



HEALTH AND WELLBEING BOARD: 28 NOVEMBER 2019

REPORT OF LLR

WORKFORCE WORK STREAM FOR THE STP – PROGRESS AND CHALLENGES AT A SYSTEM LEVEL

Purpose of report

1. The purpose of this report is to provide the Board with an update on progress and priorities of the STP workforce workstream and to outline key risks and gaps to the system, in fulfilling the workforce ambition within the Long Term Plan and implementing a system workforce plan that supports the move towards a shadow integrated Care system.

Link to the local Health and Care System

2. The local health and care system across Leicester, Leicestershire and Rutland (LLR) is currently engaged in re-designing pathways of care to create a more integrated and joined-up system of care. This includes better preventive and supportive care in out-of-hospital settings, improved links between mental health and physical health, better support to people living with multi-morbidity, and support for the frail and elderly population. The development of the system workforce strategic plan links firmly to the following key pillars of integrations:
 - New models of care including, the integration between primary and secondary care will develop integrated pathways supported by teams. Following a Pre Consultation Business Case submission, UHL have been successful in its bid for capital which proposes the majority of acute services to be based on two sites, improving delivery of care and improvements in working conditions for staff. This will require a significant redesign of pathways to implement the reconfiguration across the main acute provider. This will require radical workforce changes and the development of the workforce modelling that supports the delivery of this is in the early stages.
 - Integration between health and social care – The evolving system models of care demonstrate the need for a more flexible workforce that supports integration at place and primary care network neighbourhood level. Year one and two priorities include the continued development of the All Age Mental Health Transformation Programme which is a five year programme to redesign care pathways across the system to reduce the demand for specialist inpatient care and out of area placements. This includes a focus on improving patient flow to enhance use of available capacity and capability in services, development of new models of care working with non-traditional providers e.g. resilience building and early identification in Children's and Young People and strengthening liaison between

urgent/emergency care and criminal justice to identify and divert patients into appropriate care pathways

The Community Services Redesign programme which will change how care is delivered, with a focus on Home First and community health care rather than acute based care. This will see a full redesign of the workforce to support the changing models of care as they emerge, including rapid response, recovery and enablement services, integrating some core community services and social care; Primary Care network and wrap around locality/neighbourhood teams – will draw on the extensive work already undertaken across the past two years on the building block development of integrated locality Teams, across health and social care.

3. In order to link to the Health and Wellbeing Strategy, the approach will use population health Management data to segment the local population and develop interventions based on greatest need. It is known the local population has an average growth of 1% with the following projections:
 - Forecast increase of 3.6% for children and young people, 1.7% for adults
 - Increase in the older population will be proportionally higher than overall
 - A significant increase in the number of people over 65 years by 33%
 - Over 16,000 people in LLR with a learning disability
 - Near doubling of the 90+ population by 2030
 - 96,580 new homes being built 2011-2031
4. LLR has a culturally diverse population which also means a local priority for developing the workforce transformation plan is to ensure the system has a reflective workforce and one that meets future population needs.
5. The STP workforce work stream is a key programme of work for the STP, and a critical enabler to clinical works streams. The Senior Leadership Team is committed to ensure the STP workforce programme is central in all planning and care model development.

Recommendation

6. The Board is asked to note the progress in developing the STP workforce workstream and comment on the proposals to develop a system workforce plan which supports the move towards an integrated care system.

Background

7. LLR has committed itself to an ambitious vision for transforming its workforce across the next five years. Having a workforce with the necessary skills and behaviours in the right place is critical to supporting the local population to stay healthy, lead independent lives and reach their full potential. This will entail designing workforce solutions against the emerging models of care.
8. The aim is to underpin the workforce system plan by adopting a population health management approach, in which the population is segmented into groups of people sharing common characteristics, targeting interventions and the workforce design around these segments. LLR has the largest population in the East Midlands region and Leicester City is the largest city population. Both universities are expanding

student numbers and there is continued expansion of housing, with major infrastructure change expected.

9. To reflect LLR's culturally diverse population, a workforce transformation priority is to ensure the system has a reflective workforce and one that meets future population needs.
10. There is approximately 20,000 whole time equivalent healthcare staff currently working across the three main NHS provider organisations in LLR. As with Adult Social care, many of the challenges faced by NHS providers of healthcare reflect the national situation. The local approach aims to create more integrated joined up workforce, develop career pathways that span the whole system, and include rotational placements and, career pathways. It will also ensure a focus on developing a sustainable workforce, and be conscious to avoid destabilising one part of the system to accommodate another part through development of new roles.
11. The LLR Local Workforce Action Board (LWAB) will be responsible for developing the capacity, capability, governance and ways of working of the LLR workforce. LWAB has reviewed its operating model and priorities for the coming 12 months. It takes into account STP Better Care Together programme priorities, NHS Long Term Plan priority areas and delivery of the People Plan priorities. It will require closer partnership working with collective responsibility to support the development of an integrated care system (ICS) across LLR.
12. Five sub-groups of LWAB will drive the implementation of the workforce plan (each with multi agency representation). The groups will use analytics and data to inform its strategies, interventions and actions.
13. As progress is made towards a shadow form of an ICS, work will be progressed through the LWAB business and strategic groups to develop \ respond to ensure the delivery of a workforce plan reflects system requirements. An initial priority is on the organisational development support to the local system as it evolves into an ICS, to ensure the workforce is engaged, supported and empowered to deliver care at its best.
14. A transformational workforce plan is in development. There is recognition that it is in its infant stage and action is being taken to address this: The LLR System Leadership Team recently reinforced their support to prioritise workforce, recognising it as a core measure of an ICS and significant area of transformational change. The emerging shadow Integrated Care System and, capital funding for University Hospitals Leicester to reconfigure from three sites to two, creates an important context and the necessary levers for radically transforming pathways and services, and realise the workforce requirements that underpin this.
15. A system workforce structure is being developed that will provide additional resource and expertise by April 2020. This represents a critical gap at present, and will enable a focus on the development of an integrated system workforce plan and Implementation framework across 5 years. An executive sponsor is confirmed (Andy Williams CEO LLR CCGs) who will provide vital leadership to the programme, closing a key gap locally. In the short term a small system workforce infrastructure has been developed to begin the necessary workforce planning. The

next steps include a full review of the work stream governance structures and sub-structures to assure the system is equipped to deliver on the requirement set out in the NHS Interim people Plan.

Overarching Key priorities

- To develop a 'system' workforce plan and implementation framework
- Develop set of system integrated delivery plans across five years
- Plan priority areas across the system, and capture current and future workforce requirements across settings of care
- Develop an LLR workforce dashboard that supports benchmarking of workforce, supports population health management workforce design, feeds future service redesign and will allow for continually monitoring KPIs as part of Long term plan. It also will enable the system to be more proactive with regards addressing system wide workforce risks and issues. Secure resource to support system workforce modelling and strategic planning
- Set of workforce principles co-designed with stakeholders to ensure absolute transparency, collective input and ownership for the 'system' – to manage the workforce as a system plan and avoid destabilising one part of the system to compensate another
- Continue providing targeted strategic workforce planning support to NHS Long Term Plan priority areas
- Develop workforce analytics across health and ensure alignment of approaches' for key workforce metrics.
- Continued development of strategies to address work force supply – LLR attraction portal, retention, increased mobility across the system.

Nest steps

16. The following series of actions will be progress over the next 6 months:

ACTIONS	TIMESCALE
Interim System workforce Planning resource to provide five months infrastructure support	November 2019 to March 2020
Retain Interim System Strategy Support	Ongoing to March 2020
Senior Workforce system team session, to include with SROs, system support and exec sponsor, to: <ul style="list-style-type: none"> - Review workforce strategy, plans, gaps and priorities - Identify resource requirements 	November – December 2019
Review Governance structures of programme / LWAB and sub-structure(s) alignment to Interim NHS people plan priority areas	November 2019 to December 2020

Develop a workforce dashboard across LLR	November 2020 – March 2020
Confirm new posts and skill mix across 5 years aligned to new models of care	January 2020 to June 2020
System workforce team structure drafted within evolving ICS and present to SLT	January 2020 – February 2020
Deep dive LWAB session into workforce planning. Develop road map and milestones	January – March 2020

Appendix

Plans on a Page

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