Thank you for your letter dated 17th July 2012 seeking information on the steps NHS Greater Glasgow and Clyde (GGC) is taking to provide employment opportunities, including Modern Apprenticeships, to individuals furthest from the employment market, in particular individuals who are experiencing high levels of multiple deprivation, care leavers, looked-after young people and the long-term unemployed.

NHSGGC recognises its responsibility as a major employer in the West of Scotland and is fully committed to supporting young people in the search for employment.

I have attached a recent strategy paper which describes our current activity levels and makes specific recommendations on additional programmes of work. This paper was fully endorsed by the NHSGGC Corporate Management Team in March 2012 and implementation/delivery of the report is underway. The recommendations include:


- The establishment of a new programme of support for vulnerable young people who may have specific barriers to employment and are furthest from labour market. (Looked after and accommodated children, young carers, learning disabilities, mental health). Such programmes will be established in partnership with Local Authorities, Further Education Colleges and the Third Sector.
Access to Work Experience and Training within NHS GGC

Introduction and Context

1. In June 2011 Derek Feeley, Director General, wrote to all Scottish Boards seeking their support to increase work experience and training opportunities for young people aged 16-24 years of age. The Director General asked all boards to describe their current activity in this area and also to provide plans to increase this activity. Preparing the NHS GGC response to this letter highlighted issues with regard to NHSGGC’s employer related employability activity and in particular the activity targeted at young people. This report addresses these issues and makes recommendations on a way forward for NHSGGC. In preparing this report we have consulted widely with Employability Leads throughout the organisation all of whom have contributed to the review of activities and are aware of the final recommendations.

2. The importance of employment in helping to tackle poverty and income inequality is well recognised in NHSGGC and this link is articulated in the policy framework outcomes for 2013. This policy commitment recognises the link between worklessness and ill health which has been evidenced through research and which is set out in NHSGGC’s policy paper on “Employability, Financial Inclusion and Responding to the Recession”.

3. Definition of Employability:

“Enabling people to progress towards employment, get into employment, stay in employment and move on in the workplace”.¹ The focus of this paper is on the first two aspects of this definition.

4. There is also a strong evidence base showing that work is generally good for physical and mental health and well-being. Worklessness is associated with poorer physical and mental health and well-being. Work can be therapeutic and can reverse the adverse health effects of unemployment and is generally good for health and wellbeing.

5. In recent months the focus of attention has been on unemployed young people (16-24) largely as a consequence of the economic and financial climate which has resulted in the highest number of unemployed in this age bracket for 17 years. The total number of unemployed young people sits at approximately 102,000² (24.3%). Of this number 35%³ are engaged in full-time education. The remaining 65,000 fall into two distinct groups. The first group, approximately 20%, have either low levels of qualifications or none at all and many have had disadvantaged

¹ Scottish Government Definition
² Scottish Government Youth Employment Statistics (16-24yrs) Summary Briefing, February 2012
³ Scotland’s Youth Employment Strategy, Scottish Government January 2012
childhoods and or disrupted education. This group requires more tailored, intensive support to facilitate engagement with education and training.

6. The second group, approximately 44,000 individuals, have relatively good academic attainment and employability skills and in a healthier economic climate would be less likely to experience prolonged periods of employment. This latter group are likely to benefit from an approach that supports the transition into employment which includes work experience. The Scottish Government has indicated its interest in the youth employment issue in a number of contexts and has recently appointed a Cabinet Minister with a particular remit for Youth Employment and has also recently published a Scottish Youth Employment Strategy. It has been made clear to the Public Sector and NHS Boards that they will be expected to do all they can to help young unemployed people to gain access to work experience and training and where possible, jobs\(^4\).

7. On 2\(^{nd}\) March 2012, the Chief Executive is attending a Scottish Leaders Forum at which the new Minister for Youth Employment will be leading a discussion on the Public Sector response to this issue.

8. At the time of writing, NHSGGC employs 1269 (1106 wte) in the 16-24 age group. This represents 3.3% of the total workforce. The majority of young employees, 1148 (1028 wte), are within the 20-24 age group with 121 (78 wte) aged 16-20. Approximately 63% of the employees are employed in job roles requiring post school qualification and experience. The actual number of jobs open to young people in the NHS without a substantial period of post school education is limited. At a broad estimate 59 % of the jobs in the NHS require a professional qualification/registration for entry level at CF Band 5/6. Another issue for consideration in the drive to employ young people is the recent abolition of the default retirement age which means that regular turnover on the basis of age retirement can no longer be relied upon to supply vacancies. However, analysis of information collected for induction purposes highlights that there are still vacancies in the system at Bands 1-3 (see table below) which could be available for young people.

---

\(^4\) Smith Report, November 2011
Total Number of Appointments 1/9/11 to 31/1/12

<table>
<thead>
<tr>
<th>Description</th>
<th>Grade Description</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed Term</td>
<td>Band 1</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td>Band 2</td>
<td>109</td>
</tr>
<tr>
<td></td>
<td>Band 3</td>
<td>55</td>
</tr>
<tr>
<td>Fixed Term Total</td>
<td></td>
<td>227</td>
</tr>
<tr>
<td>Permanent</td>
<td>Band 1</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Band 2</td>
<td>128</td>
</tr>
<tr>
<td></td>
<td>Band 3</td>
<td>29</td>
</tr>
<tr>
<td>Permanent Total</td>
<td></td>
<td>167</td>
</tr>
<tr>
<td>Grand Total</td>
<td></td>
<td>394</td>
</tr>
</tbody>
</table>

2. Analysis of Recent/Current Activity

Corporate Framework

9. Although there is a significant amount of activity underway across NHSGGC it is largely locally driven and managed with no clear system wide view of the spread and totality of the activity. The Employability & Health Strategic group supports the Employability, Financial Inclusion and Responding to Recession Policy Framework. However, its current format and membership is not designed to direct and manage a board wide approach to employer related employability issues.

10. The lack of a corporate framework for managing this activity, with the exception of the policy framework mentioned above, means that requests from external agencies to increase or support activity are agreed or refused on the basis of local capacity rather than an assessment of the wider system commitment and/or total spread of activity across NHSGGC. While it is appropriate for local areas to manage this activity in a local context this approach has led to a patchy provision of employability support with some Partnerships or Divisions doing more than others. This is usually due to local “champions” who drive this agenda forward. A range of approaches are taken and there is no measurement of overall Board success in supporting movement into employment.

New South Glasgow Hospital Build

11. Most of the activity has been driven by the New South Glasgow hospital build, and its associated Community Benefits clause (with Brookfield Multiplex), or the organisation’s provision of school work experience placements. The former has
been an extremely positive scheme with significant job outcomes and work experience placements for young people.

12. As part of NHSGGC capital plan for 2011/12, the NHS board set out capital plan budget with indicative allocations for subsequent years up to 2014 which covers the whole organisation. The NSGH project accounts for the majority of the Acute capital spend and has included community benefit targets as part of the project delivery. NHSGGC is a partner in the West Territory Hub Programme Board which has recently appointed WellSpring Partnership Limited to deliver over £200m of public sector infrastructure projects across the partnership territory. NHSGGC has supported the incorporation of community benefit clauses as part of the bidding process and will work with the HUB project and WellSpring partnership to deliver community benefit targets on their respective projects. Benchmarking and targets for this are based on the Construction Skills Client-Based Approach Framework and if applied to all capital projects in 2012-2014 could support the creation of up to 59 new apprenticeship places and sustain approximately 53 existing apprentices. The projects would also be able to provide up to 108 work experience placements. These targets are applicable to construction based training and subject to agreement on a project by project basis.

13. The job and training outcomes attached to capital projects are not managed directly by NHS GGC and in terms of the Employability, Financial Inclusion and Responding to Recession Policy Framework are more closely aligned to our responsibilities as a Local Investor than Employer.

Schools Engagement

14. The schools engagement programmes, and school work experience placements, are core activities which inform important careers related choices for school aged pupils while introducing the world of work. We currently offer approximately 300 school work experience places per year. However, this can have limited impact upon those who choose not to/are unable to progress into higher and further education, or those who are experiencing challenges within the education system and who would benefit from developing basic employability skills. The Independent Learning Project at NSGH is an example of a partnership approach to address this very issue. It should also be noted that much of the school engagement and work experience involves pupils younger than 16 years of age and does not directly link to the request made by Derek Feeley.

Partnership Initiatives

15. The Employment Partnership Programme in the City CHP (North East Sector) is an exemplar of a partnership arrangement between NHS GGC and a college partner (John Wheatley College) which offers young people an opportunity to gain work experience within the community health services while engaging in a formal course of study at the college. The College has provision for engaging those sitting lowest on the employability ladder and therefore furthest from the labour market e.g. using Skills for Work SVQ as a starting point for upskilling and movement towards
longer term employment. While identified by the HMIE Inspectors as leading innovative practice this is not currently replicated in any other area of NHS GGC.

**NHS GGC Pre-Employment Initiatives**

16. While NHS GGC have previously engaged with the More Choices, More Chances strategy and previously designed a successful Get Ready for Work programme for young people, this ended in 2009. There is currently no agreed work experience programme for this age group who are not involved with the school or higher/further education systems. No returns have been made for work experience placements for this group under the Adult Work Experience Policy. This is an area where NHS GGC, in partnership with specialist external agencies, could make a significant contribution relatively quickly.

17. Much of the provision at the top of the employability ladder has not been designed for young people or for those furthest from the labour market with barriers to employment. A significant proportion of population being targeted by the Scottish Government's Youth Strategy fall into the ‘hard to reach’ definition, the group sometimes referred to as NEET (not in education, employment or training). Those with specific barriers to employment require more tailored approaches to support the transition to employment. This includes a range of issues from having low academic attainment, literacy and numeracy problems and no previous work experience to individuals with learning disabilities and care leavers. Although it should be noted that not every unemployed young person falls into this category and there are many who are at a more advanced stage of the career ladder and require less intensive support. The NHS Works programme has supported some young people into NHS GGC jobs but only 10% of participants come from this age-group and the programme is designed to support those closest to the labour market and does not offer intensive support on employability skills. It should be noted that the NHS Works programme is under review and has no further intakes scheduled at this time.

18. Pre-employment training initiatives such NHS Works have been very successful in previous years but the current economic climate and workforce environment have resulted in a significant decrease in the number of job vacancies available for pre-employment training schemes. As a result, 50% of NHS Works trainees successful in gaining employment have taken up non-NHS GGC posts. While the programme was originally designed to recruit NHS staff any job outcome supported by NHS GGC pre-employment training is deemed to be a positive outcome and demonstrative of the Boards commitment to the agenda. This highlights the important role that NHS GGC based training and work experience, delivered in partnership with local employability agencies, can play in securing employment with other employers at a time when our vacancies are constrained.

**Modern Apprenticeships**

19. The 2009 NHS GGC Modern Apprenticeship intake has been very successful in recruiting and retaining young members of staff. Since December 2009, 10 apprentices have completed a Level 2 Business & Administration programme in Health Records and are now employed in substantive posts while another three
apprentices are in the final stages of a Level 3 Life Sciences programme within Diagnostics. These programmes were tailored for those with relatively high academic attainment and an ability to make an easy transition into the workplace. The Scottish Government have committed to a record number of 25,000 modern apprenticeship places in each year of the current administration and at the recent National Economic Forum highlighted the crucial role of work experience and modern apprenticeships in tackling youth unemployment.

20. The current MA Programme in NHSGGC was developed by creating MA posts from existing vacancies in the establishment. In the current financial climate this is likely to be the most realistic way of funding a MA Programme as ring fenced funds for supernumerary MA posts are very unlikely to be available. This approach may give additional challenges to staff side. The other disadvantage of identifying current vacancies for MA posts is that we are constrained by their availability in establishing and planning a coherent MA Programme. This is not insurmountable but it adds complexity to the management and administration of the programme. The additional costs of training the MA’s are re-imbursed by Skills Development Scotland (SDS) as part of the national MA support package.

Volunteering

21. Volunteering opportunities within NHS GGC have been seen in the past, and are seen presently by external agencies, as an opportunity to provide work experience for the unemployed. NHS GGC does receive a significant number of requests from young people who want to gain NHS work experience for use in university applications and plans are in place to divert such requests through the Learning & Education team and to liaise with higher/further education establishments. While volunteering can support individuals to engage in positive activity on the employability pathway, volunteering within the NHS is designed to improve patient experience and support the organisation in meeting its ambitions under the Quality Strategy. This requires a longer term commitment to the voluntary role and focusing on supporting services to patients. Volunteering is not a short-term fix for those looking to develop skills and knowledge primarily for employment purposes. However, recognising that young people do come through the volunteering pathway seeking work experience we will develop a system for filtering these individuals and providing more appropriate support.

Internships

22. In addition to all of the above activity NHS GGC provides clinical placements for students from local higher education and further education establishments to support achievement of professional qualifications. We are also providing work experience to newly qualified nursing graduates through our intern programme and have appointed 200 to date with another intake scheduled in Spring 2012.

Mental Health and Employability Services

23. Employability has been a core activity of The Mental Health Partnership (MHP) for several years and NHS Greater Glasgow and Clyde and Glasgow City
Council Social Work Services fund a range of mental health and employability services. The main aim of the funded services is to promote recovery and increase access to employability opportunities including paid employment for people with mental health issues through collaborative working with a range of voluntary and statutory organisations. From 2009 to 2011 there has been a steady increase in the number of people who have been referred to the services for a range of employability support. See table below.

<table>
<thead>
<tr>
<th>Year Referred</th>
<th>No of People Referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>71</td>
</tr>
<tr>
<td>2010</td>
<td>107</td>
</tr>
<tr>
<td>2011</td>
<td>120</td>
</tr>
</tbody>
</table>

Conclusions

24. In collating the response to Derek Feeley, and in preparing this paper, it is evident that there is a wide range of valuable activity within NHS GGC which supports young people towards employment ranging from capacity building to transition into NHS GGC jobs. However if the activity delivered by our external contractor Brookfield Multiplex and the school work experience placements is extracted the number of opportunities that NHS GGC offers is relatively small. Of the 530 opportunities only 115 are NHS GGC employer led.

25. In this time of economic and financial difficulty in the economy as a whole, and subsequently the public sector, there is a significant risk that young people will be particularly disadvantaged in securing employment. As a major employer in the west of Scotland NHS GGC has made a policy commitment to employability and will be expected to support the Scottish Government Youth Strategy with an effective package of support for unemployed young people.

26. The challenges and barriers which exist in taking this work forward cannot be underestimated and a successful programme of work will require CMT strategic support, a delivery plan from services setting out costed plans and targets, a governance framework for agreeing and managing this activity and a mechanism for securing engagement from operational managers.

27. In considering the resource implications of this work NHS GGC should be aware of the many external partners who are willing and able to support this work with expertise in this particular area and possibly financial resources (Glasgow Regeneration Agency, Skills Development Scotland, local colleges, Local Authorities and Scottish Government).
28. Within NHS GGC there is considerable knowledge and expertise in employability generally and in working with specific groups (vulnerable young people, Modern Apprenticeships). This knowledge is spread throughout the service and will be available to Employability Leads in developing local plans.

29. While the likelihood is that all NHS Boards will be encouraged to support schemes which lead directly to job outcomes it is important to recognise the full range of current activity in this area. A conceptual view of all the activity linked to supporting young people towards and into employment is provided in the Recent/Current Activity section of the diagram attached as Appendix 1 labelled ‘The Employability Ladder’.

30. During consultation around this paper there was clear recognition of the points set out above and a sense that more will be required of a major employer such as NHSGGC in the future given the worsening youth unemployment figures and Scottish Government’s desire to include large and public sector employers in their Youth Employment Strategy.

Recommendations

31. The CMT is asked to approve the following:

All areas of the service should be asked to review their employer related employability activities and workforce planning projections and provide a proposal to increase their contribution in each area of the employability ladder with a particular focus on activities which lead to employment. Compliance and delivery would be monitored by the Employability and Health Strategic Group on behalf of the CMT. Options for achieving this increase are outlined in Appendix 1.

32. Included in these proposals all services should specifically bring forward proposals to establish Modern Apprenticeship Schemes with a target figure of 50 new MA’s in NHSGGC to be established in 2012/13. This could be distributed proportionately across services according to employee headcount (Acute, City & Non City Partnerships, Corporate).

33. Each service (Acute, Partnerships & Corporate) should include proposals for supporting pre-employment training and work experience programmes (Work Tasters, Training for Work, Get Ready for Work programmes) to support young people into jobs with other employers. This should link with partner agencies and further education colleges where expertise exists in supporting the target group and delivering the skills required. This may or may or may not make use of external funding streams e.g. Skills Development Scotland National Training Programmes. Where NHS vacancies do exist programmes should be tailored to these.

34. Each service should bring forward a proposal to establish a programme of support for vulnerable young people who may have specific barriers to employment and furthest from labour market. (Looked after and accommodated children, young carers, learning disabilities, mental health). Such programmes could be established
in partnership with Local Authorities, Further Education Colleges and the Third Sector.

35. All NHSGGC capital projects and NHSGGC procurement should be required to apply community benefit clauses to all NHSGGC procurement activity on a project by project basis. Compliance and delivery to be monitored by the EHSG reporting to the appropriate board governance structure.

36. The Employability Health and Strategic Group (EHSG) should act as the strategic lead for all NHSGGC employability activity, including monitoring and reporting on delivering work experience, training opportunities and transition into employment for unemployed 16-24 year olds and should revise its membership and remit to this effect.

Bibliography

1. “Lost sheep”
3. NHSGGC Financial Inclusion and Recession Paper
4. Scotland’s Youth Employment Strategy Consultation Document