needs are identified earlier, as well as supporting their development and potentially increasing retention. We are aware, for instance, that the Department of Health and Social Care (DHSC) is considering the expansion of associate roles, such as that of nursing associate which is described as a "stepping stone to becoming a registered nurse".[320]

194. The increase in teaching assistants has created a significant number of potential teachers in the education workforce, but this potential seems to be untapped. James Zuccollo noted that: "About a quarter of staff in schools these days are teaching assistants. I think a lot of people hoped that they would go on to become teachers and solve a lot of our problems, but it does not seem to have done that."[321] There appears to be political will to address this, with the then-Schools Minister Robin Walker MP stating that he wanted "a pipeline through which great teaching assistants … can move up into teaching if they choose to."[322]

195. There are some initiatives to support more flexible careers through recognition of previous experience. For example, then-Minister for Health, Edward Argar MP said that the DHSC is exploring an Integrated Skills Passport, which would enable health and care staff more easily to move between the NHS, public health and social care.[323] This follows similar innovations during the pandemic which allowed nurses more easily to move between settings; however at the time this was not available to allied health professionals.[324] While such 'passporting' of skills may be welcome, NHS Providers expressed concern that the Government has not set out how it would overcome legal, practical and contractual challenges to implementing such measures.[325]

196. **Prior learning and relevant skills are not adequately recognised within the workforce. This is a result of inflexibility in regulatory models and in training routes; and presents a barrier to development.**

197. ***To boost retention and support staff to progress into more senior roles, the Government should work with regulators to develop straightforward and practicable ways to recognise, assess, and record prior learning and experience using a competency approach. Competencies should be set nationally and quality assured across different employers. They should be truly portable.***

198. ***The Government should prioritise, encourage, and resource the development of more imaginative training, including joint training between services.***

---

319 Written evidence from Prospect Trade Union (FFF0028)
320 NHS, 'Nursing Associate': https://www.healthcareers.nhs.uk/explore-roles/nursing/roles-nursing/nursing-associate/nursing-associate [accessed 12 July 2022]
321 Q 80 (James Zuccollo)
322 Q 88 (Robin Walker MP)
323 Supplementary written evidence from Edward Argar MP, Minister of State for Health, Department for Health and Social Care (FFF0059)
324 Q21 (Sarah McClinton)
325 Written evidence from NHS Providers (FFF0010)

199. ***We encourage the Department for Health and Social Care to build upon the ambitious approach taken with medical degree apprenticeships and to develop further training and development opportunities to better support progression in the social care workforce.***

Developing effective leaders

200. Throughout the inquiry the importance of good leadership was stressed. Leaders have a key role in cultivating the workforce through promoting training and development opportunities, empowering staff to deliver services and promoting wellbeing. However, we heard that in certain services leaders were not given the right training and support to lead effectively, and that more needs to be done to cultivate leaders earlier in their careers.

201. When reflecting on how to improve services, James Darley, founder and Chief Executive Officer of Transform Society, emphasised the importance of leadership in transforming public services:

> "I am not sure that we necessarily focus enough on leadership, because better leaders will deliver better results. They are the ones who will need to evolve and adapt the way we deliver our public services."[326]

202. Evidence indicated a lack of support for leaders and for leadership development training, meaning that public service workers were not always effectively prepared when taking on leadership positions, nor able to access relevant training once in them.

- Bryan McIntosh and his co-contributors argued that in the NHS "leadership development programmes often neglected the tools and techniques that managers needed to identify, address and resolve challenging people issues".[327]

- When comparing the support for local authority leaders with other services such as the military, police and civil service, Solace argued there was an "asymmetry in training and development support given to aspiring public services leaders".[328]

203. We heard several suggestions for the key skills and characteristics leaders needed to develop:

- Compassion: championing compassion in public services and creating a more compassionate workforce was stressed by witnesses in health and care[329] and the police.[330] Dr Bryan McIntosh argued that compassionate leadership would mean staff are listened to, supported and understood.[331]

- Management skills: the Chartered Management Institute argued that good management skills are "key enablers of productivity … unlocking important drivers of growth such as capital investment, technology adoption, on-the-job learning and efficiency improvements", promoted

326 Q 107 (James Darley)
327 Written evidence from Dr Bryan McIntosh *et al.* (FFF0016)
328 Written evidence from Solace (FFF0044)
329 Q 1 (Mike Haslam) and written evidence from the Association of Directors of Adult Social Services (FFF0047).
330 Q 80 (Robin Wilkinson)
331 Written evidence from Dr Bryan McIntosh *et al.* (FFF0016)

staff wellbeing and supported low-skilled workers and new entrants in the workplace.[332]

204. Steven Littlewood argued that the way leadership skills are assessed should be more transferable, to allow for broader career paths for those pursuing leadership roles.[333]

205. The Government is taking steps to improve leadership development, including through the creation of a 'Leadership College for Government',[334] which the Government states will incorporate existing programmes delivered by the Civil Service Leadership Academy and the National Leadership Centre. Alongside this, the Government argues that greater training infrastructure will be made available to local authorities through levelling up measures.

206. ***When developing the Leadership College for Government proposed in the Levelling Up White Paper, the Department for Levelling Up, Housing and Communities should gather, promote, and cascade best practice on how public services have developed leadership pipelines, such as in education, law enforcement and local authorities.***

Digital tools

207. Digital tools provide an effective way to increase access to training and development opportunities in public services. Online learning can be used to reach large cohorts of staff, in part because it reduces the time and cost of training. The Chartered Institute of Environmental Health said that more local authority staff had been able to access continuous professional development and upskilling due to "the reduction of travel time, travel costs and accommodation costs, especially for staff based at more remote [local authorities]."[335] Online learning can be more flexible on an individual level, allowing staff to build training around other time pressures including work and caring responsibilities.[336]

208. Such training can be effective in keeping skills and knowledge up to date and delivering "bite-sized" learning targeted at the users' need.[337] Adopting digital tools could improve the sharing of best practice within and across sectors. When reflecting on the uptake of online training during the pandemic, the Local Government Association noted that that "benefits of [online training] included greater sharing of ideas and practice between councils across the whole country".[338] Place2Be argued that "online learning offers some great opportunities for connectivity and shared programmes across sectors."[339]

209. We saw some excellent examples of digital training on our visit to Anglia Ruskin University. We were introduced to 'Hemsville', a 'virtual community' built on local authority data. This, we were told, allows students to see macro factors such as the environment, and then to enter into a home to

332 Written evidence from the Chartered Management Institute (FFF0019)
333 Q19 (Steven Littlewood)
334 Department for Levelling Up, Housing and Communities , *Levelling up the UK*, CP 604, February 2022, p 132: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1052706/Levelling_Up_WP_HRES.pdf [accessed 12 July 2022]
335 Written evidence from the Chartered Institute of Environmental Health (FFF0053) and Place2Be (FFF0013), which highlighted the greater reach of online training
336 Written evidence from the Open University (FFF0014)
337 *Ibid.*
338 Written evidence from the Local Government Association (FFF0012)
339 Written evidence from Place2Be (FFF0013)

see the micro. Information was provided which allowed students to see behaviours from all perspectives. For example; demonstration of hoarding behaviour would be provided alongside the information that that service user was grieving. There is significant potential for sharing software and other technologies across disciplines. The Council of Deans of Health gave the example of a mannequin replicating childbirth, which could be used by students of midwifery, paramedics and nursing. They also explained that simulated learning can act complementary to face-to-face placements and allow "controlled environments to develop skills across different settings building confidence and expertise for when this is done in person."[340]

210. Despite these advantages of digital training, we heard concerns about its quality and accessibility.

    (a) Trade union Prospect argued that online training was a "poor relation" to in-person provision and that trainers "often cannot develop the rapport and open communication needed to build and maintain workforce skills and expertise".[341] A common suggestion in evidence, which could address this, was that blended learning (a mixture of in-person and digital learning), was the best route forward.[342]

    (b) FutureDotNow, a coalition of industry leaders, thought that there is a significant digital skills gap within the public service workforce.[343] In 2018, the Department for Education, the Tech Partnership and Lloyds Bank developed a baseline for digital skills UK citizens need to live and work, (the Essential Digital Skills Framework).[344] The annual Essential Digital Skills benchmark, published by Lloyds Bank, reported that only 58% of public service staff met this threshold in 2021.[345]

211. ***The Government should ensure online training is accompanied by training to use digital tools so that public servants have the digital skills needed to access online training. Such training will need to evolve as new technology becomes available and will need to be accessible to people throughout their careers.***

340 Written evidence from the Council of Deans of Health (FFF0063)
341 Written evidence from Prospect Trade Union (FFF0028)
342 Q 77 (Robin Wilkinson), written evidence from Skills for Care (FFF0024), Health Education England (FFF0032), the Department of Health and Social Care (FFF0055) and the Institute of Health Visiting (FFF0020)
343 Written evidence from FutureDotNow (FFF0049), see also Lloyds Bank, *Essential Digital Skills Report 2021* (September 2021), p 32: https://www.lloydsbank.com/assets/media/pdfs/banking_with_us/whats-happening/211109-lloyds-essential-digital-skills-report-2021.pdf [accessed 13 June 2022].
344 Lloyds Bank, *Essential Digital Skills Report 2021*
345 *Ibid.*

SUMMARY OF CONCLUSIONS AND RECOMMENDATIONS

1. In the coming decades, public services will see a significant increase in demand which will not be met with a corresponding increase in the supply of staff. (Paragraph 16)

2. Changes in the needs of the UK population will mean long-term growth in demand for public services which will outstrip the growth of the potential workforce. This presents a long-term challenge which requires long-term, strategic solutions. To ensure a truly sustainable workforce, these solutions will need to go beyond attempts to recruit and retain more staff: flexibility, creativity, and imagination will be key. (Paragraph 26)

3. The Government does not yet have sufficient, reliable data on the public services workforce, nor projections for future demand. Developing this capability will be essential in developing effective workforce strategies for the future. (Paragraph 32)

4. *The Cabinet Office should work with all Government Departments, and particularly the Department for Levelling Up, Housing and Communities to promote best practice on developing and sharing workforce data at a local and national level.* (Paragraph 33)

5. The potential of many staff to deliver services is largely untapped. There is a need for far more imagination and flexibility in how public services staff are deployed, the tasks they can undertake, and the decisions they are empowered to make. (Paragraph 42)

6. *The Government should set the clear expectation that engagement with service users and people with lived experience must be embedded in the design and delivery of services, strategies, and workforce planning, and should strongly encourage regional and local bodies to do the same. The Government should outline best practise to ensure that such engagement is meaningful and rewarding for those service users consulted.* (Paragraph 47)

7. *The Government should prioritise developing training programmes in partnership with service users and organisations which support service users, to ensure they are preparing the workforce to meet user needs. Service users and people with lived experience should also be involved in the delivery of training.* (Paragraph 48)

8. Where new technologies are used in the delivery of public services, substantial attention will need to be paid to safeguards against bias. (Paragraph 59)

9. *Technology has great potential to ensure the sustainability of the public services. Government departments should conduct horizon scanning exercises to examine how technology can improve forecasting and planning, improve efficiency, and reduce demand for the public services within their portfolio. This must not be limited to short-term cost saving measures but should consider service-user experience and improving public services in the long-term. Horizon scanning should consider digital literacy, inclusion and bias, and basic infrastructure issues, and should bring forward feasible, realistic opportunities for technological innovation.* (Paragraph 60)

10. Greater investment in preventative services would reduce demand for public services, supporting the workforce to address the high level of demand services currently face and resolving issues before they become complex and

entrenched. This must be recognised and embedded as a key part of future workforce planning. (Paragraph 64)

11. *At all levels of service design and service and workforce planning, providers should prioritise preventative services.* (Paragraph 65)

12. The voluntary sector can add immense value to public service delivery through their local and specialist expertise. Current approaches risk alienating and excluding third sector providers from public service delivery, and are a significant waste of talent and capacity. (Paragraph 74)

13. *There is a need for a fundamental shift in how the public sector works with voluntary partners. Voluntary sector bodies should be more fully included in, and flexibility introduced into commissioning to ensure that the work of voluntary partners is not artificially limited by inflexible processes.* (Paragraph 75)

14. Many of those who deliver crucial public services feel overworked. This has a direct impact on staff turnover and creates a vicious circle which ultimately affects service users. (Paragraph 82)

15. Discrimination, in the form of increased barriers to promotion and a lack of support for staff, remains at unacceptable levels in the public service workforce. This will continue to act as a barrier for the recruitment and retention of talented people. (Paragraph 95)

16. The public service workforce cannot be sustainable until the experiences of staff are broadly positive. Due to chronic overstretch and cultural issues which include persistent discrimination and a lack of recognition, this is not currently the case. (Paragraph 100)

17. Without action to address pay, it will continue to constitute a significant barrier to the sustainability of the public service workforce. (Paragraph 108)

18. *There should be a comprehensive review of how pensions operate across the public services workforce. The goal should not be uniformity but flexibility to enable those coming to—or moving between—public service roles to do so without a financial penalty.* (Paragraph 118)

19. *The Government should encourage public service employers to offer a broad range of flexible working options by default, with this provision being unavailable only if it would have a negative impact on service users.* (Paragraph 125)

20. The lack of a cohesive national brand to public service work is a missed opportunity for the Government to convey careers which have a positive social impact in a way that will attract candidates. (Paragraph 137)

21. *Teach First has demonstrated the potential of imaginative branding to attract people into public service work. Prior to recruitment campaigns, public sector employers should conduct in-depth research to establish what messages will resonate most with potential candidates. Guidance on developing compelling messaging should be agreed centrally and distributed widely.* (Paragraph 138)

22. There is huge potential for apprenticeships to widen the talent pool by increasing diversity in the public services workforce. The Government should therefore be providing further support and encouragement to public sector bodies to incentivise their use. By removing the apprenticeship target, and ceasing to search for and combat challenges, it is doing the opposite. (Paragraph 155)

23. *The Public Sector Apprenticeship Target and associated reporting requirements should be reinstated. Further consideration should be given to additional funding for apprentice salaries.* (Paragraph 156)

24. *Local authorities should invest significant resources in developing local talent pools to support people with lived experience of using local services to enter public sector careers. These would create diverse pipelines of talented staff to deliver public services they have themselves experienced.* (Paragraph 163)

25. *The Government should impose a duty on all public sector employers to set ambitious targets for recruitment timeframes.* (Paragraph 166)

26. There is an increasing desire for broad careers in and beyond public services. In order to improve the status of public services, boost staff recruitment and secure better retention, it is essential that the public sector adapts to support these preferences. (Paragraph 176)

27. Cultural and financial barriers prevent public services staff from accessing sufficient training and development throughout their careers. The public sector's approach to training fails on two fronts: it will not retain people and it will not give them the skills they need for the future. (Paragraph 182)

28. Prior learning and relevant skills are not adequately recognised within the workforce. This is a result of inflexibility in regulatory models and in training routes; and presents a barrier to development. (Paragraph 195)

29. *To boost retention and support staff to progress into more senior roles, the Government should work with regulators to develop straightforward and practicable ways to recognise, assess, and record prior learning and experience using a competency approach. Competencies should be set nationally and quality assured across different employers. They should be truly portable.* (Paragraph 196)

30. *The Government should prioritise, encourage, and resource the development of more imaginative training, including joint training between services.* (Paragraph 197)

31. *We encourage the Department for Health and Social Care to build upon the ambitious approach taken with medical degree apprenticeships and to develop further training and development opportunities to better support progression in the social care workforce.* (Paragraph 198)

32. *When developing the Leadership College for Government proposed in the Levelling Up White Paper, the Department for Levelling Up, Housing and Communities should gather, promote, and cascade best practice on how public services have developed leadership pipelines, such as in education, law enforcement and local authorities.* (Paragraph 205)

33. The Government should ensure online training is accompanied by training to use digital tools so that public servants have the digital skills needed to access online training. Such training will need to evolve as new technology becomes available and will need to be accessible to people throughout their careers. (Paragraph 210)

APPENDIX 1: LIST OF MEMBERS AND DECLARATIONS OF INTEREST

Members

Baroness Armstrong of Hill Top (Chair)
Lord Bichard
Lord Bourne of Aberystwyth
Lord Davies of Gower
Lord Filkin
Lord Hogan-Howe
Lord Hunt of Kings Heath (to 13 June 2022)
Baroness Morris of Yardley (from 13 June 2022)
Baroness Pinnock
Baroness Pitkeathley
Lord Porter of Spalding
Baroness Sater
Lord Willis of Knaresborough

Declarations of interest

Baroness Armstrong of Hill Top (Chair)
No relevant interests to declare
Lord Bichard
Chair of the National Trading Standards Council
Chancellor, University of Gloucestershire
Lord Bourne of Aberystwyth
Governor and Deputy Chair of International Students' House
President of Remembering Srebrenica
Owner of freehold property in Hampshire which is let out
Barrister
Author of legal textbooks
Lord Davies of Gower
No relevant interests to declare
Lord Filkin
Vice-President of the Local Government Association
Lord Hogan-Howe
Non-Executive Director, Cabinet Office
Lord Hunt of Kings Heath
Member of the General Medical Council Board
Baroness Morris of Yardley
Chair, Birmingham Education Partnership; and
Adviser, Birmingham Education Partnership
Baroness Pinnock
Member (Councillor) of Kirklees Council
Vice-Chair of Huddersfield University Council (the university are significantly expanding their provision of health care training and leadership)
Baroness Pitkeathley
No relevant interests to declare

Lord Porter of Spalding

Leader, South Holland District Council

National Lead Peer, Local Government Association Conservative Group

Chair of an advisory board for Effective Governance Initiative

Chair of a training arm owned by Local Authority Building Control

Trustee, Leadership Centre for Local Government

Chair, Clean Streets

Commissioner, APSE Local Government Commission, 2030

Non-Executive Director, Norse Group

Baroness Sater

No relevant interests to declare

Lord Willis of Knaresborough

Former Consultant to Nursing and Midwifery Council

Former Consultant to Health Education England

Chair of Yorkshire and Humber National Institute for Health and Care Applied Research Collaboration

Member of Midwifery Panel of the Nursing and Midwifery Council

Chair of 'Shape of Caring: A Review of the Future Education and Training of Registered Nurses and Care Assistants'

Chair of Report by Willis Commission: 'Quality with Compassion: the future of nursing education'

Chair of Employers Panel of 'Talent Retention Solution'

APPENDIX 2: LIST OF WITNESSES

Evidence is published online at https://committees.parliament.uk/work/6403/designing-a-public-services-workforce-fit-for-the-future/publications/ and available for inspection at the Parliamentary Archives (020 7219 3074)

Evidence received by the Committee is listed below in chronological order of oral evidence session, and then in alphabetical order. Those witnesses marked with ** gave both oral evidence and written evidence. Those marked with * gave oral evidence and did not submit any written evidence. All other witnesses submitted written evidence only.

Oral evidence in chronological order

*	Mike Haslam, Deputy Director, Workforce strategy, experience and engagement, Department of Health and Social Care	QQ 1–7
*	Alan Robson, Deputy Director, NHS Workforce, DHSC	QQ 1–7
*	Rob Smith, Director of Workforce Planning and Intelligence, Health Education England	QQ 1–7
*	Mark Adam, Chief People Officer, Ministry of Justice	QQ 1–7
*	Caroline Pusey, Director, Teaching Workforce, Department for Education	QQ 8–17
*	Siobhan Jones, Director of Local Government and Communities, Department for Levelling Up, Housing and Communities (DLUHC)	QQ 8–17
*	Sarah McClinton, President, Association of Directors of Adult Social Services (ADASS) and Deputy Chief Executive Officer, Royal Borough of Greenwich	QQ 18–32
*	Steven Littlewood, Assistant General Secretary, First Division Association (FDA)	QQ 18–32
*	Matthew Lewis, UK and Ireland Director for Hays Public Services, Hays Recruitment Services	QQ 18–32
**	Kate Caulkin, Director, People and Operational Management Hub, National Audit Office (NAO)	QQ 33–40
*	Sian Elliott, Senior Policy Officer, Public Services, Trades Union Congress (TUC)	QQ 33–40
*	Dr Ana Canhoto, Reader in Marketing, Brunel University	QQ 41–50
*	Dr Aveek Bhattacharya, Chief Economist, Social Market Foundation	QQ 41–50
*	Professor Catherine Mangan, Professor of Public Management and Leadership, Institute of Local Government Studies, University of Birmingham	QQ 41–50
*	Jon Rowney, Executive Director, Corporate Services, London Borough of Camden Council	QQ 51–59

*	Joanne Roney OBE, President, Solace; Chief Executive, Manchester City Council	QQ 51–59
*	Duncan Shrubsole, Director of Policy Communications, Lloyds Bank Foundation of England and Wales	QQ 60–64
*	Andrew O'Brien, Director of Public Affairs, Social Enterprise UK	QQ 60–64
**	Dr Bryan McIntosh, Senior Lecturer, Brunel Business School, Brunel University	QQ 65–70
*	Chief Superintendent Paul Fotheringham, President, Police Superintendents' Association	QQ 65–70
*	Jade Hamnett, Social Care Future	QQ 65–70
*	Daniel Gerson, Head of Unit, Public Employment and Management, Directorate for Public Governance, Organisation for Economic Co-operation and Development	QQ 71–75
*	Benjamin Welby, Policy Analyst, Digital Government, and Data Unit, Directorate for Public Governance, Organisation for Economic Co-operation and Development	QQ 71–75
*	Hannah Cameron, Deputy Commissioner, Te Kawa Mataaho Public Service, Commission, New Zealand	QQ 71–75
*	James Zuccollo, Director for School Workforce, Education Policy Institute (EPI)	QQ 76–83
*	Robin Wilkinson, Chief of Corporate Services, Metropolitan Police	QQ 76–83
*	Robin Walker MP, Minister of State for School Standards, DfE	QQ 84–94
*	Edward Argar MP, Minister of State for Health, DHSC	QQ 95–106
*	Gavin Larner, Director, NHS Workforce, DHSC	QQ 95–106
*	Tom Surrey, Director, Adult Social Care, DHSC	QQ 95–106
*	Stephen Isherwood, Chief Executive Officer, Institute of Student Employers	QQ 107–111
*	James Darley, Founder and Chief Executive Officer, Transform Society	QQ 107–111
*	Richard Lee, Member at Women's Business Council, and Chief People Officer, Willmot Dixon	QQ 107–111

Alphabetical List of Witnesses

*	Mark Adam, Chief People Officer, Ministry of Justice (QQ 1–7)	
	Age UK	FFF0033
	Anna Freud National Centre for Children and Families	FFF0052
*	Edward Argar MP, Minister of State for Health, Department of Health and Social Care (QQ 95–106)	FFF0059
	Association of Directors of Adult Social Services (ADASS)	FFF0047
	Debra Baxter	FFF0036
		FFF0037
**	Dr Aveek Bhattacharya, Chief Economist, Social Market Foundation (QQ 41–50)	FFF0048
*	Hannah Cameron, Deputy Commissioner, Te Kawa Mataaho Public Service, Commission, New Zealand (QQ 71–75)	
*	Dr Ana Canhoto, Reader in Marketing, Brunel University (QQ 41–50)	
*	Kate Caulkin, Director, People and Operational Management Hub, National Audit Office (NAO) (QQ 33–40)	FFF0058
	Chartered Institute of Environmental Health	FFF0053
	Chartered Management Institute	FFF0019
	College of Policing	FFF0057
*	Council of Deans of Health	FFF0063
*	James Darley, Founder and Chief Executive Officer, Transform Society (QQ 107–111)	
	Simon Dennis, SAS Institute	FFF0046
	Department for Education	FFF0056
	Department for Levelling Up, Housing and Communities	FFF0043
	Department of Health and Social Care	FFF0055
	Euroship, University of Sussex	FFF0011
	First Division Association (FDA)	FFF0018
*	Chief Superintendent Paul Fotheringham, President, Police Superintendents' Association (QQ 65–70)	
	Frontline	FFF0034
	FutureDotNow	FFF0049
	General Medical Council	FFF0009

*	Daniel Gerson, Head of Unit, Public Employment and Management, Directorate for Public Governance, Organisation for Economic Co-operation and Development (QQ 71–75)	
*	Jade Hamnett, Social Care Future (QQ 65–70)	
*	Mike Haslam, Deputy Director, Workforce strategy, experience and engagement, Department of Health and Social Care (QQ 1–7)	
	Health Education England (HEE)	FFF0032
	Institute for Volunteering Research	FFF0030
	Institute of Health Visiting	FFF0020
	Stephen Isherwood, Chief Executive Officer, Institute of Student Employers (QQ 107–111)	
	Joint University Council Public Administration Committee	FFF0023
	Siobhan Jones, Director of Local Government and Communities, Department for Levelling Up, Housing and Communities (DLUHC) (QQ 8–17)	
*	Gavin Larner, Director, NHS Workforce, Department of Health and Social Care (QQ 95–106)	
**	Richard Lee, Member at Women's Business Council, and Chief People Officer, Willmott Dixon (QQ 107–111)	FFF0061
*	Matthew Lewis, UK and Ireland Director for Hays Public Services, Hays Recruitment Services (QQ 18–32)	
*	Steven Littlewood, Assistant General Secretary, First Division Association (FDA) (QQ 18–32)	
	Lloyds Bank Foundation for England and Wales	FFF0006
	Local Government Association (LGA)	FFF0012
*	Professor Catherine Mangan, Professor of Public Management and Leadership, Institute of Local Government Studies, University of Birmingham (QQ 41–50)	
	Marie Curie	FFF0026
	Maternal Mental Health Association (MMHA)	FFF0005
*	Sarah McClinton, President, Association of Directors of Adult Social Services (ADASS) and Deputy Chief Executive Officer, Royal Borough of Greenwich (QQ 18–32)	
**	Dr Bryan McIntosh, Senior Lecturer, Brunel Business School, Brunel University (QQ 65–70	FFF0016
	National Council for Voluntary Organisations (NCVO)	FFF0050

	National Voices	FFF0017
	NHS Confederation	FFF0029
	NHS Providers	FFF0010
	Nuffield Trust	FFF0042
*	Andrew O'Brien, Director of Public Affairs, Social Enterprise UK (QQ 60–64)	
	Open Data Institute	FFF0040
	Open University	FFF0014
	Our Time	FFF0021
	Mr Matt Phillips	FFF0054
	Place2Be	FFF0013
	Police Foundation	FFF0051
	Police Superintendents' Association	FFF0004
	Mr Chris Pope	FFF0041
	Prospect Trade Union	FFF0028
*	Caroline Pusey, Director, Teaching Workforce, Department for Education (QQ 8–17)	
	Richmond Group of Charities	FFF0007
*	Alan Robson, Deputy Director, NHS Workforce, Department of Health and Social Care (QQ 1–7))	
*	Joanne Roney OBE, President, Solace; Chief Executive, Manchester City Council (QQ 51–59)	
*	Jon Rowney, Executive Director, Corporate Services, London Borough of Camden Council (QQ 51–59)	
	Royal College of Nursing	FFF0062
	Royal College of Surgeons of Edinburgh	FFF0002
	Shared Lives Plus	FFF0031
	Shaw Trust	FFF0008
*	Duncan Shrubsole, Director of Policy Communications, Lloyds Bank Foundation of England and Wales (QQ 60–64)	
	Skills for Care	FFF0024
	SmartSocial Ltd	FFF0003
	Solace	FFF0044
	St John Ambulance	FFF0039
	Stroke Association	FFF0027
	Tom Surrey, Director, Adult Social Care, Department of Health and Social Care, (QQ 95–106)	

*	Sian Elliott, Senior Policy Officer, Public Services, Trades Union Congress (TUC) (QQ 33–40)	FFF0045
	Unison	FFF0022
	Volunteer Cornwall, Age UK and Penarth	FFF0001
**	Robin Walker MP, then-Minister of State for School Standards, Department for Education (QQ 84–94)	FFF0060
*	Benjamin Welby, Policy Analyst, Digital Government, and Data Unit, Directorate for Public Governance, Organisation for Economic Co-operation and Development (QQ 71–75)	
	Wigan Council	FFF0035
*	Robin Wilkinson, Chief of Corporate Services, Metropolitan Police (QQ 76–83))	
*	James Zuccollo, Director of Schools Workforce, Education Policy Institute (EPI (QQ 76–83)	

APPENDIX 3: CALL FOR EVIDENCE

The House of Lords Select Committee on Public Services was established in 2020 to scrutinise questions of policy which cut across different public services. Its work has focused on the transformation of public services to ensure that they meet the current and future needs of individuals and communities. To date the Committee has published two major reports–*A critical juncture for public services: lessons from COVID-19* and *Children in crisis: the role of public services in overcoming child vulnerability*.

The Committee's first report established eight key 'principles for public services reform' which have underpinned the Committee's work since the report's publication. These are:

- the Government and other providers of public service should recognise the vital role of preventative services in reducing inequalities;
- central Government and national service providers should improve the way that they communicate and cooperate with local-level service providers if they are to deliver effective public services;
- charities, community groups, volunteers and the private sector should be recognised as key public services providers, and given appropriate support to deliver services effectively;
- the resilience of public services to the challenges posed by the COVID-19 pandemic and ongoing demographic changes will require a fundamentally different, vastly more flexible approach to the sharing of data;
- the integration of services to meet the diverse needs of individuals and the communities in which they live is best achieved by public services providers working together at the local level, and should be supported by joined-up working across Government departments at the national level;
- local services and frontline workers should be given the resources and autonomy to innovate and improve the delivery of public services, while mechanisms to ensure the accountability of local service providers should be improved;
- advances in digital technology should be used to increase access to public services, particularly for hard-to-reach groups, but should be applied intelligently. Online services should never replace face-to-face services if to do so would disadvantage the service user;
- users should be involved in the design and delivery of public services.

The Committee is now launching a new inquiry informed by these principles, *Designing a public services workforce fit for the future*. It will focus on the changes needed to transform training, management and planning in public sector workforces, to ensure that staff are equipped to respond to users' needs.

The Committee will consider public services in the broadest possible sense. We will explore community-level initiatives and the role of the private, voluntary and charitable sectors in the delivery of public services.

Designing a public services workforce fit for the future

COVID-19 has accelerated a trend that was on-going even before the pandemic: the demand for public services is growing faster than the number of professionals

who can deliver those services. This means that the resources of services like healthcare, social care, education and other vital public services are stretched, and they are unable to serve users as effectively as possible. Moreover, in future years, the number of people entering the public services workforce is unlikely to grow sufficiently to meet ever-increasing demand. A transformation in the way that services are delivered will become even more important.

These challenges can be attributed partly to existing inefficiencies in the training, management and planning of the public services workforce, which were inherited from decades-old structures and bureaucracies. Pledges to increase the number of staff without also addressing these inefficiencies is therefore unlikely to solve the problems facing the public sector workforce in the long term. Adding more workers into a system that makes sub-optimal use of their skills will not meet ever-increasing demand. An innovative approach will be needed to re-design the public services workforce in a more effective and future-proof way. This may mean, for example, incentivising employers to look beyond applicants with traditional professional expertise and consider recruiting a wider variety of people with diverse but relevant experience and skills.

Any such transformation of the workforce could also represent an opportunity to create public services that are better tailored to users' needs, especially as those needs change. High-quality public services could deliver support that is user-focused and co-produced, thanks to new structures that enable different organisations to work together to serve the user, rather than the other way round.

The workforce will be central to enabling any such changes. Public services employees will need skills and training to drive the transformation of the organisations that they are working for, and to deliver the best possible services for users. Our inquiry will identify where these changes are needed, and how they can be implemented.

The inquiry will focus on four key areas:

- recruiting, retaining and training the public services workforce;
- the tools needed to transform service delivery and workforce effectiveness;
- the changes needed to the structure of the workforce, particularly to enable better integration between services;
- the development of a workforce that involves users in the design and delivery of public services.

What we want to learn from you

The following questions are intended to provide a framework for those who wish to offer their views. You need not answer all the questions, just those that are relevant.

The Public Services Committee explores issues that are at the intersection of various public services and is interested in taking a cross-cutting approach to workforce challenges. We welcome, however, the views of individuals and organisations that are sector-specific and would like to contribute too.

Diversity comes in many forms, and hearing different perspectives means that committees are better informed and are better able to scrutinise public policy and legislation. They can undertake their role most effectively when they hear from a wide range of individuals, sectors or groups affected by a particular policy or

piece of legislation. We encourage anyone with experience of or expertise in the issues under investigation to share their thoughts with the Committee, in the full knowledge that their views have value and are welcome.

We would like to encourage anyone to get in touch who can support the Committee to take evidence from hard-to-reach groups and individuals who might be interested in discussing these issues.

Information on how to submit evidence is set out in the annex below. If you have any questions or require adjustments to enable you to respond, please contact the Committee team at hlpublicservices@parliament.uk.

It is helpful if opinions are supported by factual evidence and examples where appropriate. Comparisons with practice in the devolved administrations and other countries are particularly welcome.

The deadline for written evidence submissions is 28 February 2022.

The Committee is seeking input on the following questions:

Recruitment, retention and training

1. It is difficult to predict accurately how the public services workforce will need to change in the long term, and yet it is necessary to prepare now for the future. What is an appropriate approach to long-term planning for workforce needs and demand in public services, and how should current training adapt, not just at the point of employees' entry into the workforce but throughout their careers?

2. Conventional approaches to training have not enabled enough professionals to enter the public services workforce to meet demand. How might training change to maximise the number of public services professionals and improve their skills?

3. What are the hurdles to joint training between services? Do siloed approaches to attaining professional qualifications prevent joint training? How might better data-sharing improve joint training?

4. How might the public sector become more attractive as an employer, particularly in comparison with the private sector? How might it become attractive enough to retain workers throughout their careers while maintaining a level of turnover that brings fresh ideas to organisations?

5. What are the consequences for inequalities of access to public services of failing to attract high-quality professionals to the public sector?

6. How can providers of public services recruit a more diverse workforce? How should they improve their recruitment of BAME people, people with disabilities, older people and people who use public services and live in the communities that providers serve?

Transforming workforce effectiveness

7. What role can digital tools play in increasing the accessibility of public services workers to service users, and in improving the quality of their work? How might we anticipate and mitigate any inequalities of access to public services that may arise from the expansion of such technologies?

8. How can digital technologies be used most effectively for training and up-skilling the public services workforce?

9. Preventative and early intervention services can improve the ability of the public services workforce to respond to users' needs. How might such services be embedded within any public services workforce strategy?

10. What have been the effects of the COVID-19 pandemic and Brexit on the public services workforce? Have these events created opportunities for workforce reform?

Transforming existing workforce structures

11. Integrating public services can mean that they are delivered more effectively to users. What would be the outcomes of better integration between public services workforces?

12. How might voluntary and private sector workforces be involved in the delivery of integrated public services?

13. What are the barriers to achieving better workforce integration (including integration with the voluntary and private sectors), and how can any such barriers be overcome? How can leaders of public services drive and incentivise any cultural change necessary to achieve integration between organisations? Are there any examples of best practice?

14. What tools do good leaders use to incentivise and challenge their workforces to transform service delivery? Are there any examples of best practice?

15. To what extent is public services workforce planning managed better at regional, sub-regional and local levels, rather than at the national level, and what mechanisms might enable more effective devolution of workforce planning? How can the Government train workforces to deliver more effectively those public services that are coordinated at the national level?

Creating user-centred public services

16. Our previous inquiries have shown that public services are failing to deliver joined-up support that is centred on the user. What workforce barriers need to be overcome to bring about a more user-focused approach to public services delivery?

17. Users' expectations of public services are changing rapidly. How, in your experience, have their expectations changed? What are the best ways to involve users in the design of public services, and what skills will public services workforces need in order to respond? For example, what skills will employees need to support users who expect more choice in the public services that they use?

APPENDIX 4: SUMMARY OF VISIT TO ANGLIA RUSKIN UNIVERSITY

Summary of visit to Anglia Ruskin University on 12 May: Note by the Clerk

1. Anglia Ruskin University and the Council of Deans of Health invited the Committee, as part of their inquiry into the sustainability of the public services workforce, to visit the Chelmsford campus of Anglia Ruskin University. Specifically, the Committee visited the Faculty of Health, Education, Medicine and Social Care (HEMS) to view training facilities that incorporate simulated learning.

Presentations

2. The Committee were greeted by representatives from the university and from the Council of Deans of Health, who then provided a presentation giving an overview of the university, of which some relevant points are outlined below:

- 25% of the student body are international students.
- Health, education, medicine and social care (HEMS) courses account for 38% of undergraduate students at ARU.
- The stated vision of the faculty is to be responsive to national policy and partnership. Key priorities are to be collaborative, inclusive, and for students to be "co-creators" of their learning.
- Retention at Anglia Ruskin and in the HEMS faculty in particular is high - which they put down to academic support.

Simulated learning/simulation-based learning

3. Paul Driver, Director of Simulated Learning gave an overview of simulated learning, which he called "simulation-based learning". This encompasses any practical learning which is not in a real-world situation. Simulated learning could encompass volunteer actors, virtual reality (high fidelity) or models such as full body dummies or model arms on which to practise taking blood (low fidelity).

4. The aim of simulation-based learning is to capture elements of the real world in a way that promotes learning. He said that it could sometimes be superior to placement-based learning: it was safer, feedback could be delivered immediately (with benefits for information retention), and more competencies could be practised.

5. Some points raised were:

- Simulated learning is not cheap. (Approximately £0.5m per simulated learning lab.) There is also a substantial time cost for designing and using simulated settings.
- Simulated learning complements placements for students, rather than replacing them. Swift development was necessary during the pandemic. The priority now is to expand the evidence base on how effective simulated learning is. This may help in expanding the potential– currently profession specific regulators limit the number of hours of experience that can be in simulated settings. There is some debate over simulated learning, and different views over how much it can be used. ARU felt it was important not to revert to placement-only ways of

learning, but that the relevant regulation needed to be right to enhance and support simulated learning.

- Simulated learning can teach specific skills or scenarios that may never occur during a "real" placement. For example, a patient falling off an operating table is a "never event", so people will rarely see it during placement. Simulated learning can teach it.
- Developing relationships between different disciplines was recognised as important; professionals must recognise the perspective of all those involved in a service users care. ARU has leads in each faculty for interdisciplinary learning, and some projects are underway to get professional groups talking to one another. This includes seminars which present one scenario to a number of different professions. Another was a virtual placement which was filmed in every room of a service users home: allowing students to see all that person's needs.

6. The Committee were introduced to "Hemsville", a "virtual community" which is built on local authority data. This, the Committee were told, allows students to see macro factors such as the environment, and then to enter into a home to see the micro. Information was provided which allowed them to see behaviours from all perspectives. For example; demonstration of hoarding behaviour would be provided alongside the information that that service user was grieving. The platform would then show what services were accessible to the service user. This platform was animated, with the ability to map handwriting samples (including unintelligible prescriptions), and faces. An added benefit of learning with this "virtual community" was that it enhanced students' digital literacy.

Visit around the facilities

7. The Committee visited several low-fidelity simulation labs. The nurse who was teaching described the use of models as "closing the theory-practise gap". This included:

- A lab where nursing students were using models arms (attached to "blood"-bags) to practise venipuncture and canulation.[346] These are skills that nurses will need in practise, and which are likely soon to be needed pre-qualification.
- Models which used sound to demonstrate to students what crackled breathing sounded like, before they had to recognise it on a ward.
- Rooms with dummies/models on trolleys. One reported difficulty for students on placement is that they do not know where to stand, and how to not get in the way of care. These simulations allowed them to practise such practicalities.
- A mock-up of a home, with all its "things to bump into", which was used for training paramedics. This allowed them to practise in a realistic setting: "do what you can do, but with added pressures"–for example, CPR cannot be delivered on a bed.
- The Committee were shown a primary school classroom setting used to practise teaching *in situ*.

346 Venipuncture: drawing blood from a vein. Canulation: inserting tubes (cannulas) into a vein to deliver fluids intravenously.

- The Committee were shown a room where cadavers were kept; for use in anatomy classes. We were told that groups of students operated on and dissected these cadavers to self-direct their learning, in contrast to some other teaching methods, where a teacher would operate and the students watch.
- A class of students learning to perform intimate examinations using wearable breasts (different sizes, skin tones, shapes), and simulated gynaecological scanners.

8. Committee Members tried on Virtual Reality headsets, which are also used to train students.

Meeting with Nursing, Midwifery, and Allied Health students

9. The Committee then met with a selection of students (all women), including several who were studying to be Operating Department Practitioners. Comments were made about the cliff-edge felt when moving from study to placement: "I've never been in a theatre", "they expect us to know so much". This had been significantly worsened due to the pandemic which had reduced placement opportunities in hospital and access to the university's simulation facilities.

10. There was unanimous agreement that the simulation facilities were extremely helpful, particularly when complementary to placements. Students felt that they provided an advantage over students who had learned in a more traditional way as they were able to practise certain skills until they had developed muscle memory: "It's easier to sign off on our competencies".

11. When the Operating Department Practitioners (ODPs) were asked how they had come to choose that course, the answers were revealing:

    - One mature student had been warned away from becoming a doctor on the basis of her sex and class.
    - One had been told she couldn't be a midwife because she had no NHS experience.
    - All the students had come across the role of ODPs somewhat accidentally. All had wanted to do something in the health/care field but had not heard of the role of ODPs. One student previously worked in a hospital and had asked colleagues after wondering for some time, and one had met an ARU student ambassador.

Additional points of interest

12. A perception of snobbery and protectionism within professions was raised several times–always along with the need to escape this. There were some examples of where progress had been made:

    - Some paediatric nurses are given a veto on whether a patient could be discharged. This was to ensure that the healthcare team thought not only of the medical situation but of the wider social context affecting that child.
    - Nurses now need to be "prescriber ready".

    Enhancing collaboration across professions could include placements in different settings (for example having a paramedic training in a GPs surgery) but there were concerns around whether regulators would approve of this.

13. The Committee met a Physician Associate, who was supervising a class. This is a relatively new position, which encompasses many of the tasks a GP would perform, but which does not have "prescribing power". She was keen that Physician Associates be given this power as a common-sense measure. She was also asked how long it would take her to qualify as a GP. There is no fast-track: she would have to retrain from the beginning of the six-year course.

14. ARU felt it was hard to demonstrate the impact they had on the way health care providers operated. They outlined several ways they tried to impact on provision: by having providers involved in the teaching, by giving feedback to providers through quality teams, and by building trust and strong relationships. The feedback from students was an important tool here.

15. Universities can be seen as "gateways" or "gatekeepers" to careers, and "gatekeeping" may decrease diversity in the future workforce. There was acknowledgement that universities need to work with students to find ways to meet entry requirements for their courses. (ARU provided an alternative for the standard maths qualification). Efforts were also underway to make the student population representative of the community–including sending student ambassadors into schools.