

[www.pcet.org.uk](http://www.pcet.org.uk)





# Shaping the Future for Primary Care Education & Training Project

Education and Training Needs Analysis  
(ETNA) Toolkit:

A resource kit and users' guide



Authors: Robert Nettleton  
The University of Bolton

Valerie Stead  
Lancaster University

Vol: 4  
**2006**

Funded by the NorthWest  
Development Agency



# Contents

Page

<b>Part 1: Introduction to the ETNA Toolkit</b>	<b>4</b>
1 Introduction to the Education and Training Needs Analysis Toolkit	4
2 How to use this ETNA Toolkit	4
3 What is the purpose of the Toolkit?	4
4 What is Integrated Health and Social Care?	4
5 How has the ETNA Toolkit been developed?	5
6 Why undertake Education and Training Needs Analysis?	5
7 Who is the Education and Training Needs Analysis for?	6
8 What 'needs' are identified by the ETNA Toolkit?	6
<b>Part 2: Using the ETNA Toolkit</b>	<b>7</b>
1 The ETNA Toolkit process	7
2 Working with the ETNA Toolkit	7
2.1 Preparation and Planning	7
2.2 Delivery	8
2.3 Follow-up	9
3 The ETNA Toolkit activities	10
3.1 Introduction Activity	10
3.2 Visioning Activity	11
3.3 Knowledge and Skills Activity	12
3.4 Action Planning Activity	15
<b>Appendices</b>	<b>18</b>
Appendix 1 Dimensions of the Knowledge and Skills Framework (KSF) likely to be of relevance to the Education and Training Needs Analysis	18
Appendix 2 Sample ETNA programme outlines	19
Appendix 3 References and Resources	21
Appendix 4 Further Resources to Support Education and Training Needs Analysis	22
Appendix 5 Reference Group and Pilot Sites	25

## Acknowledgements

We would like to thank the reference group and pilot sites that helped us to develop this ETNA Toolkit and this includes representations from Primary Care Trusts, hospital trusts and social services across the North West. A list of organisations represented by reference group members and pilot sites is available in Appendix 4.

Also our thanks to Lidia Koloczek who has assisted throughout the development of this Toolkit.

# Part 1:

## Introduction to the ETNA Toolkit

### 1 Introduction to the Education and Training Needs Analysis Toolkit

Welcome to the Education and Training Needs Analysis (ETNA) Toolkit that has been developed as part of an inter university collaboration in the North West of England entitled the 'Shaping the Future for Primary Care Education and Training' project. The tool has been developed by the University of Bolton and Lancaster University in collaboration with key stakeholders including representatives from Primary Care Trusts and Social Services across the North West.

### 2 How to use this ETNA Toolkit

This Toolkit is divided into two parts. Part 1 introduces the ETNA Toolkit and provides the background and context to its development. Part 2 focuses on using the ETNA Toolkit. It introduces the activities that make up the ETNA Toolkit and provides examples for use. The appendices provide:

- Sample outline programmes that you may wish to use as templates or for reference in developing your own education and training needs analysis events;
- A glossary of terms;
- References used in the ETNA Toolkit and a list of resources that you can access;
- A list of organisations whose representatives helped with the development of the Toolkit.

### 3 What is the purpose of the ETNA Toolkit?

The purpose of the ETNA Toolkit is to assist agencies in identifying the education and training needs of participants in integrated service delivery environments. The integration of health and social care within the communities served by Primary Care Trusts (PCTs) is integral to the wider goal of aiding health and social care staff to work together with service users and carers.

### 4 What is Integrated Health and Social Care?

Joint working, partnerships and collaboration are terms frequently used within policy documents to imply integration. However, it is not often that the term 'integrated health and social care' is adequately defined. In terms of the cross university research project 'Shaping the Future for Primary Care Education and Training', a working definition has been devised. Integrated health and social care is:

*"Care that is determined by partnerships between health and social care agencies and users/carers for the health and social well-being of the local community".*

This definition recognises that health is not only a property of individuals but extends to social well being of communities that have their own local character and influences upon their health. It recognises that participants in the delivery of integrated health and social care are drawn from agencies and users and carers linked through

partnership. Users and carers are seen as more than 'consumers' of services but active participants. This can be characterised as 'whole system working' which takes place when:

- Services are organised around the user;
- All of the players recognise that they are interdependent and understand that action in one part of the system has an impact elsewhere.

The following are shared:

- Vision;
- Objectives;
- Action, including redesigning services;
- Resources;
- Risk.

*"Users experience services as seamless and the boundaries between organisations are not apparent to them."*

(Audit Commission, 2002)

## 5 How has the ETNA Toolkit been developed?

The ETNA Toolkit has been developed through:

- An extensive review of the literature concerning integrated health and social care carried out by the University of Salford;
- A selective review of training needs analysis tools available in the public domain on the World Wide Web;
- A survey of ETNA practice amongst PCTs in the North West of England;
- Feedback from an Expert Reference Group consisting of members from PCTs, an acute hospital trust and social services departments in the North West of England;
- A pilot phase where the ETNA Toolkit was tested out and evaluated with two integrated primary care services.

The evidence base for this ETNA Toolkit also builds upon outcomes of other work packages within the Shaping the Future Project, including user and carer views of integrated health and social care and a workforce views survey. Development of the ETNA Toolkit has taken into account the NHS Knowledge and Skills Framework (Department of Health, 2004) because it is a Department of Health requirement of all NHS organisations to use it and it is linked to pay and progression, supporting the implementation of Agenda for Change. It uses a common definition of 'dimensions' and 'levels', that apply to the range of roles extending from frontline workers to those with strategic responsibilities. See Appendix 1 for dimensions of the Knowledge and Skills Framework (KSF) likely to be

of relevance to the Education and Training Needs Analysis).

The evidence base of the Shaping the Future Project has aided in the development of the Toolkit in the following ways.

While PCTs view Education and training needs analysis as important there is little evidence of carrying it out owing to lack of time and specific tools for the purpose:

*The ETNA Toolkit, therefore, aims to be easy to use and relevant for the expressed needs of the organisation.*

Education and training needs analysis for whole systems working requires whole systems engagement:

*The ETNA Toolkit, therefore, aims to be acceptable to a wide range of users and settings i.e. it must be generic.*

Education and training needs analysis is valued as much, if not more than, for the process as the outcomes:

*The ETNA Toolkit is, therefore, mainly process driven and contributes to service design and development.*

The greater the investment in education and training needs analysis the greater the value realised to the organisation:

*The ETNA Toolkit is, therefore, designed to maximise involvement at all relevant organisational levels.*

Primary Care organisations are faced with urgent imperatives that leave little energy for important but less urgent activities such as education and training needs analysis:

*The ETNA Toolkit is, therefore, designed to contribute to key organisational objectives.*

The ETNA Toolkit is presented as a resource pack for facilitators undertaking a needs analysis in the context of service development workshops. It is based upon tested approaches that are endorsed by the Modernisation Agency and are acceptable to health and social care agencies, including:

- The Health Development Agency's (2001) Public Health Skills Audit Tool;
- The Modernisation Agency's Changing the Workforce Toolkit for Local Change; (<http://www.wise.nhs.uk/cmswise/default.htm>).
- The Knowledge and Skills Framework for Development and Review (Department of Health, 2004).

The process for the Education and Training Needs Analysis Toolkit has been adapted from the group and individual training needs analysis used by the Health Development Agency (2001). A collective approach to education and training needs analysis in a group setting allows needs to relate to service development within which individual needs can be linked to workforce development.

## 6 Why undertake Education and Training Needs Analysis?

Although there are many examples of integrated health and social care in existence its achievement remains a major policy objective in terms of strategic goals and operational priorities at local level. "The government has made it one of its top

priorities since coming to office to bring down the 'Berlin Wall' that can divide health and social care and create a system of integrated care that puts users at the centre of service provision" (Department of Health, 1998). Much research has been undertaken to identify the characteristics of organisations and partnerships that facilitate integration. The ETNA Toolkit has been developed in order to identify the knowledge and skills required of participants to work effectively within integrated services and to contribute actively to service integration.

The whole notion of integrating health and social care affects a variety of groups of people. It affects the agency, workers within health and social care, managers and leaders at all levels and also the users of the service who provide the *raison d'être* for services.

In terms of workers within health and social care, integration means that roles and skill sets need to be determined within the context of the service as a whole and in relation to the contribution of other workers and agencies. Thus, the ETNA Toolkit links directly to the policy of Agenda for Change and its implementation at local level. Education and training needs analysis in the context of workforce development for integrated health and social care can be used both in a broad setting of service development or in line with workers' personal development plans.

## **7 Who is the Education and Training Needs Analysis for?**

The primary application of the Toolkit is in the development of an integrated service for health and social care. The Toolkit aims for breadth and flexibility. The Education and Training Needs

Analysis Toolkit can be used by all management and staff within the field of health and social care. A novel feature of the Toolkit is the potential to include users and carers who are not part of the formal health and social care workforce, and to involve agencies who contribute to health and social care, for example education, housing. The ETNA Toolkit can be used with participants at strategic, operational management and front line service delivery levels. It can be used by managers in order to envisage the nature of staff development required in terms of facilitating the achievement of outcomes and it can also be used by staff in terms of self assessment.

## **8 What 'needs' are identified by the ETNA Toolkit?**

The ETNA Toolkit does not seek to predetermine occupational roles or role descriptions. Rather, the Toolkit aims to help services identify a range of education, training and development needs in terms of skills and knowledge. Each of the activities will lead to outcomes that can be used to further develop services or to lead into other activities. For example, the visioning activity may indicate broad service-wide needs such as increased service awareness and organisational development needs. Equally the Identifying Knowledge and Skills activity aims to help services identify individual needs, for example, the skills and knowledge a person may need for a particular job role.

# Part 2: Using the ETNA Toolkit

## 1 The ETNA Toolkit process

Part 2 of the Toolkit introduces the Toolkit and its components. It outlines what is involved in working with the Toolkit and provides details and examples of how it can be used. Sample plans for events are available in Appendix 2.

The Toolkit incorporates a series of process-led activities designed to enable people to work through education, training and development issues related to their service. These activities are below (see figure 1)

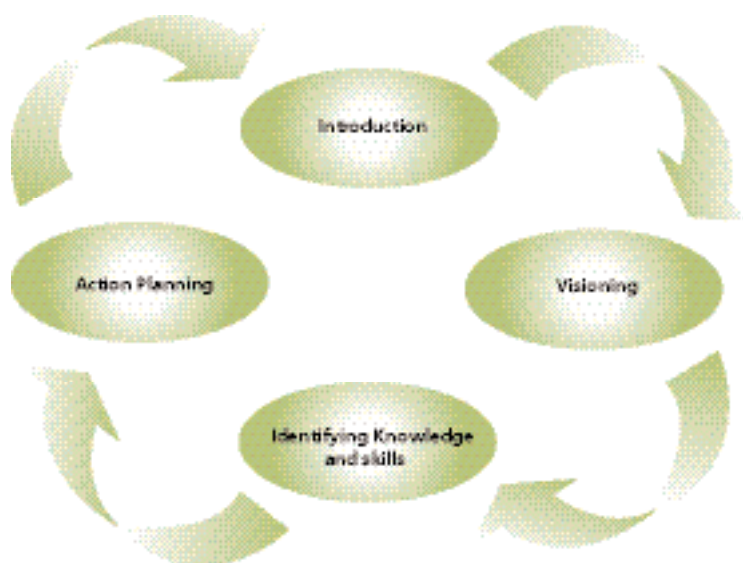


Figure 1: Process led activities

While the activities can be facilitated as separate events they have been designed as a sequence. Therefore, it is important that some activities are a prerequisite for others. For example, services could simply carry out the Visioning Activity as a single event, however, they would need to carry out the Visioning Activity before the Identifying Knowledge and Skills Activity.

Introduction and Action Planning are presented as individual activities relating to the whole sequence of activities. However, if activities are facilitated as separate events, it is important that each event is introduced as an ETNA activity and that each event is concluded with action planning. We recommend that a service undertaking all of the activities devotes at least a half day to Action Planning as a conclusion to the process. Examples of how the ETNA Toolkit can be used are provided in the following sections.

## 2 Working with the ETNA Toolkit

Working with the ETNA Toolkit entails three phases;

- Preparation and planning;
- Delivery;
- Follow-up.

### 2.1 Preparation and Planning

This phase involves the facilitators and education and training leaders of the relevant agencies working together to plan and prepare an education and training needs analysis event or series of events. Preparation and planning will involve identifying facilitators, recruitment of participants and agreeing the timing and schedule for the event(s) including practical arrangements.

Identifying a facilitator or facilitators will need the agreement of the individuals responsible for service development. Facilitators will require skills in group facilitation along with knowledge of issues relating to inter-agency working. Facilitators will need to have an awareness of other development processes available to the service that support the analysis of training and education needs. They will also need to know where they might access further support, for example, the Human Resources Department.

The ETNA Toolkit is intended for use with an integrated service and therefore recruitment of participants should include a group of mixed personnel drawn from appropriate agencies that contribute to health and social care. Each component of the ETNA Toolkit depends upon engagement and participation so care should be taken when deciding upon numbers. We recommend no more than 20 participants per workshop with one or preferably two facilitators, each of whom may adopt the role of lead and co-facilitators.

The timing and scheduling of education and training needs analysis events will depend on time available and current level of integration of the service, for instance, whether this is a newly formed service or an established service. Education and training needs analysis activities could form part of regular team meetings or could be developed as half day or whole day events. Appendix 2 shows examples of outline programmes.

*Changing the Workforce Programme* of the Modernisation Agency ([http://www.modern.nhs.uk/scripts/default.asp?site\\_id=65](http://www.modern.nhs.uk/scripts/default.asp?site_id=65)) offers some useful guidance for planning developmental activities that can help you to make the most of the ETNA Toolkit:

- Well chosen participants' group – reflecting delivery and use of the integrated service;
- Strategic level commitment to the process;
- Well-facilitated workshops;
- Workshops off-site;
- Participants must attend the entire event or series of events;
- Focus on integration issues in the specific service context;
- Effective facilitation skills.

Services may also wish to think about using preparatory work prior to the event, for example, asking people taking part in the Visioning Activity to bring along a couple of examples of how the service works in an integrated way.

Example: An established service may decide to hold a series of events up to half a day in length over a short period of time such as every fortnight where each event day involves tackling one of the ETNA Toolkit activities.



Preparation for this series of events would include mini action planning after each event to consolidate work and a brief summary of where the service are up to in the process at the beginning of each event. Alternatively a newly established service may want to run events over a longer period of time, such as sequencing over a 6 month period, with more attention to action planning and further work in between events.

## 2.2 Delivery

Working with the ETNA Toolkit requires access to basic equipment and materials including:

- Flipchart/paper/pens;
- Blu tac/pins;
- Large 'post-its' in a range of colours;
- Access to photocopier;
- Access to refreshments.

We also recommend that whatever delivery model you choose, whether a series of events or a one day workshop involving one or more components, that you allow sufficient time during delivery for an introduction and action planning. Section 3.1 and Section 3.4 provide detail of the Introduction and Action Planning Activities as stand alone events and as part of other activities.

Each event will require evaluation. Evaluation offers an opportunity for individuals to reflect on their own learning from the event(s), and it enables this learning to be made explicit. Evaluation can also be used to provide feedback on the organisation of the day. Evaluation can be an individual or a group activity that may involve responding to questions or identifying key learning on flip charts.



## **2.3 Follow-up**

The follow-up phase involves reviewing process and outcomes after education and training needs analysis events, and determining how identified needs will be acted upon. This is an important phase to demonstrate organisational support and to ensure that work is carried forward, that agreed actions are developed, and that their progress is monitored. This may involve working with other service managers or across agencies as appropriate, to review and to explore how education and training needs analysis outcomes and action plans link into existing developmental activities and processes at the relevant level. On the other hand, this may mean identifying that new or different processes or activities are needed, and exploring how they can be developed and managed.

### 3. The Education and Training Needs Analysis Toolkit Activities

This section introduces each of the activities that comprise the ETNA Toolkit in the sequence of the overall process of education and training needs analysis. Each activity is explained in terms of its purpose, examples of how it might be used, expected outcomes and potential action planning. Activities are processed and this involves using group and interactive exercises that enable participants to reach self-determined outcomes. Activities are intended to be workable for a range of services, whether established, new or proposed. Sample exercises to complete the activity are demonstrated in boxes. Appendix 2 offers examples of planned events using the activities.

#### 3.1 Introduction Activity

The introduction to the process of education and training needs analysis may be a 'stand alone' event or combined with other activities within the first event. If you choose to have a series of events we recommend that each event is introduced separately. The purpose of the introduction is to:

- Explain the process of education and training needs analysis, what the process will involve, what will happen, how and when it will occur, and the level of commitment required;
- Introduce those taking part to each other to help make people feel comfortable, typically with the use of an icebreaker exercise;
- Develop an agreed understanding of integrated health and social care.

Each event within the process of education and training needs analysis will need an introduction that reflects its place in the sequence of events and reminds participants of any work to date. For example, if introducing an event centred around an Identifying Knowledge and Skills Activity, this will include reference to the Visioning Activity that took place earlier and any work or actions that have resulted from this.

#### Example: Plan for introducing the ETNA Toolkit

- Welcome and introductions;
- Purpose of the day and significance for this group;
- Expected outcomes;
- Plan for the day, timing, breaks and admin;
- Icebreaker;
- Our understanding of integrated health and social care – group exercise.

#### Sample Icebreaker

- Working in pairs introduce yourselves to each other and explain your role. Identify one thing that you contribute to your service that is of value. The pairs then introduce each other to the rest of the participants.

It is important for services to establish a working definition of integrated health and social care so that they have an agreed framework for the education and training needs analysis process. Services may wish to develop their own definitions through the use of a simple exercise as shown below. The project definition is:

*“Care that is determined by partnerships between health and social care agencies and users/carers for the health and social well-being of the local community.”*

#### Sample Definition Exercise

- What are the key features of an integrated health and social care service?
- How would we describe the term integrated health and social care for our staff and users of the service?

#### Action Planning for the Introduction Activity

Action planning following the introduction may involve preparation for the Visioning Activity:

- Finding out what integrated health and social care means to service stakeholders, for example, service users, carers and other agencies;
- Identifying examples of where the service delivers integrated care.

#### Outcomes for the Introduction Activity

- An understanding of individual participants' roles within the service;
- An agreed understanding of integrated health and social care.

### 3.2 Visioning Activity

The purpose of the Visioning Activity is to enable the participants:

- To review where the service is now in terms of integration, and
- To explore where service members would like the service to be in the future.

Reviewing the extent to which the service is currently integrated enables participants to describe their own experience of working in an integrated way. This exercise is a further opportunity for participants to learn about the breadth and depth of the integrated service and the people who are part of it.

Exploring how participants would like their service to be more integrated in the future follows on from where the service is currently. This progression aims to enable participants to see potential areas for development that are realistic and do-able, as well as identifying ideal situations.

#### Sample Visioning Exercise for an Established Service

Part 1: How integrated is our service now? Groups of 4-5 review the current level of integration by exploring the following 3 questions. Responses are noted on flip charts:

- What partnerships do we have between agencies?
- How does our service involve users and carers?
- How does our service contribute to the health and social wellbeing of the community?

Part 2: How integrated would we like our service to be in the future? The same groups use their responses from Part 1 to help them explore the future

of the service, using the following questions:

- What other and future partnerships do we want to have between agencies?
- How can our service involve users and carers more?
- How do we want our service to contribute to the health and social wellbeing of the community?

#### Sample Visioning Exercise for a New or Proposed Service

Part 1: How integrated are we now?

In groups of 4-5:

- Each group member explains the purpose of their organisation/service and their role within it
- The group discusses how the various organisations/services currently link to each other and describe any joint Health and Social care initiatives.

Part 2: How do you want the new or proposed service to work?

- How do you see the new service operating?
- What are the opportunities?
- What will it offer to service users?
- What job roles are required to help achieve this?
- How do group members fit within this?

#### Action Planning for the Visioning Activity

Action planning following the Visioning Activity may involve:

- Developing strategies for desired partnerships and further links;
- Identifying how highlighted opportunities from a visioning exercise might be taken forward;
- Detailing plans for further

involvement of users and carers with the service.

#### Outcomes for the Visioning Activity

- Identification of current links and partnerships that members have within the service and that the service has with other agencies and services;
- Identification of links and partnerships the service would like to foster;
- Ideas for further involvement from users and carers;
- Awareness of opportunities available to the service;
- Potential job roles (for new or proposed services);
- Vision of how the service would like to contribute to the community;
- An action plan based on developing new links and partnerships, taking opportunities forward and involvement of carers and users of the service.

### 3.3 Knowledge and Skills Activity

The purpose of this activity is to help participants identify the skills and knowledge that workers possess and need to deliver an integrated service. The tool kit provides you with some exercises that you can use.

#### Exercise: Field of Words

Many workers may already possess knowledge and skills that can be used to deliver integrated health and social care, even if these skills and knowledge are not currently in use. We therefore suggest that it is

important to identify knowledge and skills assets before identifying deficits.

A field of words is used to identify, in terms that are relevant to participants, the knowledge and skills entailed in the delivery of integrated health and social care in their setting. The adaptation of the field of words technique (Houston & Cowley, 2002) is designed to assist individuals and groups to articulate the skills, knowledge and experience that they bring to health and social care. These can then be mapped onto more formal competencies with the potential for further support of learning or development.

#### Stage One

The field of words is populated in the first instance with terms identified by the facilitators as triggers to stimulate group thinking. These terms are placed randomly on a piece of flip

chart paper (as shown in figure 2). It is important that terms are used that are meaningful to participants. Facilitators may wish to consider the following terms identified in the Shaping the Future literature review. These terms have been identified as six recurring themes in the Knowledge and Skills Framework (Department of Health, 2004), NatPact Competencies (NHS Modernisation Agency, 2004) and in the Occupational Standards developed by Skills for Health (2003). The themes are:

- Communication;
- Team Working;
- Partnership Working;
- Personal/Professional Development;
- Role Awareness;
- Practice Development and Leadership.

Given the breadth of these terms, facilitators may wish to either select their own terms or provide brief local context to the themes when they are presented. A further resource for terms is the NHS Knowledge and Skills Framework.

An example using different terms is provided in figure 2 below:

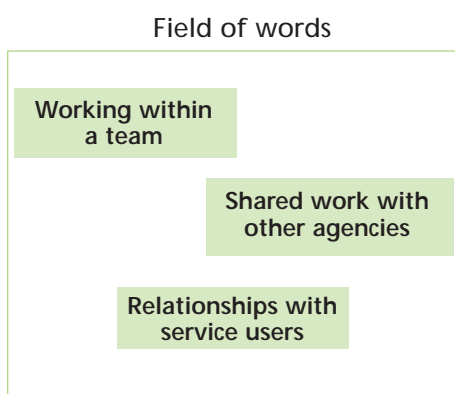


Figure 2

In this exercise the group use the triggers to produce one or more sheets of paper identifying a broad range of knowledge and skills that the group considers are represented within the service, and that are appropriate to the delivery of integrated health and social care. The exercise identifying the knowledge and skills that the service possesses could be carried out by half the group, with the other half identifying the knowledge and skills required for integrated health and social care (see boxes 1 and 2). For this exercise it is useful to use 'post its' to place on poster size sheets.

#### Box 1:

##### Knowledge & Skills Possessed

- -----
- -----
- -----
- -----

#### Box 2:

##### Knowledge & Skills Required

- -----
- -----
- -----
- -----

#### Stage Two

The group could then proceed to identify whether they are actually using the knowledge and skills within the context of an integrated service. Here, the contribution of service users and carers would be particularly useful to compare the perceptions of participants, users and carers.

Any obstacles to using knowledge and skills could be identified along with possible solutions and fed back to service managers.

The two lists of knowledge and skills (see boxes 1 and 2) can provide a gap analysis by mapping the skills possessed (one group's list) against the skills required (the second group's list). This would lead to two further documents:

- A summary of the skills and knowledge that the service requires to deliver integrated health and social care and already possesses, and
- A gap analysis of the skills and knowledge required that the service does not possess.

The gap analysis could then form the basis for development planning (see boxes 3 and 4).

**Box 3:**

**Knowledge & Skills Required and Possessed**

- -----
- -----
- -----
- -----

**Box 4:**

**Knowledge & Skills Gap Analysis Required and Not Possessed**

- -----
- -----
- -----
- -----

**Exercise: The 'capable practitioner'**

One way of thinking about knowledge and skills for a service is to consider what is required for all or at least most workers before defining the knowledge and skills for specific roles. This is based on the notion of the 'Capable Practitioner' (Sainsbury Centre for Mental Health, 2001), and can be used as a follow-on activity for the Field of Words exercise.

The headings shown in table 1 (next page) may be used to structure a group exercise to identify the knowledge and skills required. Flip chart and pens are used to collate group member contributions. The 'all must have' category refers to the skills and knowledge required by all service members to deliver integrated health and social care. The 'some must have' category identifies skills and knowledge that particular categories of staff must have to deliver integrated health and social care, for example, strategic managerial staff must have knowledge of the organisation's strategic plan. The 'who should have' category provides further detail by identifying particular roles in the service and what skills and knowledge they should have. For example, a receptionist should have knowledge of where the range of services is located. Knowledge and skills identified by the Field of Words exercise can be mapped onto this structure. This would provide a picture of where the gaps in knowledge and skills are and which roles these gaps affect.

**Action Planning for the Knowledge and Skills Activity**

The full value of these exercises will be realised by action planning to process this information within organisations. This can be achieved by:

- Mapping existing roles against the requirements identified for a group of workers or
- Mapping for specific roles. In this case it may be necessary to develop a new job description. (The Changing Workforce Programme of the Modernisation Agency, 2004 provides practical tools for developing job descriptions with groups of staff. The implementation of Agenda for Change also provides methodologies and expertise within organisations for job evaluation and development of job profiles. See References and Resources in Appendix 3).

**Outcomes for the Knowledge and Skills Activity**

- Identification of knowledge and skills that the service has presently;
- Identification of knowledge and skills required for an integrated service;
- A resulting gap analysis for the service as a whole;
- An action plan based on mapping requirements for the needs of the service as a whole, specific groups, levels and/or defined roles.

**Table 1:**

<b>All must have</b>	The 'field of words' exercise is useful for this.
<b>Some must have</b>	<p>Use categories of workers: For example, broad headings of strategic managerial, operational managerial and front line worker requirements.</p> <p>(Other typologies may be used and could include service users or carers)</p> <p>Include what skills and knowledge using Field of Words exercise.</p>
<b>Who should have</b>	<p>The roles involved in delivering integrated health and social care: e.g. case worker; receptionist.</p> <p>Include what skills and knowledge using Field of Words exercise.</p>

### 3.4 Action Planning Activity

The purpose of the Action Planning activity is to:

- Enable participants to reflect on what they have achieved from a particular education and training needs analysis activity or from the whole education and training needs analysis process;
- Evaluate learning and the education and training needs analysis process;
- Identify key issues from the activity or activities for practice, professional or service change;
- Develop a plan to action ideas and take key issues forward;
- Enable participants to plan further development.

provides opportunity for participants to reflect and review what they have learned about themselves and the service, and it offers the space for participants to take a strategic approach to planning. It also enables participants to plan how and when they might access further development. Examples of Action Planning exercises that could provide a half day event are provided below.

Action planning enables participants to reflect on the work they have undertaken and to consider in a structured way how they might take that work forward. Action Planning is recommended as an integral part of any ETNA Toolkit event as well as a process that can be undertaken separately following a series of events. Examples of action planning for particular education and training needs analysis activities are provided in sections 3.2 and 3.3. Action planning may be as simple as taking ideas away to talk through with others prior to another event within the process of ETNA, or be broader and involve implementing a service change to enable greater use of existing knowledge and skills.

As a separate event that aims to reflect on the experience of the whole education and training needs analysis process, action planning can offer rich learning at a number of levels. It

### **Sample Action Planning Exercise: Evaluating Learning**

In small groups discuss:

- What have I learned from this process about my role within the service and what have I learned about the service?
- What changes would I like to see happen that would help me in my role and that would help the service to move forward as an integrated service?

### **Sample Action Planning Exercise: Developing a Service Action Plan**

This exercise can be used for services that have undertaken a number of activities and already have a series of action plans.

Part 1: The participants are divided into groups according to the number of action plans already developed. The task for each group is:

- To review the action plan and note any actions already undertaken and their outcomes;
- Amend or add to any existing points of action if appropriate from the evaluation exercise or any other changes since the plan was developed;
- List any further action points identified from the evaluation exercise;
- Considering all of the action points, agree how each one will be actioned, what resources will be required to achieve this, who will action them and by when (see sample plan below).

Part 2: The groups present their updated action plans to each other and agree final versions that are to be taken away, copied and circulated. The groups agree a process for monitoring the progress of action plans. For instance, this might involve making the action plan progress an agenda item for service or team meetings.



## Sample Action Plan

Action	How?	Resources?	Who?	By When?

### Sample Action Planning Exercise: Our Further Development

This exercise places a focus on planning for and accessing further development activities.

Individual participants are asked to consider what further development they think they need as individuals or as part of the service team as a result of undertaking the ETNA Toolkit activities. This information is shared in small groups and mapped using flip Sample Action Planning Exercise: Our Further Development

**Example: An individual might identify the need to update their personal development plan. This need would be mapped against existing structures in place including appraisal and supervision.**

**Example: The group may acknowledge the need for the service to have a session on integrated record keeping. It may be there is no current process for this in which case the participants will plan how they could access resources to make this happen**

#### Outcomes for Action Planning Activity

- Development of service action plan;
- Evaluation of learning for individuals from the education and training needs analysis process;
- Review of learning for the service from the education and training needs analysis process;
- Identification of desired personal and service changes;
- Review and amendment of existing action plans;
- Identification of further development activities for individuals and for the service;
- Mapping of further development needs against existing organisational processes and activities;
- Action plan for identified needs not met currently by the represented organisation(s).

# Appendix 1: Dimensions of the Knowledge and Skills Framework

## **Dimensions of the Knowledge and Skills Framework (KSF) likely to be of relevance to the Education and Training Needs Analysis**

Six of the dimensions of the KSF are core which means that they are relevant to every post in the NHS.

These core dimensions are:

- 1 Communication;
- 2 Personal and people development;
- 3 Health, safety and security;
- 4 Service improvement;
- 5 Quality;
- 6 Equality and diversity.

## **'General' dimensions to be considered include:**

- G1 Learning and development;
- G2 Development and innovation;
- G3 Procurement and commissioning;
- G4 Financial management;
- G5 Services and project management;
- G6 People management.

The relevance of these will vary, particularly in respect of the level within the organisation(s) of individuals and groups participating in education and training needs analysis.

'Health and wellbeing' dimensions are likely to have wide relevance given the Toolkit's definition of integrated health and social care, in particular, the following specific dimensions:

HWB1 Promotion of health and wellbeing and prevention of adverse effects to health and wellbeing;

HWB2 Assessment and care planning to meet health and wellbeing needs;

HWB3 Protection of health and wellbeing;

HWB4 Enablement to address health and wellbeing needs;

HWB5 Provision of care to meet health and wellbeing needs;

HWB6 Assessment and treatment planning.

Documentation developed within and to support the use of the KSF provides a wealth of material to help articulate knowledge and skills. In particular, the level descriptors provide more specific phrases to help define knowledge and skills that may be required.

See web pages from the Department of Health web site: <http://www.dh.gov.uk/Home/fs/en>

In particular:

[http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT\\_ID=4090843&chk=dryrb/a](http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4090843&chk=dryrb/a)

# Appendix 2: Sample Outline Programmes

## Sample outline programmes

This Toolkit offers a range of activities that you can use to make up a development event. Although these can be run as separate events they do form a sequence and, therefore, the Identifying Knowledge and Skills Activity should not be run without having undertaken the Visioning Activity.

This appendix provides two sample outline programmes that illustrate how you might put together an ETNA event. A further option is to include ETNA Toolkit activities as part of other events, for example, within regular team meetings.

Example 1: Is for a full day event. It illustrates an initial ETNA event that works with participants to develop their understanding of integrated health and social care and to develop a vision of how they want their service to be.

Example 2: Is for a half day event. This example illustrates an event that is devoted to identifying knowledge and skills to deliver an integrated service. It assumes previous events involving Introduction and Visioning Activities have already taken place.

### Example 1: Introducing the ETNA Toolkit and envisioning an integrated health and social care service. (A full day event)

9.00 Refreshments

#### 9.20 Welcome and introductions

- Introduction to ETNA Toolkit to include purpose of the day and significance for this group;
- Expected outcomes;
- Plan for the day, including timing and breaks;

#### 9.45 Icebreaker

10.20 **Group exercise:** Our understanding of integrated health and social care

- In groups of up to 5 people describe the key features of integrated health and social care and develop a definition for staff and users of this service 20 minutes;
- Groups share definitions and agree a shared understanding 20 minutes;

11am BREAK

#### 11.15 Visioning Activity Part 1

Groups of up to 5 people discuss either: How integrated is our service now? or by responding to a number of questions on flip chart (see Toolkit Part 2: Section 3.2 sample exercises for either established or new and proposed services).

12.00 Group feedback: groups share the main points of their discussions

12.15 LUNCH

13.00 Summary of what has been achieved so far and reiterate agenda for the afternoon

#### 13.05 Visioning Activity Part 2

In the same groups from Part 1 of the exercise explore: How integrated we want our service/the new or proposed service to be? By responding to a series of questions on flip chart (sample provided in Toolkit Part 2 Section 3.2).

13.50 **Group feedback:** groups highlight main points of discussion.

14.05 BREAK

#### 14.15 Action Planning

Change groups. Each group plans action from one of the areas identified from the Visioning exercise (see action planning ideas under Toolkit Part 2: Section 3.2). For example, Group 1 looks at how further partnerships can be developed, Group 2 at how opportunities might be taken forward and Group 3 explores how users and carers of the service can be involved more.

14.55 **Group feedback: Groups present action plans**

### 15.25 **Agreeing next steps**

Large Group Exercise: The facilitator works with the whole group to prioritise actions and to agree who will carry out actions and by when.

The group also decides on a process for monitoring actions, for example, reporting back at team meetings.

### 16.00 **Evaluation of Workshop**

This might be an individual or group activity where participants highlight what they think has been of value for them in their role and for them as part of an integrated service. This is also an opportunity to gain feedback on how the day has been organised.

### 16.15 **Summary of day**

A brief summary of the outcomes achieved and, if relevant, of how this day links into other planned education and training needs analysis events.

16.30 CLOSE

## **Example 2: Identifying Knowledge and Skills to deliver an integrated service. (A half day event)**

9.00 Refreshments

### 9.20 **Welcome and introductions**

- Introduction to purpose of the event and how it moves on from work already done;
- Expected outcomes;
- Plan for the day, including timing and breaks.

9.45 **Icebreaker**

### 10.20 **Identifying Knowledge and Skills Activity: Field of Words**

■ **Stage1:** In groups of up to 5 people and using some 'trigger' themes identify knowledge and skills the group considers are required to deliver an integrated service. (See Toolkit Part 2 Section 3.3 of the Toolkit for more information on this exercise). 20 mins;

■ **Stage 2:** The groups now look at which knowledge and skills the service already has and the knowledge and skills that are required by the service. 20 mins;

11.00 BREAK

### 11.15 **The Capable Practitioner**

The same groups as before use information from the field of words exercise to come up with a grid of which knowledge and skills are required by which service roles and categories of workers (See Toolkit Part 2 Section 3.3 for more information)

11.45 **Group feedback: groups present their grids.**

### 12.00 **Action Planning**

Change groups; What action needs to be taken and by whom? (for examples see Toolkit Part 2: Section 3.3). Groups share ideas and agree next steps.

### 12.20 **Evaluation of Workshop**

This might be an individual or group activity where participants highlight what they think has been of value for them in their role and for them as part of an integrated service. This is also an opportunity to gain feedback on how the day has been organised.

### 12.30 **Summary of day and Close**

A brief summary of the outcomes achieved and, if relevant, of how this day links into other planned education and training needs analysis events.

# Appendix 3: References and Resources

## References

- Audit Commission (2002) Integrated Services for Older People, Audit Commission. London.
- Burke, S., Meyrick, J. and Speller, V. (2001) Public Health Skills Audit: Research Report, Health Development Agency, London.
- Changing the Workforce Toolkit for Local Change, Modernisation Agency, online :  
[http://www.modern.nhs.uk/scripts/default.asp?site\\_id=58](http://www.modern.nhs.uk/scripts/default.asp?site_id=58)  
Accessed 20 April 2005
- Cowley, S. and Houston, A. M. (2003) A Structured Health Needs Assessment Tool: Acceptability and Effectiveness for Health Visiting, Journal of Advanced Nursing, vol. 43, no. 1, pp82-92.
- Department of Health (2004) The NHS Knowledge and Skills Framework and the Development Review Process, Department of Health, London.
- Department of Health (1998) Modernising Social Services, Department of Health, London.
- NHS Modernisation Agency (2004) National Primary and Care Trust Development Programme,  
[www.natpact.nhs.uk](http://www.natpact.nhs.uk)
- NHS Modernisation Agency (2004) The Changing Workforce Programme.
- Sainsbury Centre Model for the Capable Practitioner, online,  
<http://www.scmh.org.uk/>  
Accessed 20 April 2005
- Skills for Health (2003) *Introduction to Modern Apprenticeships*, Skills for Health, Bristol.

## Appendix 4: Further Resources to support Education and Training Needs Analysis

Resources	Main features	Comments
<p>Department of Health-Knowledge and Skills Framework and Development Review (Department of Health,2004)</p> <p>See web pages from the Department of Health website: <a href="http://www.dh.gov.uk/Home/fs/en">http://www.dh.gov.uk/Home/fs/en</a></p>	<p>Linked to 'Agenda for Change'.</p>	<p>Partnership section corresponds to Shaping the Future Project definition of integrated health and social care.</p> <p>Links to learning outcomes and organisational levels.</p>
<p>The working partnership: <a href="http://www.hdaonline.org.uk/documents/working_partnership_1.pdf">http://www.hdaonline.org.uk/documents/working_partnership_1.pdf</a></p> <p>See also Health Action website: <a href="http://www.healthaction.nhs.uk/">http://www.healthaction.nhs.uk/</a></p> <p>Visit pages on Partnership Development</p>	<p>A collection of tools to underpin partnership development.</p>	<p>Based on Verona Benchmark and developed by the Health Development Agency.</p>
<p>HDA Public Health Skills Audit</p> <p>Burke, S., Meyrick, J. and Speller, V. (2001) Public Health Skills Audit: Research Report. Health Developemnt Agency. London</p> <p>Available from <a href="http://www.publichealth.nice.org.uk/">http://www.publichealth.nice.org.uk/</a></p> <p>Publications available on line: <a href="http://www.hda-online.org.uk/search/results.asp">http://www.hda-online.org.uk/search/results.asp</a></p> <p>On line tool: <a href="http://www.phskills.net/">http://www.phskills.net/</a></p>	<p>Completed on-line or using paper based work book, with option of facilitated workshops (guide available).</p> <p>ETNA tool has adapted some aspects of process.</p>	<p>Developed by HDA through research project and now managed by John Moores University as an on line resource.</p>
<p>National Occupational Standards in Health and Social Care <a href="http://www.skillsforhealth.org.uk/">http://www.skillsforhealth.org.uk/</a></p>	<p>Functional analysis and competencies – related to vocational awards.</p>	
<p>Smarter Partnerships <a href="http://www.lgpartnerships.com/">http://www.lgpartnerships.com/</a></p>	<p>A range of tools to assess skills and knowledge for partnership working with suggested educational /training activities.</p>	

Resources	Main features	Comments
<p>QUILT</p> <p><a href="http://www.quilt.org/Home/ptool.html">http://www.quilt.org/Home/ptool.html</a></p>	<p>A set of tools to support partnership development.</p>	<p>USA resource for early years context of integrated services.</p> <p>Based on Verona Benchmark and developed by the Health Development Agency.</p>
<p>Working Together: Staff involvement – A self assessment tool.</p> <p>Tool and Action Plan both available from:</p> <p><a href="http://www.dh.gov.uk/Home/fs/en">http://www.dh.gov.uk/Home/fs/en</a></p>	<p>Available on-line, completed as a paper based activity based on 7 standards relevant to organisational development for service planning and delivery.</p>	<p>A generic tool focussing on organisational capability for service development necessary for (but not confined) to integrated health and social care.</p>
<p>NatPact Organisational Competency Framework.</p> <p><a href="http://www.natpact.nhs.uk/">http://www.natpact.nhs.uk/</a></p> <p>The partnership competencies:</p> <p><a href="http://www.natpact.nhs.uk/downloads/newcf/5.pdf">http://www.natpact.nhs.uk/downloads/newcf/5.pdf</a></p>	<p>A very extensive, interactive web based resource under continuous development, linked to the modernisation agency.</p> <p>Includes self assessment guides to competencies at various levels of specificity.</p>	<p>Specific focus on primary care and associated areas of activity including partnership, workforce development, education, training and research as well as specific service areas and professional groups.</p> <p>Most relevant at the Strategic level.</p>
<p>Sainsbury Centre Model for the Capable Practitioner</p> <p><a href="http://www.scmh.org.uk/">http://www.scmh.org.uk/</a></p>	<p>Developed in the context of mental health.</p>	<p>Capable of being applied to a variety of service contexts.</p>
<p>Modernisation Agency: Changing the workforce toolkit for local change:</p> <p><a href="http://www.modern.nhs.uk/home/default.asp?site_id=58">http://www.modern.nhs.uk/home/default.asp?site_id=58</a></p> <p>Modernisation Agency's NHS Improvement Leaders' Guides</p>	<p>A series of guides to support leadership and change management, including:</p> <ul style="list-style-type: none"> <li>• Setting up a collaborative programme;</li> <li>• Managing the human dimensions of change.</li> </ul>	<p>Applicable to service redesign and parallel curriculum development.</p>
<p>Making Health Scrutiny Work: The Toolkit:</p> <p><a href="http://www.dhn.org.uk/">http://www.dhn.org.uk/</a></p>	<p>Produced by the Democratic Health Network to assist local government to fulfil its obligations for 'Health scrutiny' and partnership working.</p>	<p>Contains check lists, case studies and summary boxes.</p>
<p>Health Education Board for Scotland (1995)</p> <p>Devising methods to assess training needs of health promoters in Scottish area health boards:</p> <p><a href="http://www.hebs.org.uk">http://www.hebs.org.uk</a></p>	<p>Detailed research report.</p>	<p>Methods and findings applicable across professional and organisational boundaries.</p>

Resources	Main features	Comments
System-Linked Research Unit on Health and Social Service Utilization, based at McMaster University, Ontario, Canada:  <a href="http://www.fhs.mcmaster.ca/slru/home.htm">http://www.fhs.mcmaster.ca/slru/home.htm</a>	Provides details of research programmes and resources relevant to integrated service provision.	
National Primary Care Development Team <a href="http://www.npdt.org">http://www.npdt.org</a>	Information on 'Collaborative' methodology.	
Integrated Care Network: <a href="http://www.integratedcarenetwork.gov.uk/homepage.php">http://www.integratedcarenetwork.gov.uk/homepage.php</a>	Range of tools, resources and information.	
The King's Fund, London. <a href="http://www.kingsfund.org.uk/PDF/partner.pdf">http://www.kingsfund.org.uk/PDF/partner.pdf</a>	Extensive publications and research reports.	See references on partnership and integration.

Web sites accessed 20 April 2005. The authors cannot accept responsibility for the contents or continued availability of the web sites listed.



# Appendix 5: Reference Group and Pilot Sites

## **Reference Group and Pilot Sites**

The ETNA Toolkit was developed in collaboration with a reference group and pilot sites across the North West of England. We are grateful for the expertise and commitment of reference group members, facilitators and participants in pilot sites from the following organisations:

### **Organisation:**

Blackburn with Darwen Social Services Department

Bolton Hospitals NHS Trust

Bolton Primary Care Trust

Bolton Social Services Department

Cheshire and Merseyside Teaching Primary Care Trust

East Cheshire Primary Care Trust

Knowsley Primary Care Trust

Rochdale and Heywood and Middleton Primary Care Trusts

Rochdale Metropolitan Borough Council

Salford Royal Hospitals NHS Trust

The University of Bolton