

Occupational therapy workforce strategy action plan

Northern Ireland

2025–2027



Introduction

In March 2024, we published a UK-wide **Workforce Strategy and action plan**, which presented a bold and ambitious plan for the future of the profession. We highlighted the challenges facing occupational therapy across the UK, made the case for change and recommended clear actions for UK Government and stakeholders to secure the future of occupational therapy. We recognise the different context and devolved nature of key policy areas such as health, social care and education, and we have developed a nation-specific action plan for Northern Ireland.

Our plan is aligned with the policy context in Northern Ireland and outlines the key actions we will take over the next three years. In October 2016, a 10-year approach to transforming health and social care in Northern Ireland was launched, 'Health and Wellbeing 2026: Delivering Together'. *Delivering Together* sets out the need to enable people to stay well for longer and, where possible, provide care and support in the community.

Developing and delivering this action plan for Northern Ireland was and will continue to be a team effort. We are grateful to the member volunteers in our Workforce Strategy Advisory Group in Northern Ireland who've helped to shape this action plan.



Current situation

The occupational therapy workforce in Northern Ireland is facing a number of challenges, including:

Demand outstripping capacity: There is a growing need for occupational therapy services in Northern Ireland, due to an ageing population¹ and the prevalence of long-term health conditions.²

Workforce shortages: The current workforce is under pressure, with staff shortages and retention issues impacting on capacity of the profession to provide essential services.

Budgetary constraints: The Department of Health in Northern Ireland and the five health and social care Trusts are facing huge financial challenges, including unfunded spending pressures of £472 million³ in the 2024–25 financial year alone. The resultant budget constraints have affected the availability and quality of services in Northern Ireland.

Upskilling the workforce: There is a need to make sure the occupational therapy workforce in Northern Ireland has the necessary qualifications, ongoing professional development opportunities and support to fulfil their roles, including making the best use of emerging technologies. There is also a need for visible career pathways (at all levels of registered and un-registered practice), that shows longevity in the profession, from early careers to consultant level practice. It is important that the **AHP Advanced Practice Framework** for Northern Ireland continues to be embedded in practice. There's also a need to make sure occupational therapy support workers are given the tools, training and skills to continue to play an invaluable role in delivery of care.

Expanding the profession: The only route to registration as an occupational therapist in Northern Ireland is via a three-year bachelor's level university degree. This doesn't reflect the needs of the emerging population and inhibits diversity, as attending a full-time university course is not viable for many.

The state of the occupational therapy workforce in Northern Ireland

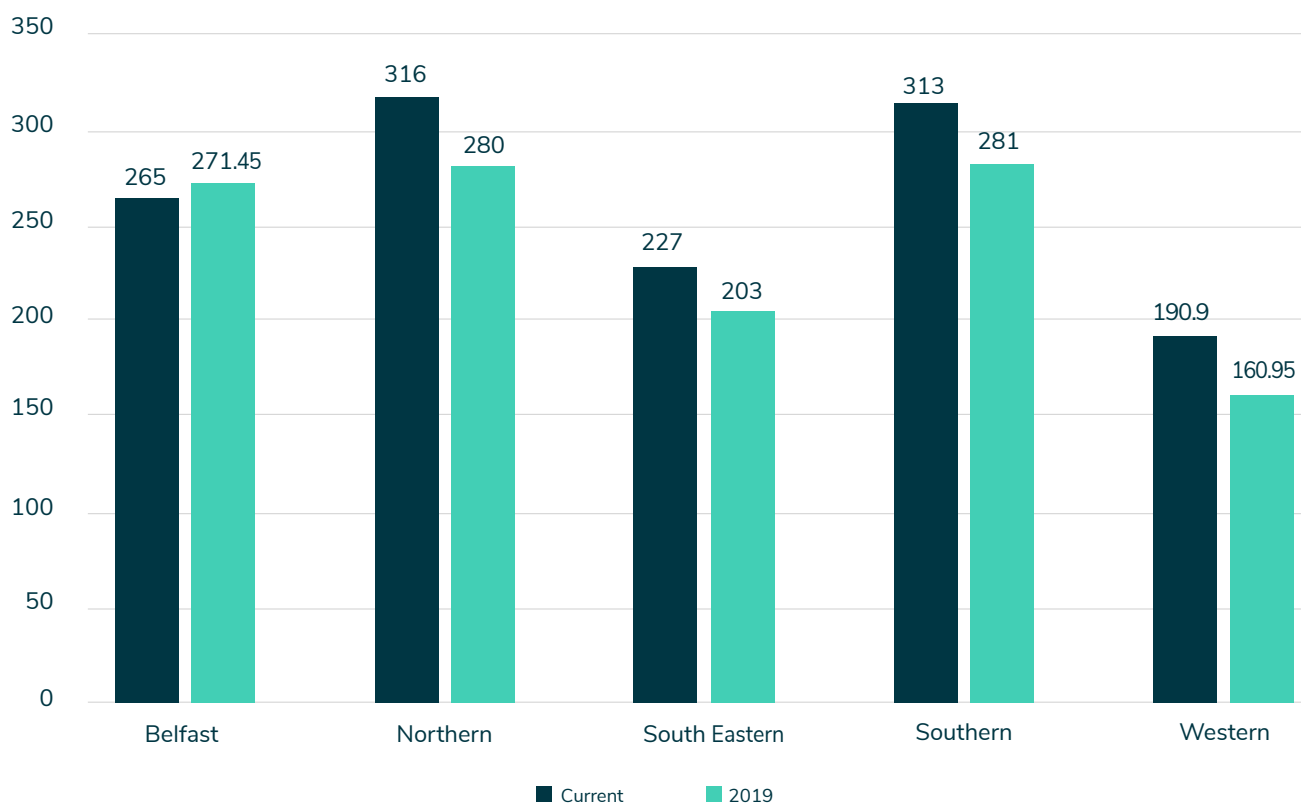
The occupational therapy workforce in Northern Ireland faces several challenges, including staffing shortages, high demand for services and low morale and job satisfaction in the profession. According to the Occupational Therapy Workforce Review 2019–2029⁴ published in 2022 by the Department of Health, there is a need for strategic planning to address these issues and to ensure a sustainable workforce. The review highlights that the ageing population and increasing prevalence of chronic conditions are driving the demand for occupational therapy services. This has put significant pressure on the existing workforce, which is already stretched thin. Additionally, the COVID-19 pandemic has worsened these challenges, leading to increased workloads and high levels of stress among occupational therapists, as reported by members in the **2023 RCOT Workforce Survey**.

Health inequalities are an issue of significant and growing concern in Northern Ireland and tackling this has been identified by Health Minister, Mike Nesbitt, as one of his key priorities⁵. **The 2024 Health Inequalities Annual Report** highlighted some stark challenges, which must be considered as part of workforce development and service planning. The Department of Health estimates that health inequalities cost the public purse up to £1.7 billion every year⁶. This is due to a range of factors including welfare costs, lost productivity and crucially in our context, health service costs. In Northern Ireland, the top ten areas of deprivation are situated within two health and social care Trust areas, Belfast and Western⁷.

Efforts are being made to address these workforce issues through various initiatives. The Department of Health has been working on improving recruitment and retention strategies, including offering more education and training opportunities and support for professional development. There is also a focus on enhancing the role of occupational therapists within multidisciplinary teams to improve service delivery and outcomes. It is vital to ensure that as the system works to deliver efficiencies, occupational therapists are given time, space and resources to undertake research and innovation, to support their involvement in making change.



Number of current registered occupational therapists compared to 2019



Source: Data gathered in response to RCOT Freedom of Information Requests, 2024

It's important that we create a culture that values evidence-based practice and continuous quality improvement. The Department of Health faces huge financial challenges and a large budget deficit which call for a move towards doing things differently and driving efficiencies. It is therefore important that occupational therapists receive robust support to engage in research and innovation, as outlined in the **AHP Research and Innovation Strategy Northern Ireland**. This includes access to dedicated funding, mentorship programmes as well collaborative opportunities with academic institutions. To realise this ambition, we need support for occupational therapy practitioners to enhance their skills and experiences in research and innovation. The forthcoming RCOT Research and Innovation Strategy will set out how we will enable the occupational therapy workforce to generate and integrate research and real-world evidence into practice, improving the delivery and quality of service provision and reducing health inequalities.

Waiting lists for occupational therapy services in Northern Ireland have been a significant concern. In the Northern Trust, the longest wait to see an occupational therapist is 1,235 days⁸. In the Western Trust, inpatient and day case waiting lists for patients under 18 indicate there are 1,447 people on a waiting list. The challenges for outpatient services for children and young people is also an area of concern, with 887 young people waiting for occupational therapy input in the Western Trust.

While the challenges in accessing occupational therapy services exist across the board, some services in Northern Ireland are facing particularly acute challenges. For example, in the Northern Health and Social Care Trust, recent data⁹ tells us that the longest wait for children's occupational therapy is more than three years. In the South Eastern Trust, there are 1,489 children waiting to be assessed on Attention Deficit Disorder (ADHD) and autism, with the longest wait being 973 days. This is due to a myriad of factors, including a demand capacity mismatch and staffing challenges. These long waiting lists have major implications, not just on the children and young people, but also their family and wider community. Such delays in accessing services can lead to children and young people in Northern Ireland not reaching their full potential.

In response to a written Northern Ireland Assembly question¹⁰, the Department of Health recently published the number of people waiting to access occupational therapy services across Northern Ireland, as of 31 August 2024. There are more than 19,000 people waiting to access occupational services. More than 57% of those are waiting more than 13 weeks. In the response to the written Assembly question, Minister Nesbitt concedes that 'Trusts are delivering in excess of expected volumes, but demand is currently exceeding capacity.'

The demand for these services often exceeds the available resources, leading to longer waiting times. Patients are prioritised based on the urgency of their condition, with those needing immediate attention being seen first. However, even with this prioritisation, many individuals face long waits before they can receive the necessary care. This delay can impact their quality of life and lead to further deterioration in physical or mental wellbeing, with an additional impact on function. In turn, this will lead to additional demand on occupational therapy services, as occupational therapy is crucial for helping people regain independence, to improve their daily functioning and ability to participate in meaningful activities.

Efforts are being made to address these waiting lists, including the implementation of the My Waiting Times NI system¹¹, which provides up-to-date information on average waiting times for various health services. It is important to note that most community-based services, including occupational therapy, are not included within this resource.

Additionally, private occupational therapy services are available which is offering more immediate access to some elements of occupational therapy, but only for people who can afford to pay.



Despite these measures, our health and social care service in Northern Ireland is still struggling to meet the high demand, highlighting the need for increased funding and resources and support for research and innovation, to ensure timely access to essential occupational therapy services for all citizens who need them in Northern Ireland.

Where occupational therapists are having an impact:

Working as mental health practitioners in primary care

Over a three month period, three OTs carried out 6,000 consultations¹², which resulted in 97% of patients, who responded to a survey, being very satisfied or satisfied. The local adult community mental health teams also reported a 43% reduction in referral rates.

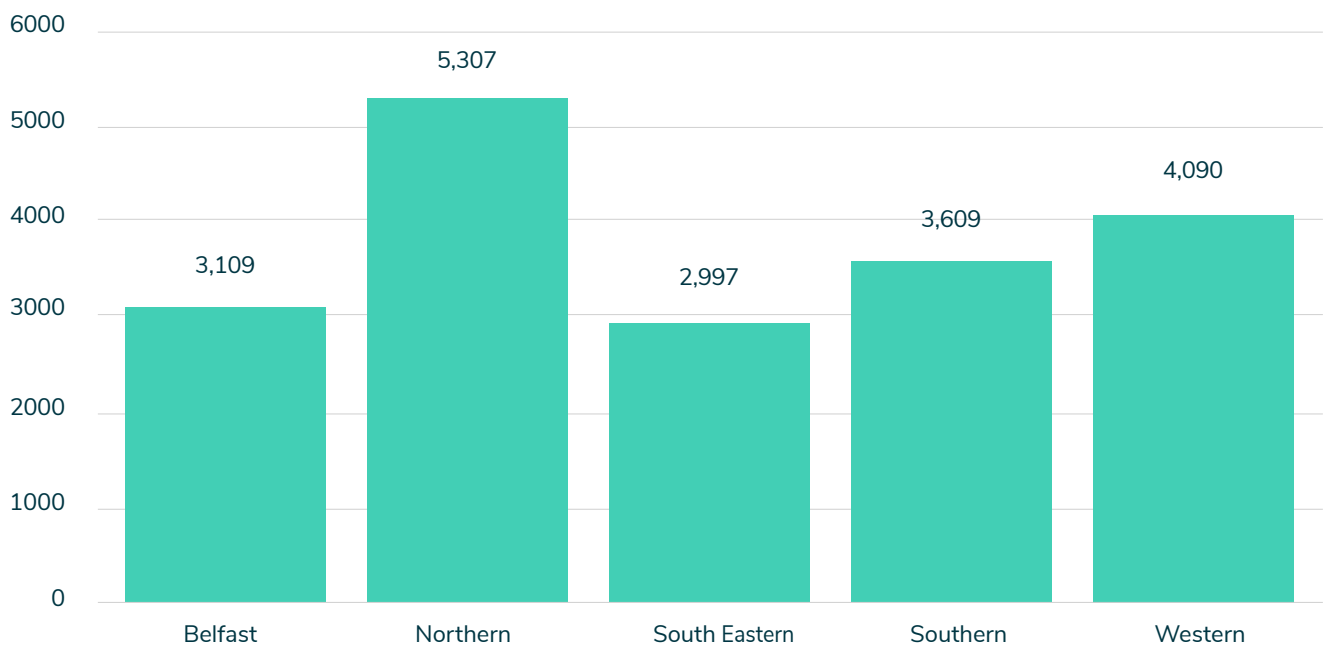
Supporting parents' mental health

100% of parents who attended a 'Mums and Munchkins' group for new parents with or at risk of perinatal mental illness felt more confident in their parenting skills after attending an occupational therapy intervention programme.¹³

Managing health and work

The Condition Management Programme evaluation (2022), showed that out of 500 participants of this OT led programme, 75% of those who were unemployed reported increases in work readiness. 34% returned to or remained in work, 13% started new employment and 12% started a course or further training.¹⁴

Number of people on waiting lists for occupational therapy services (2024)



Source: Data published by Health Minister in response to a written Assembly question, September 2024.

Health and social care policy context in Northern Ireland

To achieve the maximum impact for our Workforce Strategy action plan, we must understand the health and social care policy context in Northern Ireland, the key political priorities and what this means for occupational therapy.

Health and Wellbeing: Delivering Together: 2026¹⁵ recommends developments across four main areas:

1

Build capacity in communities and prevention: to reduce inequalities and ensure the next generation is healthy and well.

2

Provide more support in primary care: to enable more preventative and proactive care, earlier detection and treatment of physical and mental health problems.

3

Reform our community and hospital services: so that they are organised to provide care when and where it is needed.

4

Organise ourselves to deliver better: by ensuring that the administrative and management structures make it easier.

The Occupational Therapy Workforce Review 2019–2029 published in 2022 mapped out the relevance for occupational therapy (see Appendix A). There is, however, a misalignment between current health policy and the reality of service delivery at the coalface. Despite the clear and consistent positioning of occupational therapy as a key enabler to transformation, occupational therapy practitioners report that they continue to work in hugely challenging environments and often do not have the operational support they need to fully fulfil their role. The misalignment between policy and service delivery has revealed several issues including:

Inconsistent funding: The sporadic and short-term nature of funding, as government departments in Northern Ireland continue to operate with a single year budget, has led to disparities in service provision across Northern Ireland. It also doesn't properly leverage the full potential of the occupational therapy workforce's skills, knowledge and creativity. The way funding is allocated within individual health and social care Trusts is often not consistent and has led to inequitable service provision. This is reflected in how waiting lists vary across the Trusts. The lack of multiyear budgets and short-term nature of funding in Northern Ireland is also a barrier to research and innovation for occupational therapy practitioners.

Leadership opportunities: Occupational therapists are often not allowed to apply for certain leadership and senior management positions. The legislative requirement to have a registered nurse on the executive board of Trusts is not reciprocated for Allied Health Professions (AHPs), limiting the capacity for occupational therapists to lead collaboration and systemic change. Occupational therapists are also often excluded from applying for some research funding opportunities, which further hampers their ability to lead change.

Demographic data: Inadequate and inconsistent demographic data prohibits effective workforce planning efforts.

Lack of recognition for the power and potential of occupational therapy: There's a lack of understanding and appreciation for the power of occupational therapy and our unique role in addressing broader system challenges and opportunities. This lack of understanding of the unique core skills of occupational therapists by operational leadership, outside of the profession, can lead to occupational therapists being given more generic job roles – impacting job satisfaction and retention.

Our workforce vision

Our vision is for an expanded occupational therapy workforce in Northern Ireland – positioned to have maximum impact in improving people’s health and quality of life.

By 2035, we will have an occupational therapy workforce that is:

Confident and skilled in championing inclusion and advocating for occupational justice, focusing on the right of every person to have the choice and opportunity to engage in a diverse range of activities and roles.

Based primarily within communities, working closely with local populations to meet their health and care needs and ensuring that services are accessible to everyone.

Positioned to focus on prevention and early interventions, minimising the need for crisis interventions and dependency on care services.

Putting occupations at the forefront of their practice, empowering people to do the occupations that they value, manage their health and care needs, and contribute to society.

Objectives

We will work with occupational therapy leaders, external stakeholders and decision-makers to:

Increase pre-registration education places.

Expand routes to registration, to include development of occupational therapy pre-registration degree apprenticeships and pre-registration MSc/postgraduate programmes. This would help to recognise the diversity of the local population and lead to more inclusive approaches to academic, research and career development opportunities.

Ensure high quality and effective education for learners. As university places rise, there must be support given to our health and social care Trusts to ensure they can provide ongoing high quality placements, essential for the next generation of the profession. This is important in the context of increased demand for services and high vacancy and sickness rates.

Improve the geographical distribution of the occupational therapy workforce, to tackle regional imbalance and ensure every citizen who needs it has timely access to the life-changing power of occupational therapy.

Campaign for strategies to retain the current occupational therapy workforce in Northern Ireland, including improved access to leadership, research and innovation opportunities.

Invest and upskill our occupational therapy support workforce, who play a vital role in providing care and support.

Here are some of the key collective actions we'll take to implement the occupational therapy Workforce Strategy in Northern Ireland.

Through our influencing work and collaborations, we will build a strong case for:

Increasing the number of pre-registration occupational therapy places in Northern Ireland. To achieve this, we will lobby the Northern Ireland Executive and support partnership working between employers and the education provider.

Investing in the recruitment and retention of the occupational therapy workforce in Northern Ireland. This includes taking steps to ensure we retain as many graduates as possible who've studied in Northern Ireland to work in Northern Ireland, and supporting Northern Ireland residents who have studied elsewhere to return to Northern Ireland to practice.

Lobbying the Executive to provide equitable access for specialist training, leading to professional opportunities, such as advanced practice roles for occupational therapists.

The value and impact of occupational therapy by supporting and promoting research and innovation. We will facilitate exchanges of learning to inspire others to take transformative action locally.

Optimising occupational therapy in primary and secondary prevention to address health inequalities by capturing service improvement and real-world evidence data on the impact of occupational therapy working in communities. This will help keep people in work and reduce reliance on acute hospital services.

The tables on pages 13–22 present our action plan for delivering our Workforce Strategy in Northern Ireland. Each workforce priority has actions with measures and timings.

Workforce priority one: Optimising occupational therapy



- We will support occupational therapy practitioners in Northern Ireland to be changemakers, using their skills and knowledge to lead and co-design innovative products, interventions and services that improve people’s lives and wellbeing.
- We will champion innovative service delivery models that improve access to occupational therapy and achieve health equity for all.

| Action | Measure | When |
|---|---|--------------|
| <p>We will highlight the value and impact of occupational therapy practitioners working at enhanced and advanced levels of practice.</p> <p>We will work with the Northern Ireland Allied Health Professions community to share information and promote different models of practice, challenging practitioners to think and work differently.</p> <p>We will work with the Allied Health Professions Federation Northern Ireland (AHPFNI) to highlight the value of advanced practice roles to commissioners, elected representatives and decision-makers.</p> <p>We will support the continued embedding of the Advanced Practice Framework for AHPs in Northern Ireland.</p> | <p>Volume of case studies and service examples collected to highlight the value and impact of occupational therapy practitioners working at advanced levels of practice.</p> <p>Number of occupational therapists working at advanced levels of practice.</p> <p>Number of occupational therapists working in research and innovation roles.</p> <p>Number of meetings with commissioners and decision-makers centred on advanced practice.</p> | 2025 to 2027 |
| <p>We will work with our members to use the Innovation hub as a digital platform to build knowledge and confidence, to drive innovation and demonstrate the impact of occupational therapy.</p> <p>We will support the continued embedding of the AHP Research and Innovation Framework in Northern Ireland.</p> | <p>A real-world evidence base of occupational therapy demonstrating value and impact in Northern Ireland.</p> <p>Number of improvement journeys from Northern Ireland submitted to the Innovation hub.</p> <p>Number of improvement journeys from the Innovation hub shared with key stakeholders including the Department of Health, health and social care Trusts and the Chief Allied Health Professions Officer.</p> | 2025 to 2027 |

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| <p>We will work with our members in Northern Ireland to collect case studies and impact examples across primary care, children, young people and families and community rehabilitation, demonstrating our role in addressing prevention and health inequalities.</p> <p>We will use these case studies to show external stakeholders the value of improved access to occupational therapy for local populations and to wider health and social care delivery.</p> | <p>Number of case studies and impact examples collected from our members, partners and stakeholders.</p> <p>Number of improvement journeys shared with professional and practice networks, including the Allied Health Professions Network.</p> <p>Number of improvement journeys shared at national events, including any local policy conferences and RCOT's Annual Conference.</p> <p>Number of meetings held with local decision-makers including the Health Minister, Chief Allied Health Professions Officer and other key stakeholders.</p> <p>Numbers of case studies shared with key stakeholders.</p> | <p>2025 to 2027</p> |
| <p>We will work with RCOT colleagues to develop resources that help members measure and communicate the value and impact of their practice in one of three ways:</p> <ol style="list-style-type: none"> 1. Economically (for example, using return-on-investment models). 2. Socially (for example, using realist evaluation methodology). 3. Experientially (for example, using people's stories). | <p>Number of members from Northern Ireland who download RCOT resources to evaluate impact of occupational therapy provision economically, socially and experientially.</p> | <p>2025 to 2027</p> |
| <p>We will work with the occupational therapy workforce in Northern Ireland to identify and explore opportunities for artificial intelligence (AI) and digital technologies in the delivery of rehabilitation, primary care, and children, young people and families services.</p> | <p>Number of users accessing our briefings on assistive technologies, digital healthcare and artificial intelligence. This will be tracked via the analytics of our digital channels.</p> <p>Number of occupational therapy practitioners employed in rehabilitation, primary care, and children, young people and families' services who use AI and digital healthcare solutions in their practice. This will be measured via our workforce survey and scoping review of AI.</p> | <p>2026 to 2027</p> |

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| <p>We will add the Northern Ireland perspective to RCOT national roundtable on digital technology.</p> | <p>Number of Northern Ireland members involved in RCOT UK roundtable on digital technology.</p> | <p>2026 to 2027</p> |
| <p>We will build up the Northern Ireland RCOT region as an important vehicle to strengthen the occupational therapy profession regionally, raise our profile and optimise our impact.</p> | <p>Number of members attending RCOT Northern Ireland events.</p> <p>Number of members from Northern Ireland engaging on the RCOT Communities platform.</p> | <p>2025 to 2027</p> <p>2026 to 2027</p> |

Workforce priority two: Demonstrating value and impact



- We will build our real-world and research evidence for occupational therapy to justify investment in the occupational therapy workforce by quantifying the impact.
- We will work with our leaders to put forward the case for how and where to deploy our expertise to add the most value for people and their families, the wider health and social care system and to avoid critical shortages within the occupational therapy workforce.

| Action | Measure | When |
|--|---|---------------------|
| <p>We will support the occupational therapy workforce in Northern Ireland to modernise its practice in line with local policy priorities and engagement with key stakeholders.</p> <p>We will work with our members and stakeholders to develop UK-wide resources to help systems make best value decisions about the positioning of the occupational therapy workforce.</p> <p>We will empower and upskill the occupational therapy workforce in Northern Ireland to support them to develop arguments for investment in their services, without adding to their clinical burden.</p> <p>We will use case studies and service improvement journeys at national and local level to argue for the most impactful positioning of occupational therapy services in systems.</p> <p>We will work with our members and third sector colleagues to ensure the voice of patients, service users and their families are reflected, to help demonstrate the power and value of occupational therapy.</p> <p>We will work with our regional heads of occupational therapy empower staff to share data and publicise good practice.</p> | <p>Number of engagements with occupational therapy practitioners and support staff.</p> <p>Number of engagements with resources by members, partners and stakeholders in Northern Ireland.</p> <p>Number of examples included in national and regional reports by our members, partners and stakeholders.</p> <p>Number of recommendations from improvement journeys used by our partners and stakeholders.</p> <p>Number of meetings held with the Patient and Client Council, the statutory agency responsible for patient input in health and social care in Northern Ireland.</p> | <p>2025 to 2027</p> |

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| <p>We will work with leaders to reposition, invest in and grow an occupational therapy workforce in line with population health needs.</p> <p>We will co-host national workforce reform workshops to support and accelerate workforce transformation.</p> <p>We will host a virtual workforce reform roundtable with key leaders in Northern Ireland.</p> <p>We will work collaboratively with and learn from colleagues in other AHP professional bodies.</p> <p>We will work in partnership with our coalitions and networks, including the AHP Federation in Northern Ireland, to speak with one voice about the support needed for our members and the communities they serve.</p> | <p>Number of meetings held with key stakeholders where workforce expansion was discussed.</p> <p>Number of members from Northern Ireland engaging in national workforce reform workshops.</p> <p>Number of members from Northern Ireland downloading and using any associated resources.</p> <p>Develop and co-deliver a virtual workforce reform workshop bespoke to Northern Ireland.</p> <p>Number of influencing activities undertaken with coalitions and networks.</p> | <p>2025 to 2027</p> |
| <p>We will publish a new Research and Innovation Strategy to build the capacity and capability of our current and future workforce, to embrace and actively engage with research and innovation.</p> <p>We will widely publicise the Research and Innovation Strategy to members and practitioners in Northern Ireland.</p> <p>We will work with our members, partners and stakeholders to have a baseline understanding of our members' capacity and capability for research that we will use to measure changes over time.</p> | <p>Number of downloads of the Research and Innovation Strategy from Northern Ireland.</p> <p>Number of members from Northern Ireland engaged in our Research Cafés.</p> <p>Number of members from Northern Ireland enrolled onto our Research Connect community.</p> <p>Number and demographics of occupational therapy practitioners working in evidence, research and development roles, tracked through our workforce survey every three years.</p> | <p>2025 to 2027</p> |

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| <p>We will collect and draw on data through our workforce survey, membership database and workforce maps to understand the size, distribution, career levels and skills mix of the OT workforce.</p> <p>This will allow us to monitor and report on trends to inform our influencing activity and decisions about where we should be positioned within our healthcare systems.</p> <p>We will collect data to make the case for expanding routes into the profession in Northern Ireland, including development of an apprenticeship programme and a pre-registration MSc programme. We can also use the data to assess any changes in demographics of occupational therapy students following the relocation of the Ulster University Health Sciences programmes.</p> | <p>Number of mentions of RCOT workforce data by key stakeholders, including by elected representatives in the Northern Ireland Assembly.</p> <p>Number of meetings and other stakeholder engagement and influencing activities where diversifying routes into the profession is discussed.</p> <p>Number of commitments to expanding routes into the profession in party political manifestos, ahead of the 2027 Assembly election.</p> | <p>2025 to 2027</p> |
| <p>We will host a virtual workshop for Northern Ireland members and key stakeholders on the theme of the occupational therapy workforce, to share learning, celebrate success, stimulate challenge and debate around the future of the profession.</p> | <p>Number of annual events held on the theme of OT workforce.</p> | <p>2025 to 2027</p> |

Workforce priority three: Retention and career development



- We will support and promote the development of all occupational therapy practitioners, especially those from historically marginalised and under-represented communities.
- We will build our profession’s capacity, confidence and capability to incorporate leadership, learning, research and innovation into practice.

| Action | Measure | When |
|--|---|--------------|
| <p>We will make the case to NI government to expand and diversify routes into the occupational therapy profession in Northern Ireland, including pre-registration masters and apprenticeship programmes.</p> <p>We will review and develop learning and development standards for pre-registration education and early careers. These will be for education providers, practice-based educators and employers to use.</p> <p>We will support members from Northern Ireland to feed into this process and ensure their voices are heard.</p> <p>We will make the case to NI government to support the retention of Northern Ireland students into practice in Northern Ireland.</p> | <p>Number of meetings with key stakeholders discussing this agenda item.</p> <p>All providers of pre-registration education in Northern Ireland have or are working towards RCOT accreditation.</p> <p>Number of responses from Northern Ireland.</p> <p>Number of meetings and engagements with political stakeholders where this item was discussed.</p> <p>Number of Department of Health funded university places translated into employment in Northern Ireland.</p> | 2025 to 2027 |
| <p>We will make the case to NI government and stakeholders to make funding available for every health and social care Trust to have a permanent full-time occupational therapy practice learning and practice placement coordinator.</p> | <p>Number of meetings with key stakeholders where this is discussed.</p> <p>Number of questions asked in the Northern Ireland Assembly about support for practice and placement education.</p> | 2025 |
| <p>We will work with pre-registration placement educators to support the embedding of the AHP principles of practice-based learning, to enhance their confidence and capability to support learners.</p> | <p>Number of members and educators from Northern Ireland engaged in RCOT Placement Café.</p> | 2025 to 2027 |

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| <p>We will work with employers and members to support the progression of occupational therapy practitioners through career pathways by encouraging development of a work-based mentor programme, to support and guide practitioners as they move forward in their professional journey.</p> <p>We will make the case to NI government to develop a regional preceptorship programme.</p> | <p>Number of work-based mentors in Northern Ireland.</p> <p>Number of occupational therapists in leadership and consultant level roles.</p> | <p>2025 to 2027</p> |
| <p>We will support our members and employers in Northern Ireland to feed their input and perspective into the revised Career Development Framework (CDF) and support members to use the framework to nurture practice at all levels.</p> <p>We will feed Northern Ireland perspective into to the RCOT UK-wide strategy to support the learning and development of our members.</p> | <p>Number of members from Northern Ireland downloading the revised CDF.</p> <p>Number of stories gathered from members who have benefitted from applying the CDF to their practice.</p> | <p>2027</p> |
| <p>Working with our members and employers, we will undertake an extensive survey of the occupational therapy workforce across the UK. We will conduct this survey every three years and track the information.</p> <p>This will support us to better understand and demonstrate challenges around retention and career development.</p> | <p>Increase number of respondents to RCOT Workforce Survey from Northern Ireland.</p> <p>Number of meetings and engagements with stakeholders where results of the Workforce Survey was presented.</p> | <p>2025, 2028, 2031</p> |

Workforce priority four: Effective workforce planning



- We will empower the occupational therapy workforce in Northern Ireland to contribute to, access and use the workforce planning data and intelligence available to them.
- We will empower practitioners to use available data and intelligence to make informed decisions – so we are in the right place, offering the right service to meet local population needs.

| Action | Measure | When |
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| <p>Collaborate with local health and social care Trusts to gather comprehensive data on the occupational therapy workforce, including demographics, skill levels, and service demand.</p> <p>Use data from the Northern Ireland Statistics and Research Agency (NISRA) to identify trends.</p> | <p>Number of data sharing agreements in effect with health and social care Trusts and the Strategic Planning and Performance Group.</p> <p>Number of times our data and intelligence is used in national reports or campaigns.</p> | 2025 to 2027 |
| <p>We will track and report on OT workforce data, structure of leadership teams and OT waiting list data each year.</p> | <p>Number of downloads of annual reporting.</p> <p>Number of times the data is referenced by stakeholders.</p> | 2025 |
| <p>We will develop or signpost to workforce planning tools and frameworks.</p> | <p>Website activity and external references to our workforce planning tools and frameworks.</p> | 2025 to 2027 |
| <p>We will support the development of an RCOT learner data dashboard, ensuring it is applicable in a Northern Ireland context.</p> | <p>Number of engagements from Northern Ireland with the RCOT learner data dashboard.</p> | 2025 to 2027 |
| <p>We will work with colleagues to co-produce Northern Ireland specific plans for each of our priority areas for workforce growth: primary care, community rehabilitation after a stay in hospital, and in schools.</p> | <p>Numbers of plans developed.</p> <p>Number of members in Northern Ireland engaging with co-produced plans.</p> | 2025 to 2027 |

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| <p>We will gather and share examples of workforce models that have improved outcomes for local communities.</p> | <p>Number of innovation journeys from Northern Ireland received via the Innovation hub.</p> <p>Number of improvement journeys submitted that quote Innovation hub as an evidence source.</p> | <p>2025 to 2027</p> |
| <p>We will work with our members and their employers in Northern Ireland to carry out an inclusive survey of the UK's occupational therapy workforce every three years.</p> <p>We will use the results to monitor and respond to quantitative, qualitative and demographic characteristics of the workforce.</p> | <p>Number of occupational therapy practitioners from Northern Ireland responding to our Workforce Survey.</p> <p>Number of times data and intelligence from our Workforce Survey is used in regional and national reports, conversations and/or campaigns.</p> | <p>2025 to 2027</p> |

Monitoring and evaluation

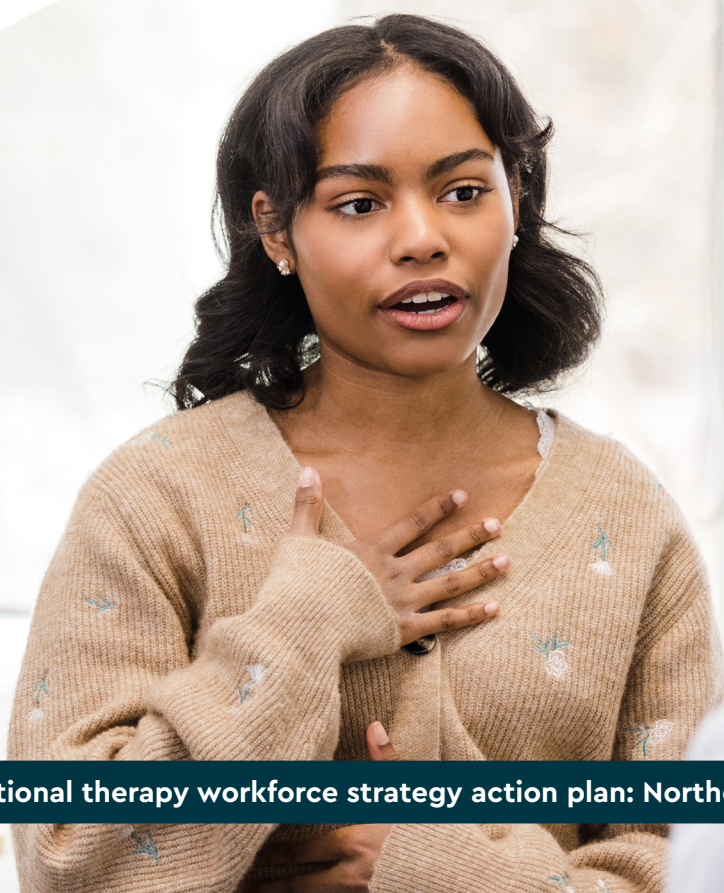
We'll continuously monitor and evaluate the implementation of the Workforce Strategy. This will involve collecting data on a range of indicators, including the number of occupational therapists in Northern Ireland, the geographical distribution of the occupational therapy workforce, and the skills and knowledge of the occupational therapy workforce.

Conclusion

The RCOT Northern Ireland Workforce Strategy Action Plan is designed to strengthen and expand the occupational therapy workforce in Northern Ireland, by focusing on optimising practice, demonstrating value, enhancing workforce wellbeing, and effective workforce planning. This action plan aims to ensure that occupational therapy practitioners are equipped and supported to meet the evolving needs of our local population.

Through targeted actions such as data collection, stakeholder engagement and tailored education programmes, we are committed to fostering a skilled, adaptable and resilient workforce. By implementing this strategy, we aim to enhance the quality of care, improve population health and care outcomes, and ensure that occupational therapy services are accessible to everyone who needs them across Northern Ireland.

We're pleased to launch our Northern Ireland Workforce Strategy Action Plan and we look forward to working with our members, key stakeholders and policymakers to deliver this action plan. Together, we can build a future where occupational therapy practitioners are empowered to make a significant impact on the health and wellbeing of our communities in Northern Ireland.



References

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- ² www.nisra.gov.uk/system/files/statistics/census-2021-main-statistics-for-northern-ireland-phase-2-statistical-bulletin-health-disability-and-unpaid-care.pdf
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- ⁶ www.health-ni.gov.uk/news/minister-sets-out-series-key-initiatives
- ⁷ www.assemblyresearchmatters.org/2018/06/26/multiple-deprivation-in-northern-ireland-latest-results/
- ⁸ Response to RCOT Freedom of Information request, data accurate as of 30 April 2024
- ⁹ Response to RCOT Freedom of Information request, data accurate as of 30 April 2024
- ¹⁰ <https://aims.niassembly.gov.uk/questions/printquestionssummary.aspx?docid=411102>
- ¹¹ <https://online.hscni.net/my-waiting-times-ni/>
- ¹² **Action examples - RCOT**
- ¹³ Belfast Health and Social Care Trust - perinatal mental health service. OTnews, May 2023
- ¹⁴ Project analysis, regional Condition Management Group, May 2022
- ¹⁵ **Occupational Therapy Workforce Review 2019 – 2029 | Department of Health (health-ni.gov.uk)**



Occupational therapy workforce strategy action plan

Appendix A

2025–2027



The Occupational Therapy Workforce Review, published in May 2022, mapped out the relevance of **Health and Wellbeing 2016-2016** for occupational therapy practitioners, under the framework of the four main strategic priorities.

The four priorities and subsequent key occupational therapy projects listed below have been taken directly from the Occupational Therapy Workforce Review and highlight clearly the strong policy support for occupational therapy and the many ways that occupational therapy practitioners are involved in the strategic direction of travel for health and social care in Northern Ireland.

1 Build capacity in communities and prevention – to reduce inequalities and ensure the next generation is healthy and well

Occupational therapy has a key role in ensuring that every child and young person has the best start in life, while also supporting adults to live healthy and well. In Northern Ireland, occupational therapy practitioners deliver this through their work in the following areas:

- Enhanced occupational therapy support in neonatology to support premature babies developmental care, aid parent/infant relationships and facilitate safe and timely hospital discharge. This early support helps reduce long term support on services.
- The emerging role of occupational therapy within Sure Start programmes allows occupational therapy practitioners to support children and families from socially deprived areas to address social, emotional and developmental needs at the earliest possible stage and within their local community.
- Support infant and perinatal mental health pathways and in doing so, helping families to fulfil their parenting role, support emotional development, reduce social isolation and promote social engagement, enhancing their overall health and well-being.
- Assisting in identifying and supporting children with special educational needs, facilitating their access to the curriculum, to achieve and to contribute positively to society.
- Recognising and supporting children with safeguarding needs particularly to enhance areas currently being focused on, for example, neglect and children with disabilities.
- Providing assessment and intervention for children with emotional health and well-being needs.
- Supporting people with mental and physical health conditions to access, maintain and develop occupational roles and activities in education/training, employment, leisure and in the community setting.
- Promote the health and well-being of people and the wider community to increase self-esteem, reduce self-harming behaviours, promote resilience and to assist in suicide prevention.
- In delivering preventative public health, self-management and preventative approaches to the population, turning the curve on reactive services.
- Proactive interventions: all patients receiving OT screening wouldn't traditionally be referred.

2

Provide more support in primary care: to enable more preventative and proactive care, earlier detection and treatment of physical and mental health problems

Occupational therapy models of service delivery within the Primary Care setting have a proven track record of managing and supporting patients with mental illness, co-morbid needs and complexities of the ageing population:

- Emerging role of occupational therapy within multi-disciplinary teams in primary care to promote enhanced health and well-being, self-management and proactively address mental ill-health.
- Frailty and falls prevention for the older person and those with physical disabilities to ensure the delivery of a holistic approach in falls prevention and recovery. Supporting independence within the home, reducing reliance upon care packages.

3

Reform our community and hospital services: so that they are organised to provide care when and where it is needed

Reform of occupational therapy models within the acute setting has significantly improved patient flow and admission avoidance, however these models are in their infancy and need to be further developed.

- Patient flow: by developing a 7-day working model of service delivery, occupational therapy has enhanced patient outcomes and facilitated weekend discharges across the acute setting.
- Occupational therapists are key in embedding admission avoidance into the acute care pathway through partnership working with Northern Ireland Ambulance Service (NIAS). This allows people to be kept at home safely following a fall.
- Occupational therapists as part of the Emergency Department team. This allows patients' level of independence to be assessed at the earliest stage of the acute process, informing the team as to what may be required to facilitate discharge.
- Supporting successful discharge: occupational therapy teams based in community settings including reablement and rehabilitation teams and home environmental assessments are essential for successful discharge. This becomes even more pertinent with the roll out of early supported discharge, discharge to assess and enhanced care at home models of care. Occupational therapists' involvement at this point ensures that the a patient's hospital stay is reduced, while maintaining their safety and optimising their independence within their own home.
- Development of the Trauma Network will require occupational therapists to have a key role throughout the patient's journey; this may include promoting independence and reducing long term impact at the early stages to delivering rehabilitation in local hospitals and within the patient's home.

4

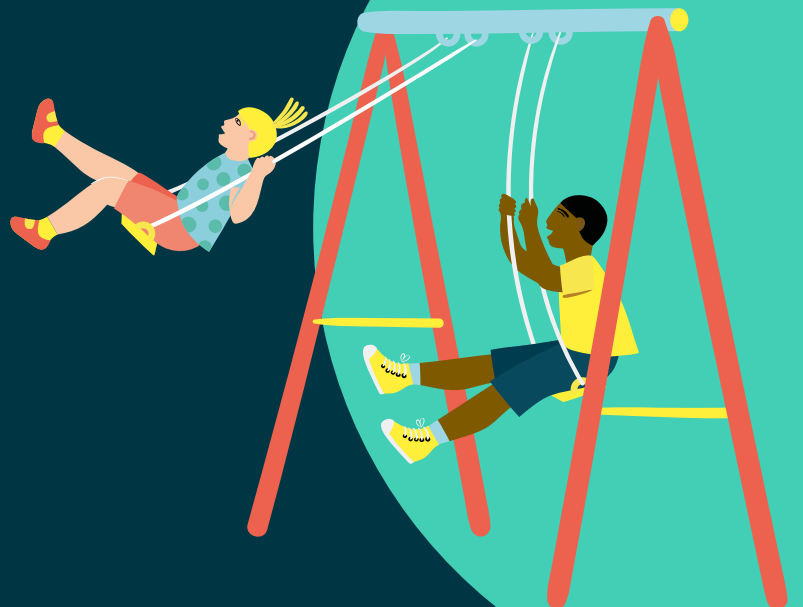
Organise ourselves to deliver better: by ensuring that the administrative and management structures make it easier

Occupational therapy has a strong history of working across traditional boundaries and developing effective partnership working approaches across the health and social care system, other statutory and non-statutory agencies including education, housing, justice, Macmillan and other community and voluntary services:

- Involvement in Integrated Care Partnerships (ICP), elective care pathways and enhanced specialty plans e.g. trauma and orthopaedics, musculoskeletal, rheumatology, pain management to proactively address secondary care pressures.
- Assessment and provision of electronic assistive technology and interface arrangements in relation to housing, employment and education.
- Meeting requirements as assessors of the Mental Capacity Act to complete formal assessments of capacity to provide additional safeguarding for more serious interventions under the Mental Capacity Act (NI) 2016.
- Meeting recommendations of the recent Stroke Review to provide timely access to the very latest treatments and care across the whole spectrum of stroke services to give patients the best possible chance wherever they are in Northern Ireland. This is alongside the key role of ensuring patients receive three hours minimum of motor retraining rehabilitation at least five out of seven days.
- Implementation of Electronic Caseload Analysis and Activity Tool (ECATs) across children and young people and community adult occupational therapy services. This will better quantify the growing complexity and demands upon these services, facilitating and achieving consistency and standardisation across clinical caseloads.
- Further development of therapy led clinics to maximize extended scope roles, e.g. neuro-spasticity, hand therapy, reducing demand on consultants and medical staff, effectively managing secondary care pressures.
- Prison healthcare – supporting and enabling people to have pro-social daily routines, roles and habits as well as meeting their physical and environmental needs.
- Occupational therapy support within diagnostic and intervention services e.g. autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), dementia and learning difficulties, helping to provide timely and differential diagnosis.
- Enhanced leadership development and succession building programmes to ensure the Occupational therapy workforce embeds collective leadership at all levels and delivers high quality outcomes based care.

We're RCOT, the Royal College of Occupational Therapists. We've championed the profession and the people behind it for over 90 years; and today, we are thriving with over 36,000 members.

Then and now, we're here to help achieve life-changing breakthroughs for our members, for the people they support and society as a whole.



rcot.co.uk/workforce-strategy