

**The Marches Sector Skills Deep Dive -
Health and Social Care
Final Report July 2020**



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1. Sector Context

The health and social care sector accounts for 8.3% of the Marches total GVA which equates to a value of £1.2bn. 14.1% of total jobs are based in the health and social care sector, this equates to 40,900 jobs. 4.8% of all establishments in the Marches are in the health and social care sector which is a total of 1,725 establishments. The proportion of the total GVA and jobs in the health and social care for the Marches is above the national base.

The health and social care sector is an important emerging sector as the Marches has dispersed, rural and ageing communities. The sector presents opportunities to pioneer new innovative health and social care approaches and technologies, operating as a testbed/'living lab' for digital health and care. Digital innovation, data driven processes and the application of new technologies will both provide commercial opportunities for business and support innovation in services provided by public, private and third sectors as identified in the Marches Local Industrial Strategy and the Strategic Economic Plan.

Shropshire has been selected as one of nine local authorities in a Government funded programme to explore how technology can shape the future of social care by piloting a data visualisation tool to identify areas of need for care homes and domiciliary care. The Broseley Project is an innovative technology project delivered by collaboration between Shropshire Council, The Lady Forester Centre, University Centre Shrewsbury, local GPs and the community. Amazon, Hitachi and Microsoft are working on using smart watches, voice activated devices and messaging to support independence amongst vulnerable people.

The Marches has a high number of well established, independent providers, offering high quality care and engaging in national pilots of new innovations in social care. Herefordshire was one of nine local authorities taking part in a large-scale pilot of the Just Right approach in 2014-2015, funded by the UK Small Business Research Initiative grant. This involved introducing technology into the care sector through care providers testing data collection on adults with learning disabilities through use of motion and other sensors.

The following table displays the GVA, jobs and establishments by the 12 sectors in the Marches.

Sector	GVA (£m)			Jobs			Establishments (Snapshot)		
	2018	%	UK %	2018	%	Eng. %	2019	%	UK %
Advanced Manufacturing	£2,416m	16.1%	9.7%	32,945	11.4%	8.5%	2,715	7.6%	7.5%
Agri-Tech	£694m	4.6%	1.6%	10,730	3.7%	0.7%	6,270	17.5%	4.9%
Business and Professional Services	£4,367m	29.1%	40.0%	54,320	18.8%	24.7%	9,080	25.4%	35.2%
Construction	£887m	5.9%	6.1%	15,000	5.2%	4.6%	3,595	10.0%	11.1%
Cyber Security and Resilience	£667m	4.4%	5.0%	11,800	4.1%	4.7%	535	1.5%	1.1%
Environmental Technologies	£295m	2.0%	2.7%	3,215	1.1%	1.1%	215	0.6%	0.6%
Food & Drink	£576m	3.8%	1.6%	9,250	3.2%	1.3%	205	0.6%	0.4%
Health and Social Care	£1,241m	8.3%	7.8%	40,900	14.1%	12.9%	1,725	4.8%	5.3%
Public Sector Inc. Education	£1,044m	7.0%	6.3%	30,000	10.4%	11.3%	1,670	4.7%	4.4%
Retail	£1,860m	12.4%	10.6%	49,000	16.9%	15.3%	5,705	15.9%	16.3%
Transport and Logistics	£411m	2.7%	4.1%	9,370	3.2%	4.9%	1,100	3.1%	4.0%
Visitor Economy	£553m	3.7%	4.4%	23,100	8.0%	9.9%	2,980	8.3%	9.2%
Total	£15bn			289,630			35,795		

Source: ONS: Regional gross value added, Business Register Employment Survey and UK Business counts, 2019

The latest data for total GVA in the health and social care sector was £1.2bn in 2018. This sector accounts for 8.3% of the total GVA for the Marches which is above the UK average of 7.8% of the total. Compared to 2017, the health and social care sector for the Marches has increased by £123m, which is the second highest sector increase in real terms¹.

The following table displays the total value of GVA in the Marches.

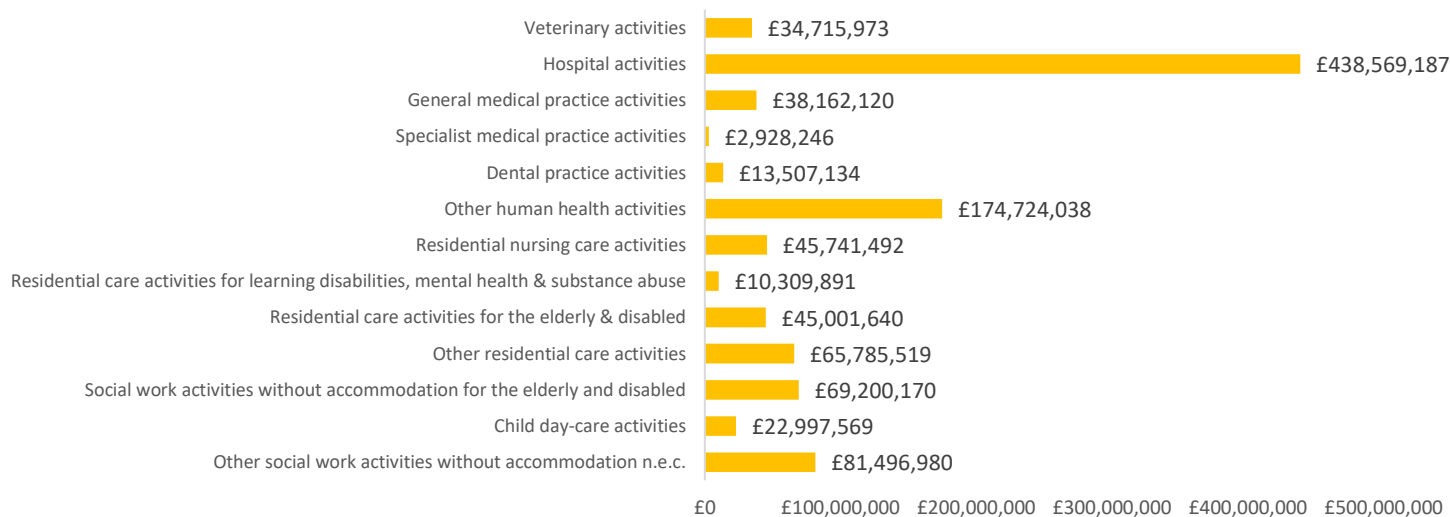
Sector	The Marches 2017	The Marches 2018	The Marches Change (2017-2018)	The Marches 2018 % of Total	UK 2018 % of Total
Advanced Manufacturing	£2,478m	£2,416m	-£62m	16.1%	9.7%
Agri-Tech	£706m	£694m	-£12m	4.6%	1.6%
Business and Professional Services	£4,169m	£4,367m	£198m	29.1%	40.0%
Construction	£838m	£887m	£49m	5.9%	6.1%
Cyber Security and Resilience	£686m	£667m	-£19m	4.4%	5.0%
Environmental Technologies	£250m	£295m	£45m	2.0%	2.7%
Food & Drink	£573m	£576m	£3m	3.8%	1.6%
Health and Social Care	£1,118m	£1,241m	£123m	8.3%	7.8%
Public Sector Inc. Education	£1,037m	£1,044m	£7m	7.0%	6.3%
Retail	£1,804m	£1,860m	£56m	12.4%	10.6%
Transport and Logistics	£402m	£411m	£9m	2.7%	4.1%
Visitor Economy	£526m	£553m	£27m	3.7%	4.4%
Total	£14.6bn	£15bn	£424m		

Source: ONS: Regional gross value added, 2019

¹ ONS, Regional gross value added (balanced) by industry, 2019

Based on 2015 EMSI GVA modelled data which allows for greater sectoral breakdown the sector contributed £1bn in total to the UK economy in 2015. Within the sector the hospital activities industry contributed the largest proportion - £439m GVA followed by other human health activities with £175m. Other industries such as specialist medical practice activities had a total GVA of £2.9m and residential care activities for learning disabilities, mental health and substance abuse was £10.3m².

Total GVA by Industry in the Health and Social Care Sector



Source: EMSI Analytics Tool, 2020

In 2019, there were approximately 1,725 establishments in the health and social care sector³, this accounts for 4.8% of the total establishments in the Marches which is slightly below the UK average of 5.3%.

The following table displays the number of establishments in the Marches.

Sector	The Marches 2019	The Marches 2019 % of Total	UK 2019 % of Total
Advanced Manufacturing	2,715	7.6%	7.5%
Agri-Tech	6,270	17.5%	4.9%
Business and Professional Services	9,080	25.4%	35.2%
Construction	3,595	10.0%	11.1%
Cyber Security and Resilience	535	1.5%	1.1%
Environmental Technologies	215	0.6%	0.6%
Food & Drink	205	0.6%	0.4%
Health and Social Care	1,725	4.8%	5.3%
Public Sector Inc. Education	1,670	4.7%	4.4%
Retail	5,705	15.9%	16.3%
Transport and Logistics	1,100	3.1%	4.0%
Visitor Economy	2,980	8.3%	9.2%
Total	35,795		

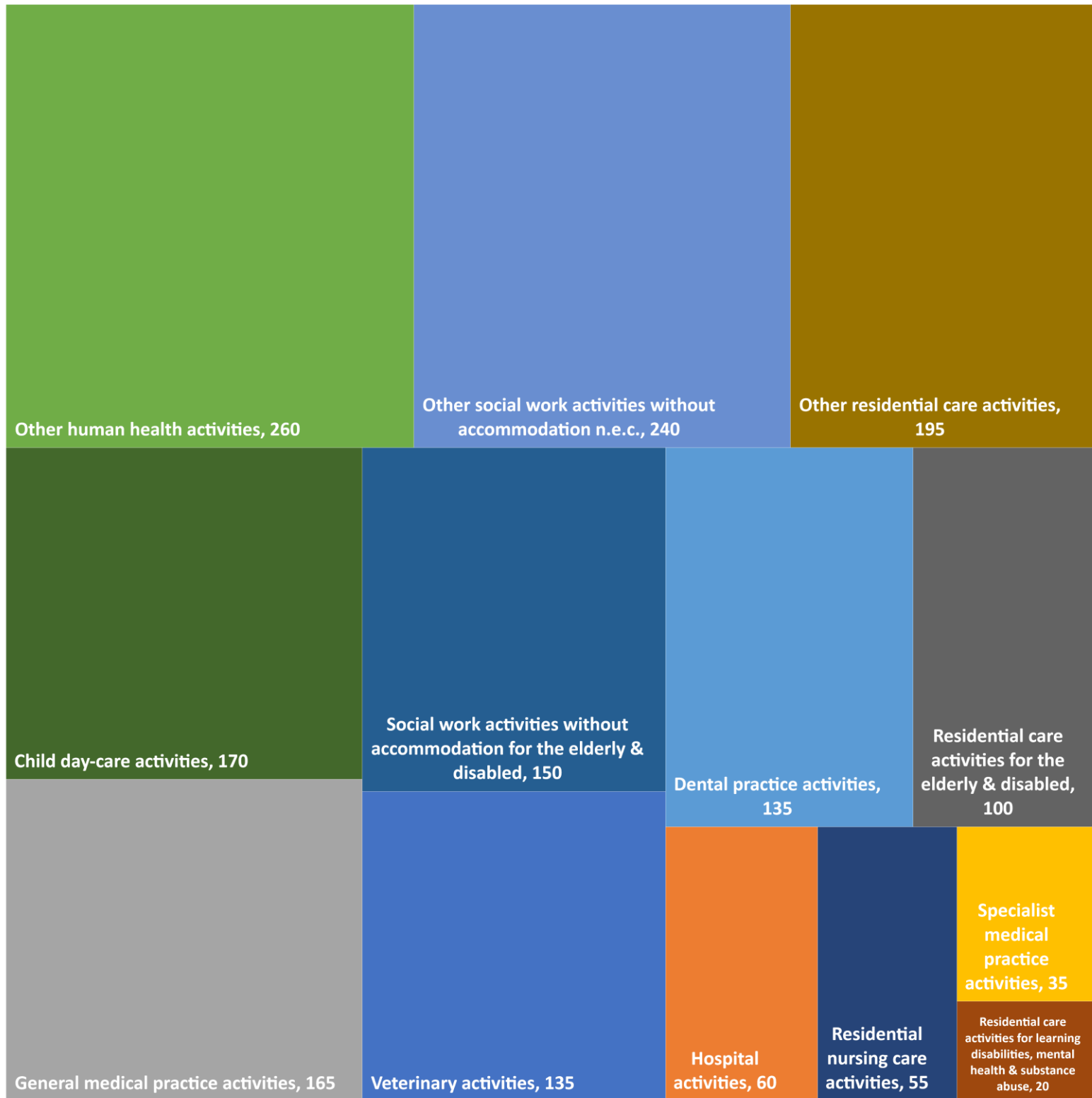
Source: ONS: UK Business Counts, 2019

² EMSI Analytics tool, 2020

³ ONS: UK Business Counts 2019. Please note, currently the ONS Business Demography dataset does not provide a breakdown by industry for all registered establishments, the breakdown can be obtained from the ONS UK Business Counts which is a snapshot (March 2019) of the Business Demography dataset.

Within the health and social care sector, the industry with the highest number of establishments is other human health activities at 260. This is followed closely by other social work activities without accommodation with 240 establishments. There are 20 establishments that are residential care activities for learning disabilities, mental health and substance abuse⁴.

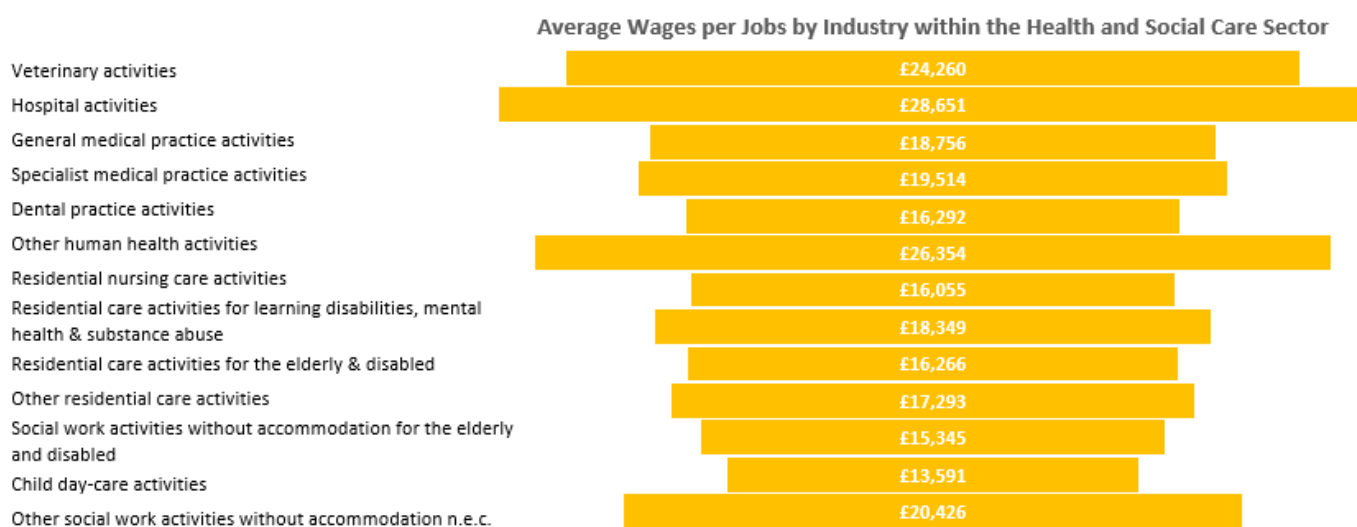
Establishments by Industry in the Health and Social Care Sector



Source: ONS: UK Business Counts, 2019

⁴ EMSI Analytics tool, 2020

The overall average wages for the health and social care sector is £21,507. Within the health and social care sector there are significant variances in wages between industries with hospital activities the highest at £28,651 to child day-care activities at £13,591⁵.



Source: EMSI Analytics Tool, 2020

Location Quotients (LQs) are a way of quantifying how concentrated a particular industry, cluster, occupation, or demographic group is in a region as compared to the nation. It can reveal what makes a particular region “unique” in comparison to the national average. Higher LQs correspond to higher levels of specialisation, with an LQ above 1 indicating that the area is more specialised in that sector than Great Britain as a whole. Overall the health and social care sector has a LQ in 2018 of 1.10⁶.

Out of the 13 industries within the health and social care sector, 10 are above 1. As reflected in the Marches Strategic Economic Plan, residential care activities are still a key industrial specialism and within this the other residential care activities industry had the highest LQ at 1.87 in 2018.

The following table displays LQs in the Marches.

Industry	2018 Location Quotient
Veterinary activities	1.76
Hospital activities	0.81
General medical practice activities	1.03
Specialist medical practice activities	0.67
Dental practice activities	1.09
Other human health activities	1.14
Residential nursing care activities	1.62
Residential care activities for learning disabilities, mental health and substance abuse	1.46
Residential care activities for the elderly and disabled	1.48
Other residential care activities	1.87
Social work activities without accommodation for the elderly and disabled	1.18
Child day-care activities	1.25
Other social work activities without accommodation n.e.c.	0.86
Health and Social Care	1.10

Source: EMSI Analytics Tool, 2020

⁵ EMSI Analytics tool, 2020

⁶ EMSI Analytics tool, 2020

2. Supply Side Analysis

2.1 Current Workforce Size⁷

There was an estimated number of 40,900 people working in the health and social care sector in 2018. This is the third highest sector at 14.1% of the total jobs and above the England total of 12.9%⁸.

The following table displays the number of jobs in the Marches in 2018.

Sector	The Marches 2018	The Marches 2018 % of Total	England 2018 % of Total
Advanced Manufacturing	32,945	11.4%	8.5%
Agri-Tech	10,730	3.7%	0.7%
Business and Professional Services	54,320	18.8%	24.7%
Construction	15,000	5.2%	4.6%
Cyber Security and Resilience	11,800	4.1%	4.7%
Environmental Technologies	3,215	1.1%	1.1%
Food & Drink	9,250	3.2%	1.3%
Health and Social Care	40,900	14.1%	12.9%
Public Sector Inc. Education	30,000	10.4%	11.3%
Retail	49,000	16.9%	15.3%
Transport and Logistics	9,370	3.2%	4.9%
Visitor Economy	23,100	8.0%	9.9%
Total	289,630		

Source: ONS: Business Register and Employment Survey, 2019

Sector Analysis

EMSI provide a more detailed breakdown of jobs by industry and based on their total of 43,513 jobs in 2018 within the health and social care, hospital activities account for 29.2% of total jobs, which equates to approximately 12,700 jobs in 2018⁹. This is followed by other human health activities and other residential care activities which are both at 10.5%, this equates to an estimated 4,600 jobs.

The specialist medical practice activities industry accounts for 0.3% (140 jobs) of the total jobs in the Marches in 2018, this was followed by residential care activities for learning, disabilities, mental health and substance abuse at 1.4% (620 jobs).

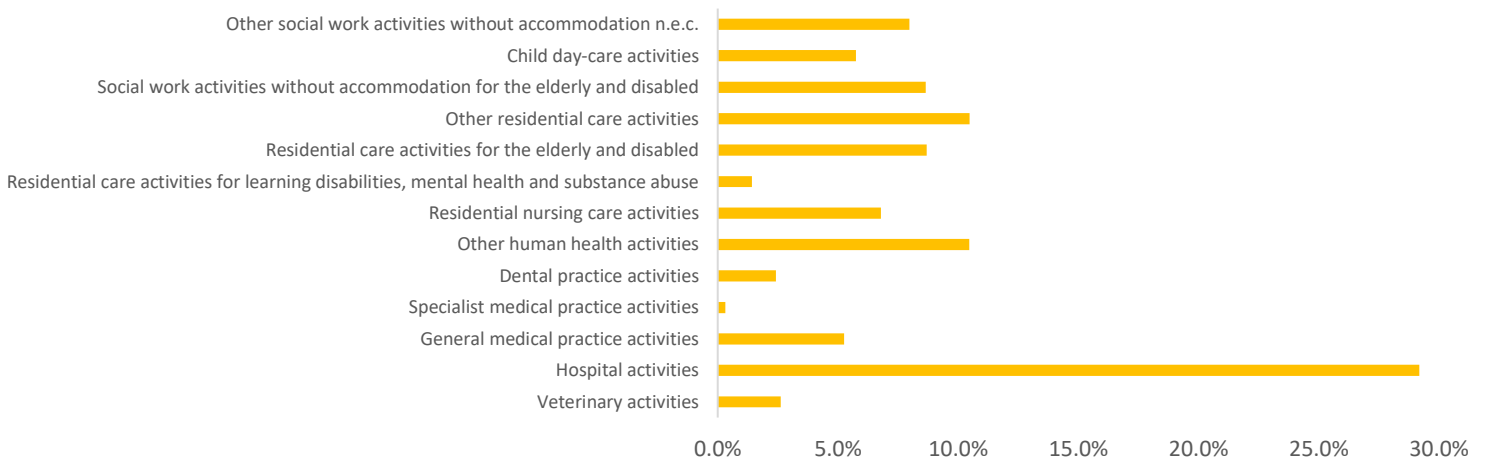
⁷ Please note depending on the source – BRES, EMSI – SIC or SOC codes there is some variation in the total jobs figures.

⁸ ONS, Business Register and Employment Survey, 2019

⁹ Please note, figures will vary as EMSI Analytics tool, 2020 has been used for further analysis.

The following graph shows the proportion each industry accounts for of the total jobs within the health and social care sector

Proportion of Jobs by Industry within the Health and Social Care Sector



Source: EMSI Analytics Tool, 2020

Occupation Analysis¹⁰

In terms of the occupations in this sector there are 41 occupations associated with the health and social care sector. Occupations in the sector are dominated by social care workers and nurses and this is reflected in the two most prevalent roles, 'Care Workers and Home Carers', and 'Nurses'. Jobs in 'Care Workers and Home Carers' are expected to increase by 4% or 436 jobs in absolute numbers - the most of any occupation classified.

Occupation	2018 Jobs
Care workers and home carers	10,110
Nurses	6,043
Teaching assistants	3,678
Nursing auxiliaries and assistants	3,181
Medical practitioners	1,725
Nursery nurses and assistants	1,542
Welfare and housing associate professionals n.e.c.	1,212
Educational support assistants	1,180
Animal care services occupations n.e.c.	1,029
Senior care workers	776
Housing officers	772
Youth and community workers	746
Dental nurses	516

¹⁰ Occupation and industry classifications categorise occupations and industries into clearly defined groups. As such they provide a common basis for collecting, presenting, and comparing of labour statistics. **Occupational** classifications (SOC) group people based on job and tasks performed whereas **Industry** (SIC) classifications group people based on the sector of economic activity in which they are employed. For the purpose of this work we have attributed occupations to their most natural industrial sector, so for example a 'Financial Accounts Managers' whose skills are transferrable across all sectors will be contained solely within Business and Professional Services. Any identified skills gap for this occupation would apply to all sectors.

Occupation	2018 Jobs
Physiotherapists	432
Childminders and related occupations	375
Medical and dental technicians	367
Houseparents' and residential wardens	366
Midwives	365
Playworkers	346
Health professionals n.e.c.	335
Paramedics	299
Child and early years officers	297
Pharmacists	288
Pharmaceutical technicians	264
Occupational therapists	256
Undertakers, mortuary and crematorium assistants	252
Medical radiographers	251
Psychologists	229
Ambulance staff (excluding paramedics)	218
Therapy professionals n.e.c.	213
Veterinary nurses	203
Veterinarians	192
Ophthalmic opticians	148
Health associate professionals n.e.c.	147
Care escorts	132
Speech and language therapists	121
Counsellors	119
Dental practitioners	114
Pest control officers	97
Podiatrists	60
Dispensing opticians	58
TOTAL	39,054

Source: EMSI Analytics Tool, 2020

2.2 Existing Training Provision

2.2.1 Apprenticeship Provision

Apprenticeships Starts

The total number of apprenticeships in the Marches (across all sectors) increased to 6,360 from 6,020 in 2018/19 - up 5.5% compared to 4.7% nationally.

The table below identifies the unique apprenticeship starts by area across the Marches LEP for all health and social care related subjects:

Local Authority	2016/17	2017/18	2018/19	Change 17/18 - 18/19	% Change 17/18 - 18/19
Herefordshire, County of	480	260	340	80	29.9%
Shropshire	900	520	500	-20	-5.0%
Telford and Wrekin	520	310	370	60	21.6%
Marches LEP	1,900	1,090	1,210	120	10.8%

Source: ESFA Datacube, 2018/19

The number of health and social care apprenticeships increased by 10.8% across the Marches in 2018/19 to 1,210. Herefordshire and Telford and Wrekin recorded increases of 29.9% and 21.6% respectively, while the number of apprenticeships in Shropshire fell by -5% or in absolutely numbers 20 apprenticeships.

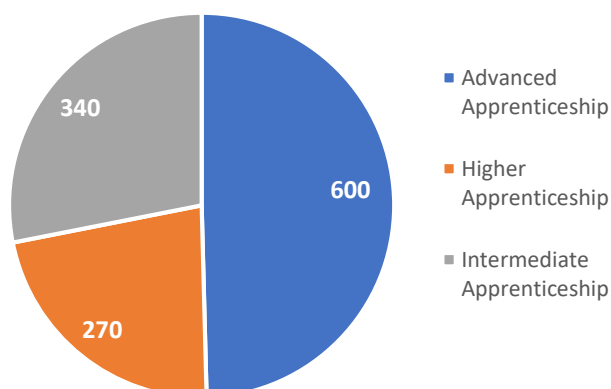
The table below identifies the number of starts by each of the Tier 2 sector subject areas that combine to form the overarching 'Health, Public Services and Care'.

Sector Subject Area	2016/17	2017/18	2018/19	Change 17/18 - 18/19
Health, Public Services and Care				
Child Development and Well Being	380	370	300	-70
Health and Social Care	1,480	660	850	190
Medicine and Dentistry		0	5	5
Nursing and Subjects and Vocations Allied to Medicine			5	5
Public Services	40	60	50	-10
Marches LEP	1,900	1,090	1,210	120

Source: ESFA Datacube, 2018/19

When considering apprenticeship starts by sector subject area, the main increase was recorded in 'Health and Social Care'. There were nominal increases in both 'Medicine and Dentistry' along with 'Nursing and Subjects and Vocations Allied to Medicine'. Of note would be the continued decline (since 2016/17) of 'Child Development and Well Being'.

Apprenticeship Level for Health, Public Services and Care



Apprenticeships starts in Health, Public Services and Care were more likely to be at either advanced or higher level in 2018/19 than in 2017/18. Almost half of all starts were Advanced Apprenticeships (akin to NVQ Level 3), while the proportion of starts at intermediate level fell from 31% to 28%.

Source: ESFA Datacube, 2018/19

In terms of starts by provider, 83 organisations delivered apprenticeships in Health, Public Services and Care in 2018/19. **The majority of training was provided by the 10 providers listed below, which accounted for 45%.**

Provider:	2016/17	2017/18	2018/19
Herefordshire, Ludlow & North Shropshire College	140	90	80
Lifetime Training Group Limited	20	50	80
BCTG Limited	70	30	70
Riverside Training Limited	10	10	60
Telford College	130	60	60
Staffordshire University	-	20	50
GP Strategies Training Limited	-	30	50
Marr Corporation Limited	80	30	40
SBC Training Limited	70	20	30
Aspiration Training Limited	70	30	30

Source: ESFA Datacube, 2018/19

Herefordshire, Ludlow and North Shropshire College appear to be the leading provider in apprenticeship starts in Health, Public Services and Care, delivering 310 since 2016/17.

Apprenticeship Provision

A mapping and gapping exercise of all apprenticeship provision in the Marches has highlighted that there are 86 apprenticeship providers offering apprenticeships within 55 miles of the Marches. This was calculated by using the most central postcode SY8 2AF.

The supporting appendix table shows the current apprenticeship training provision for each of the standards associated with the Health and Social Care sector across the West Midlands: 29 out of the

63 apprenticeship standards associated with the sector are being offered within 55 miles of the Marches. Most provision is held at the training provider, with some courses offering apprenticeships only offsite at the employer. A colour coding system was used to map and gap the provision, with a preference for onsite learning at providers taking priority in the colour coding, as some providers offer both onsite and offsite learning, which would be coloured green in the matrix.

In 6 cases there were courses with only one provider offering the course across England, e.g. Diagnostic radiographer (Integrated Degree), Environmental health practitioner (degree), Pharmacy services assistant, Physiotherapist (integrated degree) and Rehabilitation worker (visual impairment). And in 2 cases this provision was in the West Midlands, Rehabilitation worker - visual impairment & Paramedic (degree).

20 courses were not being catered for at the time of analysis anywhere across England, and an additional 13 were offered somewhere else in the country but not in the West Midlands.

2.2.2 Further and Higher Education Provision

Further and Higher Education providers are significant players in the training marketplace. Their role alongside private training providers is to provide opportunities for both the future and the existing workforce to access relevant training in the health and social care sector.

Specifically, there are the following major further and higher education establishments within the area:

- Herefordshire, Ludlow and North Shropshire College
- Telford College
- Shrewsbury Colleges Group
- Harper Adams University
- University Centre Shrewsbury (University of Chester)
- University of Wolverhampton
- NMITE

Higher Education (HESA)

Harper Adams University specialises in the agricultural and rural sector. It is currently developing a Vet School in partnership with Keele University, which will add increase local study options. whilst the University of Chester has a centre in Shrewsbury specialising in subjects aligned to medicine and healthcare, business, and education. The University of Wolverhampton has a well-established campus in the Marches, located at Priorslee in Telford, which currently specialises in engineering and University Centre Telford in Southwater which delivers education, marketing and business management. Both University Centre Shrewsbury and the University of Wolverhampton have announced increased investment in nursing and healthcare related provision. NMITE is a new higher education institution in Hereford which will focus on engineering subjects.

The table below sets out the number of students studying in these institutions in the academic year 2018/19. The data relates to all campuses not just those based across the Marches.

	Harper Adams	University of Chester	University of Wolverhampton
Advanced Manufacturing	275	345	1,445
Agri-Tech	4,755	1,020	2,300
Business and Professional Services	135	3,020	4,060
Environmental Technologies	20	370	0
Food and Drink	160	0	0
Health and Social Care	25	4,645	4,300
Public Sector Inc. Education	5	2,925	4,655
Construction	0	0	0
Cyber	0	200	0
Transport and Logistics	0	10	0
Visitor Economy	0	1,785	2,295
Retail	0	245	0
Grand Total	5,375	14,565	19,045

Source: HE student enrolments by HE provider and subject of study 2018/19

In 2018/19 there were 25 students on courses aligned to health and social care at Harper Adams, up 5 (+25.0%) since the previous year. These students accounted for 0.5% of the student body.

At the University of Chester there were 4,645 students studying courses in the health and social care sector, this is down by 510 (-9.9%) since the previous year. These students made up 31.9% of the student body.

The University of Wolverhampton had 4,300 students studying courses aligned to the health and social care sector, making up 22.6% of all students.

Qualifications and skills are on a spectrum, with many academic qualifications now having considerable employer input, and many vocational and professional qualifications being delivered by universities. There is an identified need for both detailed subject knowledge and transferable skills to be part of vocational qualifications: 'many formerly purely technical occupations are expected to show a new demand for creative and interpersonal skills' (World Economic Forum, 2016). Health and engineering are examples where such a binary divide becomes unhelpful. Employers will need all of the skills and qualifications along this spectrum, at different times and in different combinations, and learners and employees will need to be able to move along this spectrum and should be supported in doing so.

3. Demand Side Analysis

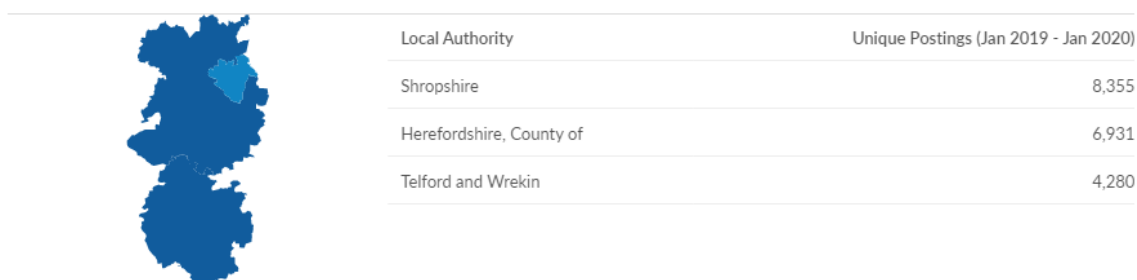
Nationally, around 1.2 million full-time equivalent (FTE) staff work in the NHS, and 1.1 million work in adult social care. Around 78% of social care jobs are in the independent sector. Providers across NHS England are reporting a shortage of over 100,000 FTE staff. Adult social care is facing even starker recruitment and retention challenges, with an estimated 122,000 FTE vacancies. This equates to a vacancy rate of around 8% for both the NHS and adult social care, compared with a vacancy rate of under 3% for jobs across the UK economy.

Analysis by the King’s Fund suggests the NHS workforce gap could reach almost 250,000 by 2030. There are significant shortages in learning disability, primary and community nursing, whilst the mental health nursing workforce dropped by 11% between 2009 and 2019. In adult social care, around one in 10 social worker and one in 11 care worker roles are reportedly unfilled. The demand for social care workers is expected to rise in line with the UK’s ageing population. Skills for Care have estimated a need for 650,000 to 950,000 new adult social care jobs by 2035.

Demand in the Marches area mirrors the shortages at a national level. Analysis of Health and Social Care job vacancies in the last year (January 2019 to January 2020) reveal 95,024 total job adverts of which 19,566 were unique vacancies.

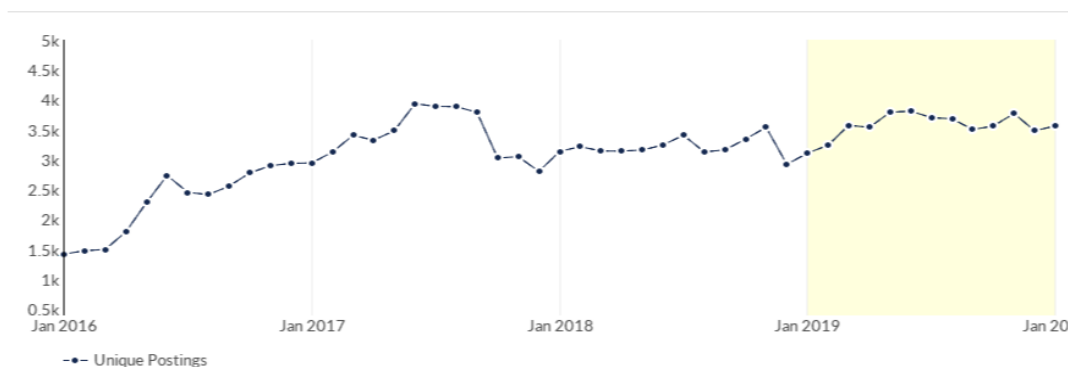
The highest demand is in Shropshire, which accounted for 43% of all unique vacancies, followed by Herefordshire (35%) and Telford and Wrekin (22%).

Job Postings Regional Breakdown



The graph below shows the long-term monthly trend for total job adverts for openings in Health and Social Care. The number of adverts increased from 1,422 in January 2016 to 3,566 in January 2020. This is an increase of 151%.

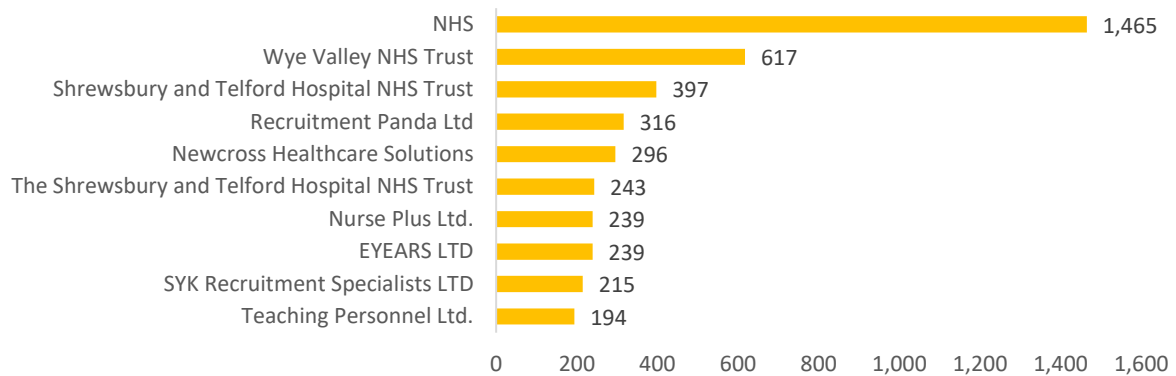
Monthly Unique Postings



Source: EMSI Analytics Tool, 2020

The top 10 companies looking to recruit to the Health and Social Care sector account for 22% of all unique vacancies posted in the Marches area.

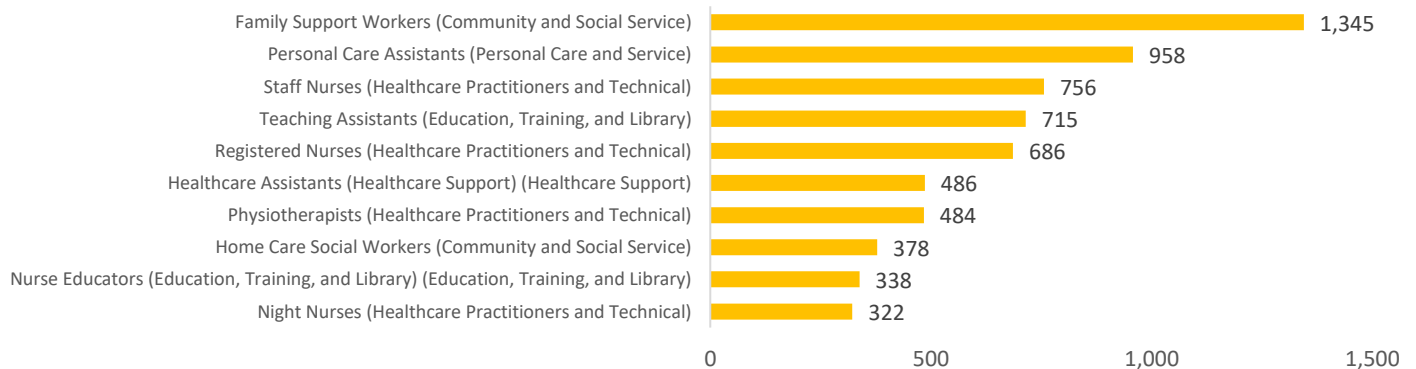
Top 10 Companies Looking to Recruit



Source: EMSI Analytics Tool, 2020

The top two advertised job titles were both associated with social care and equated to 12% of all unique vacancies in the Health and Social Care sector. Roles broadly requiring 'nurses' equalled 11%.

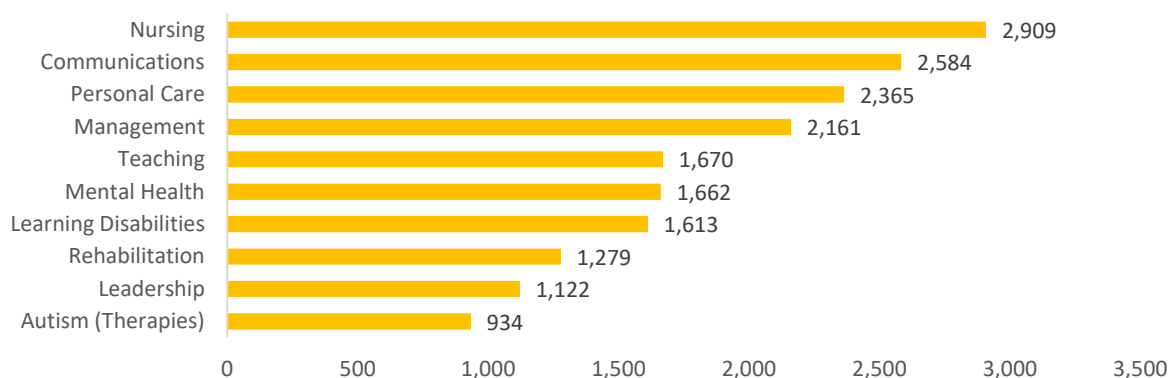
Top 10 Job Titles Employers are Looking to Hire



Source: EMSI Analytics Tool, 2020

Unsurprisingly given the prevalence of roles above for nurses, the top requested skill was nursing, followed by communication. Notably 'Management' and 'Leadership' also feature in the most requested skills. Combined these two key skills appeared in 3,283 unique postings (17%).

Top 10 Skills Employers are Requesting



Source: EMSI Analytics Tool, 2020

3.1. Occupational Forecasts

In this section of the report we use UKSOC 4-digit 2010 classifications to understand at a granular level the types of occupations and activities forecasts to be required for roles within the Health and Social Care sector.

Occupation	2018 Jobs	2022 Jobs	% Change	2018 to 2022 Openings	Education Level Required	Automation
Care workers and home carers	10,110	10,546	4%	2,373	Level 2 NVQ; GCSE at grades A*-C	27.7%
Nurses	6,043	6,036	0%	1,089	Honours, Bachelor's degree	4.3%
Teaching assistants	3,678	3,730	1%	764	Level 2 NVQ; GCSE at grades A*-C	13.0%
Nursing auxiliaries and assistants	3,181	3,219	1%	640	Level 3 NVQ; A Levels	32.4%
Medical practitioners	1,725	1,697	-2%	308	Honours, Bachelor's degree	7.7%
Nursery nurses and assistants	1,542	1,643	7%	387	Level 2 NVQ; GCSE at grades A*-C	28.0%
Welfare and housing associate professionals n.e.c.	1,212	1,249	3%	234	Level 3 NVQ; A Levels	17.7%
Educational support assistants	1,180	1,198	2%	250	Level 2 NVQ; GCSE at grades A*-C	13.0%
Animal care services occupations n.e.c.	1,029	1,044	1%	206	Level 2 NVQ; GCSE at grades A*-C	45.2%
Senior care workers	776	799	3%	169	Level 3 NVQ; A Levels	11.5%
Housing officers	772	800	4%	151	Level 4 NVQ; Intermediate, DipHE, DipFE	17.4%
Youth and community workers	746	762	2%	138	Honours, Bachelor's degree	0.8%
Occupation	2018 Jobs	2022 Jobs	% Change	2018 to 2022 Openings	Education Level Required	Automation
Dental nurses	516	533	3%	138	Level 4 NVQ; Intermediate, DipHE, DipFE	39.9%
Physiotherapists	432	427	-1%	75	Honours, Bachelor's degree	4.2%
Childminders and related occupations	375	405	8%	95	Level 2 NVQ; GCSE at grades A*-C	28.0%

Medical and dental technicians	367	365	-1%	65	Level 4 NVQ; Intermediate, DipHE, DipFE	39.7%
Houseparents' and residential wardens	366	383	5%	84	Level 3 NVQ; A Levels	45.2%
Midwives	365	362	-1%	64	Honours, Bachelor's degree	22.3%
Playworkers	346	364	5%	83	Level 2 NVQ; GCSE at grades A*-C	28.0%
Health professionals n.e.c.	335	332	-1%	56	Honours, Bachelor's degree	27.2%
Paramedics	299	290	-3%	50	Level 3 NVQ; A Levels	13.7%
Child and early years officers	297	307	3%	62	Honours, Bachelor's degree	1.0%
Pharmacists	288	282	-2%	50	Honours, Bachelor's degree	22.5%
Pharmaceutical technicians	264	261	-1%	45	Level 3 NVQ; A Levels	79.5%
Occupational therapists	256	255	0%	44	Honours, Bachelor's degree	15.4%
Undertakers, mortuary and crematorium assistants	252	278	10%	68	Level 3 NVQ; A Levels	62.2%
Medical radiographers	251	249	-1%	45	Honours, Bachelor's degree	29.4%
Psychologists	229	226	-1%	39	Honours, Bachelor's degree	N/A
Ambulance staff (excluding paramedics)	218	213	-2%	42	Level 3 NVQ; A Levels	48.5%
Therapy professionals n.e.c.	213	213	0%	37	Honours, Bachelor's degree	9.8%
Veterinary nurses	203	216	6%	49	Level 3 NVQ; A Levels	35.4%
Veterinarians	192	201	5%	40	Honours, Bachelor's degree	14.2%
Ophthalmic opticians	148	132	-11%	25	Honours, Bachelor's degree	N/A
Health associate professionals n.e.c.	147	147	0%	25	Level 4 NVQ; Intermediate, DipHE, DipFE	3.5%
Care escorts	132	133	1%	25	Level 2 NVQ; GCSE at grades A*-C	30.5%
Speech and language therapists	121	119	-2%	20	Honours, Bachelor's degree	8.4%
Counsellors	119	122	3%	23	Level 4 NVQ; Intermediate, DipHE, DipFE	2.5%
Dental practitioners	114	116	2%	26	Honours, Bachelor's degree	24.2%
Pest control officers	97	109	12%	29	Level 3 NVQ; A Levels	21.3%
Podiatrists	60	59	-2%	11	Honours, Bachelor's degree	4.3%
Dispensing opticians	58	51	-12%	<10	Level 4 NVQ; Intermediate, DipHE, DipFE	31.4%
TOTAL	39,054	39,837	2.1%	8,134		

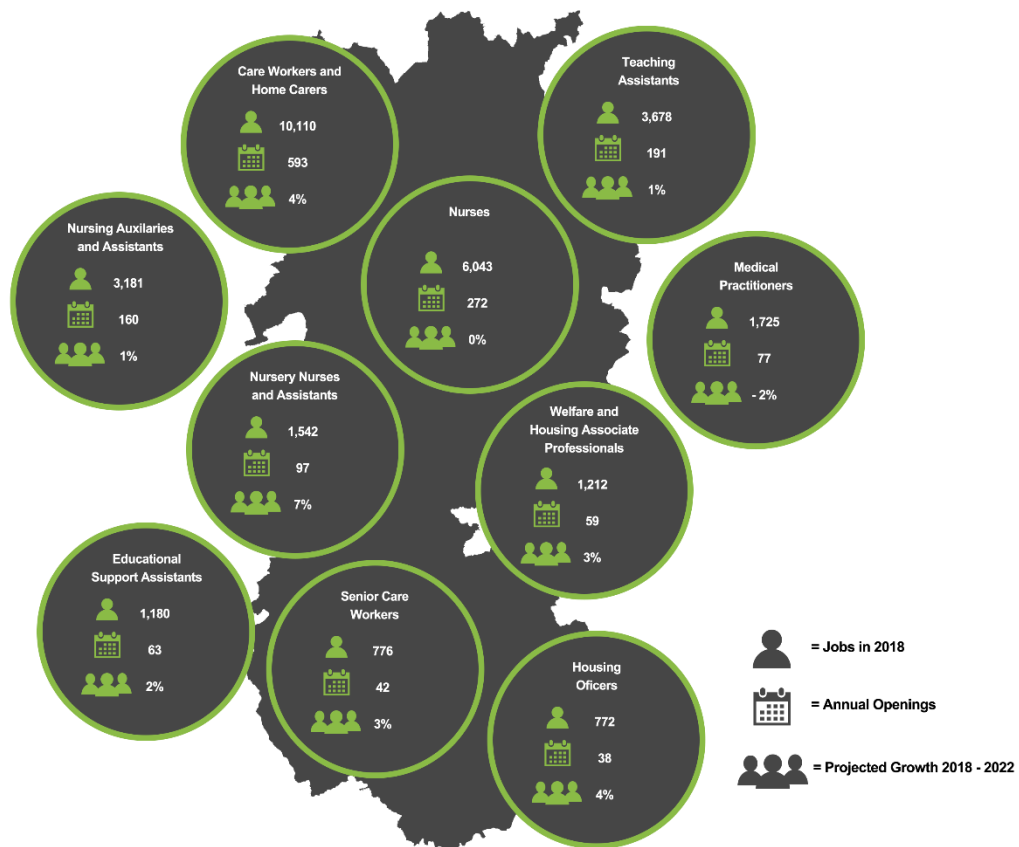
Source: EMSI Analytics Tool, 2020

Of the 41 occupations listed above, 22 are expected to grow, four are predicted to undergo nominal change (+/- in absolute numbers) and 15 are likely to contract. Occupations in the two most prevalent roles, 'Care Workers and Home Carers', and 'Nurses'. Jobs in 'Care Workers and Home Carers' are expected to increase by 4% or 436 jobs in absolute numbers - the most of any occupation classified. Of the 15 occupations forecast to shrink, 13 employ fewer than 400 people so minimal change in absolute numbers. This is typified in the two occupations forecast to contract the most - 'Dispensing Opticians' (-12%) and 'Ophthalmic Opticians' (-11%) which account for -23 jobs.

Most occupations in the Health and Social Care sector score relatively low on the automation index (the automation index captures an occupation's risk of being affected by automation). Indeed, only two occupations are rated above 50% 'Pharmaceutical technicians' (79.5%) and 'Undertakers, mortuary and crematorium assistants' (62.2%). Whilst the number of 'Pharmaceutical technicians' are forecast to fall (-1%), 'Undertakers, mortuary and crematorium assistants' are forecast to increase by 10%.

In addition to 'Care Workers and Home Carers' and the other occupations expected to grow the most include 'Pest control officers' 'Childminders and related occupations' and 'Engineering Professionals n.e.c.', 'Design and Development Engineers', 'Research and Development Managers' and 'Nursery nurse and assistants'.

The Marches Top 10 Health and Social Care Occupations



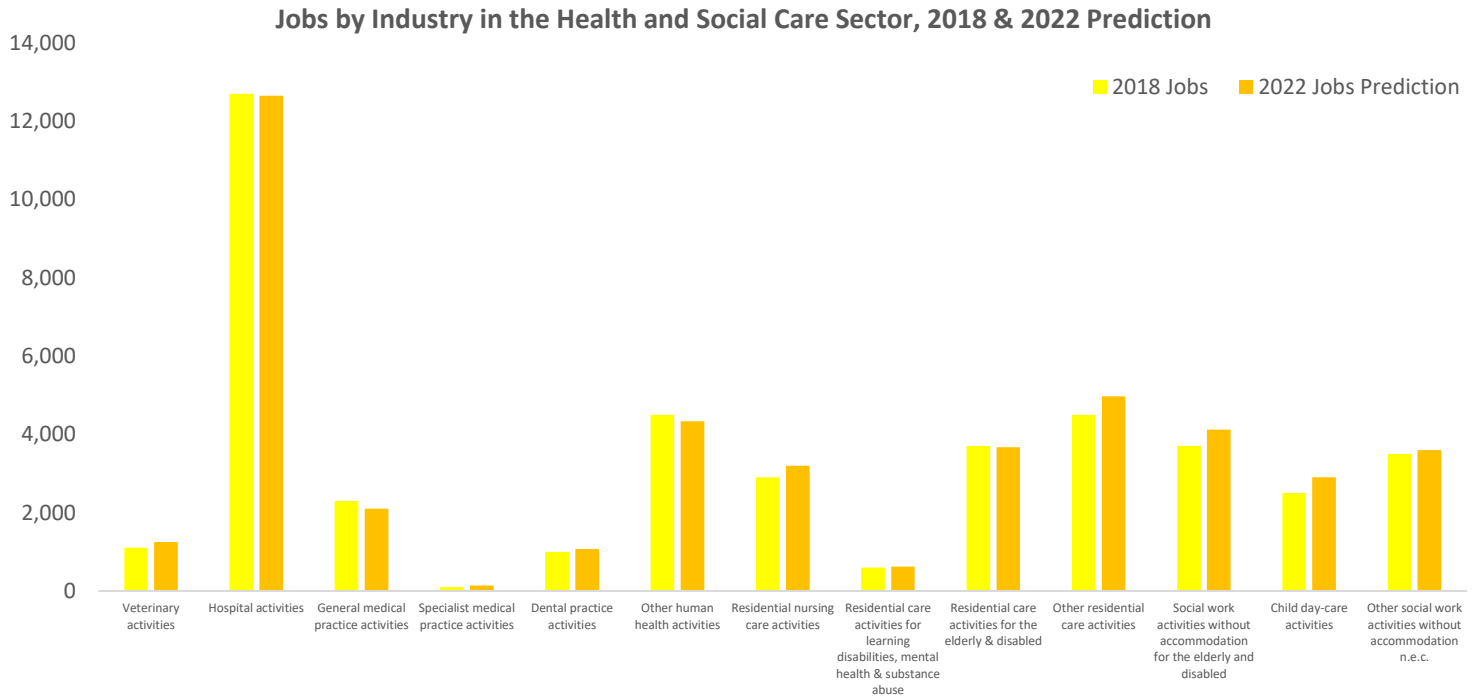
3.2. Job Forecasts by Industry

Overall, the health and social care sector is projected to increase by around 1,150 jobs by 2022. Within the health and social care sector, the hospital activities industry had the highest number of jobs at nearly 12,700 in 2018, however this is projected to decrease by nearly 50 jobs by 2022. This is followed by other human health activities and other residential care activities both nearly reaching 4,600 jobs in 2018. However, these industrial are also predicted to decrease by 2022 by an estimated number of 225 jobs and 110 jobs respectively¹¹.

At the other end of the scale, there are approximately 140 jobs in the specialist medical practice activities industry, which is projected to increase by 5 jobs in 2022.

¹¹ EMSI Analytics tool, 2020

Child day-care activities and other residential care activities are both projected to increase by approximately 410 jobs (from an estimated 2,500 jobs and 4,500 jobs respectively in 2018). Social work activities without accommodation for the elderly and disabled is predicted to increase by 360 jobs in 2022 from the 3,700 jobs in 2018.



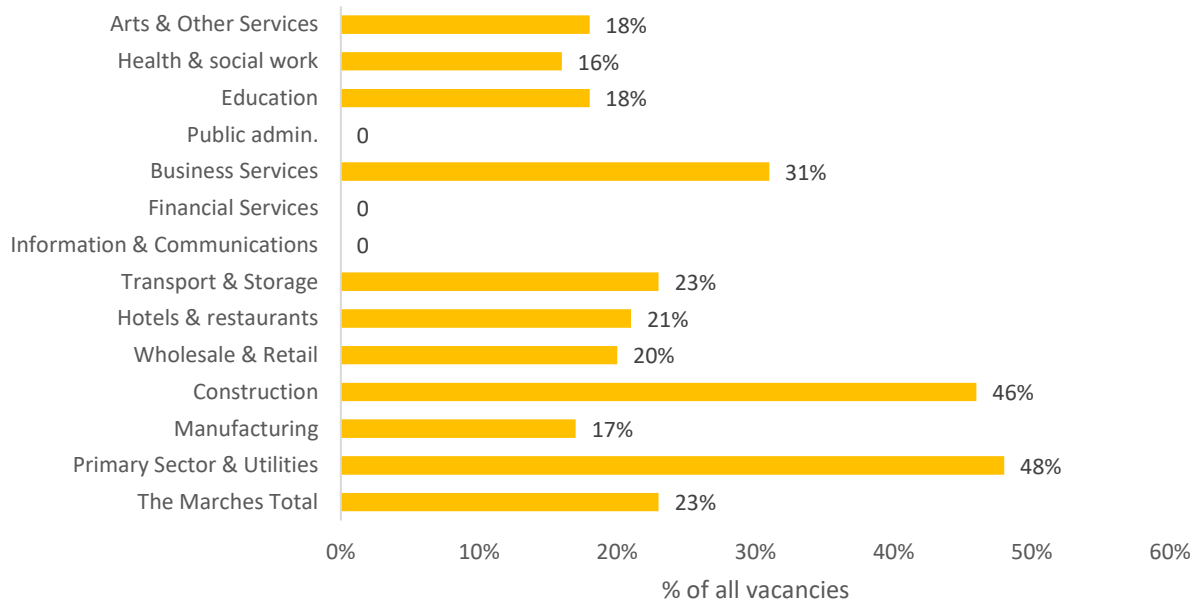
Source: EMSI Analytics Tool, 2020

3.3. Sector Skill Shortages

23% of all vacancies are skills shortage vacancies, compared to 22% nationally. The following graph highlights the acute problem of skills shortage vacancies in certain sectors.

Health & social care, defined in the graph as health & social work, has a skills gap of 16%. This is the lowest level reported out of all the other sectors in the Marches, so employers do not have a huge problem with hiring to fill skills gaps.

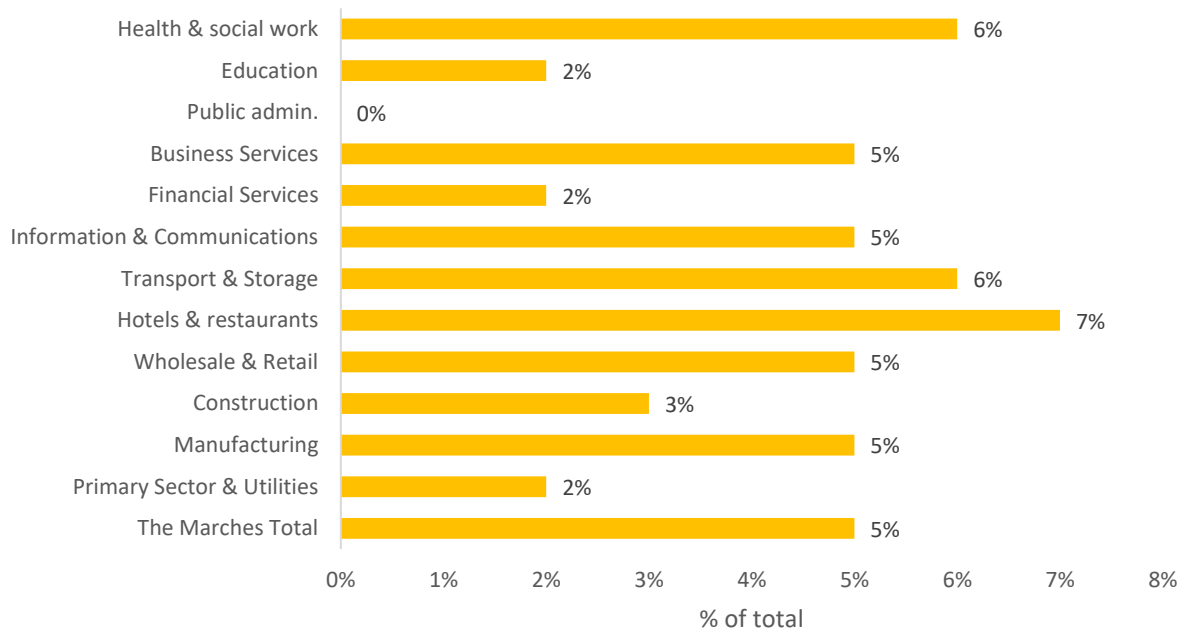
Percentage of All Vacancies Which are SSVs by Sector



Source: Employer Skills Survey 2017, LEP Summary Tables

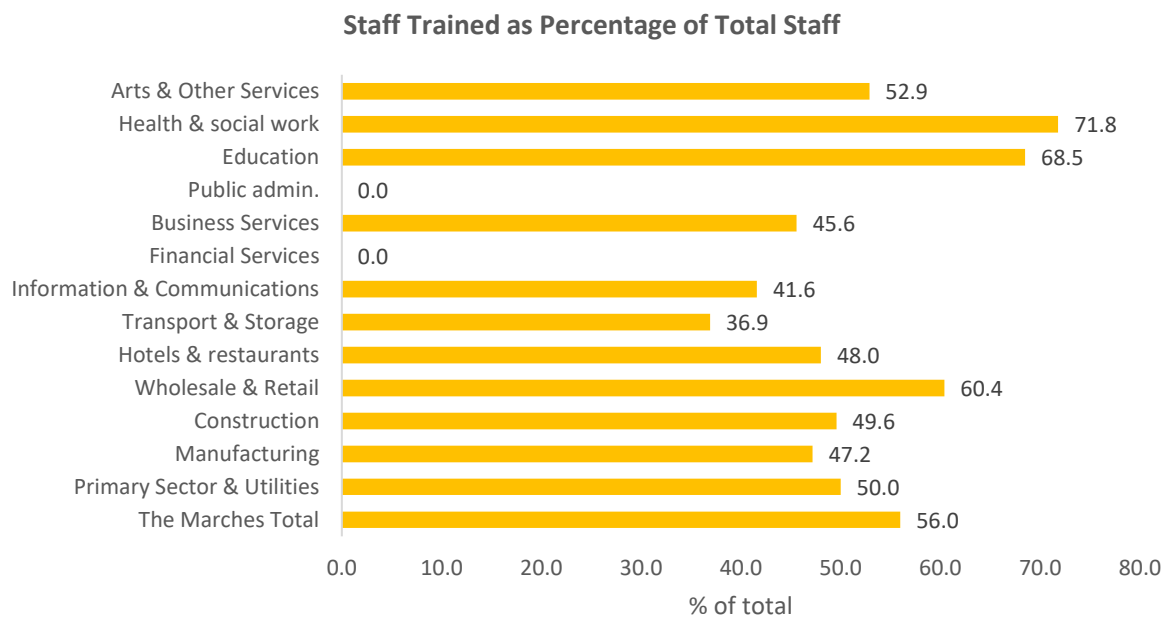
5% of staff are not fully proficient in the Marches, compared to 4% nationally. In the health & social care sector, 6% of staff are not fully proficient. This is joint 3rd highest sector reporting staff as not being fully proficient, meaning there are some skills lacking within the current workforce.

Staff Not Fully Proficient as Of Employment



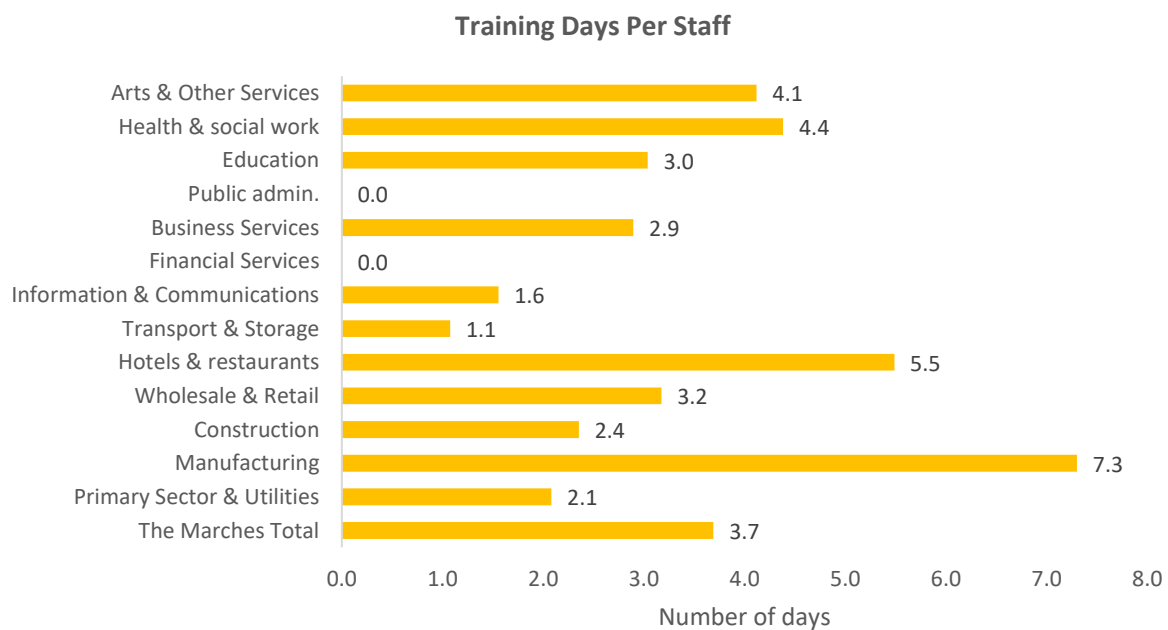
Source: Employer Skills Survey 2017, LEP Summary Tables

In the Marches, 56.0% of staff are trained as a percentage of all staff, compared to 62.2% of staff in England. 71.8% are trained in the health & social care sector. This sector has a very high training rate due to the sector requiring specialised skills. Staff will often be required to learn new skills with the developing knowledge and technologies available in the medical field.



Source: Employer Skills Survey 2017, LEP Summary Tables

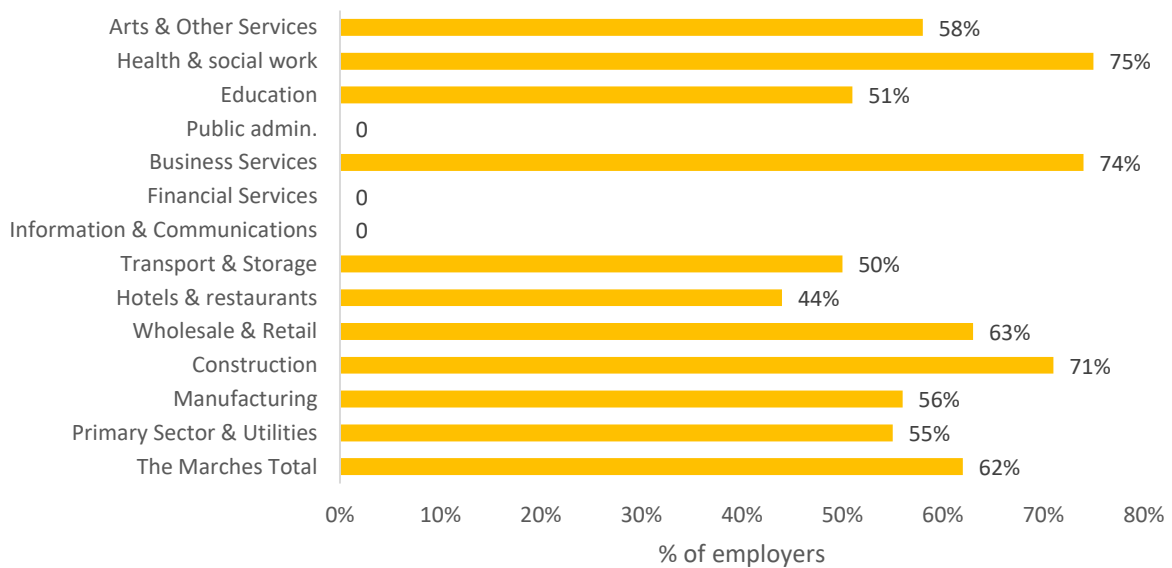
On average, employees in the Marches have 3.7 training days. In the health & social care sector this is 4.4 days. High levels of staff training and low levels of skills gaps signifies that employers are addressing skill shortages within the sector.



Source: Employer Skills Survey 2017, LEP Summary Tables

62% of employers in the Marches expect the need for new skills in the next 12 months, this is the same as national levels. In the health & social care sector, 75% of employers expect new skills from employees. This is a high percentage and signifies that there may be a significant skills shortage in the future within the sector. Upskilling may be the preferred solution to this problem – that is, training current employees with new skills to ensure they can keep up with a changing work environment e.g. enhancements in digital technology. Upskilling may be cheaper for employers and more attractive, giving employers a chance to ‘grow their own’. Employers should invest more in training to equip current staff with the skills they are looking for from new recruits to address this skills issue.

Whether Employers Expect the Need For New Skills in Next 12 Months



Source: Employer Skills Survey 2017, LEP Summary Tables

4. Supply vs Demand

4.1. Provision Review

In this section of 'Supply vs Demand' we will concentrate on the most significant areas of misalignment and gaps across the sector. Identifying which courses are currently over-supplying the labour market, which areas of labour market demand is currently being met and where there might be areas of opportunity for the development of new skill provision.

Discipline	Completers 2019	Annual Openings	Gap Between Demand and Provision	% Jobs Growth (2019-2022)
Vocations Allied to Medicine	19	779	760	0%
Nursing	1	453	452	0%
Medicine and Dentistry	40	414	374	-1%
Care	1,114	1,382	268	2%
Optical Services	3	14	11	-4%
Pharmacy	0	48	48	-3%
Dental Nursing	0	31	31	2%
Dentistry	0	29	29	-1%
Health and Social Care	3,373	1,303	-2,070	1%
Child Development and Well-Being	872	196	-676	4%
Counselling and Psychology	641	134	-507	1%
Therapy	28	26	-2	-1%

Green: Areas where the provider base already offers courses, but the data indicates that there may be room to grow these to meet employment demand.

Blue: Courses the provider base does not currently offer, indicating that there is potential for creating new courses to meet these skills needs.

Yellow: Areas where the data suggests that the provider base is currently oversupplying the labour market to a significant level.

Skills provision that is aligned to local jobs and industry demand not only helps providers with their Ofsted inspection but also helps to ensure learners are best placed to get employment using the skills they have learned, supply employers with the skills they need and support growth in the local and wider economy.

This provision review identifies areas of misalignment in the Marches for the health and social care sector:

Strengths (course areas that are well met compared to industry demand)

Course areas which have a gap between supply and demand, where that there is less provision than supply is possibly where there is still potential to increase provision locally. These include the disciplines highlighted green in the table, e.g. vocations allied to medicine, nursing, medicine and dentistry, care and optical services.

Disciplines in the green section of the table that also have a net positive change in jobs in the next few years are seen as extra strengths to the area, e.g. care.

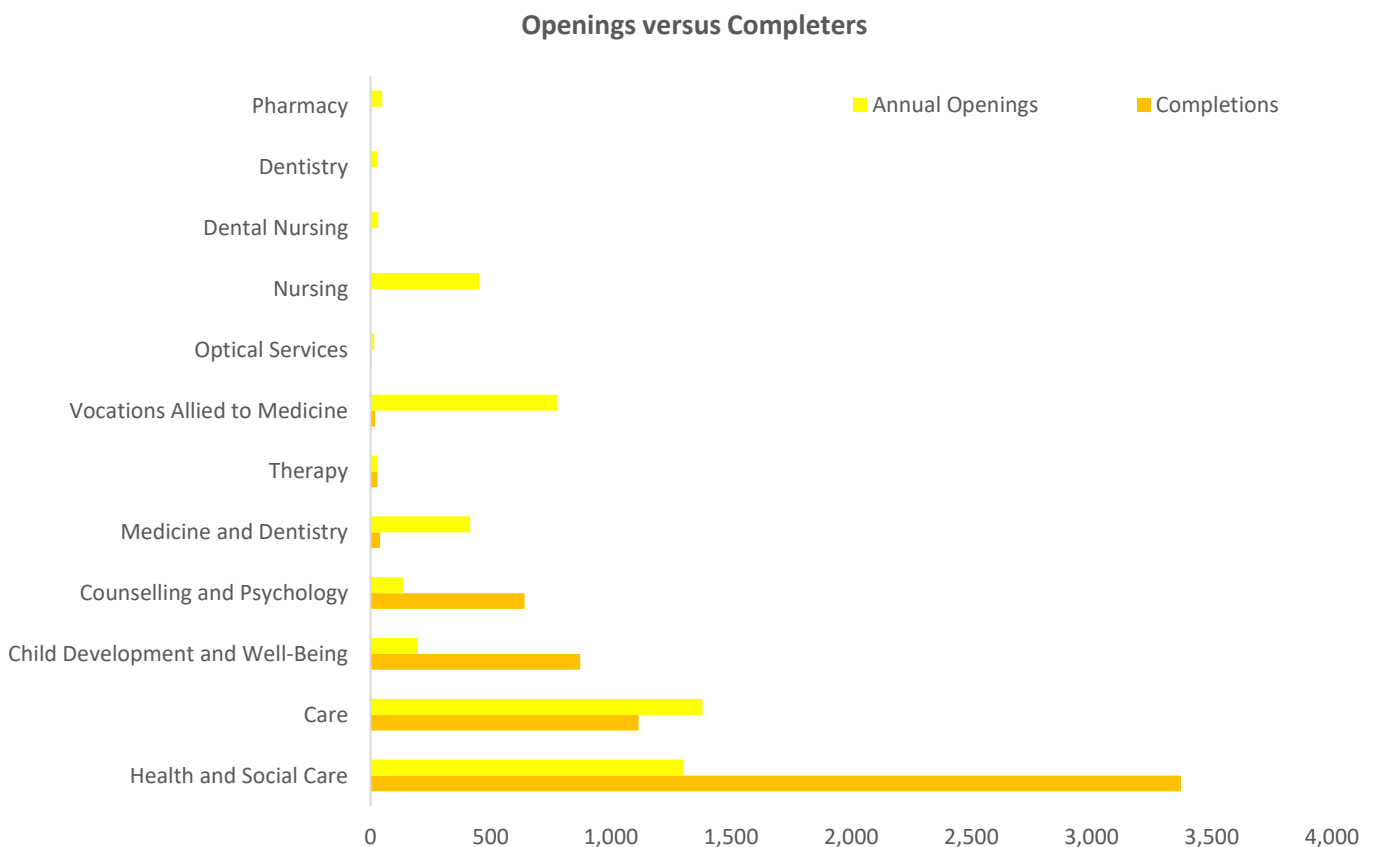
Opportunities (course areas that are currently under supplied compared to demand)

Other opportunity areas include those highlighted in blue with a gap between provision and demand, as these are the disciplines which are sought after but have no provision locally. There is room for courses to be developed in these disciplines to meet local employer needs, e.g. pharmacy, dental nursing and dentistry.

Threats (course areas that are well met or oversupplied compared to industry demand)

Disciplines with too much provision and not enough employer demand will lead to an oversaturated supply of labour in certain disciplines. Graduates from these courses will find it difficult to find employment locally and may have to move out of the area to find work in their field. People skilled in this discipline might have to upskill or retain in other disciplines to find work elsewhere. Courses in this group include those highlighted in yellow, e.g. health and social care, or child development and wellbeing.

The best way to implement change is to prioritise interventions based on biggest misalignments and gaps. Disciplines with a low uptake e.g. those in blue, need extra resources to highlight the opportunities in these occupations. **These strengths, opportunities and threats can be clearly identified in the graph below.**



Source: EMSI Analytics Tool, 2020

4.2. Future Drivers of Skills

Looking forward, according to UKCES future drivers of skills within the Health and Social Care sector will include:

- The sector is likely to be under considerable pressure to change how it provides Health Care and we are likely to see many traditional ways of working eroding. Out of hospital care will be the major change for the workforce over the next five years and more.
- A more 'blended' and multi-skilled workforce with new roles developing to deliver care within and nearer to people's homes.
- Each of the major occupational groups in the sector is likely to experience significant shifts in the skills they need to develop. There will be a renewed focus on skills utilisation in the sector as organisations look at ways to cost effectively deliver services whilst maintaining quality of patient care.
- Professional and clinical occupations, managers and senior officials are likely to be called upon with increased urgency to develop the sector and lead it through a period of prolonged change.
- Generic skills such as team working, communication skills, customer service skills and problem solving will demand constant attention by employers as the sector seeks to provide high quality Healthcare, across wider multidisciplinary teams, in the context of fewer resources.
- There is also evidence that some new skill sets may emerge. These may in time become new roles in their own right, or may extend the skills utilised in existing occupations.
- The need to develop high quality skills at the intermediate level is also likely to become increasingly important for employers as the sector seeks to utilise, more cost effectively, the skills and knowledge and professionals in the sector.
- New technology and digitalisation around telemedicine, artificial intelligence (AI)-enabled medical devices, and blockchain electronic health records are providing the catalyst for innovation in the health and social care sector. Many providers and commissioners are already looking for opportunities to use this new technology to improve services and cope better with the long-term demographic pressures that the system is under.
- *For digital transformation to be successful, the challenge for organisations will be to have the right people with the right skills to utilise the new technology.* This means that all practitioners will need to have access to high quality training and development opportunities so that they can take full advantage of new technologies and are enabled to make appropriate and expert use of these as they come online. This will need to be embedded within existing organisational development plans as part of a whole system approach to digital development and capability.
- Unfortunately, the health and social care sector has lagged behind when it comes to implementing digital strategies. In fact, in a recent survey, only seven percent of health and social care companies said they had gone digital, compared to 15 percent of companies in other industries.

- To improve this imbalance and enable effective digital transformation, the 'Building a Digital Ready Workforce' (BDRW) programme is working to promote digital literacy across the health and social care landscape. The BDRW is a national programme that is part of the Personalised Health and Care 2020 portfolio directed by the National Information Board. The programme is cross organisational and sits between Health Education England and NHS Digital.
- The digital literacy of the whole workforce is one element of BDRW which is also working to develop digital leadership and to support and develop digital specialists in the health and social care workforce.

4.3. Impact of Brexit

Until the final outcome is known, uncertainty remains, but in short, the impact of Brexit on the health and care workforce will depend on future migration policy and the barriers or incentives to live in the UK and work in the NHS and social care that are put forward.

The findings of the recent Marches Growth Hub: Brexit Preparation Report, which surveyed 17 businesses from the Health and Social Care sector reported that only three businesses (17.6%) reported that they import or export with the EU, just six (35.3%) reported that they had considered the impact of Brexit on them, and just seven (41.2%) considered how it may impact their suppliers and customers. Of those who provided additional comments, none raised any major concerns about Brexit.

Skills for Care figures outline that nationally 84% of the adult social care workforce is British. Arrangements for new immigration rules post EU exit will have a critical impact on organisations being able to recruit and retain staff with the necessary skills.

4.4. Impact of Covid-19

Covid-19 is having and will continue to have an impact on all business sectors. Digital technology has helped businesses continue to operate by enabling virtual working and addressing skills issues through online tools and training opportunities where appropriate. Predicting how that might impact on businesses in the future is difficult but methods of doing business will change and in some cases that might alter the requirements on digital technology and change skills and training requirements.

The Covid-19 pandemic has shone a light on the health and social care sector and the vital and varied roles within it. Whether this changes societal perceptions of care work and serves to support the future development of the sector and its workforce remains to be seen.

5. Conclusions

5.1. Summary

The health and social care sector is an important sector of the Marches economy. Employment is growing and is predicted to continue to grow in the coming few years, primarily to meet the demands of an aging population with more complex, numerous and longer-term conditions. This will affect most parts of the sector, require a re-shaping of many services and occupations, and provide recruitment challenges.

In addition to the anticipated growth of the workforce, there will be a need to replace current health and social care staff as they reach retirement or leave the sector and future drivers point to the increasing diversification of sector employers. This is likely to result in more flexibility within traditional roles, the emergence of new roles, increased multi-disciplinary working, and occupations expanding beyond their traditional parameters. A range of technological or digital developments are also likely to have an impact on sector skills needs.

These technological and digital developments are further explored in the Marches LEP Innovative Healthcare Analysis and Research conducted by the University of Birmingham.

5.2. Recommendations

The evidence in this report emphasises the long-term need for the Marches LEP along with key stakeholders and partners to improve the image of health and social care to recruit new entrants – including apprenticeships and improve retention of current employees. This could include developing a flexible workforce able to work comfortably across different health and social care settings for now and in the future. The sector needs to be able to offer staff the opportunity to follow both a health or social care career path providing resilience and growth. Employers from different parts of the sector should also be encouraged to undertake more joint training opportunities particularly around leadership and management, because different occupations face common skills and performance challenges. This may include, exploratory scenario planning looking specifically at the future shape of the sector which could provide a catalyst for employers to develop a consensus about future needs. Alongside this, commissioning teams due to technological and digital advancements need to be engaged and made aware of the future needs to understand the impact of innovation and how this can be supported through procurement.

- Improve the image of the sector
- Support the sector for resilience and growth
- Develop and retain the current workforce through leadership and management
- Innovation: in both new product development, adoption and procurement

5.3. Action Planning

Moving forward the Marches Local Enterprise Partnership (LEP) and its key stakeholders will need to review the recommendations, develop a strategy and agree an action plan to address the challenges and opportunities identified within this report.