A SKILLS PASSPORT FOR HEALTH AND WELL-BEING?

Report of a consultation event for stakeholders

Organised by:
The London Teaching Public Health Network

Hosted by:
Skills for Health (London Region)

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1 Executive summary

• This is a report of a consultation meeting of key stakeholders from public and third sector organisations to consider the level of support for the development of a skills passport in health and well-being to be developed and piloted in third sector organisations.

• This work is part of an initial consultation study being carried out by the London Teaching Public Health Network with support from Skills for Health (London)

• It is well recognised that the Third Sector already makes a major contribution to the public health agenda, improving and protecting health and well-being through their work with marginalised and hard to reach groups. They want to do more. Opportunities for the sector to engage more are available through new commissioning arrangements and the 2012 Olympic programme.

• The Third Sector is complex and diverse with many organisations being too small to offer much opportunity for career structure and progression. Training is often carried out in-house, informally or through non-accredited routes and much is not recognised or given appropriate value outside of the sector.

• A Skills passport might offer a solution. This is a web based tool to support individual and workforce professional development.

• Initial research and consultation took place over the past eight weeks to establish the vocational area uptake and use of skills passports as a model of individual professional and workforce development, including identifying structure, function and popularity. This was used to develop an information leaflet on skills passports and their potential within the ‘public health’ sectors.

• Further initial one-to-one interviews with stakeholders took place prior to the consultation meeting about this proposed development. Though numbers are small, (19 in total) most people supported this development, though they identified key issues and potential barriers including security, funding, interoperability, motivation and impartiality of verification.

• The consultation meeting attracted more than 70 delegates with strong representation from the Third and Public Sectors in London and other English regions. Workshops with delegates were held to assess the level of support for this development and any further issues or concerns as well as ideas for next steps.

• In principle, most stakeholders supported the development of a skills passport. They felt that it would aid the professional development of individuals working in health improvement in the sector and would give recognition and value to much of their informal training and experience. It was also recognised as a useful tool for workforce planning and development. Difficulties were discussed, including the difference in culture of the Voluntary and Community Sector (VCS) and its readiness to adopt a competency framework approach to professional development. There were also issues around funding and support.
• It was agreed that next steps should include more discussions with the third sector on key issues identified at the meeting. This included:

  o conversations with the sector on the usage and value of a competency based approach to training and development;
  o further clarifying issues around data protection and funding;
  o work with the Public Health Resource Unit to tailor the Public Health Skills and Career Framework for third sector use
  o Agree the most suitable model of passport to develop as a pilot.

• Discussion should also take place directly with PCT and LA commissioners on the value and usage of skills passports in identifying skills needs and gaps and how this might be used in tendering for public service contracts.

• It was also agreed that the skills passport should be piloted with a number of small third sector organisations from different settings (e.g. rural and urban). The pilots would likely form part of a larger feasibility study where key issues identified could be further researched and tested.

2 Introduction

The London Teaching Public Health Network, supported by Skills for Health, London, organised an event to consult with key stakeholders on the level of support for the model of a skills passport for health and well-being as a potential tool for workforce planning and career development for the third sector.

‘The third sector comprises a range of non governmental organisations that work to deliver social benefit in a variety of capacities including charities, voluntary and community groups and social enterprises’1

More than seventy delegates attended from London and other regions with a strong representation from Third and Public Sector organisations. The meeting considered how skills passports were being used in other vocational sectors and how they might work in public health. Presentations included information about the workforce development agenda in health, including the recent development and use of the Public Health Skills and Career Framework. Delegates also heard how skills passports were being used in a charity and with volunteers as well as in the Care and IT Sectors. Workshops were organised with delegates to discuss the level of support, key issues and suggested next steps.

3 Background

Improving and protecting health is a key policy objective, with government recommending the public, private and voluntary sectors work together and adopt a ‘public health mindset’, one which promotes and protects health and reduces health inequalities2. This can only be done if the workforce has the appropriate knowledge, skills and development. A number of organisations, agencies and individuals are involved in developing strategies to achieve these aims and the public health workforce continues to evolve. The Third Sector is recognised as making a significant contribution to improving the public’s health and well-being and is an important member of this wider public health workforce. There now exist opportunities for the sector to participate more fully through the new public service commissioning arrangements and the

1 Quotation taken from Looking After Leaders, the Henley Management College, 2008
2012 London Olympic agenda. However the sector varies in resources and organisational infrastructure to support skills and career development, including those specific to health improvement. The Third Sector is also complex and diverse with many organisations providing services through short term contracts or grants, thereby affording little opportunity for career structure or progression. Training is very often carried out in-house, informally or through non-accredited routes and much of this is not recognised or given appropriate value outside of the sector. Though we know something about generic sector skills needs and gaps, we have little information about the workforce’s ‘public’ health skills. Added to this few organisations tender appropriately for workforce development in their budgets. A skills passport might be a possible solution.

3.1 What is a skills passport?

A Skills Passport is a record of all a person’s training, education and experience kept on a website. Though a relatively recent concept, they are becoming increasingly established in vocational areas, particularly the building and construction industries, hospitality and catering, retail, active leisure and learning, IT and, most recently, care. Consultations are now taking place about their use for youth and community work. There are, to date, no such schemes in health. They offer a structure and mechanism for personal career and workforce development which can be incorporated into a variety of organisations and be owned by the individual. There are various models, two of which were presented at this meeting. A Skills Passport in health and well-being would include qualifications, training and experience relating to promoting and protecting health and well-being. It would be endorsed by those who have experience in skills development in health, including employers, educators and trainers.

3.2 The London Teaching Public Health Network

The London Teaching Public Health Network is one of nine regional public health networks established by the Department of Health, England to:

- enhance the knowledge of everyone who can improve public health through the sphere and influence of their work
- create health promoting universities and colleges.

We partner with academic and public sector (health and government) and third sector organisations to help create a ‘public health mindset’ within the wider workforce. We are the national lead for engaging the third sector. Our Third Sector Working Group’s objective is to promote and support the development of public health skills in the third sector and we are currently engaged in a project to determine what are the ‘public health’ skills and needs for this sector. This consultation emerged from this work.

3.3 Skills for Health

Skills for Health is the licensed Sector Skills Council for the Health Sector in the UK covering NHS, independent and voluntary sector. Its purpose is to help the whole sector develop solutions that deliver a skilled and flexible workforce to improve health and healthcare.
4 Initial research and consultation

4.1 Collecting data
Prior to holding the consultation meeting with key stakeholders, the London Teaching Public Health Network (LTPHN) obtained information on other skills passports and their potential value for the health /third sector, from a range of people and organisations.

Information on models of skills passports were obtained through:
- Researching models of skills passport via the internet
- Emailing key contacts in the sector
- Interviews (telephone and face-to-face) with organisations developing and hosting skills passports in other sectors
- Discussions at meetings of the LTPHN (Third Sector Working Group and Steering Group)

This formed the basis of an information leaflet of Frequently Asked Questions on a Skills Passport in Public Health.

4.2 Preliminary interviews with stakeholders

4.2.1 Methods
Information was further gathered by interviewing stakeholders. Volunteers for this research were obtained through the LTPHN’s wide network of Third Sector, Public Sector and Academic/research organisations in London. In total, 19 volunteers agreed to be interviewed comprising 12 Third Sector (managers and front-line workers), 6 academic and 2 from the public health sector.

Interviewees were given a copy of the FAQ leaflet on skills passports. Questions were asked about their prior and current knowledge and understanding of skills passports, how useful they thought they could be for people working in health, whether they felt they would be useful to themselves and their organisation and whether they thought there might be issues or barriers to their development.

4.2.2 Results
In general, most people found the concept of a skills passport in public health potentially useful for themselves and their organisation. One person said that this was long overdue. This was particularly so for those working in the third sector. Issues, or possible barriers to development, were identified.

Good points
- A useful tool to promote culture of training and development in health work outside NHS
- A practical way to help construct a CV, to organise one’s professional development
- Could help to ensure standardised, transferable training
- Could help to drive up standards in health promotion/protection
- To help verify qualifications and training (particularly informal)
- Would give value to informal training – missing in the Third Sector
- Good for people moving from sector to sector. Could provide a much needed link between those working in health in public and third sector.
- Could act as a motivator to gather qualifications
- Would be useful for volunteers too – people wanting to gain access to ph practice through non-traditional routes.
Possible barriers

- Usage and security
- Motivation in an unregulated sector – good PR needed to get everyone to see the relevance
- Large NGO’s may not find it as useful as smaller ones
- Verification: Would this be impartial? Might be used as some form of inspection? Could be a challenge for informal ‘on the job’ training.

Other Issues

- System interoperability (software and accreditation)
- Use of the term ‘public health’ in the sector (not common)
- IT use in sector variable, some having poor access and skills
- The value of ‘qualifications’ over skills
- New concept
- Funding the process

The information received from these interviews helped further refine the leaflet on Frequently Asked Questions (which was retitled ‘A skills passport in health and well-being’) and set the agenda for the consultation meeting with stakeholders.

5 Presentations

Dr Fiona Sim, Co-ordinator of the London Teaching Public Health Network, chaired the morning session and welcomed speakers and delegates, outlining the purpose and structure of the day.

5.1 Department of Health

Dr Marilena Korkodilos, consultant in public health medicine at the Department of Health presented the DH’s perspective on the wider ‘public health’ workforce and the role of the third sector in this agenda, stressing that measures to improve well-being (a large part of the work of the third sector and others in the wider workforce), are likely to improve health. She spoke about how working together can contribute to health improvement and the need to develop the right people with the right skills at all levels in this, including those working as leaders in their organisations. An integrated and inclusive whole system approach is needed with health and other professionals understanding each other’s perspectives. The DH is supporting the work of the national Teaching Public Health Networks and the Public Health Resource Unit in this aim.

5.2 YMCA Central

Mark Harrod, Director of Policy and Public Affairs at Central YMCA spoke about the work of Central YMCA in health with its mission of changing health attitudes and behaviour through advocacy, education, provision of services and direct delivery. He told of how they have recently incorporated a Skills Passport in his organisation as a way to increase professionalism and raise standards in the sector. He saw the passport as a useful tool to support professional development and workforce planning. It helps skills gaps analyses for individuals and teams, identifies qualifications and training needs, recognises CPD and helps in finding potential funding. He also spoke of the issues, such as the need of a ‘buy in’ from individuals and organisations and of personalised support needs for some of the workforce.
5.3  **Skills for Health**

Kathy Tyler, the London regional director for Skills for Health, talked about the work that Skills for Health, the national Sector Skills Council for Health, is doing to support the health sector’s workforce development. She described the national role and function of this organisation its regional focus and strategy, including cross sector working to support the Third Sector. She presented some of the key labour market intelligence on the skill needs of the Third Sector and how this relates to developing a national and regional Sector Skills Agreement for health.

5.4  **Public Health Resource Unit**

Cindy Carlson presented information about the recently published Public Health Skills and Career Framework, developed by the Public Health Resource Unit and Skills for Health in consultation with the public health workforce. The framework defines the core and defined competencies for public health for not only specialists and public health practitioners, but for the wider workforce who might have public health as only part of their role. She described the rationale for its development, who the framework is for and how it can be used by organisations and individuals. It is currently being piloted as a competency assessment tool across the country with a variety of wider workforce groups including health trainers. This will identify who contributes to ‘public health’ and what their development needs might be.

The framework will provide the core and defined competencies of any potential skills passport for public health/health and well-being across all levels of practice, from entry to specialist.

5.5  **Purple Passports**

Mark Callahan, CEO of Purple Passports, presented his organisation’s model of passports which is currently being used by a number of sectors, including retail, transport and the active leisure and learning industry. The passport is developed by the sector but is owned by the individual and can function by whatever the sector wants or agrees or needs e.g. as a licence to practice, a record of a single achievement or all achievements set at all levels or one level – it can be whatever is best for the employee/employer. He explained its current use: as a tool to foster personal development and manage CPD, as a measure of skills levels; to encourage workforce development; to motivate workers; to aid transparency of skills and to avoid unnecessary training. Purple passports use a system of third party verification within its passports, to verify formal and informal training and development.

5.6  **E-Skills UK and Skills for Care**

Martin Harvey, from E-Skills UK presented the passport model developed and used for the IT and Telecoms sector. E-Skills UK is the Sector Skills Council for the IT and Telecoms sector. The passport is well established in this sector and is now in use in over 900 organisations. It offers organisation and individual access and is linked to awarding bodies and the Learning Achievement Review. It is used for the assessment of skills, to add qualifications, view skills targets and plan learning. They have recently adapted their technology for use in the care industry and are supporting the pilot development. Anne Hartnell, from Skills for Care, presented testimonies for the care sector on how it is now proving a useful tool for workforce planning and development.

5.7  **The London Teaching Public Health Network**

Lorraine Williams, from the London Teaching Public Health Network, presented some initial background research of stakeholders’ responses to the potential development a skills passport for health and well-being. This is summarised in section 4.2.
6 Summary of Workshops
Delegates attended two 45 minute afternoon facilitated workshops. These were organised to discuss the level of support for a skills passport in health and well-being within and across sectors. Delegates were asked whether they supported the development of a skills passport, what they felt were the good points for their sector, any particular issues and what they felt should happen next.

6.1 General support for a skills passport in health and well-being
From the outcome of the workshops and evaluation sheets received after the meeting, there was, on the whole, a majority of support for this development, though there were a number of issues raised and points for clarification, both positive and negative.

6.2 Key issues raised
The feedback has been organised into three themes: professional/occupational; organisational and general.

6.2.1 Professional / occupational
Good points
- Captures and gives value to informal and on the job training – this is often missing from the Third Sector
- Seen as an enabler for jobs and careers in health – giving personal development opportunities for staff/volunteers
- Could help drive up standards in the sector
- Could create working links to other sectors (public/voluntary/private)
- Strategically, would provide opportunity to remodel and give more influence to the socio-ecological model of health

Possible challenges or barriers
- How to ensure standards of work – particularly if internally verified
- The Public Health Skills and Career Framework was seen by some as a barrier in itself:
  - The Voluntary and Community Sector (VCS) not generally driven by competencies
  - The framework is not owned by VCS
  - The framework presents a medical model with little content on determinants of health (where much of the Third Sector Work is concentrated)

6.2.2 Organisational
Good points
- Workforce development - could help organisations to identify and focus on the competences they really need for the services they want to deliver
- Recruitment - Could equip organisations to make appropriate appointments
- Tendering - Could help organisations suitably tender for public service contracts
- Training provider links - Could involve links to local learning and training providers ‘signed up to the passport’ creating a culture of learning and training in health and well-being in sector.

Possible challenges or barriers
- Culture of some of the VCS may not be suitable: low investment in skills development, some have no protected learning time, some may see as irrelevant.
- Access could be an issue:
  - Urban / rural differences – may be more difficult to implement in a rural environment.
  - Access to IT – particularly in rural areas
  - Language could be a barrier
- Cost to the organisation (in terms of time commitment, resources: human and equipment) is unknown. Many organisations are resource poor and may not have capacity to support this
development. Cost to the public sector organisation was also highlighted as some thought that PCT’s and LA’s might be involved in assessing and verifying passports.

- **Commissioning and performance management.** It is important that commissioners from PCT’s and LA’s recognise and value this development and would allow full cost recovery for any workforce development required in budgets.

- **Transferability.** The passport would need to link with the sector’s generic and specialist competencies (fundraising, management) as well as other internal HR and organisational development systems in larger organisations. It will also need to link with national (and regional) qualifications and accreditation systems as well as with other Sector’s development software (such as students on line CV’s in HE).

### 6.2.3 General

**Good points**

- *Skills passports are proven in other sectors*, including occupational areas which link heavily to health and well-being, such as care and active leisure and learning.

- *There is the potential for cross-sectoral recognition* (public/private/third). Passports in health and well-being could be used by a *wide variety of the workforce in all sectors* (e.g. classroom assistants, housing officers, police officers, youth workers, hairdressers etc.).

- *Opportunities for development.* Some saw the potential for developing a passport with groups they were currently working with, such as health trainers or volunteers – and wanted to be involved in co-ordinating this development in some way.

**Possible challenges/barriers**

- *Could possibly fragment sector* (those who have skills passports vs. those who don’t – may put off some staff and volunteers from joining)

- *Diversity* of the sector could mean that only those with appropriate resources to support development will likely take up a skills passport – creating a possible *inequalities’ gap*

- *Security and data protection* was flagged by many as a key issue – how this might be used by organisations and other individuals.

- Need to be clear about whether this is *for individual or organisational development (or both?)*

### 7 Next Steps

Verbal and written feedback on ideas for next steps are summarised below.

#### 7.1 Further Research

It was generally accepted from discussions on the day and written feedback given that there would need to be further research and discussions on specific issues arising from this initial consultation. These are:

- Discussions with VCS on how competency frameworks are used and implemented
- Translate and tailor Public Health Skills and Career framework for VCS
- To clarify issues around safeguards for identity theft
- To discuss potential usage with commissioners (PCT/LA)
- Discussion and agreement on which passport model would be the most appropriate to develop for the sector.
- Funding the process – how this could be managed (including potential /projected costs to organisations for development and support prior to any piloting)
7.2 **Pilot development**

Once further discussion have taken place to clarify points or issues the next step would be to plan an in-depth feasibility study with selected pilots to test out some of the key issues and to identify any further problems or barriers for the sector. This would involve, in the first instance, development of the skills passport tool.

- Develop a skills passport tool/model which can be piloted with the sector.
- Pilot development with small organisations in different settings (e.g. urban/rural) to identify:
  - How this works in practice
  - Issues of supervision, data entry, IT training and other key issues for testing
  - Potential costs in terms of time and resources
  - The usefulness to the organisation and individual for workforce planning, professional development etc.
  - To identify any further issues or barriers

A robust research model should be designed which will evaluate outcomes against specific criteria. Funding will need to be obtained for further research and pilot.

8 **Acknowledgements**

I am grateful to everyone who made a contribution to this event and would like express my thanks to those who helped in the initial research; to the speakers for their expert contributions on the day; and to all the delegates attending the workshops. Sincere thanks also to all who helped in the research, planning and organisation of this event, in particular Jenny Griffiths, Richard Shircore, Digby Ingle, Heather Davison, Margaret Simons, Kathy Tyler and Fiona Sim.

9 **Appendix: Profile of speakers**

**Dr Fiona Sim, Coordinator, the London Teaching Public Health Network**

Fiona is currently Coordinator of the London Teaching Public Health Network, hosted by the London School of Hygiene and Tropical Medicine, and a part-time inner city GP in Luton.

After graduating in medicine from UCL, Fiona trained as a GP and then as a Public health specialist. She has held senior posts in public health, NHS management and in medical education in London, including director of public health, Trust medical director, and associate dean of postgraduate medical education. Fiona has worked for many years to further the development of multidisciplinary and intersectoral public health. While Head of Public Health Development at the Department of Health, Fiona was able to drive the development of multidisciplinary public health, including the establishment of the Public Health Register. In London, she was responsible for research to identify the diverse public health workforce, set up the UK’s first public health leadership programme, and its first multidisciplinary integrated public health specialist training programme.

Other current professional interests include: joint editor-in-chief of the international journal *Public Health*; hon. senior clinical lecturer, UCL; member, NICE Education Advisory Group; Board member, UK Public Health Register; Board member, Faculty of Public Health; vice-chair, Royal Institute of Public Health; General Medical Council QA Visitor and Fitness to Practise panel member.

**Dr Marilena Korkodilos, Consultant in Public Health Medicine: Public Health Workforce and Capacity, Department of Health**
Marilena is a Consultant in Public Health Medicine. She qualified in medicine from University College London Medical School in 1994. After registration, she worked in paediatrics and subsequently the Confidential Enquiry into Stillbirth and Deaths in Infancy. Marilena joined the Eastern Deanery Public Health Training Scheme in 2002. In 2005, she was seconded to the Health Inequalities Unit at the Department of Health. She was responsible for the cross government Review of the Health Inequalities Infant Mortality PSA Target, which was published in February 2007 and subsequent Implementation Plan, which was published in December 2007. In December 2007, Marilena joined the Public Health Workforce and Capacity Unit at the Department of Health.

Mark Harrod, Director of Policy and Public Affairs, Central YMCA
Mark has recently taken up the role as Central YMCA’s first Director of Policy and Public Affairs having worked for the charity since 1999, most recently managing and developing its work across central London as Executive Director, Health & Community. While focusing primarily within London, the charity also operates both nationally and, increasingly, internationally through its operations. These include YMCAfit, a leading provider of vocational training within the fitness and health industries; CYQ, a qualifications awarding body operating exclusively within the fitness and health field; Y Touring theatre company, which uses the Theatre of Debate approach to explore key health-related issues with young people; and Central YMCA Club and One KX, Activity for Health centres based off Tottenham Court Road and in Kings’ Cross respectively.

The Policy and Public Affairs role aims to facilitate and support change in health attitudes and behaviour by impacting on policy and practice locally, regionally and nationally. As part of this role, Mark is currently Chair of ProActive Camden and of the Borough’s Voluntary Sector Health Forum; Vice-Chair for Camden Public Health Partnership; Vice-Chair of ProActive Central London; lead partner on the London Fitness Network’s Inclusion initiative; physical activity lead partner for the Well London Alliance; member of NHS London’s Physical Activity Strategy Group; and lead for the YMCA’s 2012 strategy. Mark has been working in the fields of health-related activity and informal education in and around London for the past 18 years.

Kathy Tyler, Regional Director – London, Skills For Health
"My career to-date includes policy development and implementation, workforce and organizational development in both health and education. I have worked at national, regional and local levels for example on continuing professional development and I have a particular interest in supporting individuals and organizations to achieve their full potential."

Cindy Carlson, Consultant, Public Health Resource Unit
Cindy Carlson is a public health and institutional development specialist. Over the last 26 years she was worked on developing and managing a variety of public health programmes in Africa and in the UK, set up and managed an MSc in Public Health at Oxford Brookes University, and has contributed to the development of public health competences and supported public health skills development as part of the Public Health Resource Unit in Oxford over several years. She now divides her time between working on making the Public Health Skills and Career Framework a living, useable tool and working on international health policy.

Mark Callahan, Director, PurplePassports
"Following a career in facilities management I founded Innovise Software Plc in 1994. Innovise grew to become a world leader in human capital management solutions. I formed PurplePassport in 2004 which now provides skills passport to 14 industry sectors employing over 10 million people and more than 1 million employers. PurplePassport has recently been acquired by iProfile. My main ambition is to get my work/life balance right! Still trying!"

Martin Harvey, Director UK Partnerships, E-Skills UK
Martin Harvey is Director of UK Partnerships at e-skills UK and leads the employer engagement, stakeholder relations and nation’s team. Prior to e-skills Martin was with IBM, Chase Manhattan Bank and NatWest Bank. At IBM he was Vice President of Corporate Communications Europe, Middle East and Africa, based in Paris.

Anne Hartnell, Head of Brokerage – SE Region, Skills for Care
Working in consultation with carers, employers and service users, Skills for Care aims to modernise adult social care in England, by ensuring qualifications and standards continually adapt to meet the changing needs of people who use care services.

We do this by:
- Developing national standards and a qualification framework for our sector
- Collecting skills data and researching issues affecting carers and people who use care services
- Creating a national workforce development strategy for all sectors
- Building employer-led regional support networks to liaise with health, local government and education at local, regional and national level.

With her successful track record in developing learning cultures in businesses, particularly with SMEs, Anne Hartnell has led the delivery of a £2.5m business support service for adult care providers across the South East region for Skills for Care. By using Care Skills Passport as the vehicle to drive an adragogic approach as well as providing an effective HR Development tool, the project’s evaluation shows a legacy of sustainable good practice in the commissioning, the management and the integration of learning into care service delivery.

Lorraine Williams, Lead: third sector engagement, the London Teaching Public Health Network
Lorraine is a qualified midwife and a teacher in health studies with a background in professional and workforce development. She has recently joined the London Teaching Public Health Network and is currently working on a project on the public health skills of the Third Sector workforce in London.