

**Oxfordshire Health and Wellbeing Board
Thursday 14 March 2019**

Report Title	Oxfordshire Health and Social Care Workforce
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Summary and Recommendations	
<p>Through the leadership provided by the Oxfordshire System Workforce Group (Oxfordshire System Workforce Group) our ambition is to work together at a system level to address key workforce issues and shortages as well as planning for a future workforce that is able to deliver integrated care out of hospital in a flexible way that responds to shortages and demand.</p> <p>Oxfordshire System Workforce Group is driving forward and monitoring a discrete set of system wide projects that compliments the work that is being led at BOB level and/or within provider organisations.</p> <p>Oxfordshire through Oxfordshire System Workforce Group is supporting the development of the BOB Workforce Strategy that is due to be signed off in March 2019.</p> <p>The Health and Wellbeing Board is asked to note the range of work that is taking place and the progress made through working in partnership on key workforce issues.</p>	
Is the work linked to a sub-group of the HWB	<input type="checkbox"/> Integrated Services Delivery Board
This paper links to the following priorities set out in the Joint Health and Wellbeing Strategy	
<ul style="list-style-type: none"> <input type="checkbox"/> A coordinated approach to prevention and healthy place-shaping. <input type="checkbox"/> Improving the resident's journey through the health and social care system (as set out in the Care Quality Commission action plan). <input type="checkbox"/> An approach to working with the public so as to re-shape and transform services locality by locality. <input type="checkbox"/> Plans to tackle workforce shortages and prepare for delivery of integrated care <input type="checkbox"/> A Healthy Start in Life <input type="checkbox"/> Living Well <input type="checkbox"/> Ageing Well <input type="checkbox"/> Tackling Wider Issues that determine health 	
The purpose of this paper is	
<input type="checkbox"/> For discussion and comment	

1. Introduction

- 1.1. Oxfordshire has a population of around 680,000 and this population is getting older. The older population of Oxfordshire has been increasing at above the South East and England rates. Life expectancy and healthy life expectancy for females at 65 in Oxfordshire are each (statistically) better than the England average.
- 1.2. An estimated 8.5 years for males and 8.2 years for females in Oxfordshire are expected to be spent in poor health. Over 7,000 people currently receive care and support services from Oxfordshire County Council and It is projected that by 2039 the number of people aged over 85 will increase by 80%.
- 1.3. In Oxfordshire our vision for adult social care is to deliver sustained and improved experiences for people who access our services by working with the NHS, private and voluntary sector providers whilst using the expertise of our customers and other key stakeholders to design, procure and evaluate services.
- 1.4. Our strategic ambitions are to;
 - 1.improve the satisfaction of service users
 - 2.increase the number of people supported at home
 - 3.improve the quality and sustainability of care providers in Oxfordshire
 - 4.involve more local people and organisations in the development of services.
- 1.5. It is widely accepted that we can only deliver these ambitions by providing a workforce that can provide the right type of care, in the most appropriate setting, based on an individual's health and care needs
- 1.6. The current challenges facing health and social care in Oxfordshire are well understood. A combination of an ageing population, an ageing workforce, workforce shortages in some specialities, the difficulties of attracting young people into health and social care and the cost of housing locally and the limitations of transport and parking arrangements all conspire to make workforce one of our greatest challenges in planning and delivering health and social care.
- 1.7. Meeting the challenges of today as well as delivering on Oxfordshire's ambition for integration delivered at the most appropriate level aligns well with the new NHS Long Term Plan. The Oxfordshire's ambition for integration, the specific workforce actions outlined in NHS Long Term Plan and the NHS Workforce Implementation Plan that will be published later this year will frame our priorities in the coming year.
- 1.8. Local policies regarding rural and transport can mean that working age adults who might enter the workforce often choose to drive their children to school meaning that they are unavailable at key care delivery times (morning and afternoon school runs). The increased traffic at these times also impacts on the schedules of home carers and their ability to travel between clients.
- 1.9. There is a distinct challenge for adult social care, specifically supported living services for adults with learning disability, primary home care providers on the Help to Live at Home Framework and charitable care home providers. There is a significant impact on

those providers being able to compete in an increasingly competitive employment market creating significant risk.

- 1.10. Working together as a system has been identified as the best way to help us work efficiently to find solutions to these common problems, provide support and advice for specific workforce problems individual providers might be facing and together identify issues and gaps that might require new partnership working to resolve.
- 1.11. This paper provides an overview of how the establishment of the Oxfordshire System Workforce Group has been instrumental in the identification of the key workforce issues for Oxfordshire and describes how we intend to continue to work together as a system to meet our workforce challenges both now and into the future.

2. Oxfordshire System Workforce Group

- 2.1. The Oxfordshire System Workforce Group was established in April 2018 as a vision setting group and vehicle to develop and test the Oxfordshire Workforce Strategy and work programme with senior stakeholders.
- 2.2. To meet this aim, the purpose of the Oxfordshire System Workforce Group has been set up to;
 - ensure support and development of the Oxfordshire health and social care workforce in all care settings, promoting integrated care working across professional and organisational boundaries.
 - ensure workforce activity is aligned to, and supports our vision of sustainable quality care provision
 - allow for prioritisation of work in line with key Oxfordshire health and social care priorities
 - consider opportunities for funding and investment based on the need to increase the scale and pace of certain work
- 2.3. The membership of the Oxfordshire System Workforce Group includes all local provider and commissioning organisations and provides an opportunity to drive forward and monitoring a range of projects and initiatives that are taking place, aligning our efforts to achieve new solutions and ensure maximum impact from the work taking place.
- 2.4. Within the new Oxfordshire Governance structure and programme management approach workforce is seen as an enabling work stream and is accountable locally to the Oxfordshire Health and Wellbeing Board (HWB) reporting through Oxfordshire's Integrated Delivery Board (ISDB).
- 2.5. The Oxfordshire System Workforce Group also reports to the Buckinghamshire, Oxfordshire and West Berkshire Sustainability and Transformation Partnership through the Buckinghamshire, Oxfordshire and West Berkshire Local Workforce Action Board in its monthly updates.

3. Developing the Buckinghamshire, Oxfordshire and West Berkshire Workforce Strategy

- 3.1. A Buckinghamshire, Oxfordshire and West Berkshire Workforce Strategy which is aligned to NHS Long Term Plan is in the process of being finalised and validated with partner organisations in the Sustainability and Transformation Partnership and local Integrated Care Systems later this month. Following this validation an action plan will be put in place to address the priorities and gaps that will have been identified through this process.
- 3.2. The Buckinghamshire, Oxfordshire and West Berkshire Workforce Strategy identifies the four main workforce themes of;
 - recruitment and resourcing
 - leadership and culture,
 - engagement, retention and well-being;
 - workforce design, planning and productivity.
- 3.3. The Buckinghamshire, Oxfordshire and West Berkshire wide strategy will include an Oxfordshire place-based narrative that outlines our most pressing workforce issues and actions linking closely with our local individual provider workforce strategies.
- 3.4. A separate Transforming Care Partnerships Workforce Plan for Oxfordshire and a Primary Care Workforce Strategy are also in the process of being agreed and will be part of this overarching Buckinghamshire, Oxfordshire and West Berkshire Workforce Strategy

4. Developing Oxfordshire's Future Workforce

- 4.1. In Oxfordshire we are on a journey towards integrated care delivery and there is need to develop our local workforce to support this change. This means we need to develop, skill and/or re-skill our workforce as well as creating and training people in new roles to fill gaps or provide more effective care. It also means that we need to revise our HR and governance systems to enable health and social care staff to work in an integrated way to create a 'Workforce without Walls'.
- 4.2. Individually and collectively there is a lot of work in train across Oxfordshire to impact on current workforce issues as well as supporting the development of new ways of working and delivery of integrated care. Oxfordshire System Workforce Group has a place-based delivery plan that captures initiatives and projects that are best managed at a system level to addresses problems that are common across Oxfordshire
- 4.3. Over the last 12 months Oxfordshire System Workforce Group has successfully delivered against many of the actions in the workforce section of the Oxfordshire CQC Review action plan with its focus on System Task and Finish Groups aimed at using established best practice and collaboration to resolve some of our identified areas of agreed focus.
- 4.4. Examples of this approach include;

- Working in partnership to take forward a suite of Health and Social Care Support Workforce projects that aim to impact on workforce planning, recruitment and retention, leadership and organisational development and career pathways for this group of staff
- Agreeing on an allocation of funding from BOB LWAB for 2018/19 to include nursing development, development support for workforce development to support Oxfordshire's Winter Plan and Frailty Pathway that will enable greater flexibility and integration of care whilst facilitating our staff to work in multidisciplinary health and social care teams and a project to attract Young People into Health and Care.
- Funding support via Buckinghamshire, Oxfordshire and West Berkshire Support Workforce Board to focus on a Care Certificate Pilot and developing a career pathway tool linking health and social care.
- Agreed workstreams focusing on developing strategies and methodologies to consider how affordable key work housing can be made available to our health and social care support workforce.
- Using the learning from the acute trust success in recruiting from abroad to share this approach with social care providers and plan further joint overseas recruitment initiatives with Oxford Health Foundation Trust.
- The Community provider has a range of initiatives to facilitate routes into nursing to increase its workforce including promoting and supporting apprenticeships as a means of creating career pathways and increasing capacity and collaboration.
- Oxfordshire's local social care sector represented a significant proportion of the national social care intake to the December 2018 Nursing Associate cohort. This signifies a successful start to working in partnership across the county to recruit more nurses and is supported by Health Education England.

4.5. Creation of genuinely integrated teams of GP's, primary care, community health and social care staff to provide a flexible workforce that can react to shortages and demand is a key feature of the new NHS Long Term Plan. Facilitating working in this way also provides an enriched work experience for staff and new opportunities for career development across the system. It will help in retaining staff not just in individual organisations but within and across Oxfordshire's health and social care system. If we are successful it could also attract others to come and work in Oxfordshire.

5. Oxfordshire's 'Top 5 Workforce Issues and Actions'

5.1. There is a significant amount of activity around our focus on Workforce as an enabler. An outline of the 'Top 5 Oxfordshire Workforce Issues' and actions being taken are shown below. This outline is supplemented by the Provider Workforce Strategies, Activities and Plans that are summarised in Appendix 1.

5.2. A. Recruiting and Retaining well trained, experienced staff

Contributory factors that are pertinent to this issue include:

- High cost of living in Oxfordshire, London weighting and better employment packages for jobs over our borders

- Low level of unemployment locally and completion from other employers
- An aging workforce with high levels of actual and upcoming retirement
- National staff shortages in particular roles or groups of staff (including MH and Adult nurses, podiatrists, CAHMS consultants, psychological Wellbeing Practitioners (IAPT))
- Need to reduce the reliance on agency staff
- The unknown impact of Brexit
- Attraction of paramedic skills for other parts of the healthcare sector
- Attracting Nurses to a call centre environment
- Pilot to develop individuals with social care needs to consider a career in social care.
- Poor rural transport

Actions being taken include:

- Development of Nursing Associates
- Increasing apprenticeships
- Working to reduce 'poaching' of trained staff
- More effective use of 'Retire and Return', further improving education and training provision with Health Education England (HEE) and education providers, develop a school of Nursing and Midwifery
- Taking targeted measures to improve retention, including achieving a 2% reduction at OUH and 1% reduction overall
- Undertaking Long Term workforce planning at directorate level
- Sharing learning and experience of recruitment software (TRAC)
- BOB LWAB funded project to 'Attract Young People into the Health and Care workforce' through apprenticeships and engagement with educational establishments
- Increased youth branding and work
- Diversification of work – OT, Physio and other pilot work to support patient care and improve retention and job satisfaction
- Increased use of Specialist Practitioners to support GP practices and improve job/role satisfaction and improve patient experience
- Development of an adult social care career pathway to use with schools and colleges to create a future pipeline of young people – currently under represented in adult social care workforce.

5.3. B. Leadership and Organisational Development

Contributory factors that are pertinent to this issue include:

- High vacancy and turnover rates for Registered Managers and other leadership roles – fragmented leadership
- Staff leaving citing manager relationships as a problem
- Poor NHS staff survey results,
- Low or variable staff engagement scores,
- Limited leadership capability and confidence due to insufficient development opportunities and a lack of a joined-up 'ladder' of developmental interventions
- Ongoing high operational demands
- Reputational management and Commissioner's and public's expectations

- Feedback via exit interviews and complaints: -patients and staff
- Poor system co-ordination and shared understanding, with most leadership development occurring within single organisations and often within a professional group
- Need to improve the quality of care (in some areas or care)

Actions being taken include:

- Leadership training for Registered Managers and other leaders in Social Care providers, including nurses and deputy managers
- Developing 'leadership at every level' including a proposal to offer places on each-others' programmes – initially on a pilot basis
- Introduce a more structured approach to talent management in line with NHSI-led Regional Talent Boards
- Consider bids for NHS Graduate Management Trainee Scheme, including STP-wide placements
- Development of a 'high performance culture'
- Exploring a joint development programme for HR Business Partners
- Refreshing and extending Enhanced Leadership Skills programme
- Nursing Leadership pilot
- Ensuring staff have up to date appraisals and have completed statutory and mandatory training
- Registered Manager Network for adult social care managers including informal WhatsApp group to share and support

5.4. C. Un-coordinated training

Contributory factors that are pertinent to this issue include:

- Different working practices, processes and procedures across the system
- Different training priorities in individual organisations on issues that affect system working
- Focus on specific parts of the workforce to the detriment of others
- Insufficient joint planning within and intra- organisationally across Oxfordshire
- Lack of clarity and short timescales of available monies to bid for externally
- Absence of a strategic mandate from both Health and Social Care organisations to do this together

Actions being taken include:

- Strengthening links with education providers
- System wide commissioning of education – including FE/HEI, NHS Trusts and Social care
- Agreeing a system wide training plan
- Establishing a single system-based training offer
- Pilot of a standardised Care Certificate across Health and Social Care
- Pilot of a cohort of Nursing Associates in Social Care
- STP streamlining work

5.5. D. Development of a workforce that can deliver ‘New Models of Care’ and ‘New Ways’ of working

Contributory factors that are pertinent to this issue include:

- Demographic changes and increased demand for care
- Changing needs of the population
- Workforce supply/Staff shortages
- Oxfordshire’s journey towards becoming an ‘Integrated Care System’
- Greater emphasis on prevention and self-care
- An expectation, by the public and commissioners, of seamless care delivery of care in a flexible and co-ordinated way

Actions being taken include:

- Developing and implementing new roles to fill gaps and increase skill mix
- Upskilling current staff
- BOB LWAB funded project to ‘Develop integrated team working’ to facilitate flexibility and improve capacity during surges in demand
- Continuing to provide more local outreach services closer to where the needs are
- Diversification of work – OT, Physio and other pilot work to support patient care and improve retention and job satisfaction
- Increased use of Specialist Practitioners to support GP practices and improve job/role satisfaction and improve patient experience

5.6. E. Promoting Staff Health and Wellbeing

Contributory factors that are pertinent to this issue include:

- Increased sickness due to stress
- Poor staff engagement
- Staff leaving due to continually high workloads
- The impact of long working hours and high patient demand
- High vacancy rates amongst clinical staff- particularly nurses and midwives
- Variable sickness rates and the need to provide cover for sickness

Actions being taken include:

- Developing and improving career pathways
- Improving the quality and quantity of appraisals
- Strengthening Occupational Health, Employee Assistance Programmes and Health and Wellbeing initiatives
- Making organisations ‘a great place to work’ – including staff engagement, effective communication, reward and recognition
- Providing mindfulness, Yoga sessions and information on self-management of wellbeing
- Welfare support in Health and Wellbeing teams

- Identifying people as they look for alternative employment, incentivising them to stay within the wider health and care sector rather than leave to work for competitor employers

6. Summary and Recommendations

Oxfordshire Health and Wellbeing Board are asked to note:

- 6.1. The approach taken by the system to add value to projects that are being taken forward at Buckinghamshire, Oxfordshire and West Berkshire level and Provider level by focussing on a discrete set of system wide projects that will be reported to the Health and Wellbeing Board through Integrated System Delivery Board
- 6.2. The focus on Oxfordshire System Workforce Group's on both working in partnership to address key workforce issues whilst planning for a future workforce that can work in an integrated way
- 6.3. Oxfordshire System Workforce Group's role in aligning the strategic direction set out in the NHS Long Term Plan, the emerging strategic context within the Buckinghamshire, Oxfordshire and West Berkshire Workforce Strategy and the operational and strategic development plans within Provider workforce strategies.
- 6.4. The range of work that is being undertaken in partnership across the system as well as by individual organisation to impact on current issues whilst supporting the development of integrated care.

Appendix 1: Provider Workforce Strategies, Activities and Plans

In addition to the issues and actions being taken collectively and individually referenced in our 'Top 5 Oxfordshire Workforce Issues' individual provider organisations have summarised what is going well and what is challenging below to provide an overview of some of the issues they are currently working on.

Adult Social Care

What's going well?

- Retention in social care: turnover in Oxfordshire is now below the national and regional averages
- Higher levels of recruitment from outside the sector, bringing in new staff (37% in Oxfordshire compared with 32% nationally)
- Staffing increases in Adult Social Care, achieving progress in line with the estimated level of staffing increase required over this period according to the Adult Social Care Workforce Strategy (increase from approximately 14000 in 2015 to 16000 in 2018)
- Strong collaboration across health and social care, including providers and provider associations, across key themes: Recruitment, Valuing Staff and Retention, Leadership and OD, Career Pathways, and Key Worker Housing.

What is challenging?

- One of the least affordable places in the country to live
- Very low unemployment - strong competition with other sectors and recruitment from a limited potential pool of staff
- Pay and other recruitment levers are not enough alone to attract staff, and the financial cost of low retention is significant
- Workforce being dispersed across a large number of providers and requirement for own transport in rural areas
- New ways of working / transformation
- Leadership, organisational and skills development
- Recruitment of key staff, including in the Support Workforce (care and support workers), Registered Managers, Social Workers, Occupational Therapists and Nurses

Oxford Health Foundation Trust

What's going well?

- Improved retention (1.5% improvement from 15% turnover to 13.5%)
- Significantly bigger internal bank.
- Focus on tackling Stress with good support from staff side.
- Progress on Equality, Diversity and Inclusion including better WRES data.
- Strong Apprenticeship Programmes
- Improved career path visibility for staff
- High volumes of recruitment, particularly into Healthcare Assistant (non-registered) roles

What is challenging?

- Agency utilisation and spend remains very high.
- Staff Survey results static despite significant efforts to boost engagement and motivation.
- Housing costs remain an issue for many staff and impact recruitment and retention.
- Nurse shortages remain problematic, only partly offset by agency use.
- Gaps in many mental health teams.
- Increased workload and caseload putting huge strain on staff in many teams and professions.

Oxford University Hospitals Trust.

What's going well?

- Improved retention (1-2%)
- Increase in substantive staff (+2016 WTE since April 2018)
- Growth in international nurses (15-20 per month)
- Greater collaboration across organisations (ICS and STP)
- Good examples of improving patient flow and productivity
- Low sickness and absence (3.2%)
- Stronger and more creative and ambitious workforce planning

What is challenging?

- Ongoing shortfall of key staff, especially qualified nurses
- Affordability of living locally and day to day transport and parking
- Variable staff engagement, with a slight reduction in overall staff survey results
- Balancing reliance on bank staff with sustainability of workload
- Affordability of temporary staffing to create the capacity to meet access standards

SCAS

What is going well?

- A pay review that will be impactful for call centres creating increased attraction
- Employer branding developing new products, undertaking a web site refresh and remaining current
- Social media – using Instagram, Facebook, twitter and Linked in
- Running events – approx. 50 attended last year
- Widening participation – Youth, young ambulance citizen programme, MOD – maintaining traction, BAME/LGBT – partnership working with our networks and raising SCAS's profile
- Reviewing/improving practices including: lifting assessments and films to support assessments and interviews
- 82/100 UCAS paramedics have applied to SCAS – supporting with C1, incentives and training and educational support
- EOC – retention, repayment of training clause, transferees to internal posts regulated, talent management and progression planning