STP workforce event

9 March 2017 – County Hall, Preston

**Background**

How we're making a difference

The development of the Sustainable Transformation Plans (STP) within Lancashire has been part of the work plan of the Health Scrutiny Committee since April 2015 and the ongoing relationship with STP officers has evolved through the implementation of a range of scrutiny methods to inform and involve the members of the Committee. This has included member briefings, formal attendance at Committee, informal meetings with smaller groups of councillors and continual updates on progress and milestones, which have included:

* creation of the initial governance structure
* establishment of a programme team
* Sustainability Assessment Forecast
* Case for Change
* Alignment of Plans
* Development of LDPs

As part of that relationship the Committee have been able to share their views and comments to robustly challenge the 'direction of travel' and contribute to how the Programme should be developed further and this includes a commitment to the formal role of the Committee within the overall STP governance structure.

Although the STP footprint covers three top tier council areas in part and another in part, all partners have come together to engage in meaningful dialogue. It is clear from attendance at regional and national events that the approach taken in Lancashire has led to a far greater role for elected members than elsewhere. Councillors on the committee understand the STP, and have had excellent access to key NHS staff. NHS staff have been open and forthcoming, and have recognised the benefits that have arisen from the increased understanding of a range of members, as well as from the democratic challenge that has been presented to them.

Time has consciously been set aside by the Committee to deal with these long term strategic issues. Too often, scrutiny gets bogged down in the "here and now", especially at a time when in Lancashire and elsewhere the NHS and Adult Social Care have been under pressure and serious strains have shown in the system. Lancashire HOSC has engaged early and often, and have a solid base from which to play a full part in the STPs development.

During the continuous scrutiny of the STP the Committee recognised an opportunity to maximise their influence by creating a mechanism to act as an enabler to bring together key stakeholders to address the challenges relating to the provision of workforce initiatives and projects and ensure that democratic accountability is built into the overall new models of care design and development.

The most recent activity planned was a half day Scrutiny Inquiry event to bring stakeholders and elected members together to discuss the 'cross-cutting' issue of workforce in the delivery of sustainable, effective health and social care services.

This decision was welcomed and supported by the STP Programme team and the Council's management team as an innovative approach to bringing together councillors and officers with the aim of seeking a strategic solution in a transparent and inclusive manner with the ultimate aim of improving the overall health and social care provision for the residents of Lancashire and South Cumbria.

All the individual work streams within the STP and Local Delivery Plans (LDP) are dependent on a multi-skilled and flexible workforce that meets the needs of the population. Those work streams are:

* Prevention;
* Primary Care Transformation;
* Regulated Care Sector;
* Urgent and Emergency Care;
* Acute and Specialised;
* Children and Young People Mental Health;
* Learning Disabilities; and
* Mental Health Transformation

The organisations invited to the workforce event were:

* County Councillors
* District councillors
* Heads of Service – Lancashire County Council
* Clinical Commissioning Groups
* Acute Trusts
* Ambulance Trust
* Health Education North West
* Registered Care Home Managers
* Unions
* NHS England
* STP Programme Team

**Introduction**

On the day delegates received a presentation from Heather Tierney-Moore, Chief Executive of Lancashire Care NHS Foundation Trust and the Senior Responsible Officer for Leadership and Organisational Development within the Lancashire & South Cumbria STP.

The presentation provided crucial context to the challenges relating to a health and social care workforce and identified a number of themes that are being worked through as part of the ongoing development of the STP and Local Delivery Plans.

To deliver the aspirations of the STP requires the health and social care workforce to work in an integrated and synergised way via the new and existing models of care and across integrated and transformed pathways. A number of key factors need to be determined to achieve this such as:-

* Understanding the current and future workforce challenges
* How to recruit and retain a highly skilled workforce and their family
* Understanding the supply of the current and new workforce including what roles are required
* Understanding the impact of the Comprehensive Spending Review on Health Education Funding

Statistical information shared raised several factors in relation to gaps, shortages and vacancies which included:-

* The historical gap in funding that translates into gaps in recruitment – both within the health and the social care sectors
* Impact on the number of trainees across specialities
* Capacity issues of under-graduates trainees entering programmes
* Access to further workforce development
* Heavy reliance on bank, agency, locum and good will of existing workforce
* Gaps across specialities such as emergency care, psychiatry, acute medical and GPs

Additionally, other key themes emerged that require innovative solutions to be developed across the STP:

* Current workforce demographics – age, sickness, turnover and location
* Rotation and learning opportunities
* Time taken to recruit and support available to staff
* Unknown impact of Brexit
* Royal Colleges and GMC influence
* Adverse media stories – Chorley and Morecambe Bay
* Pressures in the system and achievement of targets
* Financial stability

The presentation concluded by identifying a number of opportunities:-

* Apprenticeship Levy
* Maximising every recruitment opportunity
* Learning from New Models of Care
* Enabling a flexible workforce
* Retaining and rewarding the workforce
* Getting fair share of extra medical trainees

Following on from the presentation delegates separated into one of the following six thematic groups

There will be 6 workshop groups in total looking at the following areas:

|  |  |  |
| --- | --- | --- |
| **Table** | **Topic** | **Facilitators** |
| 1 | Public sector wide opportunities | Louise GilesMark Wardman |
| 2 | New models of care involving Third sector and technology | Peter Tinson |
| 3 | Primary Care – how you might do a 'Millom' in Preston | Karen KyleGertie NicphilibDavid Wilkinson |
| 4 | Care home and domiciliary care sustainability | Jackie HansonAdele Thornburn |
| 5 | Pan public sector Apprenticeship levy opportunities | Karen Swindley |
| 6 | Attracting high end professionals into Lancashire/South Cumbria | Mike Burgess |

Some brief questions were provided to facilitate the group discussions

**Challenges & Opportunities**

* What are the issues relating to the challenges locally and what could work including, if relevant, examples of what best practice (either within Lancashire or elsewhere).
* What would the ideal workforce solution look like
	+ What is achievable?
	+ How do we make the most of what we've got?

**From Here to There**

* How do we get from where we are to where we want to be?
* What actions need to be identified
	+ For the STP/LDP officers
	+ For the Health Scrutiny Committee (in terms of where they can add value/influence)

**Key Learning Points:-**

Public sector wide opportunities

* No focus on early intervention – different perceptions
* Perverse commissioning
* Flexible employment required – reduction in agency spend
* Look at function, not form
* Multi skilled workforce locality based

New models of care involving Third sector and technology

* Risk of losing specialism/knowledge depending on model/skill set
* Uncoordinated approach to telecare, telehealth, assistive technology, mainstream technology and apps
* Duplication across some services –
	+ MDT v Social Care
* A joint corporate agreement about the approach and governance
* An agreed dataset for evaluating benefits – health and social care

Primary Care – how you might do a 'Millom' in Preston

* Differential pay scales in GP practices
* Forum to bring Primary Care together to understand issues
* Patient records – sharing access Health and social care
* What are the high level things that will work anywhere?

Care home and domiciliary care sustainability

* Vulnerability - Significant number of small independent care homes, and many domiciliary providers have less than 10 employees.Clear link between Leadership, quality and staff retention
* Make them an integral part of the community
* Incentivise nursing homes to deliver nursing care to residential care clients
* Value the skills and experiences of staff
* Improve positive image and media about the sector

Pan public sector Apprenticeship levy opportunities

* Maximising the use of the levy for new and existing staff
* Development of new apprentice programmes as new roles are developed across the system and across organisations
* Need to understand the model of service delivery to identify staff development needs
* Use apprenticeships to develop new roles quickly across the system
* Levy payers being providers to maximise the return on the levy

Attracting high end professionals into Lancashire/South Cumbria

* Focus on Recruitment and Retention within the economy and ensure we have processes in place to – nurture, 'spot' talent, and ensure we recruit and retain.
* Maximise the opportunities and local links and ties with our fantastic education and health and care organisations – e.g. UCLAN, Lancaster, Royal Preston Infirmary, Lancashire Teaching Trust, East Lancashire, HEI's Uni's
* Need to develop the L&SC 'Brand' – we can then use this to attract professionals/families to the professional jobs within the economy via one accessible website that includes information about schools, leisure, housing, opportunities, networks, place, assets and more.
* Enhancing the “Core skills passport” for foundation trainees but all other health and care professionals would be a good step in the right direction to enable people to stay and develop within the economy.
* Succession Planning and talent management are key

**Shared commitments**

The aim of the workforce Scrutiny Inquiry event was to deepen elected members knowledge and understanding of the current and future challenges, explore options and identify where they can 'add value' to solution design. The challenges of the geography of Lancashire and South Cumbria combined with a diverse population and a myriad of organisations who either commission, deliver or sign post health and social care services within the public, private and third sector require an innovative approach.

Following the discussion within the thematic groups a number of shared commitments were suggested as a way forward.

1. Ensure communication across all sectors takes place to facilitate a greater understanding of the workforce opportunities and challenges
2. Have an oversight of the 5 Local delivery Plans to identify any inconsistencies
3. Share best practice and experiences
4. Be clear about spheres of influence – consider how partners can complement and collaborate with each other
5. Promote the benefits of integrated health and social care – improve the 'caring' profile through good media practices
6. Tackle governance issues
7. Ensure the vision is truly sustainable and flexible for the future
8. Maximise all opportunities across all sectors to develop multi sector opportunities for recruitment at all levels
9. Make the best use of existing skills and pathways
10. Consider how incentives could be utilised

**Conclusion**

Over 50 delegates attended and took part in the event which concluded with networking opportunities for officers and councillors. Feedback was sought and comments included:-

"Group sessions were interesting"

*County Councillor*

"Great overview of workforce challenges"

*Officer*

"Ideas and actions were enthusiastically generated"

*Officer*

"Thought provoking….I'm glad I attended"

*District Councillor*

A number of appendices are attached for further information

* Copy of presentation by Heather Tierney-Moore
* Full notes from the group sessions
* List of attendees
* Programme for the day
* High end workforce framework
* Presentation from Mike Burgess (HENW)