Moray Integration Joint Board

Workforce Plan

2019 – 2022

Defining the plan - **Introduction**

Health and Social Care Moray have delivered community-based services and assumed responsibility for strategic commissioning since 1 April 2016. Throughout the last three years we have worked jointly as partners in health and social care to improve the delivery of services to the people of Moray. Our vision is that by 2021 we will have achieved service improvements and be able to provide the local population with the highest quality of person-centered care.

Our aim is to continue to personalise care, educate individuals and give them choice and control over the lives they lead. Services will be planned, co-ordinated and delivered within localities and in support of the 2018 General Medical Services (GMS) Contract increase our focus on local patient-centered care delivered through newly developed multi-disciplinary teams.

We recognised that our workforce is key in progressing new ways of working and that retaining their skills is fundamental in the delivery of new models of care. Our aim is to focus on these new models, develop new career pathways and enhance the roles within multi-disciplinary teams; highlighting the opportunities for cross-sector learning and development of new generic roles e.g. Link Workers, Social Care Assistants, Advanced Nurse Practitioners and Paramedic Practitioners.

We also plan to continue to develop joint working relationships between health and social care professionals; building on our existing links with the primary and acute sectors and the Third and Independent Sectors.

Health and Social Care Moray welcome changes that will benefit service users. We aim to support the strategic themes contained within Moray Partners in Care and The Primary Care Improvement Plan and as part of the Workforce Plan agree how we will prepare the workforce for changes in service delivery. It is recognised that our workforce is key to delivering new ways of working and therefore crucial that we support them in obtaining and /or retaining skills, knowledge and aptitudes required to deliver the level of person-centered care that we are striving towards.

Recruiting and retaining staff remains a major challenge and we need to review our approach and the incentives used to attract individuals to work in the health and social care sector.

This Plan has been developed by the Senior Management Team in conjunction with their service areas and specialties. Staff Partnership/Trade Union colleagues will continue to be involved in the review of services through workforce steering groups. The challenges, risks and solutions are the

responsibility of everyone within Health and Social Care Moray with the aim of providing a well-aligned, supported and sustainable workforce for the future.

This Workforce Plan aims to guide our service departments develop a workforce fit for the future, one which is able to deliver the strategic aims described within Moray Partners in Care and the Primary Care Improvement Plan for Moray i.e. a sustainable workforce competent in managing service demands and safeguarding the continued delivery of high-quality care.

Mapping service change - Direction of Travel

Health and Social Care Moray will work with all their partners to plan effectively for the future needs of the community. We will encourage people, including our own workforce, to take charge of their own health and well-being and that of their families and communities. We will promote positive health messages and signpost to sources of advice and support as required, developing skills and confidence which will allow self-management of long-term health conditions; building resilience and fostering a culture of early intervention and prevention including concerns around mental health and loneliness.

Develop services in partnership with providers of health and social care services including the Third Sector and Independent Care Sector to provide a more cohesive level of care which can be delivered safely at home or in a homely setting. We will develop multi-disciplinary teams (MDTs) which will provide more holistic care and prevent hospital admissions wherever possible. Determining what type of skill mix is needed to meet future demand will promote succession planning and enhanced MDT roles in primary care.

A commitment to work with people as partners in their own care, support and treatment. Provide the necessary information that will allow then to make informed choices regarding their personalised care and support planning. Shared decision-making will allow individuals and families feel empowered to discuss and understand treatments available i.e. Realistic Medicine. We need to ensure that in taking this objective forward the workforce have the required competencies to deliver this and are encouraged and supported by a clear career pathway,

The 2018 GMS contract represents a significant change in how general practices operate and their links with Health and Social Care Moray and the professionals working within our communities. Our vision is that by 2021 Health and Social Care Moray will have well-resourced and sustainable

primary care systems in place which will be delivered by a network of GP Practices. The GMS contract supports the development of a new role for GPs, the Expert Medical Generalist and senior clinical decision maker; moving their workload and responsibilities to a multi-disciplinary team. Practice Managers, administrative staff and General Practice Nurses will generally remain directly employed by the Practice as independent contractors. The multi-disciplinary teams will, in the main, be employed by the NHS or Scottish Ambulance Service however they will be embedded within practice teams. This model provides continuity of care to people, whilst supporting practice sustainability and professional governance.

The MDTs will focus on anticipating care needs, supporting self-management and the co-ordinated operational delivery of care and will include new roles e.g. Paramedic Practitioners.

Our workforce is our most valuable resource and in order to retain the skills and knowledge already present it is essential that we promote continuous professional/ skills development and support staff in career progression. Ensuring our workforce is motivated and multi-skilled with the ability to undertake a wide range of health and social care tasks will assist the new ways of delivering services e.g. skill mixing will help determine the most appropriate use of our workforce.

We continue to face major challenges in recruiting and retaining staff and as such we need to look to new ways of recruiting e.g. using social media and websites like Facebook and Linkedin to attract people to live and work in Moray and consequently improve workforce supply. We also need to look at how we motivate, support and develop existing staff e.g. career development, flexibility of working conditions for those who may be considering retirement.

Establishing workforce needed to meet service demand - Challenges

Recruiting and retaining staff remains a major challenge and we need to review our approach towards recruiting and be more creative in the incentives used to attract individuals into the health and social care sector. There are some key factors that affect this, including but not exclusively, pay and conditions and the rurality of Moray. Whilst some of these factors remain, as they have been over the last three years, there has been a move to a different working pattern for Social Care Assistants (complete shifts) and a review of Care at Home staffing structure from management and leadership through to team structure. We need to encourage more existing staff to engage in different ways of working and encourage them to develop their skills and apply

for new roles, for example, multi-disciplinary team working including Paramedic Practitioners, Advanced Nurse Practitioner and Community Link Workers.

Moray has a growing elderly population, consistent with national trends. Population projections from the National Records of Scotland show over the last 10 years a 40% increase in the over 65 population in Moray and a reduction of 22% in the 15-64 age-group (mainly working age).
These figures highlight the impact this will continue to have on our workforce who are supporting an ageing population, many with complex health and social care needs.

We need to look at alternative ways of working, retain highly experienced staff and provide opportunities for those who wish to continue working beyond their chosen retiral or state pension age. With changes to state pension age there is likely to be an increase in staff working for longer although for some of the workforce, specifically some NHS staff, early retirement at the age of 55 may prove quite appealing. We need to fully support our ageing workforce by exploring alternative roles which will fit with their preferred work/life balance and retain their expertise within the Partnership.

Financial challenges continue to be high on the agenda and we need to look to our new models of working to deliver services more efficiently e.g. using members of the multi-disciplinary team to deliver care rather than GPs, training and developing more Social Care Assistants.

Understanding workforce availability - Current Workforce

As set out in the National Health and Social Care Workforce Plan: Part 1, NES is working with stakeholders to bring together and align relevant workforce data under a data platform called the 'Data Lake' which will better inform workforce planning. Full implementation of this is expected by the end of 2019.

Going forward, the NES data platform will be crucial in supporting more integrated local, regional and national workforce planning in health and social care. For now, the workforce information data is built around different reporting systems for the Moray Council and NHS Grampian. Consequently, complete harmonisation of workforce information is not feasible at this stage, however, workforce statistics have been provided by both partners which are populated in the tables below.

Workforce statistics taken from NHS Grampian and The Moray Council as at 31 August 2019 are outlined below:

Table 1

Organisation	Headcount	WTE
The Moray Council up to Grade 8	690	486.53
The Moray Council Grade 9 +	93	85.68
NHS Grampian	776	622.20
Total	1559	1194.41

Table 1: Integration Workforce Summary by Headcount, Working Time Equivalent (WTE) and Number of Posts

Table 2

Organisation	Whole Time	Part Time	Total
The Moray Council	234	549	783
NHS Grampian	345	431	776
Total	579	980	1559

Table 2: Integration Workforce Summary by Part Time/ Time Total

Table 3

Organisation	Male	Female	Total
The Moray Council	118	665	783
NHS Grampian	102	674	776

Table 3: Integration Workforce Summary by Gender Organisation Male Female

Table 4

Organisation	Age	Profile					Total
	<25	25-34	35-44	45-54	55-59	60+	
The Moray Council	32	108	143	251	140	109	783
NHS Grampian	17	132	171	276	95	85	776

Table 4: Integration Workforce Summary by Age

Table 5

Job Family	Total Headcount	WTE
Admin Services	116	93.35
Allied Health Profession	121	92.02
Dental Support	40	31.18
Medical and Dental	34	22.31
Nursing and Midwifery	383	324.57
Other Therapeutic	27	22.91
Personal and Social Care	7	6.40
Senior Managers	1	1.00
Support Services	47	28.47
Totals	776	622.20

Table 5: Total Headcount by NHSG Job Family

Implementing, monitoring and refreshing - Action Plan and Review

Our Workforce Plan is a working document which will be reviewed on an ongoing basis by the Senior Management Team. The Action Plan is attached as Appendix 1 and will be completed and reviewed on an on-going basis. HR and OD professionals from the Moray Council and NHS Grampian will provide advice and guidance in relation to the workforce objectives that require HR/OD input e.g. redesign involving organisational change; innovative recruitment.

Effective staff engagement will play an integral part in implementing many aspects of this plan. To ensure its success, support will be available from trade union and staff side colleagues through the Joint Staff Forum and other staff working groups.

Appendix 1

Workforce Planning Action Plan 2019/22   Definition: Short – Up to 1 year Medium – 1 to 3 years Long – 3 to 5 years
Mapping workforce skills and competencies

	Description of Action	Lead	Timescale for Implementation – Short, Medium or Longer term	Description of Potential impact on Workforce / Service	Financial resources required	Progress towards implementation
1	Workforce Review, particularly Mental Health Nurses	Service Managers	Long term	Ageing workforce Create generic roles/new roles to meet service demands	Increase of training budget, cost of developing new roles	
2	Develop the Mental Health Strategy Plan	Specialist Service Manager	Medium	Create stronger links with Integrated Children's Services		
3	Develop local induction and training i.e. new ways of working, different IT systems, Policies and Procedures, Health and Safety procedures. Aim to transform the culture and philosophy of care which will assist in meeting future service demands.	Senior Management Team	Long	Training implications for staff. Maintain staff engagement and motivation which reflects on the delivery of services. Development of new roles e.g. Generic Healthcare Support Workers, Advance Nurse Practitioners. Develop career pathways and provide opportunities for staff motivated to advance in their chosen career.	Increase in Training and Recruitment budgets will be required.	

4	Target the recruitment of workforce groups with higher than average rates of turnover.	Service Managers	Medium/Long	Encourage recruitment of the people who demonstrate our core values and understand our vision. Recognise the need to support staff development, particularly those working in specialist units, improve positive leadership and accountability.	Uncertain of exact budget implications, in many driven by national terms and conditions.	On-going
5	Career Planning and Talent Management; awareness of age profile and the need to be proactive. Develop career pathways and new ways of delivering service. Embrace technology	Service Managers	Medium/Long	Improve engagement and motivation when career pathways are defined. Understand the benefits of technological advances.	Increase in L&D and recruitment budget.	
6	Information sharing - develop easy access to service information across Health and Social Care Moray	Senior Managers, ICT Security and Information Governance.	Short	Swift transition of information, better for Clients and Patients. Enable staff to provide a quality service	Within existing budget	
7	Ensure Acute Medical Units have dedicated access to physiotherapy, OT	AHP Lead Moray	Medium			

	and access to appropriate services				
8	Implementation & evaluation of MH and Wellbeing services - Choose Life, Stress Control, Moray Feelgood Festival.				