



## GOVERNING BODY

<b>Agenda Item No.</b>	<b>11</b>
<b>Reference No.</b>	<b>IESCCG 19-43</b>
<b>Date.</b>	<b>23 July 2019</b>

<b>Title</b>	<b>Workforce Update incorporating Interim People Plan</b>	
<b>Lead Chief Officer</b>	Amanda Lyes, Chief Corporate Services Officer	
<b>Author(s)</b>	Amanda Lyes, Chief Corporate Services Officer	
<b>Purpose</b>	To present to the Governing Body the workforce update prepared for the Suffolk and North East Essex Integrated Care System (ICS) Board on 12 July 2019.	
<b>Applicable CCG Clinical Priorities:</b>		
<b>1.</b>	To promote self care	
<b>2.</b>	To ensure high quality local services where possible	
<b>3.</b>	To improve the health of those most in need	
<b>4.</b>	To improve health & educational attainment for children and young people	
<b>5.</b>	To improve access to mental health services	
<b>6.</b>	To improve outcomes for patients with diabetes to above national averages	
<b>7.</b>	To improve care for frail elderly individuals	
<b>8.</b>	To allow patients to die with dignity and compassion and to choose their place of death where appropriate	
<b>9.</b>	To ensure that the CCG operates within agreed budgets	
<b>Action required by Governing Body:</b>		
To note the content of the update.		

# Workforce Update prepared for Suffolk and North East Essex Integrated Care System (ICS) Board, 12 July 2019

Presentation content:

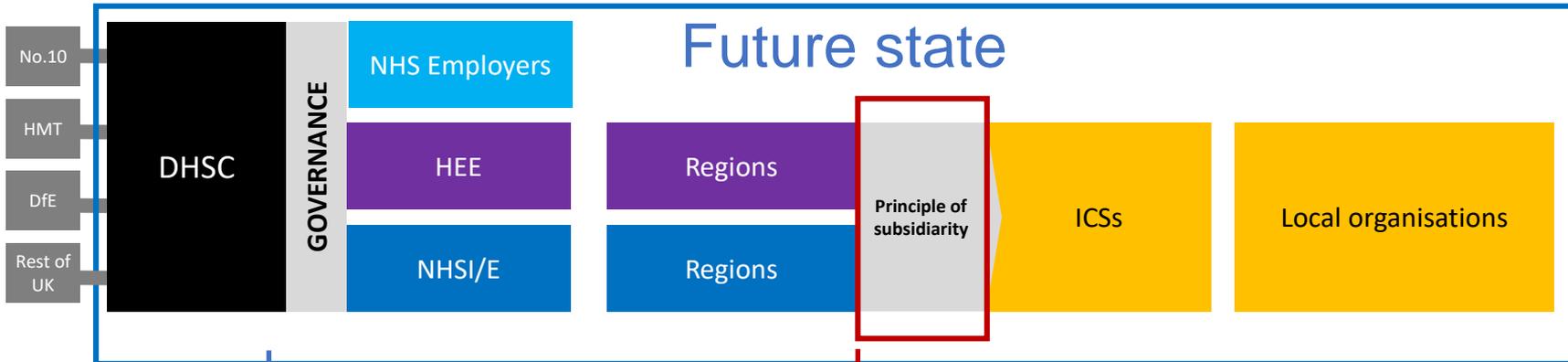
- Implementing the LTP: Workforce Architecture
- Workforce responsibilities at an ICS level
- NHS Interim People Plan
- SNEE Workforce infrastructure current state

## Workforce architecture: Aims and assumptions

**To move to a position where SNEE are doing the right things at the right level on workforce across the system. Commitment that the system strongly supports ICSs/STPs becoming the main unit of workforce planning and work to provide clarity on how we make that happen from 19/20 onwards**

### Future Direction:

- Workforce activities/functions should only be done at a **national level** where: organisations have statutory responsibilities; individuals/teams have specific skills and experience on certain areas; strategic imperatives require national coordination and implementation
- At a **regional level** teams will: support national priorities, deliver improvement programmes, and support ICSs/STPs depending on needs of the system
- **ICSs/STPs** will become the default level for future workforce decision-making in health and care - accountable and responsible for workforce activities, with accompanying resources and according to degree of readiness
- **Local employers** will continue to carry out workforce activities but some may be aggregated up to ICS/STP level where this makes sense
- In summary, ALB's will pass powers, responsibility, funding and governance **down from the national level**, individual organisations will also understand the need for system collaboration locally and **aggregate up**.



Clarity about the roles and responsibilities of the national bodies, regional teams, the SNEE ICS, workforce alliance groups and local employers.  
 Key considerations: the will and appetite from SNEE partners to deliver this?

A roadmap of responsibilities and resources available to SNEE ICS and support request from regional teams  
 Key considerations: how we can make the best use of our local resources to provide the right infrastructure for delivery and accountability

Details of the critical path to establish single, real time, workforce dataset available to national system and local bodies, built up from local systems  
 Key considerations: what does the future state look like? Making data meaningful to SNEE partners

## 18/19 Health and Social Care Workforce Responsibilities

### The Secretary of State for Health – Department of Health

- Supporting Ministers & whole system oversight
- Setting strategic objectives and holding the system to account
- Pay
- Pensions
- Industrial relations
- Electronic Staff Record
- Professional regulation leadership
- Legislation
- ALB sponsorship

### Health Education England

- System-wide workforce planning
- Workforce education and training
- Workforce intelligence and analysis
- Workforce transformation
- Postgraduate medical and dental education
- Commissioning of clinical education and training
- NHS apprenticeships
- Leadership development & whole system talent management
- Return to Practice
- International Education and training Programmes
- Health Careers Service

### NHS Improvement

- Shared lead for implementation of FYFV and service transformation
- Quality improvement
- Performance management of provider organisations in relation to:
  - Workforce productivity
  - Workforce retention improvement
  - Reducing reliance on agency
  - Organisational workforce/finance plans

### NHS England

- Shared lead of FYFV and service transformation priorities
- National lead for delivery of FYFV
- Setting service specifications/outcomes
- Specialised commissioning
- Primary care; commissioning, performance, workforce
- Workforce equality and diversity
- NHS Professional leadership (Chief Professional Officers also work for HEE and NHSI)

### Skills For Care

#### For Adult Social Care:

- Standards, Learning, Qualifications and Apprenticeships (SLQA)
- Recruitment and Retention
- Employer Engagement
- Workforce Intelligence
- Workforce Innovation
- Regulated Professional Workforce in SC
- Leadership and Management

### Sustainability and Transformation Partnerships (STPs) & Local Workforce Actions Boards (LWABs)

- STPs – support closer working of provider organisations to support implementation of the FYFV
- LWABs – Workforce arm of STPs (including Accountable Care Systems and Devolution areas) aligning STP intentions and working collaboratively with HEIs etc.

### Public Health England

- National Lead for FYFV and Prevention/ Population health
- Leadership of the public health workforce (including public health nursing and midwifery workforce)
- Workforce development, equality and diversity
- Implementation of Fit for the Future: Public Health People

### NHS Employers

- National negotiation with health unions
- Support and guidance for local HR, OD and recruitment

### Professional regulators (overseen by PSA)

- Registration and continuing Fitness to practice of regulated professionals
- Setting professional and educational standards
- Approval and inspection of programmes of study

### NICE

- Evidence-based practice and technology guidance
- National Quality Standards
- Indicator development (including Quality Outcomes Framework)

### Care Quality Commission

- Inspection of standards – safe staffing levels, leadership

### Higher Education Institutions/ funding organisations

- Provision of education and training
- Student loans system

# Future Workforce Responsibilities at an ICS level

## **Workforce strategy, planning and analytics**

- Develop ICS/STP level workforce plans to support ICS service priorities, using national and regional workforce data
- Set HR strategy ie culture, management method, engagement

## **Increasing NHS workforce supply**

- Responsible for improving system wide retention and attrition
- Compact with HEE on growing workforce numbers for particular disciplines and professions

## **Improving support available to the existing workforce**

- Responsibility for system talent management
- Improving staff health and wellbeing – being an employer of excellence, equality, diversity and inclusion
- Management of medical rotations/SAS doctor development funds (dependent on size of STP/ICS)
- Responsible for reduction in ICS wide agency spend and development of collaborative banks

## **Enablers**

- MOU with HEE to deliver on ICS and national priorities
- Effective partnership working with HEI's and Further Education Institutions with devolved responsibility for planning and managing clinical placements within the ICS
- Repurposing LWABs, or enhancing existing Strategic Workforce Groups, to engage system partners across health and care

# NHS Interim People Plan

- **Making the NHS the best place to work:** set out action to make the NHS an employer of excellence – valuing, supporting, developing and investing in our people. Carry out extensive engagement with staff, staff representatives and employers to develop a new offer, setting out explicitly the support staff can expect from the NHS.
- **Improving the leadership culture:** including undertaking system-wide engagement on a new NHS leadership compact that will establish the cultural values and leadership behaviours we expect from NHS leaders, together with the support and development leaders should expect in return
- **Taking immediate action in 2019/20 to tackle the nursing challenge:** increase numbers of undergraduate nurses, reduce attrition from training, develop additional entry routes through the nursing associate qualification and apprenticeships, improve retention of our current workforce, support return to practice, and increase international recruitment.
- **Delivering 21<sup>st</sup> century care:** set out action to transform ways of working, releasing more time for care and enabling health professionals to make best use of the full range of their skills, combined with targeted actions to secure the right current and future workforce supply. This will include analysis to inform workforce decisions and the Spending Review process.
- **Developing a new operating model for workforce:** create a cohesive and collaborative approach to leadership and workforce, with clarity about who does what at national, regional, system (STP/ICS) and local levels and with more people activities carried out by integrated care systems.

# Programme structure



**NHS People Plan Advisory Group**  
Chair: Dido Harding

**Social Partnership Forum**

**National People Board**  
Chair: Prerana Issar  
SRO for NHS People Plan

**NHS England & NHS Improvement, Delivery, Quality and Performance Committee**

**Health Education England Board**

**Programme Director, People Plan (interim)**  
Ben Dyson

**Deputy Programme Director, People Plan**  
Gina Naguib-Roberts

**Professional workstreams**  
medical, nursing, allied health professions, healthcare science, pharmacy and dental

**LTP national service programmes**  
maternity, mental health, learning disability/autism, prevention, health inequalities, ageing well, CYP, cancer, diabetes, emergency care, CVD and respiratory, personalised care, planned care, patient safety

**Delivering 21<sup>st</sup> century care**  
Chair: David Behan

<p><b>Releasing time for care</b> Chair: Hugh McCaughey Lead: Rhydian Phillips</p>	<p><b>Workforce redesign: optimising skills</b> Chair: Patrick Mitchell Lead: Kirstie Baxter</p>	<p><b>Securing current &amp; future supply</b> Chair: Wendy Reid Lead: Sam Illingworth</p>
<p><b>Analysis, insight and affordability</b> Chair: Ben Dyson/Rob Smith Lead: Ed Kendall/John Stock</p>		

**Making the NHS the best place to work**  
Chair: Navina Evans  
Lead: Caroline Corrigan

**Improving the leadership culture**  
Chair: Julian Hartley  
Lead: Steve Hart

**Urgent 2019/20 actions on nursing supply**  
Chair: Ruth May  
Lead: Mark Radford

**A new operating model for workforce**  
Chair: Rob Webster  
Lead: Gina Naguib-Roberts

Including improving retention & reducing sickness absence

**Comms and engagement**      **Programme team**      **Finance**

# SNEE Workforce – current state

## Local Workforce Action Board (LWAB) Governance & Oversight

- Emerging Local Workforce Alliance Groups (LWAG's) are forming to sit under the existing SNEE Local Workforce Action Board (LWAB) which would then enable the LWAB to be a more strategic focused board

## Projects and Workforce Priorities for 19-20

- Review undertaken of last years system wide workforce projects and annual report produced, looking to build on best practice for 19/20 system wide projects as resource becomes available
- Work is underway to scope out workforce priorities for 19/20 and to refresh the SNEE Workforce Strategy for health and social care in line with the LTP/People Plan and SNEE ICS ambitions

## Workforce Programme Support & Infrastructure to deliver

- Support from HEE to further develop the workforce programme support over the next 2 years with a particular focus on two new roles to provide strategic direction & accountability and a local workforce intelligence resource to support system wide workforce planning