Nottinghamshire County Council

REPORT OF THE SERVICE DIRECTOR, COMMISSIONING AND RESOURCES

CHILDREN'S WORKFORCE HEALTH CHECK 2017-18

Purpose of the Report

1. The report provides a summary of the responses to the latest Children's Workforce Health Check survey, which was completed between November 2017 and February 2018, and seeks approval for progress with the action plan arising from the responses to be reviewed by the Committee in six months.

Information

2. The 2017-18 Children's Workforce Health Check combines responses from employees across the entire Children and Families department, including Children's Social Care, and therefore encompasses data that would previously have formed part of the Social Work Health Check. The purpose of the Health Check, which is undertaken annually, is to explore key workforce and workforce development issues, and provide a local research base for workforce development and support initiatives.

3. The 2017-18 Children's Workforce Health Check covered the following areas:

    *   workforce demographics and stability
    *   workforce resources
    *   workforce development
    *   workforce health, wellbeing and support.

4. The 2017-18 Health Check survey was completed by 240 staff from a frontline workforce of approximately 1,070. With the survey aimed primarily at staff who worked directly with children and families, this still represented 22% of the target workforce (so slightly more than a 1 in 5 response rate). The Health Check data has been combined with Human Resources data, and other workforce data held within the department, to provide an overview of the current workforce. Below is a summary of what is working well, and what may need to be reflected on and addressed.

    What's good about working within the Children & Families Department?

    There were a good number of improvements in staff responses to the survey this year, which collectively demonstrate a positive trend upwards in terms of how staff perceive their experience of working within the department including:

A stable workforce:

- HR data reveals that 64% of the workforce have been with the department for five years or more (only 50% had that length of service in the last health check), 84% have been with the department for two years or more, and 50% of staff have been in their *current* role for over three years
- turnover within frontline teams is down to just over 5% (from a figure of 17% two years ago)
- 80% of respondents stated that they envisaged being in the same role in 12 months' time (a significant improvement on the 53% who gave this response in the last health check).

Good management support:

- 80% of respondents felt that their managers were accessible whenever they needed them
- 88% of staff felt that they were listened to and supported by their managers
- 80% of staff rated the quality of their supervision between 6 and 10 (with 10 representing 'excellent')
- 84% of staff were offered opportunities for reflective supervision
- a new manager's support programme is about to be launched, to address the specific demands of management in frontline social care.

Personal and professional development options:

- 88% of eligible staff had received an Employment Performance and Development Review (EPDR) during the last 12 months (an improvement on the 82% who gave this response in the last health check)
- 93% of staff stated that they had been able to access training in response to needs identified within their EPDR
- children's social workers have been able to access additional Continuing Professional Development (CPD) opportunities through the Council's lead role within the D2N2 Teaching Partnership
- The department's own workforce development budget has been able to support staff in accessing specialist and role-specific training relevant to their role, but which sits outside of the corporate offer.

Good levels of job satisfaction:

- 79% of staff, when asked to rate how rewarding their jobs were, provided ratings of 3 to 5 – on an 11-point scale where 5 was 'extremely rewarding' and minus 5 was 'not rewarding at all' (again, an improvement on the 62% who offered this level of ratings in the last health check)
- when asked what elements of their working life make their working experience positive, the highest ranked positives were 'supportive colleagues' and 'supporting managers', closely followed by 'job satisfaction', and a 'good work:life balance'.

An appropriate support infrastructure:

- 83% of staff stated that there were adequate processes in place to monitor their personal safety
- 73% of staff felt that they had been kept informed about changes within the department, with 68% of staff who had actually experienced change stating that they had been offered the support they needed
- almost 20% of staff stated that they had accessed the corporate Coaching Network, which is a promising proportion of the workforce, given that the service is relatively new
- children's social workers have been able to access 'self-care' events, organised by the D2N2 Teaching Partnership, helping them to develop their resilience, offering strategies for coping with pressure, and encouraging the use of relaxation techniques.

What might we need to review and address?

A stable workforce:

- whilst statistics around workforce stability are looking very positive, it is important that the department acknowledges the part played by current recruitment and retention initiatives in achieving this. The improvements evidenced over the last two years, have helped reduce agency costs for vacancy cover, attracted high calibre candidates, and encouraged staff to remain with the Council. To sustain this positive trend, there is a need to ensure a continued commitment to these initiatives going forward.

  Comment:
  The existing initiatives have seen agency costs fall by over 20% in the last 12 months, vacancy levels down to 5%, and length of service figures improving – demonstrating that recruitment and retention activities are working effectively, with Nottinghamshire County Council being in the top seven local authorities nationally for their success with vacancy reduction and improved retention (DfE Social Work census 2017) – an outcome which has been noted by the newly formed Centre for What Works in Children's Social Work.

Good management support:

- whilst the majority of staff stated that their managers were accessible and supportive, between 15-20% of staff were unhappy with the levels of support they were offered. The department may therefore need to ensure that Service and/or Group Managers, provide more regular monitoring of the management cohort's ability to manage their teams effectively, give managers the support they need, and encourage relevant CPD options or peer support, where appropriate, for managers.
- team meetings are an opportunity for managers to engage and inspire their staff, and help sustain a sense of 'team identity' and strength. Whilst, on the whole, this is achieved, there is potential to improve the way in which team meetings are conducted, by providing a template for team meeting agendas which will ensure consistency and encourage action points to be followed up/responded to, and fed back to the team.
- Of the 55 managers who undertook the Health Check survey, only one was from an ethnic minority group – the department would like to investigate this further, to ascertain whether this is simply because of a low-response rate from ethnic minority

managers, or perhaps indicative of an imbalance in progression opportunities for ethnic minority staff.

Comment:
From April 2018, the Children, Families & Social Work division will be rolling out a programme of Manager Support Briefings to its frontline managers – aimed at providing them with additional input on a range of topics pertinent to their particular roles managing frontline practitioners. This will complement the existing corporate CPD offer, but will focus specifically on the nuances of working with children and families, and with staff working in challenging environments. Topics will include practical sessions around use of the Business Management System (BMS) and business reporting, to workload management, performance management – as well as providing input on building resilience teams, and supporting staff.

The issue around Black & Minority Ethnic (BME) management representation will be investigated further, as detailed in the action plan below.

Having the right resources:

- at a more corporate level, access to the ICT network continues to be an issue (at the time of the survey) – with 33% of staff stating they had experienced access problems. These issues may well be ironed out by the introduction of the Smarter Working initiative and the distribution of new ICT kit to the workforce.
- 51% of staff stated that they had not been given, or signposted to, information about Smarter Working.
- the Nottinghamshire Standardised Toolkit is now being accessed and used by most staff for whose role it would be relevant but, as yet, only 39% of relevant respondents stated that they used it regularly.
- a small cohort of staff commented on their working environment being changed (in relation to Smarter Working) and were unhappy with the loss of storage space and display space, as well as feeling that they had lost their 'team' space.

Comment:
Since the completion of this year's Health Check, frontline teams have been issued with new Yoga devices which should help alleviate some of the technical and IT issues that were being experienced with the older devices. There has also been a series of locally delivered workshops on the use of the Standardised Toolkit, and further promotion is planned over the coming months to help embed this further into practice, supported by a monitoring process within the Mosaic system, so that assessment activity can be evidenced over time. The roll-out of Smarter Working was also relatively fresh at the time of the survey, and staff will be more familiar with the changes now being made and the benefits of same, than they might have been when they undertook the Health Check. This will be picked up in the 2018-19 Health Check to ascertain how the experience of Smarter Working has been for the workforce.

Personal & professional development options:

- whilst the uptake of support from the Coaching Network was thus far encouraging, there were some anecdotal comments from staff which suggested that they were not clear about, or appreciative of, the benefits of the corporate coaching offer.

Comment:

As the Coaching Network is still in its infancy, and the benefits of coaching to the organisation have yet to fully embed, it is anticipated that both the take-up and appreciation of the coaching offer will improve over time.

Good levels of job satisfaction:

- 219 respondents stated that they accrued levels of TOIL or Flexi each month – collectively generating 290 additional working days per month/averaging 1.32 days per employee, per month. Even if it is assumed that only half of the whole workforce accrue this average level of TOIL or Flexi, this represents a potential for 706 additional working days per month, with 23% of staff stating that they are unable to take this time back.

  Comment:
  Family life does not operate on a '9 to 5' basis, so there is an appreciation of the fact that staff may often need to conduct their work with families outside of normal working hours, and these additional hours are not necessarily planned for – rather more they are urgent interventions that cannot be delayed. Hence it might be anticipated that staff will generate additional hours on an ad hoc basis each week. The responsibility for managing their own time sensibly rests with each worker, but it is also important that managers share some responsibility, from a health & wellbeing perspective, for their team members' working patterns. The 'fix' to this situation will never be perfect, but there is a need to ensure that wherever possible, staff are encouraged to balance their hours.

An appropriate support infrastructure:

- whilst frontline practitioners are issued with personal safety devices, there are still some patches of concern about how staff safety is monitored – by managers, and by colleagues, with some teams feeling that there is no consistent process in place to monitor their safety.
- given the percentage of sickness absence that is currently attributed to stress/depression, there was very little uptake of either the Counselling Service or the corporate Personal Resilience course by respondents to this Health Check. Equally, only 22% of respondents were aware of the Council's Health & Wellbeing Champions.

  Comment:
  The department is currently in the process of reviewing and replacing the existing personal safety devices and, with this change in resource, will be developing a set of new guidelines for managers and staff around the issue of staff safety when working away from the office and/or outside of office hours.

  As part of the Council's involvement with the D2N2 Social Work Teaching Partnership, a new Health & Wellbeing Hub is being developed, which will be a "virtual" one-stop shop for a wide range of support services – providing information on issues such as debt, relationships, parenting, healthy life-style choices, counselling, etc. Available via the Partnership's website, and complementing the existing corporate health and wellbeing infrastructure, this resource will be available for all frontline (and other) staff from the late Autumn of 2018.

In addition, the department is building on the current resilience input to teams, by exploring the provision of 'Mental Health First Aid' support across frontline teams and will be developing this initiative further over the coming 12 months, as well as a refreshed awareness raising programme of news items to highlight the corporate coaching, counselling and Health & Wellbeing Champions offer.

5. This year's Health Check has provided some very positive indicators about the workforce's experience of working within Children's Services and it is good to note that the corporate HR data, departmental data and national Department for Education data supports the view that workforce stability is improving. This, against a backdrop of efficiencies, staff reductions and change suggests that the core ethos of the department, and its investment in its workforce, together with an infrastructure of strong managers and strong teams, places the department in a good position to build on its strengths and meet its challenges with confidence.

6. In addressing the responses to the 2017-18 Health Check, an action plan has been developed that will feed through into the Children's Workforce Development Plan for 2018-2020. The key elements of the action plan are:

   a) that the Council, and senior management within the department, maintain their commitment to the existing recruitment and retention initiatives that are in place, to ensure that the stability of the children's workforce is sustained going forward.

   b) that Group and Service Managers continue to take a proactive approach to supporting the work of Team Managers – particularly with regard to role-specific skills development and peer support.

   c) that Team Managers are encouraged to take a consistent approach to the format of Team Meetings, and ensure that actions identified during meetings, are then executed and reported back on to the team to underline the value and credibility of ideas and actions agreed between team members.

   d) that further data is sought from the HR department with regard to statistics for BME managers across the department, to clarify whether the low representation within the survey cohort was indicative of progression problems for ethnic minority staff, or simply because BME managers chose not to participate in the survey.

   e) that the purpose of the Smarter Working initiative be re-visited within Team Talk, and/or within Team Meetings, so that all staff understand why these changes are being made and what the benefits will be for them.

   f) that there is further and on-going promotion of the Nottinghamshire Standardised Toolkit to increase the proportion of frontline practitioners who are making regular use of it.

   g) that the corporate Coaching Network develops a higher profile across the department's workforce, with the benefits of coaching being more overtly promoted by managers, and through vehicles such as Team Talk and the intranet's News pages. It is felt that feedback from staff who have undertaken coaching and found it beneficial would help to engage other colleagues.

h) that managers continue to monitor the additional hours being worked by their teams and, wherever feasible, support individual staff in managing their time more effectively, so that they are able to take most of their additional hours back.

i) that existing processes for monitoring staff safety are reviewed and a set of guidelines developed to ensure that staff conducting out of office/out of working hours visits have a reliable mechanism for 'checking in' when they are safely back home.

j) that the department fully supports the development of a more robust support infrastructure for the workforce, particularly those experiencing, or likely to experience, forms of mental illness, recognising that the nature of the work undertaken by the workforce is, itself, of a stressful nature and that the added challenges of life outside of work can compound an individual's difficulties in coping. There is a clear need to address the significant levels of absence due to stress and depression, and the new initiatives being developed currently will need the endorsement of senior and frontline management if improvements are to be made.

7. Progress on the implementation of the subsequent action plan will be monitored by the Children's Services Leadership Team with key outcomes informing a revised Children's Services Workforce Development Strategy.

Other Options Considered

8. Whilst the department could have continued to employ both a social work health check and a separate children's workforce health check, the move towards a more integrated children's workforce health check supported the option of combining all workforce data to provide clearer comparisons across service areas, rather than them being viewed in isolation from each other.

Reason/s for Recommendation/s

9. The implementation of the Children's Services Workforce Health Check action plan will address the key issues identified by staff across the department and support the development of an informed forward plan that will help meet future workforce needs and aspirations.

Statutory and Policy Implications

10. 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

11. There are no financial implications arising directly from this report.

Implications for Service Users

12.	An effective, consistent, and motivated workforce will positively impact on the lives of children and families living in Nottinghamshire.

RECOMMENDATION

1)	That progress with the action plan arising from responses to the Children's Workforce Health Check survey 2017-18 be reviewed by Committee in six months.

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Constitutional Comments (EP 24/05/18)

13.	The recommendation falls within the remit of the Children and Young People's Committee by virtue of its terms of reference.

Financial Comments (SAS 06/06/18)

14.	There are no financial implications arising directly from this report.

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.

None.

Electoral Division(s) and Member(s) Affected

All.

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