

## STP Enclosure Cover Sheet

<b>Document</b>	<b>STP WORKFORCE AND ORGANISATIONAL DEVELOPMENT WORKSTREAM UPDATE</b>
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<b>Meeting</b>	Plymouth City Council Overview and Scrutiny Committee

<b>Purpose</b>	To provide an update on the Workforce and Organisational Development workstream.
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<b>Background</b>	<p>The Devon STP has a clear goal to meet the increasing health and care needs of the population while ensuring services are sustainable and affordable. The Workforce and Organisational Development workstream is one of five enabling workstreams supporting the Devon STP change programmes.</p> <p>The workstream is already working on areas identified in the 2017 Care Quality Commission Plymouth Local System Report. These areas are either specifically supporting the Plymouth locality or are representative across the wider Devon system.</p> <p>This report provides an update on the workstream progress, successes and the current key areas of focus with a specific alignment to the 2017 Care Quality Commission Plymouth Local Systems Report.</p>
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<b>Recommendations</b>	1) To note the contents of the report.
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<b>Outcome sought</b>	To improve visibility and understanding of the STP Workforce and Organisational Development workstream and the work focussed in Plymouth.
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**The NHS in Devon understands its need to meet all relevant statutory obligations when undertaking a change programme and nothing in this report should be taken to commit the NHS to a particular decision without proper consideration of those obligations**



## 1. BACKGROUND

- 1.1. The Devon STP has a clear goal to meet the increasing health and care needs of the population while ensuring services are sustainable and affordable. The Devon STP has seven priorities:
  1. Prevention and promoting health
  2. Integrated models of care
  3. Primary care
  4. Mental health and learning disability
  5. Acute hospital and specialist services
  6. Productivity
  7. Children and families
- 1.2. The Workforce and Organisational Development workstream is one of the five enabling workstreams supporting the programmes of change focused on the seven STP priorities.
- 1.3. Workforce currently presents one of the biggest challenges facing the Health and Care System in Devon. There are widely recognised constraints in workforce supply across all sectors in the system with evident gaps already impacting the ability of providers both locally and nationally to recruit to roles in specific professions, particularly within the required sub-speciality areas.
- 1.4. At the same time, the profile of the local workforce suggests significant numbers of senior clinical staff can retire over the next five years, making it increasingly important that system partners are able to retain clinical staff both at an earlier point in their career and through retire and return options.
- 1.5. The need for effective system and local level workforce planning, resourcing and development is therefore paramount and needs to be integral to the agenda of the STP and emerging Local Care Partnerships alongside the management of change to organisational and system structure and configuration, performance and productivity.
- 1.6. To maintain focus and direction the STP Workforce and Organisational Development workstream has a number of key priorities. These priorities are:
  - STP workforce strategy development
  - Reducing nursing & medical agency spend
  - Improve and secure short term workforce supply
  - Ensure long term workforce supply
  - Proactively lead Health Education England and Education provider commissioning
  - System leadership capability (particularly at Executive Team level)
  - Collaborative working and behaviours across all STP partner organisations
  - Translating the STP vision into practical action (to engage staff in creating a shared purpose for Devon)
  - System Ways of Working (shifting cultural and behavioural norms)
  - Effective and Efficient Organisational Systems and Processes (as part of the clinical and non-clinical service redesign work with Acute Services Review and New Models of Care)
  - OD Support to prioritised STP Work Streams (across the 7 priorities)

1.7. This report provides an update on the workstream progress, successes and the current key areas of focus with a specific alignment to the 2017 Care Quality Commission Plymouth Local Systems Report.

## **2. SUPPORTING THE FINDINGS OF THE 2017 CARE QUALITY COMMISSION PLYMOUTH LOCAL SYSTEM REPORT**

2.1. The Care Quality Commission (CQC) undertook a review of the local Plymouth system in December 2017. The report identified the following key areas of workforce and organisational development for improvement.

### **2.2. Areas for improvement: organisational development**

2.2.1. The CQC review identified the following areas for improvement that relate to the business discipline of organisational development:

*a. As the system moves towards further integration, work needs to be undertaken to ensure that staff are fully engaged, on board from the outset and led by a collaborative leadership.*

*b. Organisational development work needs to be undertaken to break down any organisational barriers, strengthen relationships, improve communication and ensure there is a shared understanding among staff of their role in achieving the strategic vision at an operational level.*

2.2.2. The Workforce and Organisational Development workstream is currently focused on delivering the following that will support the above areas for improvement.

#### Talent Management

2.2.3. With funding received from South West Leadership Academy to develop a system wide Talent Management database which will support the development of local high performing talent through Systems Leadership. This will also support system level succession planning.

#### Systems Leadership

2.2.4. With funding received from South West Leadership Academy to develop a system wide Leadership Programme using a blended learning approach to include Group Coaching and simulation as well as a commitment from learners to mentor others in order to develop system skills, knowledge and behaviours.

#### OD & Leadership

2.2.5. Sharing OD capacity and capability across the system in order to provide collaborative learning opportunities and drive efficiency through a system delivery approach.

#### System Leadership Conference

2.2.6. To encourage and cultivate collaborative working and behaviours the Programme Delivery Executive Group (PDEG) has approved a proposal for establishing an STP leadership conference, which would be a quarterly and involving the senior leadership teams of each organisation across the system. The plan will be to have the first conference in May/June this year.

### 2.3. Area for improvement: primary care

2.3.1. The CQC review identified the following areas for improvement that relate to primary care: *Due to the fragile primary care situation, the system needs to work with NHS England at pace to avoid the sustainability of the wider system improvement being put at risk.*

2.3.2. A plan for primary care in the Plymouth area is being developed by NHS England, NEW Devon CCG and Plymouth City Council. The aim is to sustain and develop GP services across the city, with the emphasis on integration and collaboration, technology, premises, and making the city an attractive place in which to live and work

2.3.3. The Workforce and Organisational Development workstream is currently supporting the following areas that will assist primary care within the Plymouth locality:

- Department of Health international GP recruitment campaign is being supported by the STP workforce team through providing expert advice and guidance. 12 posts will be allocated to Plymouth, recently announced by Simon Stevens in the first year of the programme.
  - NHS England and NEW Devon CCG are planning campaigns to attract more GPs to Devon and Cornwall and will include specific measures to encourage GPs to choose Plymouth and make it easier for them return to work. The STP workforce and OD team is supporting this work.
    - NHSE are working on a programme to fast track GP returners back into the workplace through making it easier to get onto the performers list and back into General Practice.
  - Health Education England funding of £190k has been secured to support for 2017/18 financial year three Primary Care projects;
    - Create a web presence that promotes the south west, the pharmacy provision within it and the new models that are being developed.
    - To improve primary medical and community pharmacy workforce commencing with the priority area of Plymouth. Western Primary Care Partnership taking ownership of the Western primary care improvement plan Workforce. Programme manager in post until end June 2018 (CCG/PCC funded). This will enable grip and traction of the programme. STP wide primary care workforce plan drafted November 2017 to include the HEE funded activity.
    - Develop a model of community pharmacy clinical service hubs which is integrated into primary care to support general practice resilience.
- Bids for further HEE funding in 2018/19 financial year are being planned.
- Ensuring that the Primary Care Workforce Strategy is part of the system wide Integrated Care System Workforce Strategy.
  - Leadership links established between the Primary Care Programme and Workforce and Organisational Development workstream to ensure Plymouth benefits from all wider STP workforce work programmes.

2.3.4. NHSE has also announced that they will be allocating additional funding to fund 12 GP trainee places in 2018 as part of their targeted enhanced recruitment scheme for Plymouth.

2.3.5. In addition to the support provided above, the STP Primary Care programme is currently actively working on increasing its available staff capacity and reviewing the deployment of resources to support priority activities.

### 2.4. Area for improvement: workforce strategy

2.4.1. The CQC review identified the following areas for improvement that relate to the development of workforce strategy:

*System leaders should develop a coherent workforce strategy for Plymouth*

2.4.2. The STP Workforce and Organisational Development workstream is currently developing the Integrated Care System Workforce Strategy. This strategy will be closely linked to the wider STP Strategy 'Patients to People' and national HEE workforce strategy which is also currently in draft.

2.4.3. The Strategy will refresh the previous interim STP workforce strategy and build upon the knowledge that has been gained across the system with regard to the workforce opportunities and challenges that exist in delivering new models of care and system architecture.

2.4.4. The strategy will be a system level strategy identifying the future workforce direction and requirements. The strategy will articulate the current and future system position with regard to; short and long term workforce supply including attraction, recruitment, retention and exit; creating a stable sustainable workforce that has the ability to work adapt and work flexibly across the system; training and development; development of new types of roles including strategic implementation of the apprenticeship levy. It will be informed through system level workforce metrics that have been obtained through HEE and the National Minimum Data Set (NMDS) for social care.

2.4.5. To ensure that the strategy will be representative of system needs it will be developed with the engagement of key stakeholders. Engagement with key stakeholders will commence in mid-April.

2.4.6. The development of this system level strategy for Devon will provide direction for a more detailed plan relating to the Plymouth area.

2.4.7. The Academic Health Science Network has also been commissioned to develop a Primary Care Strategy for the south west.

2.4.8. In addition within the Western system work is commencing on creating a single local integrated workforce plan which will be linked to the wider STP workforce strategy and will focus on the areas which are particular to the Western locality and Plymouth. To take this forward a working group has been established with representatives covering Primary Care, Residential and Domiciliary Care, Voluntary and Community Sectors, Plymouth Hospital Trust, Livewell Southwest, Community Pharmacy and NEW Devon CCG and Plymouth City Council. The first meeting is scheduled for April and progress will be reported back to the shadow Local Care Partnership and Overview and Scrutiny Panel.

### **3. IMPROVING SHORT TERM WORKFORCE SUPPLY**

3.1. Devon faces significant challenges with workforce supply which includes attraction, recruitment and retention to work within the Devon health and social care system, in order to begin addressing these issues we have:

- Provided an early focus on domiciliary care to support community proposals as part of 'Your Future Care' plans.
- Developed a Proud to Care Devon website which showcases career pathways, job vacancies and filmed case studies of community roles to promote careers in the sector. There are now 100 Proud to Care Ambassadors recruited and trained to promote the industry.

- Integrated health and social care apprenticeships were launched at Northern Devon Healthcare Trust and Torbay & South Devon NHS Foundation Trust with apprentices enjoying rotational placements in both health and social care settings.
- A system wide vacancy management process has been introduced
- A system wide redeployment process has been created and signed up to by all unions
- Workforce data on recruitment activity has been collated and analysed at a system level to identify hard to fill roles and target resources to improve
- We are exploring rotations of unregistered workforce between Trusts and domiciliary care settings to improve retention and improve integration
- Devoping passports for qualified staff for mandatory and essential training to enable greater movement of resource around the system

3.2. The latest activity in this area of work includes:

- A Retention Strategy and Plan are being prepared, following a major piece of research into the retention of community-based personal care workers. The research was commissioned by DCC and RD&E, in partnership with Living Well At Home providers.
- Following the participation of the STP Resourcing Group in Skills for Care's pilot of Integrated Health and Social Care Ambassadors, Ambassadors from Devon have been invited to London in May 2018 to make a film on the success of the pilot to be used nationwide.

#### 4. HEE FUNDING

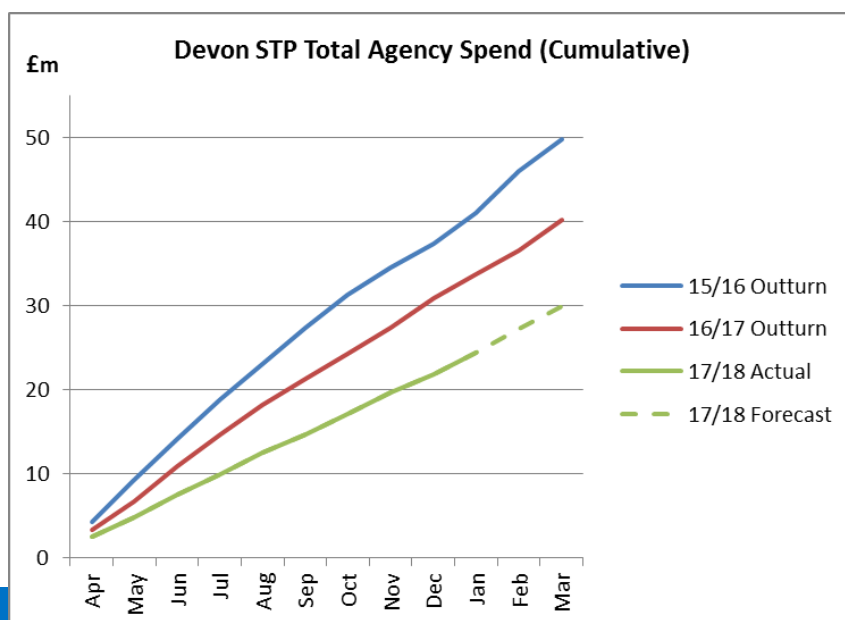
4.1. The Devon STP was successful in attracting funding of £851,000 from Health Education England for workforce transformation in 2017/18. The funding is being used to support eleven areas of development. The eleven areas and current progress are provided in Appendix 1.

4.2. The workforce strategy and OD groups are starting to formulate outlines for bids for future funding so that we can focus resources on the priorities identified by system partners and as outcomes from STP programmes of work.

#### 5. REDUCTION IN AGENCY SPEND

5.1. There has been significant success achieved over the last 2 years of focus in agency spend reductions, reducing overall spend since 2015/16 by around £20 million, see performance Chart 1.

Chart 1: Devon STP agency spend 2015/16 to 2017/18 (forecast)



	M10 YTD	FY Actual/ Forecast at M10
	£m	£m
2015/16	41.0	49.8
2016/17	33.7	40.2
2017/18	24.5	29.9



- 5.1.1. Of the 75 Nursing Agencies utilised at the end of 2014/15, only 30 were on approved 'frameworks', with off-framework activity accounting for 61% of expenditure and 54% of contracted hours committed. The number of agencies has been reduced from c75 to 25 with off framework use restricted to one agency and which accounts for less than 4.5% of the total spend.
- 5.1.2. Reporting is more transparent with the ability to monitor performance at a system level and demand has reduced. Knowledge and expertise has increased across the organisations both within Procurement, HR and within the service areas and across all staff groups
- 5.1.3. The programme continues to be focussed on further rate reduction from agencies, increasing the use of and availability of workers on our internal nursing banks and we have created a tiering process for medical agency usage. We are also pursuing the use of a specialist recruitment agency to support the system with hard to fill roles.
- 5.1.4. A bigger emphasis on the current usage of medical agency, usage of National framework providers and benefiting more from their influence and strategies to challenge suppliers ensuring they follow national contracts.
- 5.1.5. Progressing combined banks and potential IT solutions.
- 5.1.6. There remains a strong commitment to continue on the journey working collaboratively to realise further efficiencies, financial savings and reduce reliance on agency usage
- 5.1.7. The programme is also working with colleagues from local authorities to learn from success they have had within the social worker agency market.

## **6. WIDER PROGRAMME OVERVIEW**

- 6.1. Other key workstream activity includes:
- establish a reliable workforce data provision to support evidenced based decision making and the development of a Workforce and Organisational Development Strategy
  - provide support in controlling medical vacancy management
  - support the Corporate Services Review
- 6.2. **Workforce data**
- 6.2.1. Workforce data has a fundamental role in supporting workforce transformation. It is required to:
- inform the development and monitoring of workforce and organisational development strategy
  - inform service delivery reviews in the design of new ways of working
  - identify current and future operational risks
  - support workforce planning

- 6.2.2. High level organisational data is currently compiled through the NHSI monthly workforce returns and is displayed through a performance dashboard, developed in-house, to provide both system and organisational level performance.
- 6.2.3. GP workforce and practice data is also being collected through NHSE and this is now available for analysis. There are some concerns about data quality however the current base line provides a starting point upon which we can build.
- 6.2.4. The next steps are to continue to establish consistent and reliable sources of system level data that is readily accessible. Additional analyst support has been secured from the NEW Devon CCG Business Intelligence team and conversations are ongoing with HEE on their ability to provide an accessible data source that is ready for analysis.

### 6.3. **Medical vacancy management**

- 6.3.1. An early phase of the Workforce workstream introduced a medical vacancy management process. This process provided the Medical Directors with vacancy details to enable consideration as to whether the vacant posts should be filled on a like for like basis, the vacancy held or take an opportunity for changing the requirements of the vacant post. The process is currently being reviewed with the Medical Directors to determine how it has been operating and whether it has been meeting expectations.

## 7. **RECOMMENDATION**

**To note the contents of the report.**





**Appendix 1: Summary of 2017/18 HEE funding activity and progress as of Q3 2017/18.**

Ref	STP Priority	Title	Bid description	Progress (RAG)
1	Mental Health	Mental Health	To support Mental Health workforce transformation, particularly in skilling staff with the competencies required to deliver new evidence based pathways of care.	
2	Primary care	Pharmacy recruitment portal	Create a web presence that promotes the south west, the pharmacy provision within it and the new models that are being developed	
3	Integrated Local Care	Hospices Train the Trainer	Advanced Communication Skills - Train the Trainer	
4	Primary care	Pharmacy Resourcing and OD	To improve primary medical and community pharmacy workforce commencing with the priority area of Plymouth	
5	Acute hospital & specialised servs.	Physician Associate	Training of additional 20 Physician Associates to replace junior doctor gaps	
6	Acute hospital & specialised servs.	ANNP	Training to establish an additional 17 ANNP	
7	Integrated Local Care	Care Homes Upskilling -	To introduce a management development programme to support care and nursing homes. To introduce a Care Certificate Plus to deliver additional skills to adult social care workers within the community to support unnecessary hospital admittance and support discharge.	
8	Primary care	Pharmacy Training	Develop a model of community pharmacy clinical service hubs which is integrated into the primary care to support general practice resilience.	
9	Integrated Local Care	Common Competencies	Critical competencies identified to support of new models of working	
10	Integrated Local Care	Health and Social Care marketing - resourcing	Collaborative strategic recruitment and retention of staff in the roles required to provide future models of care. Raising the profile of career in care and health in Devon, using high quality multi-media campaign to attract and retain staff	
11	Prevention and early intervention	MECC	MECC Implementation across Wider Devon	