



Nottingham
City Council



Nottinghamshire
County Council

Summary of the Joint Nottingham City and Nottinghamshire County Health & Wellbeing Board Workforce Workshop - 4th November 2015

Background

A joint workshop was hosted by Nottinghamshire and Nottingham City Health & Wellbeing Boards to explore possible local solutions to known workforce issues. The workshop was designed to give participants the opportunity to share experiences and discuss local strategies to address workforce issues, such as 7 day working, use of agency staff, integrating workforce, skills and retention, new models and implications of the living wage.

The Aims of the session were:

- To consider workforce needs, requirements and gaps over the next 3-5 years
- To explore to what extent current organisational workforce planning strategies address the future workforce needs
- To explore integrated solutions to workforce planning

The session was attended by a wide range of professionals (providers and commissioners) from health and social care across city and county, including third sector partners.

Presentations were given to provide context around health and social care workforce issues. Following the introduction, participants took part in a series of discussions. There were seven themed discussion tables and two additional tables for open discussion on any additional themes raised by participants.

The themes identified prior to the workshop were:

- Seven day services - Exploring the importance of 7 day services and what needs to be done to make it happen, using case studies from around the country.
- Holistic (or Hybrid) worker - The new Nottingham Citycare multi-skilled worker model.
- Integrated working - Principal social worker Adult Social Care experience of working in health and adult social care integrated teams in Nottinghamshire over 15 years.
- Reducing Agency staff - Strategies to help manage the use of agency staff.
- Transforming the Fire & Rescue Workforce - Implementing a change from fire-fighting to risk reduction and community safety. How the Nottinghamshire Fire & Rescue Service is redesigning the service to meet future needs.
- Workforce retention - Workforce retention issues in Children's social work.
- Living wage - Implementing the living wage in care settings

Each table had a lead or 'expert' (with the exception of the open discussion) and a facilitator.

Appendix One describes the themes, and gives details of the lead and facilitator.

Participants explored the theme using three key questions as follows:

- 1: What's working well...?
- 2: What could we do better....?
- 3: What needs to happen....?

Evaluation of the session

The event was attended by 83 participants, and feedback on the day was very positive. Forty (48%) evaluation forms were returned. All but one response (97.5%) agreed or strongly agreed that the event met their expectations and was useful. Two of the 40 (5%) responses stated that they did not feel that they could participate in the event. The comments that were provided with these two evaluation forms did not reflect the negative score and were anonymous.

The evaluation asked 2 additional questions:

- What have you learnt from the event?
- What will you do differently as a result of what you've learnt?

A range of comments were received; the following selection illustrates the main feedback:

Nottinghamshire CCGs – “challenges across health & social care are more common than I realised!” *“I will follow up (with social care colleagues) to join up evaluations of local schemes.”*

Nottinghamshire County Council – *“I will look around much more when initiating projects to find out what is happening in other areas and across other organisations.”*

Voluntary sector – *“I will apply transferrable skills (of multi skilled staff) to my organisation”*

Nottingham City CCG – *“We need further joint events”*

Adult Social Care, Nottingham City Council – *“We need to consider role of homecare as equal partners in care delivery groups” “I will embed these in change programmes”*

Nottinghamshire CCGs – *“How do we intend to follow up on the key issues?”*

NHS Hospital Trust - *“I will make additional connections that will support improved workforce planning and integrated service development”*

Adult Social Care, Nottinghamshire County Council - *“The opportunities are there, we now have to progress then” “I will talk to home care providers about how to develop the holistic worker role”*

Voluntary sector – *“I will modify my strategy and adopt good practice”*

There were multiple comments on the value of the session *“excellent session- thank you;” “Thanks for the opportunity this has sparked further thought and ideas;” “Good event, well presented;” “friendly event;” “really good;” “well facilitated and organised.”*

Summary of Discussions

Notes were collected and key points summarised. There was a significant amount of overlap in discussions, which highlighted the complexity of the issues and need to consider multiple solutions to find sustainable solutions.

Integrated Working

Integration was raised in almost all discussions. The need for a common understanding of integration, agreement around individual responsibilities, the need to work across professional boundaries and importance of a system-wide approach were considered essential. A joint strategic development plan for health and social care workforce was proposed that included third sector partners. Some specific comments included:

- New models should be explored that are designed around the person.
- Integration can act as the starting point to the holistic worker model – creating new roles that require both health and social care skills.
- A system-wide approach is required, involving the 3rd sector, and wider public services such as community pharmacies and the Fire & Rescue Service.
- Staff like to work in an integrated way but employment issues need to be overcome
- Information sharing is a barrier, but is working in some areas. Learning should be applied from areas where it is working well. A suggestion was made that citizens could hold their own records for all services to access
- New methods to evaluate success are needed to move away from traditional organisational boundaries.
- Measuring outcomes is key, ensuring services meet a person's need, and are working to common outcomes.
- Aversion to risks need to be overcome, especially around professional indemnity.
- Review of professional boundaries and use of a core care certificate could be considered
- Access to development resources by the 3rd sector staff could be considered
- The single assessment process should be developed further
- There is a need to consider what skills are required around mental health
- It is important to start small by taking forward discreet and manageable projects, identifying common barriers and solutions.

Holistic (or Hybrid) worker

The holistic worker model within Citycare was recognised as excellent practice that could be transferrable to many care situations and could support other workforce issues such as 7 day services, workforce transformation & retention. Promoting the key benefits of such a model may help support implementation in practice. Discussion points included:

- There is a need to identify opportunities to spread the holistic worker model.
 - Within the Fire & Rescue Service, or early adoption by continuing care
 - Clinical v non-clinical role should be considered including personal assistants
- There is a need to process map the system, designed around the citizen.
- The model can support 7 day services.
- Joint training is needed – eg: a University of Derby course is under development.
- A citizen can train personal assistants on aspects of their own care.
- Joint benefits should be identified, such as Making Every Contact Count, job satisfaction, career development.
- NB: an evaluation is in progress and the holistic model may be spread nationally.

Living Wage

The national living wage poses a particular challenge for the care sector. The discussions highlighted the need to consider holistic benefits for staff and a whole system approach to make the roles more attractive and broaden career progression. Key comments included:

- A total reward package is needed, rather than focussing on salary.
- A caring differential above the National Living Wage is likely to be required.
- Training and development needs to be addressed including opportunities for career progression.
- A whole system approach is required, to allow progression, integration, & networking.
- The role of carers needs to be promoted to raise its profile and highlight its importance.
- Commissioning processes need to change to support the care sector, focussing on outcomes, rather than tasks.

Reducing the Use of agency staff

The discussion accepted that the use of agency staff was important to a well-functioning system, but a proper root-cause analysis can help identify reasons for high usage and help find solutions. Organisations will need to consider new ways to make jobs more attractive to existing and new staff, highlighting benefits for staff and service users. Discussion points included:

- There will always be a need for agency staff, but there is a need to continue working to agree consistent and fair prices & terms – Regulation may be needed to support this.
- A root cause analysis is required to identify reasons for use of agency and to understand solutions.
- There is a need to grow our own staff in roles where agency staff are frequently used.
- Jobs need to be made more attractive to our permanent staff.
- Organisations need to look at new ways to develop their own workforce.
- The quality of care should be considered – staff that feel supported and valued offer greater benefits for service user experiences compared to short-term agency staff.
- Organisations need to promote benefits to help attract and retain staff, such as flexible working practice.

Transforming the workforce

The Fire & Rescue service transformation highlighted a number of general issues applicable to workforce change management. Discussions also focussed on the importance of prevention and cross-sector working, keeping the person at the centre and making every contact count, sharing information across the services involved. Key comments included:

- The Fire & Rescue service supports better targeting of 'at risk' individuals, but improved sharing at an operational level is still required.
- Transforming the workforce has involved a twin track of 'imposed' and 'chosen' change – strong force.
- There is a need to develop strategies jointly.
- There is an opportunity to promote common 'assessment' of 'at risk' – e.g. top 10 things to look for when visiting those at risk can be used by all services.
- Cultural change pilots can be used to change hearts and minds.
- Workforce retention can be assisted by making jobs interesting and varied.
- Shared training across organisations will help staff understand each others roles.
- There is a need to promote understanding of Making Every Contact Count.
- Are openness to pooled budgets and/or single employers the main barriers to success?

Seven day services

Discussion highlighted the importance of an appropriate approach to seven day services. Blanket application would not address real need, so a focus on patient flow, multi-disciplinary approaches and self management is required to identify a workable and sustainable solution. Key comments included:

- There is a lot of good working to promote 7 day working, such as GP services at the front door, a large 3rd sector is already providing services 24/7.
- We need to understand what is needed, to define what we mean by 7 day working. A blanket approach should not be applied.
- There is a need to focus on patient flow and not services; and distribute workforce to match service need (not want) and get funding flows right.
- The use of other clinical workforce in healthcare should be considered.
- Organisations need to engage their current workforce, not alienate them with changes.
- There is a need for continual education of the population, and better signposting on where to get advice and support.

Workforce Retention

Workforce retention was a common theme across many discussions. Organisations were already taking action to address need independently. The example of Children's Social Services highlighted issues that were common across the health and care system. The need for a flexible and holistic approach to support staff and maintain wellbeing should help retain staff. Consistency in salary, terms & conditions etc across the region could help alleviate problems of staff migration. Discussion points included:

- There are good examples of work around workforce retention, but more still need to be done.
- Wellbeing at work is a significant issue. The holistic needs of staff need to be met.
- Manager support is required to support the rest of the workforce – inc. stress management, ability to identify staff needs and support them. This is especially important for front line staff.
- There needs to be flexibility and a range of strategies to support staff. Continued Professional Development, flexible working, mobile working, development opportunities, benefits are all important.
- The range and availability of support and benefits on offer to staff need to be communicated/promoted.
- Regional consistency is important. Staff migration is an issue as organisations are often unable to match the competition.
- Analysis of what makes people stay in their job can extend our understanding, and help organisations apply the learning.
- Investigating other company strategies on workforce retention may identify solutions.

Open Discussions

There was a wide ranging debate as part of the open discussions. The main elements included the need to improve joint working across organisational boundaries, using the skills of the wider workforce and allowing career progression around the system; the importance of promoting primary care medicine as a valuable career and the need to include the third sector as valuable partners in the care sector. Some specific comments included:

Third Sector

- The Third sector needs to be thought about in the planning stage.
- Tenders should include a requirement for minimum skills level (training).

- Third sector Consortia need to be managed effectively.
- There is a need for longer term contracts to build capacity / competency/ sustainability.

Primary Care

- Better promotion of primary care as a career option to students is required.
- There is a need to use better skill mix or integration to alleviate GP capacity issues – eg broader role of Pharmacists.

Interface between organisations/ Joint Working

- Communication needs to be improved to support patient flow. Better relationship management will also support this.
- There is a need to blur boundaries between primary and secondary care, e.g. joint ward rounds, professionals working together. Virtual wards can help promote joint working.
- The pharmacy workforce can be used to manage Long Term Conditions – e.g. patients can be registered to one pharmacist.
- System-wide improvement is required.
- There is a need for joint policies and training / development.
- Medication is a significant issue for health and social care, such as safety issues identified by the CQC.
- Fixed training requirements lead to reduced flexibility for domiciliary staff to move about.
- There is a need to avoid ‘it’s not my job’ mentality.
- Better communication & partnership with Pharmacy are required.
- Holistic workers and holistic teams allow cross organisation working.

Career progression

- A Nottinghamshire-wide approach to supporting H&SC careers is required, with rotations across the whole system inc. care homes/home care. This will improve attractiveness of hard to fill posts, and could include:
 - Dual qualifications (nurse and social worker)- investigate areas of good practice.
 - Apprenticeships.
- A common care certificate, and common T&Cs will support staff rotation.

Next Steps

The key findings from the workshop outlined in this report will be used to formulate recommendations and presented to the Nottingham City and Nottinghamshire County Health & Wellbeing Boards to gain support for any actions required across the health and care system. It is anticipated that there will be a range of actions required, at individual level, organisational level and system level. The Health & Wellbeing Boards will consider how to promote the recommendations and how to implement the system-wide actions.

The work will be overseen by the Nottinghamshire County Health & Wellbeing Implementation Group, and Nottingham City Commissioning Executive Group on behalf of the two Boards. Further information is available from:

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Appendix One: Table Themes, Description and Leads

Theme	Lead	Facilitator	Description
Seven day working	Helen Hemming , Locality Delivery Facilitator, NHS Improving Quality	Jane Fitch Health Education East Midlands	Exploring the importance of 7 day working and what needs to be done to make it happen, using case studies from around the country
Holistic worker	Lyn Bacon , Chief Executive, Nottingham Citycare	Jane McCombe Health Education East Midlands	The new Nottingham Citycare multi-skilled worker model
Integrated working	Tina Morley Ramage , Principle Social Worker Adult Social Care (ASC) Nottinghamshire County Council	Wendy Lippmann Jennifer Allen Nottinghamshire County Council	Principal social worker Adult Social Care experience of working in health and adult social care integrated teams in Nottinghamshire over 15 years
Reducing Agency staff	Lynn Robinson , HR Business Partner Nottingham City Council	Natasha Taylor Nottingham City Council	Strategies to help manage the use of agency staff
Transforming the Fire & Rescue Workforce	Wayne Bowcock , Deputy Chief Fire Officer Nottinghamshire Fire & Rescue Service	Helen Richardson Nottinghamshire County Council	Transforming the Workforce: Implementing a change from fire-fighting to risk reduction and community safety. How the Nottinghamshire Fire & Rescue Service is redesigning the service to meet future needs.
Workforce retention	Liz Maslan Children's Workforce Development Manager Nottinghamshire County Council	Lorraine McPherson-Bravo Nottingham City Council	Workforce retention issues in Children's social work
Living wage	Antony Dixon . Quality Commissioning, Nottingham City Council Rosamunde Willis-Read Project Manager. Group Manager - Quality & Market Management. Nottinghamshire County Council	Veronica Thomson Nottinghamshire County Council	Implementing the living wage in care settings
Open discussion (possible 2 tables for open discussion)	Elaine Mitchell Integrated Workforce Development Manager, Nottingham City Council Jackie Brocklehurst Strategic Workforce Development Manager Health Education East Midlands		Space for discussion on a theme of your choice