

Best Practice Guidance for the Recruitment and Retention of Trainee, Qualified and Senior Psychological Wellbeing Practitioners (PWP)

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This guidance has been developed with input from the Senior PWP group within the North West PWP Professional Network.

Introduction

The Psychological Wellbeing Practitioner (PWP) workforce is relatively new, created within the Improving Access for Psychological Therapies (IAPT) programme. As the role has developed a number of challenges have become apparent, particularly in regards to recruitment and retention, which are common to most, if not all services:

- The trainee PWP role, is significantly oversubscribed: it appeals to a wide range of individuals, in particular to the large numbers of psychology graduates, (which significantly increase every year in the UK): it is not unusual for 1 trainee PWP post to receive well over 100 applications in 24 hours
- The qualified PWP role is very difficult to recruit to, with a relatively small pool of the PWP workforce to recruit from, with services ultimately 'stealing' from each other. It is not unusual for a Qualified PWP advert to receive no suitable applicants, resulting in multiple re-advertisements
- The senior PWP role is a newer development for this workforce, where there is currently limited career opportunities (including remaining within the PWP setting), and as such generates a moderate level of applications, but often from very newly qualified PWPs who may not have the desired level of experience

This guidance aims to help support organisations overcome some of these barriers to successfully recruit and retain an effective and healthy PWP workforce.

Recruitment

The success of any organisation depends on the quality of its workforce. To provide the best possible effective and responsive services, IAPT teams needs highly skilled, flexible, and motivated employees. National Job Descriptions (JD) and Person Specifications (PS) exist for trainee, qualified and Senior PWPs via the IAPT website (<http://www.iapt.nhs.uk/workforce/low-intensity/>) which can then be used and edited for any service specific skills or experience required.

The PWP role is now well established: organisations have learned and developed from their experiences of recruiting to these posts since the inception of IAPT in 2008, which has informed the knowledge of the key skills and abilities which support the development of excellent PWPs within a team or service. These include:

Trainees

- Relevant previous qualification(s) demonstrating ability to study – this does not necessarily need to be a psychology degree, or at degree level, but the ability to undertake academic study successfully is essential
- Relevant previous experience of working directly with people in a health or care setting – this can be within statutory or voluntary services; while direct experience working with people with mental health problems is useful, it is not always essential: primary care experiences, for example, Health Trainer roles can provide more relevant previous experience than roles on mental health wards
- Excellent organisational skills – while not explicit in the national template JD and PS, experience has shown that these are essential skills for a successful PWP given core duties of managing a high caseload, writing up good quality clinical records, producing patient letters and correspondence with other health professionals, and prioritising competing demands in their clinical work, for example, safeguarding issues, clinical risks, patient missed-appointments etc.

Qualified

- The (currently BPS) accredited qualification in Primary Care Mental Health Practice, or equivalent Qualified Graduate Primary Care Mental Health Worker qualification (2004-2008) is essential as the **only** qualification which trains people to undertake a step 2 role within an IAPT service
- Relevant experience as above (for a trainee), plus the appropriate clinical experience to complete the IAPT accredited qualification as a minimum: managing a caseload of patients experiencing mild to moderate mental health problems delivering appropriate step 2 interventions and demonstrating the ability to work at capacity in a high volume low intensity service
- Demonstrable organisational skills in a step 2 clinical role (as above for a trainee)

Senior

- The (currently BPS) accredited qualification in Primary Care Mental Health Practice, or equivalent Qualified Graduate Primary Care Mental Health Worker qualification (2004-2008) is essential as the **only** qualification which trains people to undertake a step 2 role within an IAPT service
- An accredited qualification in Low Intensity supervision is desirable, but willingness to undertake this and a demonstrable interest and ability in supporting staff development are essential for the senior PWP role
- Ability to demonstrate a range of post-qualifying experiences in offering and delivering the range of evidence-based IAPT low intensity interventions, which should include an innovative and flexible approach as service requirements change and new technologies and research develop and inform practice
- Knowledge and awareness of the 'big picture' within an IAPT service and wider organisations are key to the success of a senior PWP being able to drive forward and develop the step 2 workforce

Agency

For the purpose of recruiting Agency PWP workforce, this tends to be only for Band 5 qualified staff (and may on occasion be for band 6 roles). While a standard recruitment process is not always followed, a service should still ensure that the above key competencies are met, in particular the IAPT accredited qualification in Primary Care Mental Health Practice, or equivalent Qualified Graduate Primary Care Mental Health Worker qualification (2004-2008).

It is also vital to ensure up to date references from their most recent (agency) placement with other services, or alternatively their previous employer, as well as evidence of their qualification and the agencies own reference information.

Job Advertisements

There are clear standards for all job advertisements, however, in consideration of the challenges for the recruitment of Qualified PWPs, additional factors may be helpful to include:

- Explicitly create a positive image of the organisation and what it can offer – being aware that there is a broad range of IAPT providers, with very different service models and organisational positions (e.g. NHS, 3rd Sector etc)
- Provide a clear and accurate picture of the job duties and level of seniority – a qualified PWP needs to recognise what experience, opportunities and support they will have access to in taking up a role at the same level in a different organisation e.g. appropriate supervision, opportunities for CPD, etc
- Always offer the opportunity to speak to an interested candidate, and/or an informal visit to the service – while it is the responsibility of the candidate to take up this opportunity, it is important to actively promote this in attempting to demonstrate why the service would be an attractive opportunity for them

Interviews

The role of the interview panel is to ensure the best candidate is recruited. The panel should consist of individuals who have a specific interest in the appointment, and it is good practice to have at least one experienced PWP as part of the interview panel (this will preferably be a senior PWP but, if not available, an experienced qualified PWP will be a valuable member of the panel).

The makeup of the panel should aim to reflect the community served: it is best practice to include service user representation where possible, however, a good alternative can be a representative from a local community group e.g. local advocacy services, or mental health charity.

While it is accepted that Agency staff do not always undertake a formal interview process, there should still be a clear process in demonstrating their suitability for the post, and this should include as a minimum a brief informal interview (either face to face or telephone) with an appropriate manager.

Induction

An effective programme of induction will help to ensure that new PWP's quickly and easily become embedded within the team and gain an understanding of the organisation and its policies, procedures and culture as early as possible. It also gives them a full opportunity to quickly become effective and motivated team members.

Trainee PWP

It is essential that trainees are given appropriate support for the undertaking of the qualification, alongside understanding the workings of the particular service they are in. There are clear guidelines as part of the PWP curriculum review (LINK) for the responsibility of services to provide an appropriate learning experience: this includes appropriate timescales for commencing direct patient work independently, and providing the appropriate support and supervision necessary to enable each individual to achieve successful completion of the course.

Qualified PWP / Senior PWP

While qualified and Senior PWP's have worked in the same clinical role previously, it is essential they are enabled to develop a good understanding of the systems and processes that support their clinical work in a particular service, as these can be very different. An effective induction programme would include, use of clinical systems, admin processes, expectations for supervision, as well as mandatory training within the organisation, and time to develop a good working knowledge of other services for effective signposting interventions with clients.

Agency PWP

Induction is also important for Agency staff. While this may be briefer, it is still important that they fully understand the systems and processes to support their clinical work, and undertake appropriate mandatory training, in particular, local risk management and safeguarding policies for the organisation they are working within.

Retention

The retention of PWP's has become a significant issue for organisations, and it is recognised that a large number of the PWP workforce move on to further training, particularly as High Intensity Therapists or Clinical Psychologists in a relatively short period of time. Currently the PWP workforce is, primarily, young and at an early stage in their career, yet the opportunities for progression within the PWP role are still not fully developed, with often the Senior PWP role seen as the only option.

Trainee PWP

It is desirable to support trainee PWP's to see the PWP role as a rewarding and long term career opportunity, but this is more difficult to achieve when staff are on training contracts, which has become more routine in many localities. The high turnover of the PWP workforce can often result in opportunities for trainees to then take on permanent roles, and the possibilities of this should be made clear to the trainees to encourage retention within services where possible.

Consolidation of skills is also important within the PWP role: this ambitious and intelligent workforce are often keen to continue with their learning, but the value and benefit of skills consolidation during the first year post-qualification should not be underestimated, and should be openly discussed with the trainees so they are clear about these expectations.

Qualified PWP

In order for PWPs to want to stay in post it is important that they are given a variety of development opportunities to widen their skills and experience. Whilst it is important for newly qualified workers to consolidate their skills, those more experienced workers need access to new opportunities. To achieve this, some services have developed specialisms within the role, so that PWPs have a lead in certain areas at step 2 and are recognised as a 'champion' in a particular field. This allows PWPs to learn new skills including project management, networking and partnership working, whilst also developing a sense of ownership in their work and developments in their specific area.

Long Term Conditions: provide training to staff working with people with LTC's, develop resources for patients with LTC's, pathway developments, patient groups for specific conditions e.g. COPD, Diabetes.

This could be adapted for other patient groups such as military veterans, BME populations, older adults, young people etc.

Peri-natal: partnership working with Midwives and Health Visitors, pathway developments, patient groups with crèche facilities in appropriate community settings, networking with e.g. homestart, children's centres. Support for Dad's

Opportunities to offer interventions in a variety of formats: evidence based group interventions e.g. stress control, Living Life to the Full. Interventions offered via telephone or web-based e.g. Skype, email, messenger, CCBT programmes

Opportunities to deliver teaching as part of core PWP training programmes, and act as e.g. a practice-link for PWP training courses. Opportunities to deliver training to other staff groups within their Trusts around psychological wellbeing

Opportunities to develop pathways outside of what might be considered 'routine'; working proactively with businesses for example who have high sickness levels due to problems such as stress / anxiety / depression. Or setting up pathways and delivering interventions within colleges / universities.

Opportunities to expand PWP skill and innovative interventions at Step 2 e.g. Mindfulness Based Stress Reduction (MBSR) within a step 2 service, supporting PWPs to access accredited training to achieve MBSR practitioner status

It is important to build on and utilise the skills of the specific individual when considering issues surrounding retention, for example, PWPs may hold Masters level qualifications which may include a research component, which could be a valuable resource to services in undertaking research and audit in practice.

One of the main issues cited from PWPs in regards to retention, is the lack of opportunities for development *within* the role: contrary to popular belief, not all PWPs want to move "upwards" into higher 'steps' and more specialist services. These opportunities are currently rarely available yet PWPs work with very high numbers of weekly patient contacts, delivering interventions in a very routine way: if workers are not given the opportunity to develop outside of this routine practice, they can become burnt out and start to look for opportunities elsewhere. (Please see below 'Senior PWP' section for further examples)

Continuing Professional Development is also vital in the successful retention of PWPs, who should have the same opportunities to access this as other professionals within IAPT services. UCL have developed guidance to support appropriate CPD for PWPs which can be found [here](#). It is important that PWPs have access to this appropriate CPD to maintain their professional standards, but also have the opportunities to implement any newly acquired skills that are valuable for both service delivery and individual development.

Senior PWP

Senior PWP positions are often attractive to experienced PWPs who are invested in developing a career within psychological therapies and are ready to move to the next stage in terms of their development, but who do not want to re-train in something else (e.g. CBT or Clinical Psychology). Senior PWP positions tend to attract those who are passionate about the delivery of low intensity psychological interventions and those who want to develop their career supporting step 2 services. However, senior positions tend to be limited, and movement in to these positions is often internal, therefore opportunities are still minimal.

In order to retain PWPs in senior positions, it is important to allow them access to the support necessary to help them carry out the role, for example, to attend the accredited IAPT supervision training. If part of their role will be operationally managing junior staff, again they need to be supported to access appropriate training e.g. an 'introduction to line management'; this does not need to be costly external training and is often available within organisations. However, it needs to be accepted that some senior PWPs may want to develop further and may be keen to study for a recognised management qualification at Master level for example. As with the qualified PWP role, it is important senior PWPs have access to a range of development opportunities and for them to feel valued in their senior role including access to appropriate CPD.

Currently, Senior PWP roles focus on supervisory and management responsibilities. However, there is scope to also begin to develop other, more clinically focussed, specialist roles at a senior level developing step 2 expertise for particular clinical areas and patient groups e.g. Long Term Conditions, CAMHS, prison populations. As a specialist role, this might include Pathway Development similar to that noted in the 'qualified PWP' section, but might also include an extension of responsibilities, such as working with commissioners and managers of other services, project management and offering specialist supervision to other PWPs in working with this specific group. PWPs choosing to go down this route of development may again be keen to support their learning with a more formal qualification and need to be supported to access appropriate training; again this doesn't have to be costly external training, with many organisations offering an internal 'team leader programme' for example. This may then lead on to further formal training in this area, with senior PWPs for example being well placed to complete a recognised NHS leadership qualification, such as those offered via the North West Leadership Academy (e.g. Mary Seacole Programme).

Such development opportunities will allow those within senior positions to feel supported and valued, and as such they are more likely to commit to the role. Many senior PWPs will stay committed to the role given the opportunities for continued development, and these skills and experiences will also put these ambitious practitioners in a strong position to, longer term, be recruited in to more senior roles within psychological therapy services and leadership roles within the wider NHS, potentially becoming NHS leaders of the future.

Agency

While this guide does not intend to encourage the 'retention' of agency staff per se. they do need to consistently work at an appropriate standard. It is therefore essential that Agency PWPs always receive the appropriate level of supervision for the clinical work they are undertaking (i.e. the same as other qualified PWPs), and that any problems or concerns are addressed with both the individual, and the agency who employs them. It is also the responsibility of the agency to, where appropriate, address and overcome these issues, and share this information with other employers as appropriate. Agency PWPs must have access to necessary mandatory training but their on-going development and CPD access remains their own responsibility.

Conclusion and Recommendations

This guide has been produced to support IAPT services to implement these standards of good practice in their management of the PWP workforce, in the hope of helping services to retain a high quality workforce, who are committed and dedicated to the profession and see it as a career. As the guide has been produced in collaboration with the workforce themselves, as well as input from service managers / service leads, we trust that it reflects some of the current issues surrounding recruitment and retention, and hope that the ideas and suggestions prove useful.

This guide has been developed in liaison with a number of key stakeholders and, in particular reference to the use of recruitment agencies, Pulse, and Sugarman, the two main providers of agency PWPs in the North West, have confirmed their current policies are in line with and are supportive of the recommendations of this guidance.