

#### Health and Care Overview and Scrutiny Committee

Monday 16 October 2023 10:00 Council Chamber, County Buildings, Stafford

The meeting will be webcast live and archived for 12 months. It can be viewed at the following link: <u>https://staffordshire.public-i.tv/core/portal/home</u>

John Tradewell Deputy Chief Executive and Director for Corporate Services 6 October 2023

### Agenda

1.	Apologies	
2.	Declarations of Interest	
3.	Minutes of the last meeting held on 11 September 2023	(Pages 1 - 6)
4.	SSOT ICS People/ Workforce	(Pages 7 - 58)
	Report of the Staffordshire and Stoke-on-Trent Integrated Care Board.	
5.	Staffordshire's Social Care Workforce: Adult Social Care Update	(Pages 59 - 86)
	Report of the Cabinet Member for Health and Care.	
6.	Freedom to Speak Up	(Pages 87 - 90)
	Report of the Staffordshire and Stoke-on-Trent Integrated Care Board.	
7.	District and Borough Health Scrutiny Activity	(Pages 91 - 94)
8.	Work Programme	(Pages 95 - 100)

### 9. Exclusion of the Public

The Chairman to move:

That the public be excluded from the meeting for the following items of business which involve the likely disclosure of exempt information as defined in the paragraphs Part 1 of Schedule 12A Local Government Act 1972 (as amended) indicated below.

#### Part Two

(All reports in this section are exempt)

Membership			
Charlotte Atkins Philip Atkins, OBE Chris Bain Val Chapman Richard Cox (Vice-Chair (Overview)) Ann Edgeller (Vice-Chair (Scrutiny)) Keith Flunder Phil Hewitt Monica Holton Jill Hood	Thomas Jay John Jones Leona Leung Kath Perry, MBE Jeremy Pert (Chair) Bernard Peters Janice Silvester-Hall Ian Wilkes David Williams		

#### Notes for Members of the Press and Public

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### **Recording by Press and Public**

Recording (including by the use of social media) by the Press and Public is permitted from the public seating area provided it does not, in the opinion of the chairman, disrupt the meeting.



### Minutes of the Health and Care Overview and Scrutiny Committee Meeting held on 11 September 2023

Attendance			
Charlotte Atkins Philip Atkins, OBE Ann Edgeller (Vice-Chair (Scrutiny)) Keith Flunder	John Jones Bernard Peters Janice Silvester-Hall Ian Wilkes		

Present: Jeremy Pert (Chair)

Also in attendance: Councillor Paula Stanton and Councillor Julia Jessel

**Apologies:** Chris Bain, Richard Cox, Phil Hewitt, Monica Holton, Leona Leung, Kath Perry, MBE and David Williams

### Part One

### **23. Declarations of Interest**

Councillor Ann Edgeller declared an interest as Staffordshire County Councils appointed Partner Governor at the Midlands Partnership Foundation Trust (MPFT).

Councillor Bernard Peters declared an interest as Staffordshire County Councils Local Authority appointed Governor at University Hospital Derby and Burton (UHDB).

### 24. Minutes of the meetings held on 24 and 31 July 2023

The Committee agreed to amend the minutes of the meeting held on 31 July 2023 to include Councillor Edgeller's apologies and a spelling error under item 20.

**Resolved** – That (a) the minutes of the meeting held on 24 July 2023 be confirmed and signed by the Chairman.

(b) subject to the amendments referred to above, the minutes of the meeting held on 31 July 2023 be confirmed and signed by the Chairman.

# 25. Good Mental Health in Staffordshire Strategy 2023-2028 – Draft Action Plan

The Cabinet Member for Health and Care, Jan Cartman-Frost, Senior Commissioning Manager, Becky Murphy, Commissioning Officer Sarah Tunnicliffe, Commissioning Officer and Nichola Bromage, associate Director for Mental Health, Learning Disability and Autism and Children and Young People presented the Good Mental Health in Staffordshire Strategy 2023-28 draft action plan to the Committee.

The Committee were advised that the County Council and the Integrated Care Board had jointly developed a draft action plan to support the delivery of the Good Mental Health in Staffordshire Strategy 2023-28 which was agreed in March 2023. It was reported that the delivery of the strategy over the next five years would be overseen by the Health and Wellbeing Board.

The Committee noted the following comments and responses to questions:

- The Committee welcomed that the strategy and draft action plan has been co-produced by a number of partner organisations.
- The actions, dates and timescales within the action plan were ambitious and had been agreed by the lead organisations. Some of the targets within the action plan were already underway. For the more complex actions, where more work was required, more time had been allocated within the action plan.
- There had been a comprehensive survey sent to all of Staffordshire schools around emotional health and wellbeing which had 350/400 responses. The County Council had worked with the education sector to review the findings from that survey and an action plan had been created to address the gaps and barriers identified within the survey.
- The importance of a person's Mental Wellbeing, Mental Health and early intervention.
- ICS children and young people's mental health system improvement board had set up a number of workstream groups to look at particular parts of the action plan.
- The original strategy was developed to reflect that the stratgey would be delivered within existing resources. There was a Mental Health Investment Standard in the NHS which was ring fenced to be spent within Mental Health. There had been opportunities for voluntary services to put forward proposals for contracts with the NHS. There was also a small grants process aimed at smaller voluntary groups. The Committee requested a list of the voluntary sector schemes which had been funded.
- A number of the outcomes within the action plan were dependent on work in communities, in the development of the strategy, communities were keen to be involved and had requested to be kept informed on the development of the strategy.
- Expanding the use of Staffordshire Connects (a one-stop-shop directory service featuring health and care services and events

across Staffordshire) to include a section for children and young people.

- Findings from recent engagement and a survey highlighted that people were unaware of the Mental Health services that the voluntary services offer; the action plan looked to address this so that people know where they could access services. There had been focused groups with the voluntary sector organisations which highlighted the range of services that the voluntary services offer.
- There was an ICS Workforce plan to address the workforce issues.
- The Police had been involved in the wider co-production of the Good Mental Health in Staffordshire Stratgey 2023-2028. The National Partnership Agreement: Right Care Right Person approach was being phased in collaboratively between the police and mental health services.
- There were 9 Mental Health Support Teams in Staffordshire with a new team to be set up in January 2024 which would provide 45% coverage over Staffordshire schools, there were plans to increase the number of Mental Health Support Teams within the action plan.
- The Community Mental Health offer had been broadened to ensure that as many people can access that support at the right time. There were a number of Mental Health practitioners (ARRS – Additional Roles Reimbursement Scheme) to bridge the gap between primary care and secondary care. This was a part of the General Practice Strategy and the Committee agreed to review community mental health.
- The Good Mental Health in Staffordshire Stratgey 2023-2028 and the action plan should be shared with as many partners as possible.
- There was an outcome within the action plan around equal access which involved health inequalities and people from different ethnic backgrounds. Under the Community Champions Programme, engagement activities had taken place to involve different ethnic backgrounds.
- Public Health had commissioned for a provider for a suicide bereavement service and there was now a Real Time Suspected Suicide Surveillance officer in place.
- The agreed with the actions within the action plan however commented that some of the actions were not SMART targets.

**Resolved** – That the Committee (a) received, noted and commented on the Good Mental Health in Staffordshire Strategy 2023-2028 draft action plan.

(b) recommended that:

- the Cabinet Member for Health and Care share the Good Mental Health in Staffordshire Strategy 2023-2028 and the action plan with partner organisations when available.
- the Cabinet Member for Health and Care, as part of the consultation

on Adult Social Care and Staffordshire Connects, give consideration to expanding the Staffordshire Connects to include a section for children and young people.

(c) receive a list of the voluntary sector schemes which had been funded by the NHS.

(d) schedule in Community Mental Health in the Work Programme for a future meeting.

### **26. Mental Health Performance**

Chris Bird, Chief Transformation Officer for the Integrated Care Board presented the report to the Committee.

The Committee had requested this item following the quality account sessions with both Staffordshire's Mental Health providers which highlighted a difference in approach and the Committee were seeking assurance that an equitable service provision is available to Staffordshire residents by North Staffs Combined Health Care Trust (NSCHT) and Midlands University Partnership Foundation Trust (MPFT).

The Committee were informed that the Integrated Care Board were working with the two service providers to coordinate the service on offer. It was reported that the data was provided by both of the service providers and due to differing remits of the providers there was a challenge in benchmarking however, there were national performance metrics within the report.

The Committee noted the following comments and responses to questions:

- The National performance environment meant that the data was not comparable and the data within the report was a flavour of data available for Members and there was a comprehensive dashboard of Mental Health indicators available which could be provided. Some of the data could be split into Staffordshire and Stoke-on-Trent, but to split by District and Boroughs would need to be done by manual auditors. The Committee agreed that Staffordshire data would be useful and at this stage would not need breaking down by District/ Boroughs.
- Within the Mental Health data sets there was a three-month lag in data and work was underway to reduce this to a two-month lag.
- There were differences in performance between the two providers which were scrutinised monthly by NHSE.
- Workforce issues were raised, it was discussed that the ICB worked with providers to ensure that they could access other staff to temporarily fill posts.

 The way that current provider contacts worked was that NSCHT would provide services for Stoke-on-Trent, Newcastle Under Lyme and Staffordshire Moorlands and MPFT would provide services for the rest of the County. It was reported that there was an expectation for providers to meet the requirements in their areas however there was some provision where resource could be shared. The Committee commented that there should be the ability for a Staffordshire resident to be able to be treated by either service collaboratively.

**Resolved** – That the Committee noted and commented on the Mental Health performance indicators for NSCHT and MPFT.

### 27. District and Borough Health Scrutiny Activity

The Committee requested that the District and Borough Councils who had not yet agreed the Code of Joint Working be requested to do so. The Committee were advised that Cannock Chase District Council had established a Working Group to review letting standards of housing.

It was reported that Staffordshire Moorlands had requested to scrutinise the West Midlands Ambulance Service. The Committee discussed and agreed that a dedicated meeting for the West Midlands Ambulance Service on 13 November 2023 at 2pm.

**Resolved** – That the District and Borough update be received.

#### 28. Work Programme 2023-24

The Adult Social Care Assurance Working Group, chaired by Councillor Cox had met and scoped its work. Members of that group would be looking through specific lenses to feed into the Working Group.

There had been a workshop to look into the Staffordshire connects service. Members have fed back on this service which will be launched early next year.

The Woman's Health Working Group were due to meet to look at the report prepared which gives the Staffordshire perspective of the Woman's Health Strategy.

The social care working group, the timescales have moved to the end of the year. The members of that working group were looking through specific lenses.

The Integrated Care Hub Working Group had a new lead officer and the business cases for the ICHs were being worked up.

The Committee agreed to add community mental health and West Midlands Ambulance Service to the work programme following from this meeting.

**Resolved** – That the Work Programme be updated and noted.

Chair





### Health and Care Overview and Scrutiny Committee -Monday 16 October 2023

### SSOT ICS People/ Workforce

### Recommendation(s)

I recommend that the Committee:

- a. Notes the contents of the report on the current NHS and Social Care workforce position; NHS Provider workforce updates; People, Culture and Inclusion programmes and the progress in addressing the workforce challenges across the Integrated Care System.
- b. Notes the current strategic workforce context, including the Long-Term Workforce Plan and local mapping activities.
- c. Notes and considers the proposed future activities facilitated by the Integrated Care System (ICS) People Team in continuing to address the workforce challenges, increasing the supply pipeline and ensuring we have a well-supported and developed health and care workforce to deliver care to our population.

### **Report of the Integrated Care Board**

### Summary

- 1. This report was developed in collaboration with ICS, clinical, workforce leads, alongside our partners from across the system. It details the current workforce position and Key Performance Indicators (KPIs). The pack reflects on key milestones and achievements in addressing our greatest workforce challenges - against the backdrop of significant operational pressures, as well as working towards financial balance. Although these pressures have impacted workforce availability and resilience, the report captures how our people have worked together and developed innovative approaches to support our workforce and our local population.
- 2. The committee is asked to:
  - a. Reflect on the contents of the 2022/23 annual report provided for context (received by the Committee in July 2023) included as an appendix.

- b. Note the current strategic workforce context, including the Long Term Workforce Plan which can be accessing using the following link <u>NHS</u> <u>England » NHS Long Term Workforce Plan</u>
- c. Note and consider the individual NHS Provider and General Practice/updates.
- d. Note collective future activities facilitated by the ICS People Team in continuing to address the workforce challenges, increasing the supply pipeline and ensuring we have a well supported and developed health and care workforce to deliver care to our population.

# Report

### Background

- 3. The whole system Workforce/ People agenda has been previously presented to the Committee, with discussions focussing on the workforce position, challenges and activities taking place at partner and system level.
- 4. This report to the Committee provides an up-to-date position on the whole ICS workforce; NHS Provider and General Practice workforce; activities and programmes of work undertaken across the system to improve our overall workforce position, and future activities.

### Link to Strategic Plan

5. This report and People Culture and Inclusion programmes are informed by the national People Plan, National Long-Term Plan, ICS People Function Operating Model, ICS Joint Forward Plan and local Social Care Strategies.

### Link to Other Overview and Scrutiny Activity

6. N/A

### **Community Impact**

7. N/A

## List of Background Documents/Appendices:

 Appendix 1 – ICS People / Workforce slide pack Appendix 2 – ICS People Culture and Inclusion Annual Report

### **Contact Details**

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**Staffordshire and Stoke-on-Trent Integrated Care System (ICS)** 

# People, Culture and Inclusion Programmes

Annual Report 2022-2023



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# Introduction

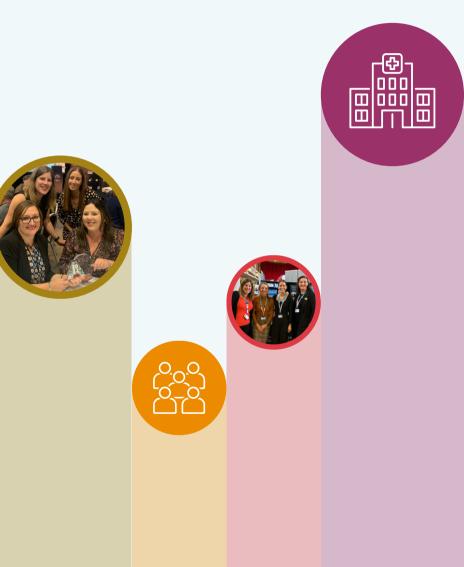
The Staffordshire and Stoke-on-Trent Integrated Care System (ICS) has continued to face significant pressures with day-to-day service delivery, restoring services to pre-COVID-19 levels, the ongoing impact of the pandemic, winter pressures and more recently industrial action.

Our people have worked tirelessly and passionately to deliver services despite challenges with workforce supply, psickness absence and the ongoing impact to their health and wellbeing.

We reflect on significant milestones from 2022-23, including Whe formation of the Integrated Care Board (ICB) and new governance structures, as well as working towards financial balance.

Although system pressures have impacted workforce availability and resilience, our people have worked together and developed innovative approaches to support our local population.

This annual report explores the achievements, current work and future plans for our People, Culture and Inclusion programmes.



# Foreword

#### Another amazing year of achievements across our People Culture and Inclusion Programmes.

The collaboration between all our system partners truly shows in this Annual Report. We have worked together to tackle the workforce challenges to develop innovative solutions to growing our workforce, securing our future supply, retaining, looking after our people and developing an inclusive culture

There are so many highlights for me! The achievements demonstrate the determination of our people and leaders to make Staffordshire and Stoke on Trent (SSOT) the best place to live and work. I am proud that Staffordshire and Stoke on Trent ICS continues to be recognised as an exemplar model for system People, Culture and Inclusion practice.

As we look to 2023-4, we will continue our journey towards creating 'One Workforce', develop more provider collaboratives and refresh our strategy in line with national direction. We will work with each ICS portfolio to define, transform and develop the workforce to deliver the best Thealth and care for our population. Thank you all for your contributions. Thealth and care for our population. Thank you all for your contributions. Thealth and care for our population. Thank you all for your contributions.

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Since my appointment as Non-Executive Director for the ICB People Culture and Inclusion Committee, I have seen the programmes and ICB People Function go from strength to strength. Partners from all sectors have shown their commitment to tackling the workforce challenges collectively, designing new and innovative ways of improving supply, retaining and looking after our most valuable asset.

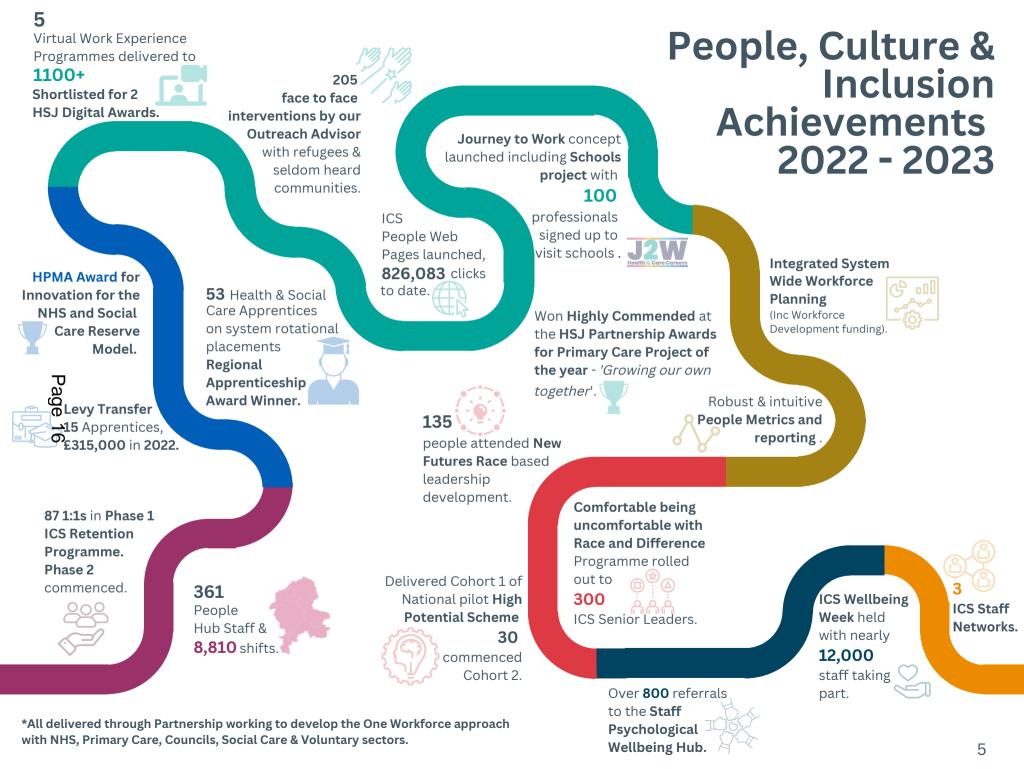
For me, it is important that we reflect on the achievements and the impact the work of programmes has on the workforce and our population. I have been hugely impressed by the achievements and the impact made over the last year and I look forward to seeing what more we can achieve together.

#### Shokat Lal, Non-Executive **Chair of SSOT People, Culture and Inclusion Committee**



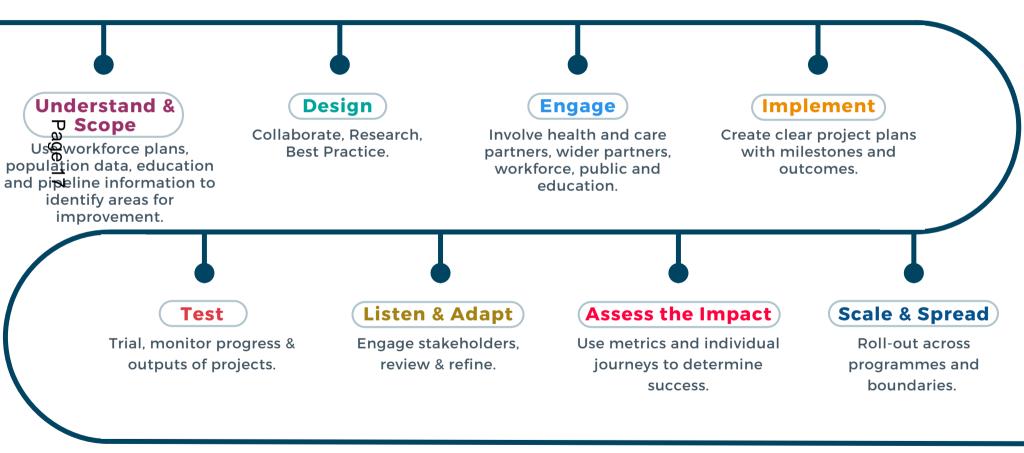
# Our programme achievements have been captured against the ICS People Plan domains







Our approach to measuring success and impact of People, Culture and Inclusion programmes



\*Underpinned and monitored via the **People Culture and Inclusion** governance and Committee structure

# Looking after our people

Supporting the health & wellbeing of all staff and retention

# Planned



- Development and approval for an ICS staff health and wellbeing strategy.
- Further promotion and outreach of staff health and wellbeing support available.
- System-wide health and wellbeing event.
- Support and training offered to non-clinical practice staff in wellbeing, as well as clinical to equip and empower.
- Development of an ICS wide Wellbeing Ambassador/Champions approach and community of practice.
- ICS workforce and Psychological support team work closely together to support development of new wellbeing initiatives linked to evidence.
- Broader psychological support offer across ICS, including social and primary care.
- Develop further wellbeing offers linked to population health data.
- Scope for Growth conversations supporting the health and wellbeing of our workforce.
- Prony ting the NHS 'Looking after Your Team, Looking after Your Career and Look g after You Too' programmes in primary care.
- Implement learning from SSOT regional wellbeing project within SSOT.
- ICS recention programme delivery continues, evaluation undertaken, and recommendations considered for next stage of the programme.
- Develop offers to retain the workforce at system level, for example People Hub and reserves, career conversations, flexible working options and support.
- Retention Coordinators in place and scoping system needs.
- Commence work on local GP recruitment/retention plan through the appointment of Clinical Retention Champions.
- Research good practice in private sector to improve the employment cycle.
- Focus on retirement and options to return, with schemes to support those registered and unregistered to remain in the system.
- Test 'try before you buy' schemes, including work experience, shadowing and job swaps.
- Deep dives into staff experience and reward and recognition offers as part of retention programme.
- Collaborate to introduce one occupational health contract for NHS trusts.
- System-wide NHS Staff Survey analysis and joint plan in place.

# Delivered



- The ICS Staff Psychological & Wellbeing Hub ('The Hub') continues to deliver outreach and engagement across the system with a strong focus on Primary and Social care. From Jan 2022 Feb2023, 124 Engagement sessions delivered reaching over 2500 staff.
- The Hub has offered support to all Health and Social care staff with over 800 referrals and developed a strong Hub social media presence with nearly 800 Twitter followers.
- The first online Health and Wellbeing Event held in March 2022. Keynote speakers: Sally Gunnell OBE, Michael West, Andrew Sharman, Andrew Whittaker and Colin McLachlan. Nearly 12,000 page views (analytics based on IP addresses, therefore the page views could be significantly higher).
- The Hub have delivered a Wellbeing Ambassador approach through the system including support to primary care and social care.
- Close liaison and learning via regional Be Well programme leads.
- Scope for Growth pilot has been completed for identified groups: HPS, New Futures, Stepping Up.
- Staffordshire Training Hub has regularly promoted the NHS Looking after You programmes to Primary Care via STH bulletin, social media and website.
- Completion of Phase 1 of System wide retention programme, working with partners in both NHS Trusts and Primary Care (GP Clinical Champions) to develop initiatives and collaborate on policy and messaging/resources.
- Launch in February '23 of Phase 2 of System wide Retention Programme, Steering Group established and draft Joint Retention Strategy created through engagement with all partners. 4 Priority Areas identified for System and Working Groups established to support creation of action plans. Ensuring that the priorities align with strategies of partner organisations and work already underway.
- Retention Hub webpage created and development has begun to bring together useful retention resources into one place for all staff to access.
- NHS providers jointly awarded OH contract to TP Health Ltd with one contract managed at ICS level from April 2023. Supports collective ambition and vision of looking after our people, sharing best practice, identifying areas of pooling. expertise and provides an excellent foundation for further collaborations
- 2021 Staff Survey Analysis undertaken at system level, alongside Social Care workforce survey insights.

# Spotlight on: Health & Wellbeing

## Staff Psychological Wellbeing Hub



From **Jan 2022-Feb 2023**, **1228 staff** accessed webinars with weekly themes delivered twice a week

Continuous outreach and

reaching over **2500** staff

engagement across the system with

a strong focus on Primary and Social

care. Also have a strong social media

followers. From Jan 2022-Feb 2023,

124 Engagement sessions delivered

presence with nearly 800 Twitter





Carer's Support Network launched with **30 staff** signed up. First monthly network with guest speaker took place in **Feb 2023** 



Integration and collaboration between services, reducing duplication, streamlining and improving the experiences of staff

# Be Well Midlands

SSOT ICS have had money assigned to support with the tackling of health inequalities: Existing health and wellbeing offers are to be re-marketed to support with attracting colleagues from underrepresented staff groups.

The Staff Psychological Wellbeing Hub are taking a lead on this and have created a task and finish group, due to meet for the first time on 1st March 2023.

The aim is to create a number of coproduce staff support toolkits, tailored to specific under-represented staff groups, focusing initially on disability and neurodiversity, LGBTQ+, ethnic diversity.

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# **Growing for the Future 1**

Growing the workforce for the future & enabling adequate workforce supply

# Planned



- System wide recruitment planning in shared "high risk" areas; joint roles, flexible contingent workforce, continue International Recruitment.
- Joint approaches to campaigns, both externally for the public and internally at providers, including recruiting for 'hard to fill' staff groups.
- Streamlining recruitment processes across the ICS, utilising digital platforms
- Further recruitment to the ICS People Hub to support System wide (health and care) as required.
- Movement towards System by default approach to Contingent Workforce and ICS Collaborative Bank.
- More Health and Care Reserves working within SSOT.
- Increased Widening Participation activity in schools; wider than Cornerstone Schools scope joint delivery potential between Health/Care.
- Targeted engagement work (at scale across System Partners) with wider community aligned to tackling health inequalities.
- Foch on increasing access to Health and Care roles from SSOT seldom heard communities.
- Launch of Virtual Work Experience programmes; Mental Health, Primary Care, Social Care.
- System wide Work Experience Portal; develop cross sector approach
- Cohort 4 of System Health and Care Apprenticeship.
- System Pharmacy Technician Apprenticeship in partnership with Primary Care/Staffordshire Training Hub.
- System wide approach to engagement with colleges; promoting all health and care careers.
- System wide workforce strategies developed for professional groups inc AHP, Pharmacy, Nursing, Practice Managers, Social Workers.
- Refresh of the Primary Care workforce strategy (ICB, Staffordshire Training Hub and ICS).
- Development of a 'GPN school' and further refine GPN Strategy
- GP and GPN Fellowship schemes.
- Recruitment of additional ARRS facilitators for Primary Care.

# Delivered



- Targeted recruitment across the health and social care sector with system wide 'New to Care' recruitment events, attendance at jobs fairs, presentations at University Open Days, social media promotion and career conversations with existing staff.
- Campaigns to recruit include NHS Reserves, Reserve Registered Professionals, Social Care Reserves, Home Care Workers, Corporate Reserves and Companion Volunteers.
- SSOT People Hub supported UHNM and MPFT to recruit into brand new Virtual Wards roles.
- SSOT People Hub designed a Social Care Hub with Local Authority and care home providers launching in Spring 2023.
- Scoping first steps towards collaborative bank, have developed model with UHNM Nurse Bank team to trial booking of People Hub Reserves into vacant shifts.
- Operated as system 'Workforce Cell' in times of escalation and surge. Reviewed and strengthened workforce mobilisation processes to provide a contingent workforce.
- SSOT Journey to work Concept developed and launched encompasses all ICS widening participation, education provider engagement, community outreach, recruitment, retention and contingent workforce activities.
- Schools engagement pilot launched in September 2022, working with Primary, Middle and Secondary Schools from a range of demographic areas across Staffordshire & Stoke on Trent.
- Health and Care Force launched, which encourages employees from across the system to offer face to face and virtual visits to Schools as well as development of resources and lesson plans that can be accessed by all schools.
- Four live and one on demand virtual work experience programmes have been delivered including Mental Health, Primary Care, Hospital and Social Care. Hospital programme now available to students as an on-demand package.
- System wide work experience portal scoping commenced with HEE and neighbouring ICS.

# **Growing for the Future 2**

Growing the workforce for the future & enabling adequate workforce supply

# Planned



- Health and Care wide recruitment planning in shared "high risk" areas; joint roles, flexible contingent workforce, continue International Recruitment.
- Joint approaches to communication of campaigns with the population and relevant Providers both in Health and Care inc recruitment to 'hard to fill' staffing groups.
- Streamlining recruitment processes across the ICS, utilising digital platforms
- Further recruitment to the ICS People Hub to support System wide (health and care) as required.
- Movement towards System by default approach to Contingent Workforce and ICS Collar orative Bank.
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- Cohort 4 of System Health and Care Apprenticeship.
- System Pharmacy Technician Apprenticeship in partnership with Primary Care/Training Hub.
- System wide approach to engagement with colleges; promoting all health and care careers.
- System wide workforce strategies developed for professional groups inc AHP, Pharmacy, Nursing, Practice Managers, Social Workers.
- Refresh of the Primary Care workforce strategy (CCG, Training Hub and ICS)
- Development of a 'GPN school' and further refine GPN Strategy.
- Commence work on local GP recruitment/retention plan via appointment of Clinical Retention Champions.
- GP and GPN Fellowship schemes.
- Recruitment of more ARRS facilitators for Primary Care.





- Outreach Advisor has completed targeted engagement work with various community groups including Amity Hub, YMCA and Sanctus to offer opportunities to gain employment and training opportunities in heath and care settings. Additional Outreach advisor recruited to support broadening scope and support to seldom heard communities.
- Traineeship programme adopted to offer health and care placement. opportunities for seldom heard communities, supported by the Outreach Team. Offers a pathway to apprenticeship programme following successful completion of the Traineeship.
- Cohort 4 of the Health Care Support Worker Apprenticeship were recruited in March 2023.
- Level 3 PT Pre-Registration Pharmacy Apprenticeship programme launched in November 2022 in partnership with NHS and Primary Care leads.
- Evaluation of ICS Apprenticeship scheme and implementation of learning
- Funding secured to support 5 Midwifery Apprenticeships. Recruitment commenced from existing workforce.
- Funding secured from HEE to up skill ODP workforce, will support various study days and 3 ODPs to undertake their degree top-up.
- Establishment of Primary Care Workforce Implementation Group with inaugural meeting held in March '23. Group priorities include identifying priorities, development of strategy.
- GPN Foundation School Programme Steering Group launched in January 2023
- Staffordshire Training Hub (STH) are encouraging development of the Professional Nurse Advocate role across Primary Care to support restorative clinical supervision, linking in regionally to promote growth.
- STH facilitated General Practice Fellowship Scheme and current cohort of second Fellows due to graduate in July 2023.
- Regional recognition of local work in developing new roles and improving supply e.g. Medical Physics, Audiology.
- Our partners have won awards from local universities and colleges for their work in developing and supporting apprenticeships.

# **Spotlight on: Workforce Mobilisation**

The People Hub have supported a wide range of services across the health and care system over the last twelve months...

From the vaccination programme (including support at mass vaccination sites, local vaccination sites) via community pharmacies and PCNs, the Targeted Vaccination team, Children and Young People and School Aged Immunisation teams) to:

- The heart failure team
- vaccination programme •
- allied health professionals' referral team •
- national blood service
- discharge teams •
- A&F

- frail and elderly assessment units
- walk-in clinics
- infection control teams
- antenatal vaccination teams
- nurses supporting asylum seekers
- mental health care and homecare services.

The People Hub workforce has been supporting a variety of communities and filling workforce gaps when the system was most under pressure. Workforce gaps and winter pressures meant additional beds in community hospitals were re-opened and People Hub staff stepped forward for additional training to work in these areas.

The People Hub has mobilised registered and non-registered healthcare and admin staff to provide support to the **NHS trusts in the area being affected by industrial action**. In addition, the People Hub team has forged strong relationships with workforce and operational colleagues, creating a robust workforce request and mobilisation process to take into account different circumstances.

The People Hub has increased and bolstered relationships and communication with key partner organisations and facilitates conversations to discuss, plan and resolve, where possible, the issues faced by a system under pressure.

#### Examples of support from the People Hub team:

Mutual Aid

Facilitated mobilisation for ACP & ENP from UHNM to MPFT to support Industrial Action Mobilised 40 RN and HCA to UHNM to support winter pressures

Surge

standard care this winter in Stoke-on-Trent' Podcast here

Listen to 'Reserves set to deliver gold

#### This has included future planning for:

- Predicted hotspots (e.g. bank holidays, school holidays)
- Shorter term request (e.g. when industrial action dates have been agreed and published by trade unions) and;
- Immediate and urgent workforce 3 demand (whereby Mutual Aid assistance needs to be sought from neighbouring trusts)



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# Spotlight on: SSOT People Hub Collaboration

Since working closely with **East Staffs PCN** during the **COVID-19 vaccination delivery programme** and supplying vaccinators and administrators, conversations led by the ICS People Hub Team to support an identified need in Primary Care initiated the development of an Admin Hub.

**GP** practices across Staffordshire and Stoke-on-Trent are using People Hub admin staff to help them deliver their patient focussed workloads, including data entry, appointment making, summarising, coding, answering phones etc.



Staff from the Admin Hub currently work with **practices across East Staffordshire, Burton, Lichfield and Tamworth** supporting nine practices, covering five roles, which equates to **over 1900 hours worked since June 2022**.

As success grows, the People Hub Team have now **reached out to Local Medical Council partners in North Staffs and SOT** to develop the Admin Hub further with at least **20 new GP practices keen to engage**.



As the Admin Hub becomes more established the ICS People Team will look to spread the offer wider across the rest of the county, with t**argeted recruitment** campaigns and specialist training in GP practice systems.



# ICB Clinical Staff Upskilling Pilot

As part of **Reservist model**, the People Hub have worked with colleagues within the ICB, as well as partners within UHNM, MPFT and UHDB to pilot this exciting programme. **14 ICB clinicians** stepped forward in Cohort 1, were all matched with a clinical setting of their choice (**mental health, walk in centre, acute inpatient ward or A&E**) and are being released from their day jobs for one shift per month. The clinicians have been able to avail themselves of **bespoke refresher training provided by Staffordshire University**.

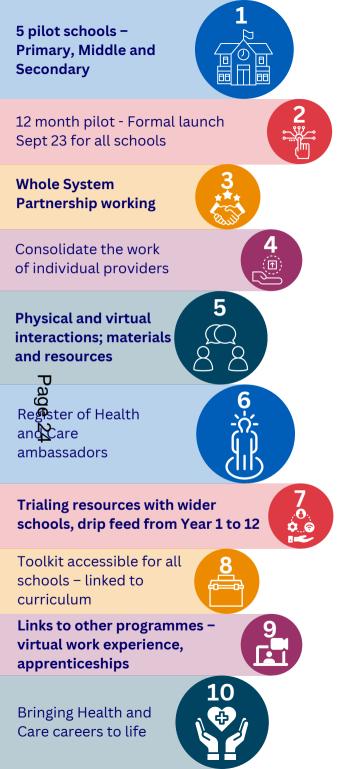
Plans are currently afoot to launch a 2nd Cohort, expanding the offer to corporate clinicians within NHS England Regional Team.

### Tracey Shewan, Director of Communications and Corporate Services

"I have found the pilot a wonderful step back in to front line Nursing... the time and support I have had to do this has been amazing. I also can see from colleagues on the front line how impressed they are that we are doing this and showing our support and solidarity with them"

### Kellie Johnson, Lead Nurse for Quality and Patient Safety

"The pilot has enabled experienced nurses who have moved into management/corporate roles to continue to offer direct patient care... ensuring that clinical leaders have an up-to-date knowledge of frontline care delivery with the privilege of ongoing learning through patient connections and stories."



# Spotlight on: Schools Engagement

**Engagement and promotion of health and care careers** to increase awareness and knowledge, improving our **future recruitment supply...** 

# Primary School (Year 1 - 4)

- Make Every Contact Count (MECC) Healthy Living, Wellbeing
- Interactive, virtual materials: Themed activity packs; Animated videos; real life videos; career pathway videos and visuals
- Aligned to the curriculum, lesson planning
- Teacher resources and prop box

- Health and Care employee parents visit schools to promote careers
- Information and guidance for parents
- 'Back to School' scheme

# Middle School (Year 5 - 8)

- **MECC** Healthy Living, Wellbeing
- Interactive, virtual activities: Inspirational videos, 'someone like me' in varying roles; Career pathway videos; Career and inspirational talks; events

• Aligned to the curriculum, lesson planning

- Personality/values based quizzes and career questionnaires
- Linked to SATs and careers information
- Information and guidance for parents

# Secondary School (Year 9 - 12)

- **MECC** Health Living, Wellbeing and Sexual health
- Interactive, virtual activities: Virtual Work Experience; Social media; Career and inspirational talks; events
- Aligned to curriculum, lesson planning

- Personality/values based quizzes/ career questionnaires
- Information about H&SC T levels, college, university
- Physical work experience/ Placements

# **Belonging in the NHS**

Supporting inclusion, belonging for all & creating a great experience for staff

# Planned



- Sustained focus on inclusion to influence leadership and development of the System
- ICS Workforce Dashboard to include WRES information.
- Triangulation of system WRES and WDES data with the current and development of EDI System Metrics.
- System Wide Reciprocal Mentoring Preparing for launch early in 2022-23 using NHS Leadership Academy Reciprocal Mentoring Programme framework. Reciprocal Mentoring evaluation and learning lessons undertaken and acted upon across system
- Continue Inclusion School journey.
- Staffordshire and Stoke on Trent Stepping Up programme Cohort 4 delivery.
- 'Comfortable being Uncomfortable' cultural education programme roll-out being extended to more leaders and teams.
- Step Ing Up/New Futures alumni support, to include ongoing development opportunities and the cking of career progression.
- Devetopment of the NHS Rainbow Badge programme on a system-basis, including extension of principles to non-NHS partners.
- New Futures Diverse Leadership Programme delivery.
- WDES Differently Abled Buddy Scheme (Provider pilot).
- Nominated Clinical Director EDI Champion (Staffordshire Training Hub).
- People, Culture and Inclusion programmes to further inform the development of an inclusive culture across the ICS.
- Widening participation from seldom heard groups ICS Outreach Project in supporting Refugee community into roles with our sector.
- System wide inclusive recruitment in line with EDI High Impact Action plan.
- Scope 4 Growth Talent Management Career Conversations project commenced.
- HPS cohort 2 increasing participation from those from ethically diverse communities
- Extend support to non-NHS system partners on developing inclusion.
- Diverse characteristics are proportionally represented across the ICS.





- Process established for collective NHS WRES and WDES metrics from 2023 this will include co-production of action plans and EDI system metrics from June 2023.
- Development of Midwifery WRES and associated action plan relaunched end 2022.
- ICS EDI reference group in review to reflect support Inclusion by design in our workforce, OD and education ICS approach throughout the year.
- Collaboration across the inclusion agenda, on workstreams such as EDS, WRES, WDES and re annual calendar of inclusion events (Black History Month, Pride etc).
- Three system Staff Networks meeting regularly and influencing change.
- Staff networks feed into development of ICS initiatives including reviewing an ICS health and reasonable adjustment passport based on good practice from Police and NHS; supporting widening participation initiatives; joint representation at community events e.g. PRIDE and "Let's Talk about..." webinar /interactive sessions for wider ICS partners and observances from an EDI and Belonging Lens.
- Reciprocal mentoring: NHS Leadership Academy programme suspended revised timescale to commence Q1 2023.
- Inclusion School programme across system and beyond: Inclusion and Intersectionality the Big Questions with John Amaechi OBE May 2022; RACE Forward: Your Role in Creating an Anti-Racist ICS with Karl George MBE and Yvonne Coghill CBE February 2023.
- Local Stepping Up cohort 4 'New Futures' delivered to 33 participants in 2022. Cohort 5 commencing March 2023 (40 places offered). Alumni support continuing.
- Comfortable Being Uncomfortable with Race & Difference delivered to circa 300 system colleagues, including senior leadership.
- ICS will pioneer WRES Champions Programme from March 2023: supporting the WRES and wider inclusion and cultural transformation required to achieve anti racist and anti discriminatory culture across partner organisations and ICS.
- Race Code Assessments completed by NHS partners this will form basis of EDI system governance and accountability. This includes workforce metrics.
- NHS Rainbow Badge Scheme assessments completed by NHS partners. Action plans to be triangulated and principles shared with wider partners with support to adopt.
- Differently Abled Buddy Scheme being implemented across the system, with funding from Feb 2023-end March 2024, including Primary Care via STH.
- Region's Chief Nursing Officer Developing Aspirant Leaders (DAL) programme uptake of 4 successful staff across the ICS.
- System participation in HEE BAME Aspirant Development Programme (one system candidate in 2021-22, 3 in 2022-23).
- Widening Participation and Out Reach Project have ICS EDI specialist support via working group, Outreach project launched in February 2022, supporting seldom heard communities to access training and job opportunities in health and social care.
- Inclusive Recruitment project progressing with sharing of resources and good practise, increasing use of ethnic diverse inclusive recruitment guardians across ICS
- Scope for Growth pilot delivered via New Futures and HPS 2022 cohorts.



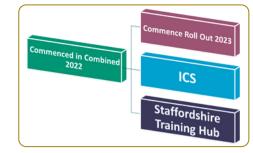
# **Race, Inclusion and Differently Abled**

Creating System-wide Change on Inclusion

We know we still have much to do to create a wholly inclusive environment for everyone to thrive, progress and feel they belong in. However, we have truly laid the foundations for a step-change in race inclusion across our system in 2023-2024, embarking on a 'stepped up' and multi-faceted programme for change to propel us to our inclusion future vision:

- Our Inclusion School and Comfortable Being Uncomfortable programmes have been a fundamental part of helping to change mind-set and culture on inclusion
- **talent**, whilst simultaneously developing the wider system environment to penable them to thrive

•<sup>D</sup>Our RACE Code shared journeys will ensure that we continue to achieve Sand fix progress as we go, towards being an anti-racist system





This scheme will provide support to new and recently recruited staff who identify as having a disability/neuro-divergence. It aims to help support staff to become established in their new role and guide them in accessing appropriate support. A buddy is someone different from the more formal relationships of manager, supervisor or HR representation.

A Differently Abled buddy is someone who is also Differently Abled who has agreed to act as an informal and friendly source of support and and the support of the Combined Ability Network (our staff network for people who are differently abled).





#### **Developing the Culture: Creating the right Climate**

- System Reciprocal Mentoring
- developing Staff Network Executive Sponsors & Leads
   Development of WRES Champions • board development on race inclusion and health
- inequalities
- New Futures Line Managers

### **Changing Systems and Processes: Creating the right Environment**

- Inclusive Recruitment programme
- RACE Code & associated action plans
- Addressing system WRES metrics, WDES metrics & gender pay data

#### Support & Development for Ethnic Diverse Work Force

- New Futures & Stepping Up Alumni
- Developing Aspirant Leaders (DAL) Programme

Inclusion School

• Comfortable being Uncomfortable

- developing NF Line Managers.
- Model Employer/Race Disparity Ratio
- engaging with our local communities on race inclusion and health inequalities.
- Investing in our organisation and system staff networks
  - Organisation and System level **ENRICH** networks
  - Developing you: Developing Me programme

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# Plans for 2023

- Increased support and Besence in Job Centres county We de
- Wisits to the Staffordshire Science centre University for Amity and YMCA customers
- Facilitated Virtual Work Experience sessions for community based customers
- Traineeship cohorts in January and February
- Additional Outreach Advisor
- Continued support via face to face and group sessions for seldom heard groups
- Potential flexible working pilot (administration)

# Spotlight on: Seldom Heard Community Outreach

Supporting people from seldom heard communities into healthcare roles by providing careers advice, work experience/volunteering opportunities and job application support. This is support is delivered from a variety of community venues, working alongside DWP, local authorities and housing associations.

205

face to face interventions with **Outreach Advisor** since May 2022





8 young people into various full time college courses, continuation of HE courses and apprenticeships

Supporting 2 BTEC students with volunteering placements at UHNM 10 young people currently on placement as part of the Traineeship programme in partnership with Stoke on Trent College



(5 individuals are progressing into Apprenticeship roles)



5 people into employment

Information sessions in a variety of **Job Centres**, **Dentistry careers session at Amity Hub** and **Aspiration Summit** 



# **Belonging in the NHS**

Valuing and supporting leadership at all levels, and lifelong learning





- North Leadership Development Programme Systems Connects 120 people, 2 Trusts, system wide potential: Platinum and Gold. Masterclasses and cohort sessions underway.
- "Our System Connects" programme reaching circa 60 Band 7 (Gold) & 60 Band 8 (Platinum) leaders from across the System.
- Scope for Growth pilot to include a Train the Trainer model, Community of Practice, 3-5 year career plans for initial groups, target groups identified as High Potential Scheme 1 & 2, Stepping Up Programme/ Stepping Up Alumni.
- Potential & Development Conversation toolkit completed.
- High Potential Scheme Cohort 1 completed, cohort 2 commenced.
- Build a HPS support network: coaches, mentors, sponsors, assessors.
- West Midlands Coaching Collaborative to support ICS.
- Development of Diverse Coaches.
- New Etures diverse leadership programme delivered.
- Colleoration to commence with regional stakeholders including UHDB, MPFT, Derby & Burt Trusts on the system New Futures programme (equivalent Stepping Up) ready for lawsch March 2022.
- Taler Opipeline/ leadership development activities within Social Care in partnership with Skills for Care.
- Expansion of our Leadership Programme for Band 6 (or equivalent) professionals following the success of the Gold & Platinum System to enable a passport approach to development ensuring an inclusive offer more widely.
- Development of System wide talent development tools.
- System wide careers events offering information about roles across the whole sector; NHS, social care and primary care.
- Introduce core offer to support PCN development in conjunction with the Midlands Leadership and Lifelong learning team . Additionally, OD Practitioners will work with PCNs on their progression through the maturity matrix.
- Staffordshire Training Hub roll-out of leadership courses and CPD across general practice, informed by practice-led Training Needs Analysis (TNA) e.g. Practice Management, Leadership Series.
- Inclusive Talent Leadership Programme to be utilised across system wide leadership talent pool.
- Alumni Leadership development to incorporate: New Futures, High Potential Scheme, System Connects.
- System coaches and mentors support all leadership programmes.

# Delivered



- 'System Connects' platinum and gold programmes delivered...with more planned over 2023.
- Scope for Growth pilot completed objectives for participants of the identified groups. Train the Trainer module and Community of Practice in progress.
- High Potential Scheme Cohort 1 completed. Cohort 2 launched November 2022 as a Buddy Model with Shropshire using the early adopter model. 30 participants across SSOT and Shropshire, Telford & Wrekin (STW) ICS.
- HPS has a cohesive support network across the ICS including: Career coaches, sponsor, mentors and assessors.
- West Midlands Employers Coaching and Mentoring collaborative entered it's second year. 3 year forward vision created by providers, collaborating on the system-wide development of coaching and coaching culture and across system support of leadership development programmes.
- Coaches from diverse backgrounds currently in training to support the WM Coaching Pool.
- All leadership and talent offers mapped across the system into a common framework of development pathways.
- Local Stepping Up cohort 4 'New Futures' delivered to 33 participants in 2022.Cohort 5 commencing March 2023 (40 places offered). Alumni tracking and support continuing including masterclass sessions planned for 2023. New Futures programme is intended to Reset - Refocus - Re-energise our people with an ethnic diverse heritage and leadership ambition. Supporting progression and advancement into leadership roles.
- Alumni Leadership development have quarterly Masterclasses planned commencing in March 2023.
- ICS People team coordinating careers events at schools, colleges and universities, plus community events with a focus on reaching and supporting seldom heard groups. Sharing information about jobs, entry level requirements, training and qualifications, work place learning and experience programmes.
- PCN development well underway with the appointment of 3 OD practitioners working across all PCNs, in partnership with Staffordshire Training Hub and ICB Primary Care teams.
- Staffordshire Training Hub delivered a series of Next Steps in Leadership courses for aspiring leaders and those new to management courses 98 x Primary Care staff attended.
- Launched Primary Care Coaching and Mentoring service open to GP Trainees, GP Locums, salaried and GP Partners to access up to 12 hours of coaching/mentoring.

# Spotlight on: High Potential Scheme

The **High Potential Scheme (HPS)** is an innovative, **24month career development scheme** to help middle level leaders who have the ambition, aspiration and motivation to accelerate their careers to senior executive roles at a faster pace. The scheme is open to **clinical and non-clinical leaders** working in health and care.

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# Cohort 1

"It was fantastic to see our 14 Cohort 1 High Potential Participants Graduate in July 2022. Not only did over half of them gain promotion during their time on the scheme but since their graduation further career development opportunities have arisen for many of them to progress further."

### Cohort 2

In November 2022 we were also delighted to Cohort 2, the Buddy Model launch, in partnership with Shropshire, Telford and Wrekin ICS, testing the pilot model for scale and spread. **Cohort 2 has 30 participants from a diverse of backgrounds, professions, including 3 participants from social care.** 

# New Ways of Working

Leading workforce transformation and new ways of working

# Planned



- Increase People Hub resource/scope of practice through joint campaigns with wider system partners and continue to develop training packages and pastoral offer.
- Further develop ICS Reserve model inc. emergency 'Step Forward' workforce. Pilot model across sectors with engaged private providers.
- Continuing work with VAST/Support Staffordshire to collaborate further with the sector.
- Continue to build volunteer aspect of contingent workforce.
- Long term volunteer buddy schemes.
- Scope use of platforms to support system staff sharing e.g. Allocate/Patchwork, NHS Jobs3.
- Contribute towards and inform the ICS Digital assessment from a workforce perspective. Develop refreshed Digital People Strategy.
- Refresh of ICS People Programme website.
- Pilot Rigital Staff Passport at system level with People Hub.
- Commence ICS People APP development (2-5yrs).
- Introduce Digital Champions Network.
- Development of a digital career pathway across the system, to consider rotations and innovative placements Inc. ICS apprenticeship.
- Establishing strong links with education providers to engage future workforce, promote NHS & Care digital and tech careers and to scope training and education.
- Development of a Digital Leadership programme including virtual classes and elearning.
- Lead System-wide Workforce Planning to support clinical transformation pathways e.g. Cancer, Maternity, Urgent Care and wider Case for Change.
- Continue the development of a system workforce dashboard and metrics.
- Outreach work to ensure our opportunities are tailored to local workforce and deliver the needs of our population.
- Alignment of core training programmes and competencies across the system.
- Create and update key and clinical roles descriptions to better reflect the roles of the future.
- New joint roles and career pathways across the System.

# Delivered



- Continued growth of the SSOT People Hub and reservist models, testing new and innovative ways to attract, recruit and retain people to a contingent workforce.
- Proactive planning with partners around the recruitment to high risk areas, such as domiciliary care, offering incentives such as intensive course of driving lessons to successful candidates.
- 37 new Reserves recruited to People Hub since launch of Winter Campaigns.
- Reserve model refined through partnership working with System colleagues in order to effectively support during times of surge and, more recently, industrial action.
- Currently scoping NHSE regional team Reservist pilot, supporting surge and return to practice.
- Continued partnership working with volunteer organisations and VAST/Support Staffordshire with strong relationships built ahead of and during Winter 2023.
- Development of volunteer Companion role in partnership with UHNM.
- New SSOT People Hub Activity Dashboard created, tracking recruitment and deployment across the system.
- Contributed to development of ICS Digital Strategy and Roadmap.
- Digital Workforce Plan drafted following engagement with Chief Information Officers and Digital Collaborative - aligned to Digital Roadmap. Action plan and priorities to be agreed in April '23 including Digital Networks, digital skills and career pathways for digital and technology roles.
- ICS People Function Website refreshed and updated 826,083 page views. Careers, jobs, training, retention and more all included on our ICS website.
- Scoping the use of digital systems to enable more effective offer to partners; deployment and payment of Hub staff. Introduced TRAC to support SSOT People Hub and system recruitment campaigns.
- Digital Leadership programme scoping commenced.
- System wide workforce planning support to all 7 ICS Portfolios.
- Continued development of ICS People Metrics, more recently focusing on including Social Care and Primary Care.
- ICS People Outreach team have worked with community groups and on a 1:1 basis with individuals to support opportunities within the local workforce.
- Exploring new rotational apprenticeship programmes, including a digital/social media apprentice, AHP focussed schemes.
- Working with local Colleges to help facilitate T Level placements in a number of areas including digital. T-Level placement planning at provider level.
- Schools engagement pilot commenced with a focus on primary schools as well as secondary.
- Secured funding to support 4 x Anaesthesia Associate trainees to support the developing theatre workforce and new way of working in theatres.

# **Growing for the Future**

Educating, training, developing people & managing talent

# Planned



- Refresh and launch of ICS System Wide Education, training and development Group. Partners Inc. NHS, LA, Social Care, Voluntary, Staffs Training Hub, CCG, Further & Higher Education providers.
- Scope system wide approach to Clinical Placements expansion and digital platforms to support understanding of placement capacity, develop plans with partners to improve capacity and experience.
- Working more closely with Education Providers.
- Gather higher and further education and destination data and intelligence.
- System approach to commissioning training places and overall engagement with Higher education Institutes (HEIs).
- Delivery of cohort 3 of System Wide Apprenticeship programme .
- System wide Pharmacy Technician Apprenticeship scheme development and launch in partnet hip with Staffordshire Training Hub.
- Commence planning for ICS Career Pathway progression e.g. Nurse Associates, Trainee Nurse Associates, Degree Apprenticeship, and pathway experience at System Level.
- Development of further ICS career pathways in line with system priorities, informed by workforce planning.
- Continued delivery of System wide Apprenticeship Levy Share.
- Develop new courses with Higher Education partners which respond to system need and workforce planning indications, informed by national and local drivers.
- Develop further Health and Care work experience and information sharing opportunities for all groups.
- Review system wide training delivery to find collaborative solution.
- Develop system Training Academy (2-5 years).
- Focus on developing an offer for Admin and clerical staff training, career progression inc NHS, LA, Social Care, Primary Care.
- Proposals for developing senior leads as Career Coaches to support developmental & career conversations with high potentials and career development toolkit.
- GPS coaches in Primary Care.
- General Practice Pathway to progress and retain using apprenticeships.

# Delivered



- ICS Education, Training & Development group re-launched with all system partners engaged. Workshops focusing on social care and nursing took place.
- Executive Senior Responsible Officer (SRO) identified to oversee the ICS Education and Training Collaborative supported by a refreshed Steering Group approach, in partnership with HEE.
- Drafted Education & Training Strategy, underpinned by ICB Duty to promote education and training (Joint Forward Plan).
- Commenced discussions with HEE on METIP approach for 2023/24 and system oversight.
- Planning for a Workforce Summit being held in October 2023 has commenced to bring all system partners together to discuss challenges and joint solutions to the recruitment, training and retention issues across health and social care.
- Undertook scoping on Clinical Placements and explored system wide approach with partners, with Job Description and project brief developed with Clinical Leads. Unsuccessful recruitment to an ICS hosted post leading to discussions regarding provider collaborative approach.
- College and University Engagement plan in place to strengthen relationships.
- Working with HEE to collate Further education & Higher education destination data.
- Worked with system partners, HEE and NHSE to explore opportunities to transform, develop and train the workforce utilising HEE, NHSE and other funding.
- Cohort 3 system wide rotational Health Care Support Worker programme successfully took place in 2022, with cohort 4 recruited and starting in early 2023.
- PTPT Pre- Registration Pharmacy Technician cross sector apprenticeship programme launched
- Created new apprenticeship pathways including Midwifery, Student Nurse Associates in Social Care and Physician Associates in Primary Care and Mental Health.
- Work commenced to refresh and expand the ICS Health and Care Career Pathway ro include routes into registered professional occupations across our system utilising the website to house the information and sharing to wider groups.
- Levy share system well established and continuing to offer to Staffordshire and Stoke on Trent Health and Care providers.
- Schools engagement group has helped to create a range of resources that can be used by individuals and education providers to share information about career opportunities in health and social care.
- 4 Virtual workforce experience programmes delivered plus 1 on demand programme
- Staffordshire Training Hub launched the Primary Care non-clinical Apprenticeship Programme to recruit new staff or upskill current workforce.
- System partners have explored innovative ways to deliver training and development opportunities including e-learning, simulation suites, online and videos.
- Secured a NHS Graduate Management Training Scheme (NHS GMTS) trainee who will undertake placements across the system.
- ICS New2Health & Care Academy scoping commenced with NHS and Social Care partners, building on New to Care recruitment successes in Social Care.
- STH undertaking a pilot for quality assurance of multi-professional clinical placements at PCN level to develop new ways of supporting education placements across Primary Care.
- STH leading a Trainee Nurse associate programme via ARRS funding 7 trainees qualifying in September 2023. Second cohort recruitment underway for 13 TNAs plus Social Care scheme being supported by the model in conjunction with HEE.

# **Spotlight on:** Allied Health Professionals (AHPs) Faculty

The **SSOT AHP Faculty** facilitates system-wide working between health and care providers and Higher Education Institutions (**HEI**s) for all **AHP**s across our system, all activity aligning with the **Long Term Plan**, **People Plan** and I**CS goals**. Current membership includes 13-14 AHP disciplines, support workers and student AHPs. Monthly meetings held with representation from all providers Trusts, both HEIs and Private, Independent and Voluntary Organisations (PIVO) colleagues.

Strategically identifying and developing a strong sustainable AHP workforce, whilst promoting SSOT and sharing best practice across disciplines have been key focus. **Project leads have progressed workstreams and increased AHP efficiencies within and across provider Trusts, HEIs and PIVO in the ICS...** 



Since 2022: SSOT AHP Faculty have attracted circa £271,000 funding, following 7 successful BIDs to fund leadership of key projects, alongside a successful joint £1,279,680 joint AHP and nursing BID

A twatter page and NHS future platform page has been created to further engage AHPs to support our communication channels





AHP Faculty Leadership Secondments, have also supported with development of future leaders

AHP Faculty have hosted 5 student AHP leadership placements, with more planned for academic year 2023/2024





The SSOT AHP Conference in November 2022 celebrated the success of ICS AHP staff and inspired best practice amongst colleagues. It was attended by 300 AHPs of all disciplines and included support worker colleagues

Overview of SSOT AHPs Across the System:

1,317.33 Known Full Time Equivalent AHPs and 455.48 Known AHP Support Workforce

# Key Project Outputs for 2022 - 2023

AHP Preceptorship: ICS project to support to newly qualified staff, attract and enhance AHP retention. Implementation and impact now being evaluated. Work recognised locally, regionally and nationally, informing best practice and published

Developing AHP Support Workforce: Created an Aide Memoir to facilitate and empower support workers in Professional Development Reviews. Plus system resource area created. First AHP Support Worker celebration event scheduled for April 2023

Equality, Diversity and Inclusion: Golden thread through all work streams, but additional work undertaken to understand specific needs of the AHP workforce in SSOT. Focus groups planned and recommendations will be identified

**Over 55's Project:** Retaining expertise of senior colleagues: Surveyed senior AHPs considering retirement, captured reasons and factors that might enable their retention in workforce. Work ongoing

Workforce data and Intelligence: Created an ICS workforce data dashboard to support with future workforce planning for AHPs

**PIVO AHP scoping project:** Identifying where PIVO colleagues work to increase ICS engagement and collaboration. SSOT AHPs survey disseminated and database of all AHP PIVO providers being created

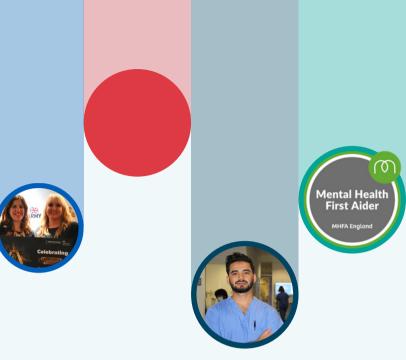
AHP student dashboard: Created to support AHP placement management & expansion system level

Apprenticeships: Two new AHP apprenticeship programmes negotiated with HEIs; Radiography BSc at Keele recruited 17 new apprentices (Jan 23); work ongoing to develop an Occupational Therapy apprenticeship also at Keele (anticipated start 2024)

### Spotlight on: ICS Apprenticeships

Evaluation & developments...

<b>Placement Feedback</b>	Changes Made
Apprentices not aware of what is expected of them	Induction will be both college and employer based
ထာline review meetings can be daunting သ ထု	Online review meetings changed to face to face, to be held at the college
B B Placements unsure of what the apprentices should/shouldn't be doing	New easy glance chart provided by the college of work the apprentice should be undertaking
Unsure of placement dates	Placements will run with a main base with 3, 1 month long SPOKE placements, all to be communicated with apprentice, college and placements
Uncertainty over salary commitment required	Clear throughout all promotional work the salary commitment, also clear within the updated memorandum of understanding (MOU)
ICS support and involvement throughout apprenticeships praised	



#### What's next...

- Mental health first aid training
- Monthly review meetings with the apprentices
- Quarterly review meetings with placements areas
- Working with placement providers to open up in house training opportunities
- Working with partners to support other apprenticeship opportunities
- Numeracy Champions
- Schools and Colleges Engagement Outreach activities

### **Cross-cutting Theme**

Driving & supporting broader social and economic development

### Planned



- ICS Widening Participation Strategy agreed and action plan implemented.
- System wide approaches to Widening Participation embedded and delivery of joint activities.
- System Career Pathways (including Apprenticeships) with various starting points to support participation (Traineeships).
- Continue support to workplace learning schemes e.g Step into work, Princes Trust Traineeships, T Levels, Staffordshire Cornerstone Employer.
- Further engagement with and opportunities for disadvantaged or seldom heard communities including Refugee/ Out Reach project.
- Robust work directly within communities to identify how to create job opportunities.
- Working with education institutions to develop the local future workforce across the health and care system.
- Appentment of Ambassadors to promote careers in health and care.
- More ecruits from seldom heard communities in all NHS Trusts, Local Authorities and ICS People culture and Inclusion programmes.
- Further work with the Staffordshire and Stoke on Trent LEP to link into work being done in the private sector to support those from seldom heard communities find educational opportunities and work.
- Wellbeing Enabler project linked to inequalities & mental health priorities.
- Understanding of workforce experience and inequalities at organisation and system level through WRES, staff survey/feedback (F2SU),H&W, psychological wellbeing hub, staff equality networks, gender pay and ethnicity pay gap reports.
- Through accountability and sustainability of Staff equality networks: understand and identify areas of inequality, enable workforce as representative of, and link with our local diverse communities.
- Understand service user experience and staff understanding of health inequalities and impact on population health and access to services/information.
- Digital enablers e.g. APP/Passport.
- Development of workforce specific actions to support ICS Green/Sustainability Strategy.



- ICS Widening Participation Delivery plan agreed and being monitored by Widening Participation Group.
- Development of 'Journey to Work' Concept to promote and create entry points and further opportunities within health and social care for various groups including school leavers, job seekers and seldom heard communities.
- Continued promotion and delivery of workplace learning schemes such as Traineeships, Virtual and Physical work experience and T levels.
- ICS Cornerstone Employer Status maintained through working with schools and Careers Enterprise Company.
- Outreach Advisor worked with over 200 people from seldom heard communities to offer one to one support, careers guidance, Observerships and job opportunities across Staffordshire and Stoke on Trent.
- Outreach Advisor working closely with Equality and Diversity Lead, Local Authorities' and local community groups to understand areas of inequality.
- Provider level support to overseas colleagues in a range of forms inc Observerships,
- Scoping commenced with West Midlands Migration Service.
- College and University engagement in place to develop the local future workforce, with specific initiatives to support people from seldom heard communities e.g. ICS Apprenticeship Scheme.
- Development of Health and Care Force, aligned to existing Career Ambassador schemes inc iCare. register of professionals available to visit schools, colleges and events.
- Partnership working with Job Centres, Local Authorities and targeted recruitment campaigns to attract people New to Care.
- Training and shadowing packages in place, facilitated by ICS People Hub and in partnership with Health and Care Providers, to support with entry level requirements.
- Development of ICS People webpages providing accessible information on health and care careers.
- Member of Staffordshire and Stoke on Trent LEP and regular engagement with leads.
- Wellbeing Enabler project reviewed with focus on Mental Health First Aid Training funded by HEE and delivered by Changes to Social Care and Primary Care colleagues, with second cohort planned in 2023.
- Ongoing work with Population Health and Health Inequalities Portfolio team to understand the activities and alignment with the People programmes.
- Staff Networks successfully continue with engagement from staff across ICS
- Contributed to development of ICS Green/Sustainability Strategy.



**Facilities &** Estates

### **Spotlight on: Journey to Work**

The health and care careers pathway 'Journey to Work' scheme brings opportunities together under one concept, making it easier for people looking to start, change or progress their careers.....



The aim is to **improve employment outcomes for local people** and **show there is** an entry point and career for all in SSOT Health and Care Services. We will Working with job centres and **job seekers** 

- Reaching out to seldom heard communities with our outreach work and offer schemes such as Traineeships
- Offering Apprenticeships and opportunities
- Attracting and training people via our ICS New to Care Academy
- Working with colleges and students
- Creating a Primary and Secondary school careers programme

Journey to Work will help to facilitate a career journey through a variety of routes across the SSOT Health and Care system. For those;

- Leaving education
- Never worked in health/care
- Looking for a career change
- A→ Wanting progression and development

Social Care





Watch Edward's Story here





### **Cross-cutting Theme**

Transforming people services & supporting the people profession

### Planned



- Establishment of ICB People Function.
- Commencement in post of ICB NED lead for "One Workforce" People, Culture and Inclusion Committee.
- Appointment of Chief People Officer.
- Delivery of HR & OD efficiencies programmes focussing on multiple contracted service providers, provision of HR&OD functions and optimising the utilisation of Robotic Process Automation (RPA). Current projects focussed on:
  - Occupational Health Move towards 1 OH Provider across the ICS
  - Recruitment Standardise and streamline processes across S - explore options for delivering at scale, introduce RPA Processes and maximise efficiencies
  - Sorkforce Planning/Information ICS-wide planning and reporting functions scoped
- Consider Provider Collaboration and delivering at scale in wider People functions.
- Continue to provide OD and system development support and capability to organisations, provider collaboratives, clinical networks and other formal collaborative arrangements within the ICS.
- Work on Navigating Change Masterclasses, bitesize learning and supporting toolkit as part of the ICS People Transformation workstream has commenced as part of a system wide Health & Wellbeing offer.



- ICB People Function team in place and development sessions taken place to support team development.
- All ICB Non-executive Directors NEDs appointed.
- Appointment of ICS NED chair for People Culture and Inclusion Committee.
- ICB Chief People Officer appointed.
- ICS People Collaborative Operating Model developed with NHS Trust Chief People Officer (CPO) and leads.
- Strong links established between ICS leads for Nursing, Therapies, Medical, Quality, Planning, Finance and People Leads.
- HR & OD efficiencies programmes progressed in the following areas:
  - System OH tender completed and new consortium provider from April 2023
  - Recruitment working group established and RPA scoping underway
  - Workforce planning, information systems and reporting scoped across ICS via a series of workshops. Workforce planning and intelligence peer network established. Additional resource appointed at ICS level, support and development plan in place with partners
- Provider Collaboration approach underway for Clinical Placement programme.
- Successful delivery of 8 bespoke sessions to support the ICS People Transformation, including: Navigating Change, Stress Management, Polishing Up your Resilience and Making Change Work For You. The sessions were delivered on line and included course materials and resources, to facilitate managers/leaders delivering onto their teams.

### **Cross-cutting Theme**

Leading coordinated workforce planning & intelligence

### Planned



- ICS People metrics and dashboard to include social care and primary care.
- ICs People metrics assurance and monitoring of agreed metrics.
- Developing overarching dashboards with both quantitative and qualitative data, incorporating information at a Trust/Provider and system level, which will allow us to track the benefits realisation of our collective endeavours, for example Staff Experience and Workforce Sustainability Dashboards.
- Utilise ICS level data for planning including workforce, population and health inequalities activities.
- Support social care managers to complete WF national minimum data set.
- Sociacare clear on projected future needs of RGNs and plan to achieve this.
- More vorkforce planning expertise at system level.
- Increased workforce planning capability and capacity across the system via training/mentoring/community of practice.
- Delivery of Strategic Workforce Planning in relation to operational plans.
- Workforce planning across clinical pathways Case for Change, cancer, maternity and Urgent Emergency Care (UEC).
- Incrementally increasing system-wide working by influencing wider stakeholders via digital platforms, data and direct feedback from our workforce/ service users.
- Using workforce planning tools to plan at system and place level.
- Collaboration/streamline Agency/Bank rates at system level.
- Ensure project outcomes are recorded and impact evaluated to allow us to prioritise the work at system level, creating value for money.
- Utilise STH Primary Care TNA data and focus groups to assess workforce risks including retention and retirement.



- Newly established ICS Workforce Planning and Information team in place, building relationships with key stakeholders.
- Developed and refined approach to workforce insight metrics and ensured transparency/knowledge of the position to increase awareness of workforce issues, subsequent mitigations and management of risk.
- Scoping commenced to develop workforce information capability across all portfolios, ensuring the approach is robust for future use and development.
- Supported programmes with workforce information and subsequent deep dive requirements to inform requirement/priorities and define/measure the impact of workforce interventions.
- Developed approaches to understanding the workforce planning position and opportunities, to ensure development and delivery is aligned to system and organisational priorities, via the Operational Plan.
- Enhanced and bolstered the system position by the working in partnership with NHS providers to develop plans and identify areas of opportunity for workforce planning improvement (capacity and capability).
- Developing approaches to contribute to effective operational workforce planning, including review of opportunities to enhance processes and approaches, e.g. budgeted establishment into ESR.
- Ensuring workforce planning is integral and considered both strategically and operationally to ensure the right people, with the right skills are in the right place at the right time, including enhancing of skills within HR professional community.
- Integrated planning and working between Strategic Workforce Planning and People Programme activities aligned to the intelligence and plans.
- Facilitated and delivered operational workforce planning national and regional requirements, in an unprecedented challenging planning round due to additional granularity and submission challenges.
- ICS People Culture and Inclusion programme assurance developed to track and measure impact of projects.
- Primary Care data and information being utilised to inform STH and Primary Care team focus, plus GP Recruitment and Retention Champions.

### New Ways of Working

Supporting system design & development

### Planned



- Appointment of mandated ICB Director(s) level posts.
- Appointment of Chief People Officer/Partner for the system.
- Supported transition of current CCG workforce into new ICS/ICB structures.
- HR processes to be undertaken with affected workforce as mandated posts are appointed to linking to support offers available.
- Health and wellbeing & leadership/OD support available for staff affected by change processes.
- Formalised ICS People Function as part of the new ICB structure.
- Creation and delivery of ICS OD programme Lessons learned OD support, ICB board development, culture and behavioural change support across ICB, ICP and PCN's, including clinical leadership and clace-based focus.



- All ICB directorates, structures and functions established, in place and operating under new operating framework.
- Safe transfer (TUPE) of CCG staff into new ICB with roles and responsibilities established.
- ICB staff supported with health, wellbeing, leadership and OD offers.
- Transfer of System People functions to new ICB People function.
- ICB/ICS system wide OD strategy and programme developed to support evolvement and development of new ICB/ICS.
- Ongoing support to the emerging future functions ICS/ICP/ICB.
- ICB Board development programme ongoing.
- PCN OD programme progressing well with dedicated resource and plans in place.
- Supporting design, delivery and embedding of clinical leadership approach across the system.
- People Plan reviewed to directly align to the ICS strategic aims and population needs.
- Contributed to the development of the Joint Forward Plan and Integrated Care Partnership strategy .

### Health Education England Allocation of

Heath Education England Funding 1

2022 - 2023

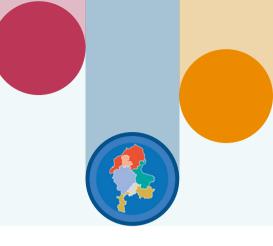
Planning for annual workforce development funding commenced early 2022 using well embedded governance processes.

Ans were in place to ensure that designated funding was swiftly allocated to agreed projects to address local workforce priorities and the Health Education England (HEE) Mandate. System partners have worked with HEE and NHSE colleagues to agree and secure further funding with a number of successful bids being approved.

HEE provided each ICS with **a workforce transformation allocation in 2022/23.** For Staffordshire and Stoke on Trent, this allocation was **£370,000 (see table).** 

Project	Funding	
Belonging		
Organisational Development	£50,000	
Leadership programmes	£50,000	
Lets work together programme	£20,000	
Growing for the Future		
Trainee Nurse Associates - Social Care	£50,000	
Clinical Placement expansion	£60,000	
Community Outreach and Health Inequalities	£30,000	
Education, Learning & Development 'reboot'	£5,000	
Maternity Apprenticeships	£25,000	
Looking after our People		
Retention in high pressure areas	£70,000	
New Ways of Working		
Workforce Planning Capacity and Capability	£10,000	
Total	£370,000	

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#### NHS

**Health Education England** 

### Allocation of Heath Education England Funding 2

2022 - 2023



- Belonging
- Future supply pipeline
- Widening Participation and outreach
   Widening Participation and outreach
   into communities
   Retention of current staff
   Hard to fill vacancies

- Development of existing employees

The system received an additional **£750,000** in funding to further the work already started, and commence new transformational projects

This funding has helped deliver the outcomes detailed in this report.

2023/24 HEE funding allocations are yet to be confirmed, however once confirmed the process of allocation will mirror previous years.

Project	Funding	
Belonging		
OD programme built on Messenger Review	£30,000	
Leadership programme delivered at scale	£60,000	
Equality, Diversity and Inclusion	£100,000	
Growing for the Future		
Community Outreach - seldom heard and deprived community focus	£50,000	
Workforce Planning capability and capacity	£70,000	
Trainee Nurse Associates - Social Care	£30,000	
Journey to work Concept including Schools engagement pilot	£150,000	
Maternity apprenticeships	£25,000	
Looking after our People		
Retention in high pressure areas	£150,000	
New ways of working		
Virtual wards - Digital Upskilling/ OD	£25,000	
Community upskilling eyecare / OPD	£60,000	
Total	£750,000	

### Developing Plans for the Future **Our Operating Model**

Looking forward, the system faces a number of well-known **workforce challenges**, reflected in the current position and experienced by partners. The three main challenges being:

- Workforce supply in registered workforce due to turnover/burnout/age/ lack of flexible working opportunities
- **Cultural/behavioural change** required between all Partners to move to a System way of working
- **Financial challenge**; requirement to deliver increased activity (due to population demand and elective recovery) via workforce productivity rather than increase in headcount.

The ICS People Function is the linchpin for the system working the to strengthen the offer to our existing workforce, attract and support more people from our local communities into careers in health and care, and create a robust pipeline of trained and skilled people to deliver quality treatment and care to our population.

It is imperative that we continue to build on the partnerships forged over the years to enable delivery of the system priorities within the 7 portfolios. Our **ICS People Operating Framework** is captured in the following infographic:

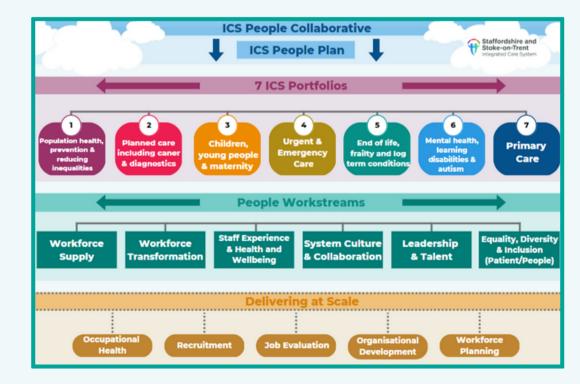












### Developing Plans for the Future **Programme Activity**

The **ICS People Function** ensures any interdependencies with national, regional and system strategies and portfolios are included in planning and delivery of the People Culture and Inclusion programmes, as follows:

- Delivery of national and regional functions e.g. ICS workforce planning and reporting, ICS People Plan
- Enabling function for 'One Workforce' operating model across ICB, NHS, Local Authority, Social Care, Primary Care, Voluntary Sector, private providers
- Delivery of Joint Forward Plan, ICP strategies, alignment to all 7 portfolios and partner strategies
- Direct link with ICB finance and planning functions including operational planning, agency, and people metrics.

We await the launch of the **National People Strategy** which will subsequently require local plans to be updated and delivered in line with the national vision and our changing local landscape. Additionally, the **Hewitt report** will outline recommendations regarding ICS oversight and governance, and the way we transparently share data and utilise it to improve our practices.

Meanwhile, our **ICS People Collaborative** approach, developed over time with health and social care partners, is mature and effective in collectively tackling our workforce challenges. Our **programme activity for 2023-24** is captured in the infographic:

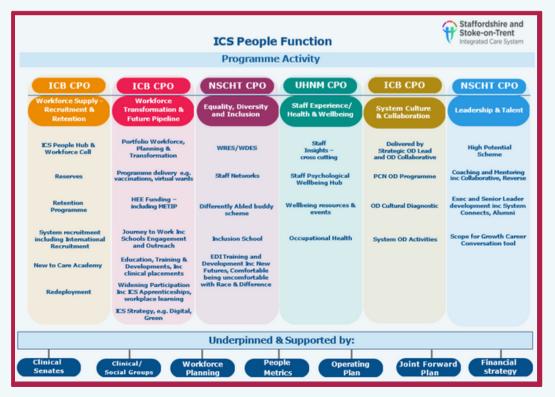












### With huge thanks... **To our Partners**



We look forward to continuing our work with all partners with our People at the heart of everything we do.



# **SSOT ICS People / Workforce**

# Health & Care Overview and Scrutiny Committee

October 2023



### **Context - Our current operating environment**



### **Staffordshire & Stoke-on-Trent Workforce**





**ICS Education, Training and Development Strategy & Group** (inc. Allied Health Professionals faculty)



5

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Education and Training Commissions and workforce development funds coordination at system (Phase 1)

One Occupational Health Contract for NHS Trusts

Widening Participation activities inc National T-Levels pilot

**EDI Workstream** supporting staff networks, Workforce Race and Disability Equality strategy and data, leadership & training

Jog rney to Work model - promotion and accessible routes into H&C jobs for young people, seldom heard groups, unemployed, new to care

Phase 2 system wide Retention programme and focused activities

Staff Psychological and Wellbeing Hub

Primary Care Workforce Implementation Group & Staffordshire Training Hub

System Wide collaboration on agency spend and bank rates



12 ஸ்

14

Watch <u>Aysuda's Story -</u> <u>YouTube</u> here



### 2023-24 so far... ICS People, Culture & Inclusion Activities

ICS Portfolio workforce planning and alignment to programme delivery

ICS People Hub and Reserves = contingent flexible workforce at system level

ICS People Digital Plan - designed & delivery commenced

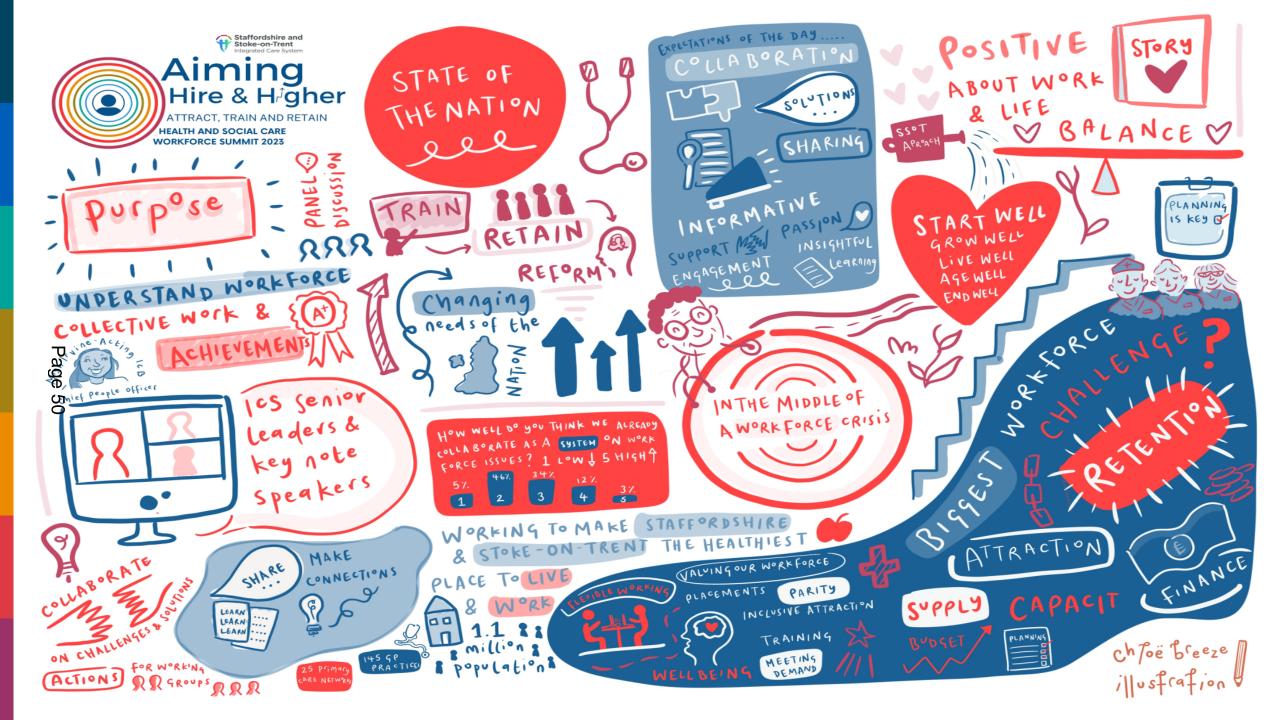
#### Scoping for Delivering People Services at Scale

System-wide career pathway schemes - HCSW apprenticeship, Student Nurse Associate, Pharmacy Technician and Physician Associate

### SSOT Long Term Workforce Plan (LTWP) Delivery Gaps/Future focus



		et a
TRAIN	RETAIN	REFORM
<ul> <li>Medical and Dental education</li> <li>Reduce International Recruitment</li> <li>New 2 Care'</li> <li>Engage with seldom heard communities</li> <li>Trainee pipeline intelligence &amp; planning</li> <li>Education / training commissions and workforce development funding</li> <li>Clinical Placement Capacity</li> <li>Grow Education provider partnerships</li> <li>Alternative training / education models</li> <li>Apprenticeship expansion</li> </ul>	<ul> <li>Health and Wellbeing offers</li> <li>Staff Psychological and Wellbeing Hub long-term funding</li> <li>Employee Value proposition</li> <li>Expansion of Flexible Working practice</li> <li>Equality, Diversity &amp; Inclusion activities</li> <li>Health Inequalities focus in activities</li> <li>Experience &amp; wellbeing data and intelligence</li> <li>Culture, Leadership and Talent activities</li> <li>Digital Staff Passport</li> </ul>	<ul> <li>Reduction in agency</li> <li>Increase contingent workforce</li> <li>Delivery of ICS People Digital Plan</li> <li>Upskilling workforce</li> <li>Attraction of digital workforce</li> <li>Future workforce for digital and AI</li> <li>Delivery of People Services at Scale</li> <li>Engage Professional bodies</li> <li>ICS Portfolio workforce planning</li> <li>Transformation inc new roles &amp; skills</li> <li>Cultural and Leadership for reform</li> <li>ICS career pathway &amp; rotational offers</li> </ul>



## LTWP Next steps – October – December 23

▶ Data / intelligence collation and mapping

#### Review of existing priorities and plans

Delivery timelines to be defined – short, medium and long

Workforce Summit outcomes - delivery of highest risk / challenging area plans

Provider/Partner mapping undertaken to identify opportunities to align activities at system level

Delivery and monitoring through established working and steering groups

Oversight, monitoring and review via ICS People Collaborative Group

Finalised plan to be ratified by People, Culture & Inclusion Committee - November 2023 (2 year review)



United in uniqueness

Page

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United in uniqueness



#### United in uniqueness

#### United in uniqueness

### **Our Combined People Plan** 2023-28

#### Our people systems and policies enable the Trust to deliver great services

- Vacancy levels crept up to 14% but...
- 43 RMNs starting next 2 months
- Support services what can we do at scale and across the system?

# Provide the best opportunities for our people to achieve their potential and asplitations

- Leadership Development in system and careers across
- Succession Planning still a gap
- Good Staff Survey Scores

### 5.Outstanding systems & processes

4. Achieve potential & aspirations.

3. Health & Wellbeing

#### We will be inclusively representative of our communities

• Still challenges in representation at all levels and abuse

Keele

TEACHING TRUST

- WRES/WDES scores improving and positive
- RACE Code, Rainbow Badge Scheme, Sexual Safety
- System leadership and development

2. Great

place to

work

1. Inclusive &

representative

North Staffordshire Combined Healthcare NHS Trust

WE ARE PROUD WINNERS

We will provide a great place to work

- One of top Staff Surveys in NHS in England but needs to improve
- Positive team scores but more to do
- Turnover just over 12%

We ensure our people's health and wellbeing is supported better than any employer in the NHS

- Staff Support Hub on behalf of system
- Improving Sickness levels (less than 5%)
- Action on violence and abuse to staff

### **People Promise Elements and Themes: Overview**

Survey Coordination Centre

All of the People Promise elements, themes and sub-scores are scored on a 0-10 scale, where a higher score is more positive than a lower score. North Staffordshire **Combined Healthcare NHS Trust** We are compassionate We are recognised We each have a We are safe and We are always and inclusive and rewarded voice that counts healthy We work flexibly learning We are a team Staff Engagement Morale 10 9 Page 55 8 7 6 Score (0-10) 5 4 3 2 1 0 6.5 6.1 7.2 7.4 7.4 6.5 7.8 6.6 7.3 Your org 7.9 6.6 7.4 6.6 6.1 7.2 7.4 7.4 6.5 Best 7.5 6.3 7.0 6.2 5.7 6.7 7.1 7.0 6.0 Average 7.0 5.9 6.1 5.7 4.6 6.2 6.7 6.2 5.2 Worst 1225 1221 1218 1221 1178 1213 1224 1225 1225 Responses

### **Our People Strategy – Making UHNM a Great Place to Work :**

University Hospitals of North Midlands

We will look after our people by supporting our people to be healthy and well, both physically and psychologically, and when unwell ensuring they are supported.

Page

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We will create a sense of belonging where we are kind and respectful to each other by creating a positive and inclusive culture which is reinforced through our Being Kind programme.

We will grow and develop our workforce for the future by attracting, recruiting and retaining our people.



We will develop our people practices and systems by promoting and using new technologies and equipping our people with digital awareness and skills.

- We have a comprehensive wellbeing offer for all of our colleagues
- We have a system-wide winter plan
- Good employee benefits and support offers
- Strong retention rates with turnover less than 9%
- Vacancy Rates are improving month on month are below 10%
- We have introduced a compassionate and inclusive work programme "Being Kind"
- Junior Doctor and Consultant Industrial Action continues to impact on activity and finances
- Completed flexible working survey to drive actions







### Your Wellbeing

24/7 support is always available

Support is available for our #UHNMFamily, at any time. Listening Emotional If you're thinking about acting on f you're feeling worried, c you're feeling anxious or stuck erwhelmed and need a suicidal thoughts or feel you are a listening ear Staff Support & Counselling 0300 124 0104 Reach out to a manager or colleague for a Wellbeing conversa Staff Psychological Wellbeing Hub Staff Support & Counselling ocal NHS urgent mental health helplines 24hrs a day, 7 days a week NHS Staff support line: 0800 069 6222 7:00am – 11:00pm, 7 days we

Staff Psychological Wellbeing Hub: 0300 303 5406 or visit vbstaffsandstoke org uk/staff-psychologicalwellbeing-hub B 0300 005 46 0 800 069 6 0 r text FRO 0800 069 6 0 r text FRO 0800 069 6 0 r text FRO 0800 069 6 0 r text FRO North Staffordshire 0800 0328728 (option 1) South Staffordshire 0808 196 3002

0808 196 3002

### **General Practice and Primary Care Networks**

Facilitated and enabled by the ICS Primary Care Team and Staffordshire Training Hub, the following workforce governance and programmes are in place:

- Primary Care Workforce Implementation Group
- Mapping of LTW Plan Primary Care targets
- Increasing Additional Roles Reimbursement Scheme (ARRS) Workforce
- Launch of General Practice Nursing School
- Page 57 Apprenticeship schemes e.g pharmacy technicians, health care support workers
- National GP Retention Scheme
- Suite of retention schemes for GPs and other Health Care Professionals
- Wellbeing initiatives for General Practice/PCNs
- Launch of General Practice Staff Survey
- ARRS retention initiatives
- Launch of new flexible pools staffing pool



#### Health and Care Overview and Scrutiny Committee -Monday 16 October 2023

#### Staffordshire's Social Care Workforce: Adult Social Care Update

#### Recommendations

I recommend that the Committee:

- a. Consider and comment on the key discussion points and action points arising from the recent Adult Social Care Provider Round Table, facilitated on 14 August 2023.
- b. Consider and comment on the intention to establish an Adult Social Care Academy, to meet the training, learning and development needs of the adult social care workforce.

#### Local Member Interest:

N/A – relevant to all Members.

#### **Report of Councillor Julia Jessel, Cabinet Member for Health & Care**

#### Summary

### What is the Overview and Scrutiny Committee being asked to do and why?

- 1. Consider and comment on the key discussion points and action points arising from the recent Adult Social Care Provider Round Table, facilitated on 14 August 2023.
- 2. Following the last presentation to Health and Care Overview and Scrutiny Committee in March 2023, there was a request to provide an update on the provision of education and training to our adult social care workforce. Committee members are asked to note the intention to establish an adult social care academy, to meet the training, learning and development needs of the adult social care workforce.

#### Report

#### Adult Social Care Provider Round Table



- 3. On 14 August 2023, Health and Care Scrutiny members hosted a round table attended by providers from across our adult social care market. Representatives were invited from our Registered Managers Network and Staffordshire Association of Registered Care Providers (SARCP), including:
  - a. Care homes (residential and nursing)
  - b. Home care
  - c. Supported Living
- 4. Colleagues from the Staffordshire and Stoke-on-Trent Integrated Care Board (ICB) attended the session as active partners in the development and on-going delivery of Staffordshire's Workforce Strategy.
- 5. The session commenced with an overview of how the Strategy was developed in collaboration with a range of partners, including our adult social are providers and provided an overview of our adult social care workforce:
  - a. Each adult social care service has specific recruitment and retention issues, as demonstrated by the Skills for Care Workforce Data set and the Annual Staff Survey.

An example of this service specific need is demonstrated by Staffordshire's current vacancy rate – the average vacancy rate across all sectors is 9.9%, however there is a 16% vacancy rate for nurses working in care homes<sup>1</sup>.

b. 270 respondents completed the local Annual Staff Survey – noting 217 of respondents worked in adult social care.

The survey demonstrated we have people with the right values and ethos working in the sector (with 88% wanting to `make a difference').

86% of the workforce indicated they intend to remain working in adult social care, which is an improvement from the previous survey as 1 in 5 respondents noted it was their intention to vacate the social care sector, within 2 years.

It was noted, whilst the response rate was consistent with the previous year, the overall response rates require improvement.

6. Care providers shared first-hand experience of what life is like for our workforce and their thoughts and perspectives on the Strategy. A

<sup>&</sup>lt;sup>1</sup> Skills for Care



summary of the key discussion points and actions arising are detailed in Appendix 1.

- 7. The majority of the actions arising from the discussion typically aligned to those included in the Strategy. There was a strong focus on:
  - a. Tailoring our support and actions based on the presenting needs of each service type.
  - b. The use of positive language and reinforcement in order to both attract people to the sector and ensure our workforce feels valued and rewarded.
  - c. There is a need to expedite our actions on multi-disciplinary working, and ensuring members of our workforce are seen as professionals in their own right by a person's circle of support.
  - d. A co-ordinated communications campaign across the life course of the Strategy is critical.
  - e. Values-based recruitment and offering people opportunities to experience social care, thus making informed career decision, is fundamental to our success.
- 8. Educating our wider communities about the role, function and purpose of social care was proposed as a new action, in addition to those included in our strategy. This action would contribute to raising the profile and recognition of social care.
- 9. It was acknowledged the typically low rate of pay will continue to affect recruitment and retention.

#### Adult Social Care Academy

10. The '<u>Next Steps to Putting People at the Heart of Social Care'</u> notes a significant proportion of the workforce do not hold a relevant qualification or have access to good quality learning opportunities, which contributes to high turnover of staff. Skills for Care states turnover was reduced by more than 9% for care workers who received more than 30 instances of training<sup>2</sup>.

<sup>&</sup>lt;sup>2</sup> Skills for Care is supporting social care teams to #KeepLearning this year



- 11. Approx 54% of our local workforce have completed (or are working towards) the Care Certificate<sup>3</sup>, placing us slightly ahead of the England average (48%).
- 12. Local intelligence from our social care workforce, in respect of learning, and training can be summarised as below:
  - a. Our workforce is not aware of the full range of local training opportunities available, with capacity to research cited as a barrier.
  - b. Our workforce is not aware of the full range of funding on offer to support learning, i.e. Workforce Development Funding.
  - c. There is variation across the market, by employer, in respect of investment in learning and training.
  - d. Neither the potential or current workforce are fully aware of the career opportunities within adult social care, or the training required / opportunities to achieve these aspirations.
  - e. Individual learning and development achievements are not consistently recognised nor celebrated.
- 13. Sector based career academies are growing in popularity across England. They are designed to meet specific industry needs, harnessing the power of several partners to both attract and retain staff with the right ethos, values and training in a cohesive and consistent manner, reducing duplication<sup>4</sup>.
- 14. A number of academies have a strong focus on 'entry to work', supporting those receiving unemployment benefits to join the workforce, via targeted recruitment campaigns and provision of placement-based learning and training, utilising Adult Education Budget (AEB) Funding.
- 15. Locally, we have worked closely with our ADASS associate supporting workforce and explored other health and/or social care academies across the country to understand their structure and impact.
- 16. Representatives from the following partner organisations have contributed to our Strategy and are active participants in our Learning and Development Workstream:
  - a. Adult social care providers.
  - b. ICS & NHS colleagues.
  - c. Staffordshire Partnership for Employment and Skills.
  - d. Stoke-on-Trent and Staffordshire Local Enterprise Partnership.
  - e. Midlands Partnership Foundation Trust (MPFT).

<sup>&</sup>lt;sup>3</sup> Skills for Care

<sup>&</sup>lt;sup>4</sup> <u>https://www.gov.uk/government/publications/sector-basedwork-academies-employer-guide/sector-based-work-academies-employer-guide</u>



- f. Local Universities, including Staffordshire, Keele and Wolverhampton.
- g. Local colleges, including South Staffordshire, Newcastle & Stafford college group, Buxton & Leek college and Burton & South Derbyshire College.
- h. Department for Work & Pensions.
- 17. Following consideration of local intelligence and national directives and the intention is to establish a Staffordshire Social Care Academy. The Academy will provide learning training and development to:
  - a. Support our current workforce clearly articulating the local opportunities for them to be the best they can be at their current job and support them to progress in their career.
  - b. Support our potential future workforce clearly articulating what a career in social care entails including career progression and the local opportunities to support them to enter the sector with confidence and the required skills/
- 18. The objectives of the Academy will be:
  - a. Values Based Recruitment:
    - i. Increase the number of filled posts.
  - b. Support effective retention:
    - i. Reduce the current turnover rate.
    - ii. Increase the number of people who remain in the sector.
  - c. The provision of high-quality care by a skilled workforce.
    - i. Increase the number of staff who have started or completed their Care Certificate.
    - ii. Increase the number of staff who report to have a qualification relevant to social care.
  - d. Offer work-based learning & experience.
    - i. Increase the number of workplace learning programmes offered by adults social care providers.
    - ii. Increase the number of people who are subsequently offered employment after completion of a workplace learning programme.
- 19. The Academy will offer bespoke learning, training and development to meet the needs of our workforce, using local intelligence and engagement.
- 20. The Academy will not duplicate any existing learning, training and development opportunities instead it will bring all existing opportunities together virtually in one place for ease of navigation.
- 21.A local quality assurance framework is under development, utilising existing nationally recognised accreditation schemes and registers, to



reduce bureaucracy whilst ensuring the provision of quality training. In addition, we will consider the application of a quality assurance mark, that is locally recognised, to provide both our workforce and employers with a level of reassurance and confidence in the learning, training and development opportunities delivered.

- 22. The Academy will be supported by a Learning Management System (LMS) that will enable our workforce to book and complete learning training and development delivered by the academy and were requested by our partners.
- 23. Our workforce will be able to track their progress, store the associated certifications and provide feedback about the quality and impact of the course using the associated LMS, which aligns to the intention of the Adult Social Care Reform pledge to introduce portability of training to prevent duplication. Our local offer and LMS functionality have been designed in partnership with our providers.
- 24. As part of our wider Strategy actions, we have noted we will consider further workforce recognition and celebration events – we are building on feedback gained during creation of our Strategy that asked us to consider local 'graduation' events and celebrating our workforce's individual learning achievements.
- 25. The Academy will act as a single collective voice to drive change in respect of learning training and development, whilst seeking to better co-ordinate the use of local resources to maximise the impact on adult social care. Two prime areas for exploration are:
  - a. Sector Based Work Academies greater local co-ordination and reach to maximise their effectiveness and impact.
  - b. Apprenticeships demystifying, promoting and driving up numbers at every stage of the career pathway – whilst continuing to participate in discussions about the associated rates of pay for those who are new to care.
- 26. The Market Sustainability Improvement Fund will be utilised to support with establishment of the Academy Infrastructure. We are currently exploring utilisation of other local resources to support with both capital and revenue costs.
- 27. Phase 1 of implementation will focus on delivery of a virtual academy with our infrastructure fully operational by March 2024, subject to the preferred LMS model we pursue (if there is a required to complete a commercial process).



28. Phase 2 of implementation will focus on development of a hybrid model – which will be fully operation by March 2025.

#### Link to Strategic Plan

- 29. Have access to more good jobs and share the benefits of economic growth.
- 30. Be healthier and independent for longer.

#### Link to Other Overview and Scrutiny Activity

31. An update on the provision of education for our adult social care workforce was requested following our attendance to Health & Care Scrutiny on 20 March 2023.

#### **Community Impact**

32. See CIA

#### List of Background Documents/Appendices:

Appendix 1 – Health & Care Scrutiny ASC Provider Roundtable key discussion points and actions. Community Impact Assessment

#### **Contact Details**

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#### Appendix 1

#### Health & Care Scrutiny Adult Social Care Provider Round Table Key Discussions & Actions

Communication & Engagement		
Торіс	Key Discussion Points	Actions
Annual Workforce Survey	• 2023/24: 270 members of the workforce responded to the annual survey.	1. All partners to promote the annual workforce surveys, including asscoiated benefits, to increase the response rate so it is more representative and
	• The responses, supported by the data, demonstrated the differences between the different types of support provided i.e. home care and care homes.	aids local action.
Peer Support	<ul> <li>Providers benefit from information sharing and localised peer support – this include opportunities to learn and collaborate for greater impact.</li> </ul>	<ol> <li>Promote local peer support networks, including, but not limited to:         <ul> <li>a. SARCP</li> <li>b. Registered Managers Network Forums</li> </ul> </li> </ol>
	• The survey responses indicated team working / support positively impacts retention.	
Provider data returns	<ul> <li>Providers are required to completed multiple survey's and returns – this can be both resource intensive and the use / impact of the</li> </ul>	<ol> <li>Encourage all providers to complete ASC Workforce Data Set – to improve workforce intelligence.</li> </ol>
	information is not fully understood / communicated.	2. Consider how we improve co-ordination, requests and collate responses from local data set requests – to improve our workforce intelligence.
	<ul> <li>Due to the nature of the job and number of returns, it is important to co-ordinate engagement and returns – to reduce duplication.</li> </ul>	3. Consider how collate exit data and understand the reasons why people are leaving social care.
Multi-disciplinary working	It is important to acknowledge our workforce	1. Partners to meet to discuss multi-disciplinary ways of



Quality of Care	<ul> <li>knows the person they are providing support to, on typically a daily basis, and complete a number of critical tasks to maintain their personal health, wellbeing and safety, including, but not limited to: <ul> <li>Personal Care</li> <li>Medication</li> <li>End of life care</li> <li>Maintaining relationships with family</li> <li>Maintaining a community presence / their hobbies and interests.</li> </ul> </li> <li>A number of the workforce report they do not feel valued, respected and treated as a 'professional' by other professionals / support functions.</li> <li>It is acknowledged there can be issues with the quality of care and support delivered – typically by specific staff members – noting particular challenges in monitoring the quality of care when it is being provided in a person's own home by a single member of staff.</li> <li>Leaders and managers of services are dedicated to addressing any quality concerns and issues swiftly.</li> </ul>	<ol> <li>working – embedding a culture of mutual trust and respect.</li> <li>Ensure any specific concerns about the quality of care are reported and escalated via the appropriate local route for immediate attention and resolution.</li> <li>Scrutiny members to approach providers if they wish to shadow / work with to gain direct experience and understanding of the roles, responsibilities and impact of social care.</li> </ol>
	<ul> <li>to addressing any quality concerns and issues swiftly.</li> <li>It is critical, good practice and quality care is</li> </ul>	impact of social care.
Language	<ul> <li>championed by all partners.</li> <li>To support with both valuing our workforce and</li> </ul>	1. Consider how we collectively support educating our



promoting this as an aspirational career, it is critical language such as 'just a carer' ceases.	communities to both raise the profile and understanding of social care.
• The role and function of social care is not typically well understood by the majority of citizens, until such a time they require support.	2. Consider our local communications supporting our workforce and ensure positive language is reflected in our promotion of the workforce:
• It was recognised, as per discussions in respect of the quality of care, there can be a tendency to focus on the negative issues and concerns, which lead to generalised assumptions and statements, as opposed to positive reinforcement.	<ul> <li>a. Ensure the workforce feels valued and rewarded.</li> <li>b. To support with recruitment &amp; retention.</li> <li>c. To celebrate good practice.</li> </ul>

	Identity & Equity					
Торіс	Key Discussion Points	Actions				
Recognising differences	• The challenges facing the workforce vary by the service type / role.	<ol> <li>Continue to identify service specific themes and issues for attention and action via the Strategy Action Plan.</li> </ol>				
	• The recruitment of nurses in care homes is a local (and national) issue. Providers expressed the job satisfaction in this role. Nursing in a care home is not routinely promoted whilst studying and gaining qualifications.					
Celebrating Social Care	<ul> <li>It is critical social care is acknowledged and recognised in its own right – including gaining parity with the NHS.</li> </ul>	<ol> <li>Continue to work in partnership to ensure the social care workforce has access to the same benefits and opportunities as NHS colleagues, including lifestyle benefits &amp; discounts and training.</li> </ol>				
	It is important to recognise and celebrate our					



workforce – including challenging negative perceptions and media coverage.	<ol> <li>Partners to consider what other benefits and discounts can be extended to our social care workforce.</li> </ol>
The recent Dignity in Care Awards, and associated communications campaign generated 512 searches for 'social care jobs' via the Councils Jobs & Career platform.	3. Partners to consider how they can raise the profile and positive awareness of social care.
	4. A co-ordinated communications campaign to celebrate our social care workforce.

	Recruitment & Retention						
Торіс	Topic Key Discussion Points Actions						
Aspirational Career	• It is important, starting at school age, to use positive language and promote social care as an aspirational career.	1. Continue to use I Care Ambassadors to support with raising the profile of social care as an aspirational career, that genuinely makes a difference.					
	• The ICS are currently undertaking a pilot in local schools.	2. Increase the use of technology to support with work experience and understanding the impact of social care.					
	• SCC colleagues have commenced conversations with Careers Enterprise Company to raise the profile of social care across the curriculum.						
	• The use of virtual reality technology is a powerful tool when talking to young people about the positive effect social care can have a person's life, i.e. understanding what it is like to live with a sensory impairment.						
Рау	<ul> <li>It is recognised social care funding is nationally</li> </ul>						



	driven, and the strategy alone cannot tackle this issue.	
	• It is recognised the NHS typically offers better pay, and asscoiated terms and conditions, than social care.	
	• Social care has faced increased competition in terms of recruitment and retention since the economy 're-opened' post COVID-19.	
	• There is disparity in pay, alongside terms and conditions, across the social care workforce – noting there high number of individual employers, including SME's and national providers, leading to a wide variation.	
	<ul> <li>Pay will continue to affect on-going recruitment and retention – without addressing this, recruitment and retention will continue to be problematic for providers.</li> </ul>	
Flexible working	<ul> <li>Providers noted a number of staff have decreased their working hours to support with claiming benefits.</li> </ul>	
	<ul> <li>The use of zero hours / bank working arrangements vary by service type – this working arrangement supports to manage need / demand. However, the concerns about potentially 'inappropriate' use is acknowledged,</li> </ul>	



	but this should not be the generally held view.	
Adult social care placements	<ul> <li>We need to offer greater exposure to social care, on a co-ordinated basis at scale, including:         <ul> <li>Volunteering opportunities</li> <li>Work Experience</li> <li>Placements (college &amp; universities)</li> <li>Apprenticeships</li> </ul> </li> </ul>	<ol> <li>Meeting across partners to discuss how we increase the number of social care placement opportunities – including understanding the needs of providers to support this.</li> </ol>
Value-based recruitment	• A number of people may have the right values and ethos to work in social care – but may be concerned they do not have the appropriate training and practical skills, which will deter them from applying for a job.	<ol> <li>Ensure local application of values based recruitment.</li> <li>Ensure 'values-based 'approach is prominent and transparent in recruitment campaigns.</li> </ol>
Other discussion points		<ol> <li>Support providers in respect of international recruitment – noting recent funding has been secured.</li> </ol>
		<ol> <li>Track national and subsequent local progress on T Levels – noting there is not a current Social Care T Level in operation.</li> </ol>
		3. ICS (and other local providers as appropriate) to support providers to attain functional maths and English qualifications.



# **Community Impact Assessment**

Future Social Care Workforce Strategy

Author: Amy Duffy

Date: 20 September 2023



# > Equality Assessment

Protected Characteristics	Benefits	Risks	Mitigations / Recommendations
Age - older and younger people	Activities identified within the strategy – including the development of a Social Care Academy will support recruitment and retention in the social care work sector across all age ranges, at all stages of their working lives. The strategy is part of the joint approach to developing the Staffordshire social care workforce across the Integrated Care System, supporting inclusion.	None identified	
<b>Disability</b> - people who are living with different conditions and disabilities, such as: mental illnesses, long term conditions, Autism and other	The strategy is part of the joint approach to	None identified	





Protected Characteristics	Benefits	Risks	Mitigations / Recommendations	
neurodiverse conditions, learning disabilities, sensory impairment and physical disabilities.	developing the Staffordshire social care			
<b>Gender reassignment</b> - those people in the process of transitioning from one sex to another	workforce across the Integrated Care System,			
Marriage & Civil Partnership - people who are married or in a civil partnership should not be treated differently at work	<ul> <li>supporting inclusion. It</li> <li>aligns with the</li> <li>Leadership for a</li> <li>Collaborative and</li> </ul>			
Pregnancy & Maternity - women who are pregnant or who have recently had a baby, including breast feeding mothers	Inclusive Future Report, recognising the real difference that good			
<b>Race</b> - people defined by their race, colour, and nationality (including citizenship) ethnic or national origins	leadership can make in health and social care and the need for			
<b>Religion or Belief</b> - people with any religious or philosophical belief, including a lack of belief. A belief should affect a person's life choices or the way they live for it to be considered				
Sex - men or women	acknowledges we have			
<b>Sexual orientation</b> - whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes	a predominantly female workforce (86%) and will seek to recruit and retain a workforce, at all levels, that is more	workforce (86%) and will seek to recruit and retain a workforce, at all		



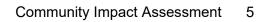
Protected Characteristics	Benefits	Risks	Mitigations / Recommendations
	representative of our local population.		

# > Workforce Assessment

Who will be affected – consider the following protected characteristics: age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion or belief, sex and sexual orientation	Benefits	Risks	Mitigations / Recommendations
<ul> <li>All social care workers within Health and Care and Children's and Families Directorates</li> </ul>	The strategy aims to develop a more resilient care sector that enables more effective recruitment and retention in adult's and children's social care, based on person- centred and innovative ways of working. Activities arising from the strategy aim to improve the recognition	None identified	



Who will be affected – consider the following protected characteristics: age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion or belief, sex and sexual orientation	Benefits	Risks	Mitigations / Recommendations
	and rewards for those		
	working within social		
	care.		
	The Social Care		
ာဆို	Academy will provide		
Page 77	support to Council Staff		
77	who currently work in		
	our directly provided		
	care services, typically		
	supporting Adults with a		
	Learning Disability		
	across a range of		
	service types. The		
	provision of an academy		
	will positively impact the		
	quality of care provided		
	and support with career		
	progression and		
	development, as per the		

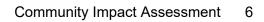




Who will be affected – consider the following protected characteristics: age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion or belief, sex and sexual orientation	Benefits	Risks	Mitigations / Recommendations
	aspirations of individual staff members.		

# > Health and Care Assessment

Key considerations	Benefits	Risks	Mitigations / Recommendations
©Residents' health and wellbeing &	The strategy and key activities support a more	None identified	
Personal responsibility and independence	resilient care sector, responsive to fluctuating needs and demand.		
	The Academy will support with the		
	provision of quality strengths-based care		
	and support & innovation, including but not limited to a digitally		





	Key considerations	Benefits	Risks	Mitigations / Recommendations
		and technologically		
		skilled workforce.		
		The Strategy		
		emphasizes the		
		importance of		
		supporting the physical,		
		mental and emotional		
_		wellbeing of our		
ו משכ		workforce, through the		
		utilization of existing		
ć	70	resources including the		
		Wellbeing Hub, Think		
		Well and The Recovery		
		College.		

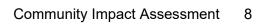
# > Communities Assessment

Key consideration	Benefits	Risks	Mitigations / Recommendations
Community capacity	The strategy and activities promote personal responsibility and independence in	None identified	



Key consideration	Benefits	Risks	Mitigations / Recommendations
	those receiving care,		
	through person-centred		
	and innovative ways of		
	working.		
	The strategy and		
	activities will explore		
	building community		
	capacity, for example to		
	increase the numbers of		
$\perp$	personal assistants and		
Page 80	Micro-providers.		
& &	The strategy will explore		
Φ	how it can work in		
	partnership with support		
	Staffordshire for the		
	benefit of our social care		
	workforce and residents.		

# Economic Assessment

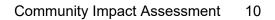




	Key consideration	Benefits	Risks	Mitigations / Recommendations
	Impact economic growth, promote	The strategy aims to	None identified	
	Staffordshire as a 'go to' location for new	develop a more resilient		
	businesses to invest and start up and existing businesses to grow.	care sector that enables		
	businesses to grow.	more effective		
	Impact upon resident's income and access to	recruitment and		
	good quality jobs.	retention in adults' and		
	Allow residents to improve diversify and	children's social		
	Allow residents to improve, diversify and adapt their skills and qualifications.	services, based on		
-		person-centred and		
		innovative ways of		
Ċ	0	working - for all social		
-	<b>_</b>	care workers including		
		those in regulated		
		professions across the		
		public and independent		
		sector, attracting people		
		at every stage of their		
		working lives, including		
		those at the start of their		
		career.		
		We will help shape the		
		future of social care in		
		Staffordshire through:		
		Working collaboratively		
		to support each		



Key consideration	Benefits	Risks	Mitigations / Recommendations
Page 82	<ul> <li>employer to be the best that they can in recruiting, retaining and developing their own teams; Working in partnership to carry out targeted local recruitment campaigns, promote the sector in schools and with potential job applicants; Jointly making the case for fair and sustainable funding to the social care sector.</li> <li>The Academy will bring together the exisiting local learning, training and development opportunities in a central hub to support with navigation and ease of access.</li> </ul>		





Key consideration	Benefits	Risks	Mitigations / Recommendations
	In addition, the academy will deliver bespoke learning, training and development identified through local		
Page 83	intelligence and engagement – which will support employees to carry out their job to the best of their ability whilst also supporting career progression.		

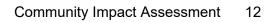
# > Climate Change Assessment

Key considerations	Benefits	Risks	Mitigations / Recommendations
See Environment Assessment Section			

## > Environment Assessment



Key considerations	Benefits	Risks	Mitigations / Recommendations
Ability to travel/access to transport	The Strategy promotes collaborative working between providers to reduce unnecessary journeys where possible and appropriate.The Strategy also considers how to support our workforce to consider low carbon alternative mechanisms of transport.	Individual can express choice over who delivers their care, meaning providers would not be able to work wholly collaboratively. Adult Social Care is a typically low paid sector – individual employees, due to their financial circumstances may not be able to afford to purchase and/or maintain low carbon alternatives i.e. electric vehicles. Due to the rural nature of certain locations within Staffordshire, alternative modes of transport i.e. public transport and use of	





Key considerations	Benefits	Risks	Mitigations / Recommendations
		bikes is not viable to provide required levels of care and support across multiple locations.	





Health and Care Overview and Scrutiny Committee -Monday 16 October 2023

# Briefing Note on NHS Integrated Care Board (ICB) "Freedom to Speak Up" arrangements following the trial of Lucy Letby

#### Recommendation(s)

I recommend that the Committee:

- a. **Receives** the briefing which outlines NHS England's expectations of all NHS organisations following the outcome of the Lucy Letby trial.
- b. **Notes** the changes to the ICB's "Freedom to Speak Up" (FTSU) policy which strengthens the organisation's approach to supporting staff and patients to speak up, embedding a culture of transparency and learning.
- c. **Notes** that it is anticipated that further NHS England actions for all NHS organisations following FTSU self-assessment will be required.
- d. **Notes** that the ICB's Freedom to Speak Up Guardians complete a report that will be presented to the ICB's People, Culture and Inclusion Committee of the ICB Board.

#### Report of the Staffordshire and Stoke-on-Trent Integrated Care Board – (Tracey Shewan, Director of Corporate Governance and ICB FTSU Lead)

#### Summary

# What is the Overview and Scrutiny Committee being asked to do and why?

- 1. This report provides a briefing to the HCOSC regarding the actions required by all NHS organisations in response to the outcome of the recent Lucy Letby trial.
- 2. NHS Leaders and Boards are expected to have implemented the updated national Freedom To Speak Up (FTSU) policy by January 2024. The FTSU Policy recognises the importance of embedding a culture which supports staff and patients to voice their concerns and adopts robust processes and governance to ensure people feel confident to speak up, feel heard and responded to in a timely way.

- 3. It is noted that the ICB had, prior to receipt of the letter from NHS England, already strengthened the organisation's FTSU policy, introducing two new FTSU Guardians and extending the ICB's policy to support staff within General Practice.
- 4. It is anticipated that representatives from the ICB will continue to work with the national Freedom to Speak Up Guardians Network to review our progress against all that is in the formal letter from NHS England. Thereby ensuring that all required actions are undertaken, including the use of a self-assessment toolkit to measure all of our arrangements made.
- 5. The outputs of this self-assessment will be reported to the ICB People, Culture and Inclusion Committee of ICB Board, and escalated to the ICB Board for public and stakeholder accountability purposes.

# Report

#### Background

- 6. All NHS organisations and others providing NHS healthcare services in primary and secondary care in England are required to adopt this national policy as a minimum standard to help normalise speaking up for the benefit of patients and workers.
- 7. The Care Quality Commission (CQC) is primarily responsible for assuring speaking up arrangements across all organisations.
- 8. Maintaining the safety of patients and staff who receive care or work within NHS organisations is central to the ask from NHS England.
  - a. Continuously improving services as a result of learning from the experience of patients and staff who work and receive care from the NHS is imperative to maintaining sustainable, high quality and safe services.
  - b. Embedding a culture which runs through the ICS of transparency, responsiveness and compassion is essential to delivering the necessary change and requires strong leadership at all levels.
- 9. Both the ICB's Freedom to Speak Up and Whistleblowing policies are aligned to the NHS People Plan, which sets out the ambition to work in new ways to improve staff experience and patient care.
  - a. Introducing the FTSU Guardian role within the ICB requires a level of expertise and completion of training at an individual level in order to

support a healthy speaking up culture which protects patient safety and enhances worker experience.

#### Main Body of the Report

- 10. Following the outcome of the trial of Lucy Letby, the ICB received a letter from NHS England leaders that included an ask of NHS organisations. The harrowing details of her crimes has touched us all and it is important for us to take stock, reflect and act to ensure processes are in place.
  - a. It is important to remind ourselves of the importance of NHS leaders listening to the concerns of patients, families and staff, and that we follow whistleblowing procedures, alongside good governance, particularly at organisational level.
  - b. Everyone working in the health service should feel safe to speak up and confident that it will be followed by a prompt response. The actions taken by the ICB in response are:
    - i. The ICB strengthened our Freedom to Speak Up (FTSU) policy, having two Guardians, an Executive Lead and a Non-Executive Lead, and currently we are taking the new policy to cover General Practice through our governance process.
    - ii. All organisations providing NHS services are expected to adopt the updated national policy by January 2024 at the latest.
    - iii. That alone is not enough. Good governance is essential. NHS leaders and Boards must ensure proper implementation and oversight.
    - iv. Specifically, they must urgently ensure:
      - a. All staff have easy access to information on how to speak up.
      - b. Relevant departments, such as Human Resources and Freedom to Speak Up Guardians, are aware of the national Speaking Up Support Scheme and actively refer individuals to the scheme.
      - c. Approaches or mechanisms are put in place to support those members of staff who may have cultural barriers to speaking up or who are in lower paid roles and may be less confident to do so, and also those who work unsociable hours and may not always be aware of or have access to the policy or processes supporting speaking up.

- d. Methods for communicating with staff to build healthy and supporting cultures where everyone feels safe to speak up should also be put in place.
- e. Boards need to seek assurance that staff can speak up with confidence and whistle-blowers are treated well.
- f. Boards are regularly reporting, reviewing and acting upon available data.
- 11. While the CQC is primarily responsible for assuring speaking up arrangements, NHS England have also asked ICBs to consider how all NHS organisations have accessible and effective speaking up arrangements as detailed above.
- 12. There is a Freedom to Speak Up Guardians Network that will review all that is in the letter from NHS England, including the use of a self-assessment toolkit to measure all our arrangements on.
- 13. In terms of the ICB, the Freedom to Speak Up Guardians complete a report that will routinely go to the People, Culture and Inclusion Committee of the ICB Board.

#### Link to Strategic Plan

14. Staffordshire and Stoke-on-Trent Integrated Care Partnership (ICP) strategic priority themes of 'People and Communities' and 'Personal Responsibility'.

# List of Background Documents/Appendices:

15. No further documents or appendices.

#### **Contact Details**

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Local Members Interest

# Health and Care Overview and Scrutiny Committee – Monday 16 October 2023

# District and Borough Health Scrutiny Activity

#### Recommendation

I recommend that:

a. The report be received, and consideration be given to any matters arising from the Health Scrutiny activity being undertaken by the Staffordshire District and Borough Councils, as necessary.

# Summary

• The Committee receives updates at each meeting to consider any matters arising from the Health Scrutiny activity being undertaken by the Staffordshire District and Borough Councils.

#### Background

- 2. The Health and Social Care Act 2001 confers on local authorities with social services functions powers to undertake scrutiny of health matters. The County Council currently have responsibility for social services functions but, to manage health scrutiny more effectively, they have agreed with the eight District/Borough Councils in the County to operate joint working arrangements.
- 3. Each District/Borough Council has a committee in which holds the remit for health and wellbeing scrutiny matters and matters that have a specifically local theme. The Health and Care Overview and Scrutiny Committee will continue to deal with matters that impact on the whole or large parts of the County and that require wider debate across Staffordshire.
- 4. District and Borough Councils each have a representative from the County Council Health and Care Overview and Scrutiny Committee as a member of the relevant committee with remit for health scrutiny matters. The County Councillors will update the District and Borough Councils on matters considered by the Health and Care Overview and Scrutiny Committee. A summary of matters considered by this committee is circulated to District and Borough Councils for information.



- 5. It is anticipated that the District and Borough Councillors who are members of this committee will present the update of matters considered at the District and Borough committees to the Health and Care Overview and Scrutiny Committee.
- 6. The following is a summary of the health scrutiny activity which has been undertaken at the District/Borough Council level since the last meeting of the Health and Care Overview and Scrutiny Committee on 28 November 2022.

#### 7. Cannock Chase District Council

Cannock Chase's Health, Wellbeing & The Community Scrutiny Committee last met 18 September 2023.

Date of next meeting: 5 December 2023

#### 8. East Staffordshire Borough Council

The Scrutiny Health and Well Being Committee met on 12<sup>th</sup> September 2023

Date next meeting: 12 December 2023

#### 9. Lichfield District Council

Lichfield District Council's Overview and Scrutiny Committee met on 14 September 2023.

Date of next meeting: 14 November 2023

#### 10.Newcastle-under-Lyme Borough Council

The Health, Wellbeing & Environment Scrutiny Committee last met on 7 September 2023.

Date of next meeting: 27 November 2023.

#### 11. South Staffordshire District Council

South Staffordshire Councils Wellbeing Select Committee last met on 6th June 2023. An update was provided to the last meeting.

#### Date of next meeting Tuesday 10<sup>th</sup> October 2023

To consider:



- Performance update South Staffordshire Community Safety Partnership
- Air Quality
- Healthwatch Staffordshire update

#### 12. Stafford Borough Council

Stafford Borough Council's Community Wellbeing Scrutiny Committee last met on 5 September 2023.

#### 13. Staffordshire Moorlands District Council

The Health & Wellbeing Committee met on 27 September 2023.

Members considered a presentation on the Move More Strategy and the Chair advised the Committee that a special meeting was being arranged at the County Council in relation to the West Midlands Ambulance Service. He would provide feedback to members following this meeting.

The next meeting is scheduled to take place in December 2023. It was suggested that representatives from Better Health Staffordshire be invited to this meeting.

#### 14. Tamworth Borough Council

The Committee met on 21 September 2023, however had no specific health related items.

Date of next meeting: 17 October 2023

#### Link to Strategic Plan

Scrutiny work programmes are aligned to the ambitions and delivery of the principles, priorities, and outcomes of the Staffordshire Corporate Plan.

#### Link to Other Overview and Scrutiny Activity

The update reports provide overview of scrutiny activity across Borough and Districts, shares good practice, and highlights emerging concerns which inform work programmes for Health and Care Overview and Scrutiny Committees across Staffordshire.

#### List of Background Documents/Appendices:



Council	District/ Borough Representative on CC	County Council Representative on DC/BC
Cannock Chase	Cllr David Williams	Cllr Phil Hewitt
East Staffordshire	Cllr Monica Holton	Cllr Philip Atkins
Lichfield	Cllr Leona Leung	Cllr Janice Sylvester-Hall
Newcastle	Cllr Ian Wilkes	Cllr Ian Wilkes
South Staffordshire	Cllr Val Chapman	Cllr Kath Perry
Stafford BC	Cllr Ann Edgeller	Cllr Ann Edgeller
Staffordshire	Cllr John jones	Cllr Keith Flunder
Moorlands		
Tamworth	Cllr Chris Bain	Cllr Thomas Jay

# **Contact Details**

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# Health and Care Overview and Scrutiny Committee Work Programme 2023/24

This document sets out the work programme for the Health and Care Overview and Scrutiny Committee for 2023/24.

The Health and Care Overview and Scrutiny Committee is responsible for:

- Scrutiny of matters relating to the planning, provision and operation of health services in the Authority's area, including public health, in accordance with regulations made under the Health and Social Care Act 2001 and subsequent guidance.
- Scrutiny of the Council's work to achieve its priorities that Staffordshire is a place where people live longer, healthier and fulfilling lives and In Staffordshire's communities people are able to live independent and safe lives, supported where this is required (adults).

#### Link to Council's Strategic Plan Outcomes and Priorities

- Inspire healthy, independent living
- Support more families and children to look after themselves, stay safe and well

We review our work programme at every meeting. Our focus in scrutiny is on tangible outcomes for the residents of Staffordshire, to use the data provided and members experience to debate and question the evidence, to provide assurance in what is being done and reassurance that matters within the health and care system are moving in the right direction. Scrutiny of an issue may result in recommendations for NHS organisations in the county, the County Council and for other organisations.

To review our meetings they can be found on this link: Browse meetings - Health and Care Overview and Scrutiny Committee

#### **Councillor Jeremy Pert**

**Chairman of the Health and Care Overview and Scrutiny Committee** 

Date	Торіс	Background/ Basis	Actions/ Outcomes	
Monday 12 June 2023 at 10.00 am Completed	<ul> <li>Primary Care Dental Overview</li> <li>Primary Care Access</li> <li>Primary Care Estate</li> <li>Work Programme 2023-24</li> </ul>	Reports as identified in the Work Programme Annual update of Work Programme	<ol> <li>The Committee receive a briefing on the delivery of orthodontics in Staffordshire. This will form a part of the next dentistry update at Committee.</li> <li>The Committee wrote to the ICB and Keele university to support a dental school at Keele University.</li> <li>The Committee receive a briefing note on the model for assessing new development sites.</li> <li>The Committee congratulated Midlands Partnership Foundation Trust on gaining University Hospital status.</li> <li>The membership of the Women's Health Strategy Working Group:         <ul> <li>a. Janice Silvester-Hall</li> <li>b. Ann Edgeller</li> <li>c. Monica Holton</li> <li>d. Jill Hood</li> <li>e. Val Chapman</li> </ul> </li> <li>The membership of the Integrated Care Hubs Working Group be updated outside of the meeting and be reported back at the next meeting.</li> <li>a. Richard Cox</li> <li>b. John Jones (SMDC)</li> <li>c. Barbara Hughes (SMDC)</li> <li>d. Lyn Swindlehurst (SMDC)</li> <li>e. Linda Malyon (SMDC)</li> <li>f. Dave Jones (NULBC)</li> <li>g. Ian Wilkes (NULBC)</li> <li>h. Rupert Adcock (NULBC)</li> <li>i. Gill Heesom (NULBC)</li> </ol>	
Thursday 6 July 2023 at 4:30pm Health and Care Training Session	<ul> <li>Health and Care training delivered by Centre for Governance and Scrutiny</li> </ul>		<ol> <li>Centre for Governance and Scrutiny provided a training session for Health and Care O&amp;S on upcoming changes in legislation.</li> </ol>	V

Health and Care Overview and Scrutiny Committee Work Programme 2023/24

Monday 24 July 2023 at 10.00 am Completed	<ul> <li>ICP Operating Plan</li> <li>System performance</li> <li>System Pressures</li> <li>Update on Elective care performance and recovery</li> <li>SSOT ICS People, Culture and Inclusion Annual Report and update.</li> </ul>		<ol> <li>8. The Committee received the ICP Operating Plan and have met with Healthwatch in their scoping of a deep dive into primary care and to review the patients journey for the frail and elderly into the care system.</li> <li>9. A breakdown of Cat 2 Ambulance response times was shared with the Committee.</li> <li>10.The full winter plan (2023/24) will be shared with the Committee when completed.</li> </ol>	<ul> <li>✓</li> <li>✓</li> </ul>
Monday 31 July 2023 Scheduled	<ul> <li>Introduction to Adult Social Care Assurance</li> </ul>	To review Social Care Services and provide assurance	<ul> <li>11.The Working Group has been established and the initial scoping meeting has taken place. The Membership is:</li> <li>a. Jeremy Pert, Richard Cox, Phil Hewitt, Jill Hood, Bernard Peters, Ann Edgeller &amp; Kath Perry.</li> </ul>	<b>v</b>
Thursday 24 August 2023	<ul> <li>Member workshop to assess access to information on Social Care</li> </ul>		12.The Workshop took place, and a follow up session will take place on 7 September.	V
Monday 11 September 2023 at 10.00 am Scheduled	<ul> <li>Joint mental health &amp; mental wellbeing strategy: "good mental health in Staffordshire" 2023/28 action plan.</li> <li>MPFT &amp; NSCHT – Mental Health performance</li> </ul>	To review the Mental Health action plan and performance.	<ul> <li>13.The Cabinet Member for Health and Care has been requested for an executive response to the following recommendations by 10 November 2023.</li> <li>a. the Cabinet Member for Health and Care share the Good Mental Health in Staffordshire Strategy 2023-2028 and the action plan with partner organisations when available.</li> <li>b. the Cabinet Member for Health and Care as part of the consultation on Adult Social Care and Staffordshire Connects give consideration to expanding the Staffordshire Connects to include a section for children and young people.</li> <li>14. The Committee receive a list of the voluntary sector schemes which had been funded by the NHS.</li> </ul>	
Monday 16 October 2023 at 10:00 am Scheduled	<ul> <li>SSOT ICS People/ Workforce</li> <li>Staffordshire's Social Care Workforce: Adult Social Care Update</li> <li>Freedom to speak up</li> </ul>			
Monday 13 November 2023 at 14.00	• WMAS			

Scheduled		
Monday 27 November 2023 at 10.00 am Scheduled	<ul> <li>Social Prescribing</li> <li>Maternity Services</li> <li>ICB 2<sup>nd</sup> Quarter Performance Report</li> <li>1<sup>st</sup> year of life (Public Health).</li> <li>Review impact on investment on social prescribing</li> </ul>	
Monday 29 January 2024 at 10.00 am Scheduled	<ul> <li>Primary Care Update</li> <li>Dentistry and Orthodontics</li> <li>Mental Health in Schools update.</li> </ul>	
Site visit to MPFT & NSCHT TBC T	<ul> <li>MPFT 10:00 - 12:00</li> <li>NSCHT 14:00 - 16:00</li> <li>Site visit to view community-based services</li> </ul>	
Monday 18 March 2024 at 10:00 am Scheduled	<ul> <li>Carers Strategy</li> <li>Adult Social Care Assurance Working Group Report</li> <li>Community Mental Health (Following from Site visits to MPFT and NSCHT)</li> <li>Pre-decision to Cabinet 20 March 2024</li> </ul>	

Further and Health and Care Overview and Scrutiny work		
Briefings	•	Quality Accounts NHS Trusts
received	•	Care market
outside of	•	Healthwatch Annual Report 2022/23
Committee		
Items for	•	Impact of air pollution on health
future scrutiny	•	Impact of Long COVID
	•	Obesity and Diabetes
	•	End of Life – compassionate communities
	•	Innovation / technology

- Healthwatch Annual Report 2023/24
- Public Health Annual Report
- Public Health Dashboard
- Developing Healthier Communities updates

Membership	Borough/District Councillors
Jeremy Pert (Chair)	
Richard Cox (Vice-Chair - Overview)	Ann Edgeller (Stafford)
Ann Edgeller (Vice-Chair – Scrutiny)	David Williams (Cannock Chase)
Charlotte Atkins	Monica Holton (East Staffordshire)
Philip Atkins	Leona Leung (Lichfield)
Keith Flunder	Ian Wilkes (Newcastle-under-Lyme)
Phil Hewitt	Val Chapman (South Staffordshire)
Jill Hood	John Jones (Staffordshire Moorlands)
Thomas Jay	Chris Bain (Tamworth)
Kath Perry	
Banard Peters	
Jæice Silvester-Hall	
Ian Wilkes	
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