

*We have been working together to consider what the requirements set out in the NHS Long Term Plan mean for our residents, staff and health and care partner organisations across north central London (NCL). We have a collective commitment to deliver changes that will improve the health and wellbeing of residents and have listened to what residents told us is important to them.*

*We have developed a draft NCL delivery plan for workforce and are now seeking the engagement and involvement of all local partners, stakeholder and residents to refine and finesse these plans. Over the next two months, we will cross-reference, financially cost and finalise our plan for submission in November.*

*If you have any comments, queries or think we have missed important points relating to any of the sections please get in touch with the Sarah Young ([sarah.young11@nhs.net](mailto:sarah.young11@nhs.net)).*

## **North London Partners: DRAFT in development - NLP LTP Workforce Chapter**

Our workforce plan builds on the work that north central London has been doing to attract people to live and to work here so we have the best possible workforce to deliver high quality services to our community.

Our **vision** is to support NCL health and social care organisations to be excellent employers, committed to delivering efficiency, developing and supporting the wellbeing of staff whilst also preparing them to deliver the new care models in a range of settings. We will work with North London organisations across all health and care settings to support their collaborative efforts to achieve this whilst ensuring everything we do contributes to our priorities.

Our workforce is our greatest asset to being able to deliver safe, effective care in the right place, at the right time. This means having access to the right skill-mix is essential, so we must work collectively to address a number of challenges, including attracting the right health and care professionals, retaining the existing workforce, and shortfalls in care and social workers, GPs and practice nurses, as well as nurses, midwives, allied health professionals working across all care settings in our system. We must do this in the context of the significant financial challenges facing North London, and better supporting our workforce will contribute to that, for example through reducing turnover and supporting and developing our workforce to reduce unwarranted variation in the care we provide.

In order to support this vision, Siobhan Harrington (Chief Executive of Whittington Health) is the SRO for North London Partners workforce programme, working with the clinical lead, Josephine Sauvage (Chair of the STP and of Islington CCG), clinical lead for new roles Chris Caldwell (Executive Director of Nursing, Tavistock and Portman), and programme lead, Sarah Young. Through this programme, we enable and co-ordinate wider system leadership engagement and support for the priorities set out in the plan, across all health and care settings, to include social care, the NHS workforce and higher education authorities (HEIs).

**Engagement** with and across health and care sectors is led by senior leaders and partners through our Local Workforce Action Board, co-chaired with Health Education England (HEE). The Local Workforce Action Board (LWAB) supports a broad range of workforce and HR activity, and the local delivery of the HEE Mandate from the Department of Health and other key workforce priorities in line with national policies, linking in with our STP clinical workstreams and unions. Programme delivery is through our Workforce Steering Group and this links in with the HR Directors Network and our five Training Hubs through the Integrated Education Provider Board. Staff engagement takes place on current work.

Our **programme** is focussed on three strategic priorities, which align with the themes set out in the Interim People Plan, with detailed delivery priorities set out for [the first two years of the plan]. All priorities span both health and care, and we work in partnership. We will continue to refresh our delivery plan, and inform our thinking by building our evidence base and analysis, to maximise opportunities for greater impact informed by any new money set out in the national Spending Review linked to the national people plan:

- **Retention and development of the existing workforce within NCL's health and Social Care:** *to support NCL health and social care organisations to be excellent employers, committed to developing and supporting the wellbeing of staff and thus retain their staff*
- **Recruitment of staff to the NHS and Social Care sectors:** *to attract people to live and local people to work in North London so we have the best possible workforce to deliver high quality services to our community.*
- **Care and system changes including integrated care and other workforce modernisation:** *to support NCL health and social care organisations to plan their workforce and its development needs to deliver new care models in new settings including in integrated care systems.*

The rationale for these priorities is:

### **Retention and development of the existing workforce within NCL's health and Social Care**

Retaining our existing Health and Care workforce is vital to social, community, primary, secondary and tertiary services. A number of factors including the ageing of the workforce, and increasingly attractive career opportunities outside the NHS or outside London, make the recruitment and retention of staff one of the biggest challenges. Many people leave not only the local workforce but the NHS altogether, the majority being well under retirement age. We want to improve our understanding of underlying trends in turnover and vacancy rates. Nevertheless, we know we have some challenging headlines, for example, 26% of adult nurses and 29% of speech & language therapists left the NHS entirely between 2010 and 2015. We need a better understanding and analysis of trends, both in health and care.

Provider trusts, primary and social care as well as Clinical workstreams are actively exploring these areas, with University College Hospital London (UCLH) having developing nationally recognised good practice. Our approach will build on existing retention policies (for example those of provider trusts), pilots and good practice as well as locally gathered evidence such as the Ipsos Mori survey of provider trust staff in 2018.

We need to consider how to we give effective careers advice and accommodate those approaching retirement who might stay on in the NHS if they were given flexible working options proactively or who could move roles to be effective in less frontline clinical roles and how our staff working in the most stressful environments can experience rotations in other areas?

### **Recruitment of staff to the NHS and Social Care sectors**

Recruitment in health and care is high on our agenda, in terms of workforce growth in areas of highest priority and efficient ways of working. We welcome national support for a co-ordinated approach on all areas.

For growth areas, we include nursing, midwives and allied health professionals across all care settings, Retention and recruitment of these staff in NCL is particularly challenging, and we are pleased to work in collaboration with CapitalNurse and emerging CapitalMidwife and CapitalAHP programmes as well as higher education institute partners for joined up, pan London programmes and learning. Health Care Close to home are focused on GP, pharmacist, and GP Nurse recruitment as well as how to work with the newly established Primary Care Networks (PCNs), and the new roles they will recruit to

Secondly, we wish to continue to address efficiencies in ways of working – building on the implementation of our NCL Trusts Common Recruitment and Selection Policy. This is the foundation upon which Trusts will further collaborate to significantly enhance the ways in which we recruit to enable more streamlined and shared approaches - such as portability through the Employment Licence and sharing of Mandatory and Statutory training across organisations.

### **Care and system changes including integrated care and other workforce modernisation**

Supporting this third priority to develop enablers for the workforce to work collectively in different ways, to modernise and support cross sector working is essential to enabling new models of care, and will be essential in our journey to support place based systems within the Integrated Care System (ICS). We really need to

think ambitiously about how we use technological solutions to support a step change in new ways of working and how we train our current and new staff in use of technology, for example nurse or medical undergraduate modules in technology using virtual clinics.

We seek to work with the clinical programmes of work as they develop new service models to ensure that the workforce requirements are understood, and that programmes are put in place to deliver the workforce changes to transform those services.

We are supporting scenario modelling to assess the financial benefits of the new models and the impact of new roles and changing settings for providing care. Shared HR systems and policies will facilitate this work.

Health, social care and public health delivery is not limited to employees of our traditional employers, and our notion of working with the 'wider workforce' extends to the numerous carers, volunteers and citizens who improve the life of our population but are employed outside of the public sector, including home care workers and personal assistants. In order to improve the general wellbeing of our population and make use of the substantial social capital across our footprint, we will educate and support patients, carers and those in their communities in areas such as self-care, self-management, dementia and mental health awareness.

### **Whole system changes**

This is an integral part of the care and system changes above, and compliments those initiatives to develop enablers and tools that will underpin a change in approach at a whole system level in all care settings – building workforce skill mix, ability to collectively train and share parts of our workforce within pathways or specialist care settings) and building capability and capability for new models of care and to deliver change.

For all our priorities, we will ensure that we will develop our analysis to ensure our approach is evidenced based and our attention is focused in the most impactful areas.

These **priorities** are underpinned by cross-cutting workstreams that support whole system change for our 2019-20 programme and our 5-year programmes, both illustrated below:

<b>SRO: Siobhan Harrington</b>		<b>Clinical Lead: Josephine Savage</b>		<b>Clinical Lead for new roles: Chris Caldwell</b>		<b>Programme Lead: Sarah Young</b>										
<b>Priorities</b>																
<b>Sector/strategic leads</b>	<b>Retention within health &amp; care</b> Strategic Leads: Jo Savage (THubs) & Ben Morrin		<b>Recruitment to health &amp; care</b> Strategic Lead: Jess McGregor		<b>Care and system changes</b> Strategic Lead: Will Huxter / Director of People TBA		<b>Whole system changes</b> Strategic Lead: David Grantham									
<b>Social Care</b> Richard Elphick	Values Based Recruitment PM: Anne-Marie Gray		Collaborative Bank (phase 2) - Fran Talbot / PM HCCH: Alison Dear		Nursing inc return to practice PM: Joanne Eardley	Proud to Care Portal PM: Anne-Marie Gray	Apprenticeships/ local workforce routes into employment PM: TBC	New employment models PM: Alison Dear	Localities planning & modelling PM: TBC	Apprenticeship Levy - PM: TBC	Nursing - Capital Nurse inc rotations and passporting - leads: Holly Norman/ Claire Johnston	HEE pipeline of emerging roles - nurse associates - Implementation lead Aine Feeney/ other: TBC	Estates Workstream - Affordable housing - PM: TBC	Working with & across sectors & Inter-great workforce priorities - PM: Sarah Young		
<b>Health Care Close to Home</b> Katherine Gerrans	(Talent mgt) Career pathways PM: TBC	Training Hubs training design and delivery PM: TBC			GP retention PM: Tessa Newton	GPN retention PM: TBC	GP recruitment PM: Tessa Newton	GPN recruitment PM: TBC	Health Care Close to Home Workforce Action Plan PM: Alison Dear							
<b>Secondary Care</b> TBC	Retention plan (including wellbeing) PM: TBC				International GP recruitment HCCH PM: Tessa Newton	International recruitment PM: TBC	Sharing Educational Assets inc Mandatory & Statutory Training (Phase 2) PM: Cheryl Samuels		Workforce Race Equality Standard (WRES) PM: Jide Odusina						Agency & Bank standardised rates, PM: TBC	Subsidised travel PM: TBC
	Equal & diversity & tackling bullying, PM: TBC				UEC workforce Lead: Alex Faulkes & Lisa Burgess, UEC Workstream											

