

8<sup>th</sup> January 2018

Agenda Item: 5

# **REPORT OF THE SERVICE DIRECTOR, MID NOTTINGHAMSHIRE**

# THE HEALTH AND DEVELOPMENT OF ADULT SOCIAL CARE AND PUBLIC HEALTH WORKFORCE

# **Purpose of the Report**

- 1. This report sets out further progress on the health and development of the Adult Social Care and Public Health (ASCPH) workforce.
- 2. The report seeks approval for a targeted recruitment campaign for a number of frontline posts for the delivery of social care and support.
- 3. The report seeks approval for the extension of 3 Social Worker (Band B) and 7 Community Care Officer (Grade 5) posts, working in the Care Delivery Groups in South Nottinghamshire, until the end of March 2019, with funding provided from the South Nottinghamshire Clinical Commissioning Groups as part of their Better Care Fund allocation for 2018/19.

# **Information and Advice**

#### National Context

- 4. Adult social care services are facing a number of challenges. These include:
  - An ageing population with increasing needs
    - the number of people aged 85 or over in England is set to more than double over the next two decades;<sup>1</sup>
    - more than a third of people aged over 85 have difficulties undertaking five or more tasks of daily living without assistance, and are therefore most likely to need health and care services.<sup>2</sup>
  - Difficulties in recruiting and retaining staff to support people
    - in the state of the Adult Social Care workforce report by Skills for Care, it stated that nationally the overall staff vacancy rate across the whole of the care sector was 6.8% (up from 4.5% in 2012/13), rising to 11.4% for home care staff. Turnover rates

<sup>&</sup>lt;sup>1</sup> Office for National Statistics 2015, 2014-based National Population Projections

<sup>2</sup> Marmot M and others, English Longitudinal Study of Ageing: Waves 0-7, 1998-2015, 25th Edition, UK Data Service. SN: 5050

have risen from 22.7% to 27.3% a year over the same three-year period.<sup>3</sup> This may indicate some difficulties in recruiting suitable people to the sector.

- in August 2017, Skills for Care estimated that in Nottinghamshire the vacancy rate is 6.8%, similar to the national average.
- 5. Workforce planning is a key component of the two local Sustainability and Transformation Plans (STP) that cover Nottinghamshire County Council boundaries: Nottingham and Nottinghamshire, and South Yorkshire and Bassetlaw. STPs set out how local health and care services will work together to improve the quality of care and their population's health and wellbeing, and close local systems' financial gaps. Within agreed planning footprints, commissioners and providers in Health and Social Care are required to work together alongside other key stakeholders to develop and implement plans to close gaps in the areas of health and wellbeing, care and quality and finance and efficiency within five years. Good workforce planning is required to underpin and achieve these objectives. The plans include work to map the existing local health and social care workforce, identify current and future workforce issues and skill gaps, as well as workforce modelling and implement plans to ensure an appropriately skilled workforce for the future.

# Local Context

- 6. The Adult Social Care Workforce Plan, which is aligned to the Council's Workforce Strategy, was approved by the Adult Social Care and Health (ASCH) Committee on 6<sup>th</sup> February 2017.
- 7. The report also set out the progress that has been made in tackling the six key workforce priorities for the Department which were developed incorporating the results of the Employees survey. These are:
  - to develop and maintain accurate and relevant workforce intelligence data
  - to identify the knowledge, behaviours, skills and capabilities required by the workforce to support culture change and succession planning
  - to equip and support Team Managers to embed the Adult Social Care Strategy
  - to develop and maintain the ability to recruit and induct sufficient staff with appropriate qualifications, skills and experience, and support their health and wellbeing, to ensure that they understand and can deliver the ASC Strategy
  - to develop career pathways for social care roles
  - to implement the above objectives within the context of increasingly integrated working and joint workforce plans (through the STP workstreams).
- 8. Although significant progress has been made since the launch of the ASC Workforce Plan there are key areas that the Department will continue to develop around key pressure areas. Since February 2017 there have been further areas of progress.

<sup>&</sup>lt;sup>3</sup> Skills for Care, The state of the adult social care sector and workforce in England, 2016

# **Further Areas of Progress**

#### **Recruitment of Council Adult Social Workforce and Key Pressures**

- 9. Priority has been given to the recruitment of posts required in order to implement the Care Act and also to respond to the delivery of the Adult Social Care Strategy. In 2016, a centralised recruitment campaign was established to manage this effectively. To date, 114 people have been appointed to cover vacant posts due to turnover as well as new posts. Recruiting to some Social Worker posts has been challenging. One main reason for not being able to attract staff to some of the posts is that they are on temporary contracts. For some of the posts it is linked to the temporary nature (up to 31<sup>st</sup> March 2020) of additional national (improved) Better Care Fund monies.
- 10. Recruiting to vacant Approved Mental Health Practitioner (AMHP) and Best Interest Assessor (BIA) posts continues to be challenging at local, regional and national levels. There is a shortage of qualified BIAs due to the steep rapid increase in demand for assessments following the Cheshire West judgement and the change in who is now included within the widened criteria for a Deprivation of Liberty Safeguard (DoLS) assessment. Despite these challenges, a rolling recruitment exercise continues to result in suitable candidates being appointed to roles and the Council is working well with two agencies who supply BIAs to undertake assessments to provide additional capacity. The requirement to train to be an AMHP or a BIA is embedded into the Social Worker career progression policy and each has their own specific workforce training and development plan.
- 11. The Department is keen to support staff development of specialist skills. 19 trainees accessed BIA training at Birmingham and Nottingham Trent Universities during 2016/17. This exceeded a target of 15 trainees for the year and was achieved as a result of increased efforts to recruit BIA trainees to the DoLS team. The Department is supporting 14 trainees during 2017/18 with 10 trainees accessing training in September 2017 and a further four expected to start their training in January 2018.
- 12. Trainees accessing AMHP training currently go through a two-stage process in order to become qualified AMHPs. During 2017 five trainees have been supported on the second stage of whom three have recently qualified while another is expected to do so in early 2018. Four trainees have been supported on stage 1 training during 2017 and these are expected to move on to the second stage and become qualified in November 2018. The Department is looking to access training from September 2018 that will enable trainees to gain their AMHP qualification in a much shorter timescale with the expectation that the Department will continue to support four trainees per year.

#### **Recruitment campaign**

13. The current social care and support recruitment campaign has focused largely on the Council's website to promote vacancies. There are a number of frontline posts that the department is recruiting to for the delivery of social care and support. A targeted recruitment campaign with a direct marketing approach coupled with strong online presence will give better opportunity to engage with potential candidates and will generate more and better quality applications.

# Recruitment and Wellbeing of Wider Adult Social Care Workforce

- 14. The turnover for the wider social care workforce is high. Information gathered recently from an open book exercise with one of the Council's core providers showed that the average turnover rate was 50% with one largest provider stating a 70% turnover rate in 2014. Through the work of the Department's Quality and Market Management team, independent sector care providers are being encouraged to share good practice and work collaboratively to develop strategies to improve recruitment and retention of care staff. The team facilitate regular Care Home Provider Forums and these well attended events have included:
  - a presentation from a care home rated 'outstanding' by the Care Quality Commission to share ideas and practices, including how staff are empowered and valued, resulting in low turnover.
  - engagement in the East Midlands Workforce Network's 'Homecare' workstream which includes sharing ideas and practice on what has worked across the region.
  - the gathering and sharing of ideas and good practice under the branding 'How do we keep staff caring'. Examples of how providers are working to support the health and wellbeing of staff and improve recruitment and retention that have been shared to date include:
    - o making links with local schools and colleges to promote care as a profession
    - o giving staff specific roles e.g. champions or mentors
    - notes hidden in different places praising good working practices, that employees come across during their working day. This helps to raise a smile and a sense of wellbeing and motivation
    - providing 'I am a Star' badges for carers to pass on to each other when they see or experience good practice demonstrated by colleagues
    - o involving care home residents in recruitment of staff.
- 15. In homecare services, providers have been working together to explore a move towards value based recruitment of care staff, aimed at better attracting and keeping people who have compatible values, attitudes and aspirations to work in a social care setting. A number of core home care providers are also piloting a different model of home care that is more personalised and care staff work on a case basis with a number of people receiving a service. The service is designed to be more flexible and offer a more bespoke support service to individual needs. Care staff know in advance who they are working with and how many hours they will work and are paid on that basis.
- 16. Early indications from the pilots show that people get a more responsive service that meets their needs and enables them to be more independent. This in turn gives greater job satisfaction to care staff who know in advance who they will be working with and what they will be paid which it is hoped will enable care providers to retain their staff in the longer term, ensuring a more sustainable social care market.
- 17. There is currently a research project underway by Nottingham Business School into modern day slavery and the Council is involved in the research looking at supply chains in the social care recruitment market. This allows the Council to explore how managers in

Adult Social Care understand the risks associated with modern slavery and to identify plans to mitigate any risks.

# Adult Social Care Workforce Development

- 18. There is a focus on developing the required workforce skills set against the changes to pension. Changes to pensions introduced from April 2015 gave freedom over how staff aged 55 or over can use their pension funds. This means that, potentially, employees may decide that they want to retire earlier and, whilst their benefits will be reduced, they may decide that the reduced income that they will receive would be sufficient to retire, work part-time or work as an agency worker. This could have an impact on the availability of skills, knowledge and experience. In order to counter this, there is a need to capture the interests of young people and maintain greater focus on succession planning.
- 19. In line with the rest of the Council, the Department has an ageing workforce, as illustrated in the table below:

Age Band of Department Employees				
16-25	2.1%			
26-35	11.5%			
36-45	20.7%			
46-55	39.2%			
56-65	25.2%			
65+	1.4%			

- 20. The figures in the table are for the whole of the Department. It can be seen that almost two thirds of the employees of the Department are aged 46 years or over and nearly a quarter are aged over 56 years. This means that Department could lose nearly a quarter of experienced staff within 10 years, hence the need to accelerate the development of the workforce for the future.
- 21. In addition to the mandatory corporate Leadership Development Programme, the Department encourages managers through their Employee Performance and Development Review (EPDR) to access the corporate 'Manager as a Coach' programme which is designed to ensure that all managers in the Council use the core principles of developing a workplace coaching culture in their day to day management and leadership activities. To date, 102 employees in the Department have accessed the 'Manager as a Coach' programme.
- 22. In order to ensure a new supply of qualified social workers, the Department is looking to ensure there is an appropriate number of practice educators to support Social Work student placements as part of the D2N2 Teaching Partnership arrangements. This enables the Department to have appropriate development opportunities for social workers while also fulfilling a broader succession planning remit of ensuring there are students and potential Newly Qualified Social Workers (NQSWs) to replenish the workforce at an appropriate rate in the future.
- 23. The Department is also working closely with the Workforce Planning and Organisation Development Team on Apprenticeship opportunities that are being established through the current Government Apprenticeship levy scheme and the newly established Teaching

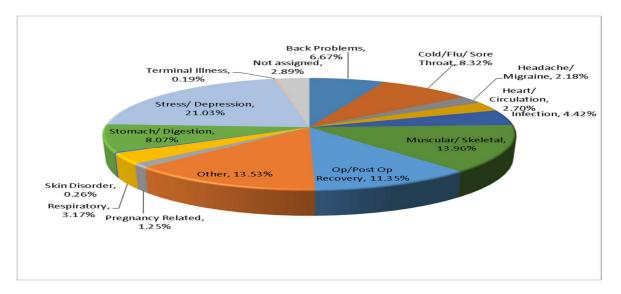
Partnership, in which both Nottingham University and Nottingham Trent University are partners. This will support the development of the workforce. The Public Health division is also participating in a national trailblazer group to develop a new degree-level apprenticeship standard for public health practitioner staff.

## Public Health Workforce Development

- 24. The Public Health division within Nottinghamshire County Council is an accredited location for the training of Public Health Specialty Registrars and for recently qualified doctors in training (Foundation Doctors). Specialty Registrars in Public Health are skilled and experienced professionals who are currently undertaking high level training to qualify for professional registration as Consultants in Public Health. The full training programme lasts 4-5 years and includes completion of a Masters degree in Public Health. Registrars rotate to various locations within the East Midlands during their training, typically spending two years in the Public Health division in the Council. Each Registrar is attached to a consultant who acts as their Educational Supervisor. Currently, there are three Specialty Registrars working within the Public Health division. They are on placement and are not direct employees of the Council, although they are undertaking Public Health work for the Council and sometimes support other sections of the Department when appropriate.
- 25. The division trains Foundation Year 2 doctors, who complete a 4-month placement with Public Health division. Foundation doctors are recently qualified doctors on the East Midlands Foundation Training Programme, which consists of six 4 month placements in a range of medical specialties, including hospital based and general practice as well as public health.
- 26. The roles of Trent Foundation Training Programme Director for Public Health (related to Foundation Doctor training) and the Nottingham and Nottinghamshire Public Health Training Network Coordinator (related to Specialty Registrars) are undertaken by a consultant within the division.
- 27. In addition, there are ad hoc arrangements for training of other clinical specialists in public health. Currently, there is a GP Fellow and a Paediatric Specialist Registrar attached to the division on a part-time basis.

#### Health and Wellbeing

28. The chart below shows the breakdown of sickness absence for the whole of the ASCPH Department. It shows that stress remains the most prevalent cause of sickness absence in ASCPH. The information which reflects the latest quarter of 2017 was presented to the Personnel Committee on 27<sup>th</sup> September 2017. This is a regular quarterly report to Personnel Committee.



- 29. High quality services are better provided by employees who themselves are healthy, well and able to cope with the ongoing national and local challenges and changes. There is a range of corporate bespoke learning materials and training interventions aimed at preventing and managing absence and supporting employees to be well at work, covering in particular resilience, stress and mental health awareness.
- 30. There is an established Attendance Management Policy, with a range of guidance and tools, including an online stress audit tool, to assist managers to identify actions for improvement.
- 31. All employees have access to an Employee Counselling Service through manager referral. Similarly, they have access to the Coaching Service through managers or self-referral.
- 32. Currently, there is targeted HR intervention and a plan to support and drive employees' health and wellbeing within ASCPH.

	July 2015 to June 2016	October 2015 to September 2016	January 2016 to December 2016	April 2016 to March 2017	July 2016 to June 2017	October 2016 to September 2017
Council	8.21	8.30	8.42	8.37	8.01	8.01
CiPFA*						
mean	8.00	8.00	8.00	8.00	8.00	8.00
Council's						
Target	7.00	7.00	7.00	7.00	7.00	7.00
ASCPH	12.79	12.51	12.94	13.10	12.68	13.03

33. Sickness levels (days per employee) over rolling 12 month periods:

\* Chartered Institute of Public Finance and Accountancy

34. Absence levels in the department were 13.03 days per employee at September 2017. However, there are variations within the department with Public Health representing 4.20 days per employee.

- 35. The performance target for 2017/18 for the Council s 7.00 days per employee per annum. The average sickness absence level as at 30<sup>th</sup> September 2017 for the Council performance stood at 8.01 days on average per employee per annum.
- 36. CiPFA (\*Chartered Institute of Public Finance and Accountancy) national benchmarking regime for County Councils is 8.0 days.
- 37. With regard to wider employee health and wellbeing, employees within the ASCPH department have access to a range of employee wellbeing support, guidance and interventions delivered through the corporate HR service. In recognition of this the Council has achieved the Platinum level award within the "Wellbeing@Work" Workplace Award Scheme, which is led on a strategic level across Nottinghamshire by the Public Health division. Individual employers deliver the scheme within their own organisation, usually via their HR function.
- 38. The main aim of the scheme is to work across key partners in statutory, private, voluntary and community businesses to effectively reduce absenteeism and 'presenteeism' (coming to work whilst sick) across our workplaces. It is also in line with the national 'Change for Life' programme, engaging the adult working age population, using the workplace as a setting to promote healthy lifestyles and a working culture and environment that sustains health. The recruitment and training of champions within workplaces means that colleagues are encouraged to take some ownership of the scheme and to look at benefits to their own health. Healthy lifestyle messages are often spread to friends and relatives, not just work colleagues.
- 39. Encouragement for staff to volunteer as workplace health champions within the Department is included as an activity within the Departmental Health and Wellbeing Action Plan. The Action Plan is available as a background paper.

#### Sustainability and Transformation Partnerships (STP)

- 40. STP work will aim to ensure that strategic workforce plans include the Social Care workforce and also reflect the strengths, values and principles of Social Care. The five Nottingham and Nottinghamshire STP Workforce Strategy priority areas are:
  - developing and embedding a systematic approach to prevention and promoting independence
  - developing a population/place-based approach to workforce redesign
  - building capacity, capability and resilience in the primary care workforce
  - supporting system effectiveness through organisational development
  - development of collaborative human resources solutions.
- 41. Initial workforce modelling is concentrating on partners using a specific workforce modelling tool to co-produce the skills and competencies required to deliver the future STP vision in the priority areas of urgent and pro-active care. As part of this work, it has been identified that there is a need to evaluate and explore the provision of seven day access to services within Health and Social Care services.
- 42. To this end, in April 2017 the Council put in a bid from the STP funding stream associated with seven day working and transformation of services for a temporary additional resource

to enable the Department to evaluate the current positon, issues and implications regarding seven day access to social care services and develop the business case for the future.

- 43. The outcome of the work has identified core Social Care services where there is a potential benefit to working in partnership with health, housing and voluntary sector partners towards providing seven day services. The evaluation report has recommended joint assessment with partners to consider extending access to seven day services.
- 44. Another outcome of the work has been the implementation of a 'seven day working clause' in contracts for some new staff joining the Council.
- 45. Embedding Prevention, Promoting Independence and Self-Care Project, which is one of the STP workforce workstreams, was launched on 7<sup>th</sup> June 2017. The post for the project is hosted by the Council. The aim of the Project is to strengthen and deliver core activities through the workforce across organisations within the Nottingham and Nottinghamshire STP footprint in order to promote independence, healthy lifestyles and mental wellbeing to at-risk groups in the communities. There will be a focus on person-centred care training for the Health and Social Care workforce. This will involve a change in culture and a shift in conversation with people from asking 'what's the matter with you' to 'what matters to you'.

## **Care Delivery Groups – South Nottinghamshire**

46. Within South Nottinghamshire there are three Care Delivery Groups (CDGs) which provide community services covering Broxtowe, Gedling and Rushcliffe. These teams are made up of health clinicians and social care professionals who work together in the community to support elderly individuals with complex needs to remain as independent as possible in their own home. There are currently 3 Social Workers (Band B) and 7 Community Care Officers (Grade 5) across Broxtowe, Gedling and Rushcliffe that work in the CDGs and approval is requested for these posts to be extended until March 2019, with funding provided from the South Nottinghamshire CCGs as part of their Better Care Fund allocation for 2018/19.

# **Other Options Considered**

- 47. There are no other options proposed as the report is to set out the continued development workstream to support the Adult Social Care Workforce plan.
- 48. The targeted recruitment campaign is in addition to the current recruitment activities to generate more and better applications.
- 49. There are no other options proposed for the extension of the Care Delivery Group posts.

#### **Reason for Recommendations**

50. The report provides an opportunity for the Committee to consider any further actions arising from the information contained within the report.

51. The social care posts in the Care Delivery Groups provide support to elderly individuals with complex needs to remain as independent as possible in their own home at nil cost to the Council.

# **Statutory and Policy Implications**

52. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

# **Financial Implications**

- 53. The recruitment campaign will be at either no cost or a maximum cost of £500.
- 54. The extension of the social care posts within the Care Delivery Groups has a nil cost implication for the Council.

# **Human Resources Implications**

- 55. These are contained within the body of the report. The Department recognises that trade unions have been supportive of the targeted HR support and the positive steps taken to support managers and the ASCPH workforce.
- 56. The extension of the social care posts within the Care Delivery Groups will be achieved by following the agreed employment policies and procedures of the Council.

# RECOMMENDATIONS

That:

- 1) Members consider whether there are any actions they require in relation to progress on the health and development of the Adult Social Care and Public Health workforce.
- 2) a targeted recruitment campaign for a number of frontline posts for the delivery of social care and support is approved.
- 3) Committee approves the extension of 3 Social Worker (Band B) and 7 Community Care Officer (Grade 5) posts, working in the Care Delivery Groups in South Nottinghamshire, until March 2019, with funding provided from the South Nottinghamshire Clinical Commissioning Groups as part of their Better Care Fund allocation for 2018/19.

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#### Constitutional Comments (LM 14/12/17)

57. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report and to consider whether there are any actions they require in relation to the issues contained within the report.

#### Financial Comments (AGW 18/12/17)

58. The financial implications are contained within paragraphs 53 and 54.

#### HR Comments (SJJ 21/12/2017)

59. The HR Implications are contained within paragraphs 55 and 56.

#### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Adult Social Care Workforce Plan – progress update - report to Adult Social Care and Health Committee on 6 February 2017

Employee Health and Wellbeing and Sickness Absence Performance and Action for Improvement – report to Personnel Committee on 27 September 2017

Departmental Health and Wellbeing Action Plan

#### Electoral Division(s) and Member(s) Affected

All.

ASCPH515