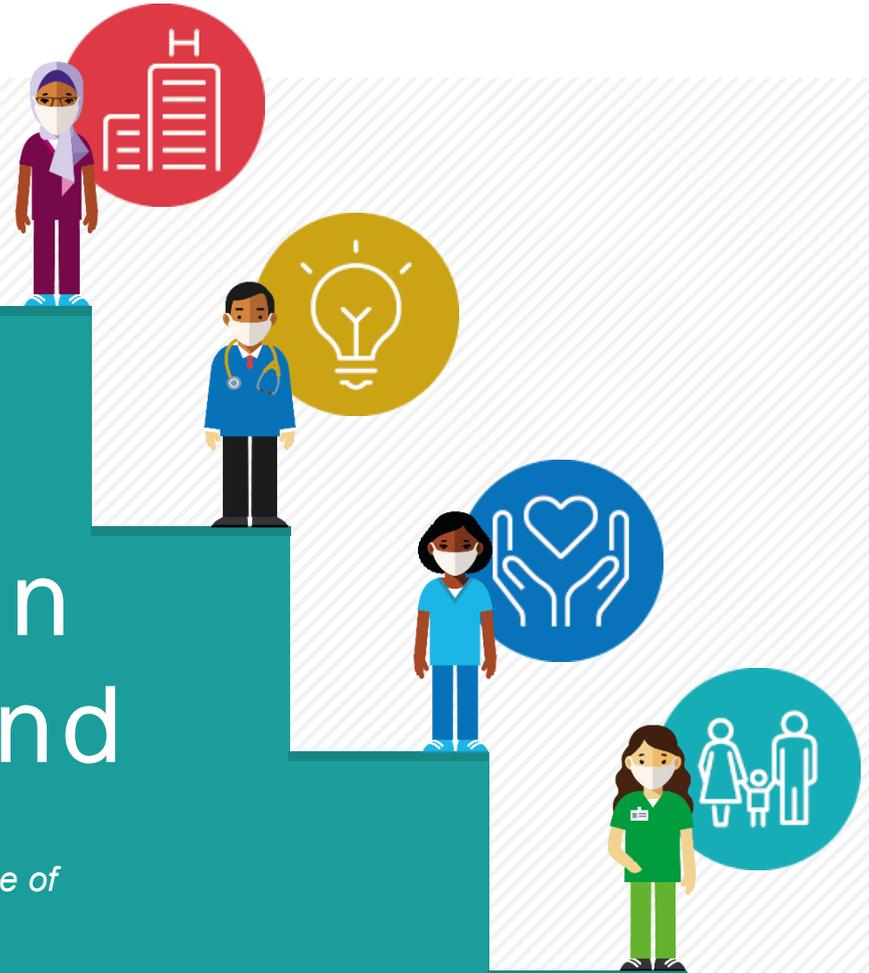


STAFFORDSHIRE AND  
STOKE-ON-TRENT

# Interim People Plan 2022-23 and Beyond

*"Our NHS is made up of 1.3 million people who care for the people of this country with skill, compassion and dedication."*



# Our Approach... an Interim Plan

Staffordshire and Stoke on Trent ICS is in the process of building our approach to delivering the National guidance for ICB People Functions to support a sustainable “One Workforce” within Health and Care. Building on our 20/21 People Promises; this document will describe where we intend to prioritise our workforce activities this year to move towards a more integrated, inclusive, supportive and accessible System approach for our People. Our priority areas will be decided based on where our activities can support the workforce supply risks in our System and also our areas of highest need from a Population Health/ reducing Health Inequalities perspective.

This document is unapologetically an interim “living plan” and it will be revised and updated following the establishment of the formal SSOT ICB. During this process we will contribute to the development of our ICS Strategic direction ensuring that Workforce outcomes are aligned to Population needs of our County as defined by Population Health and Inequalities Data, Clinical Leaders and our Citizens. Assurance of our plans will be carried out in the “One Workforce, People, Culture and Inclusion Committee,” with the input of our colleagues within NHSEI and Health Education England (HEE), which is a key committee of the ICB Board. We will monitor the progress of our programmes bi-monthly at the Programme Groups. We will track our progress via our own “collective measures of success” (which include specific locally developed metrics, outcomes and products) and also adherence to national/regional metrics devolved from our partners in NHSEI and HEE. We will work in close partnership with our regulators (NHSEI) and Staffside partners to ensure we achieve our goals.



*“ Our workforce is our greatest asset in providing high quality care for our populations, however we also recognise the significant workforce challenges we face across health and care. As we embark on the exciting journey of developing Integrated Care Systems, we know that we need to harness the collective effort of our workforce to meet the demands we face, having greater impact on what we can achieve together, reducing duplication and working across boundaries. We are therefore determined to work as “One Workforce” where “operating as a whole is greater than the sum of the parts.”*

**Shokat Lal, Chair of the ICS People, Culture and Inclusion Committee**

# Staffordshire and Stoke-on-Trent's “One Workforce”

The aim of this plan is to support the creation of a “One Workforce” which will deliver the SSOT vision of making Staffordshire and Stoke on Trent the healthiest place to live and work.” To enable this, the ICS will act as an “**Anchor Employer**” to set the pillars within which we will approach the employment of our health and care workforce; as well as our commitment to supporting the wider community in their health and wellbeing.

Our ICS Partners consists of the workforce within NHS Trusts, Local Authority, Social Care, Primary Care, Voluntary and independent sector staff in a wide variety of roles. We plan to develop workforce schemes which align to the individual organisational priorities of these partners, as well as delivering our overall ICS Strategic Goals. The way we will do this will develop over the coming years as the ICS matures, our specific shared objectives are clarified and our partnership relationships solidify.

Our aim is to work with these Partners to have more staff, **working together better** in a compassionate and inclusive culture - and help make our local area a better place to live and work. We will strive to affect positive change across the whole workforce; allowing collaboration, opportunities and increasing our overall staffing numbers. To do this we will prioritise widening participation in groups which suffer from health inequalities by creating employment (in line with our ICS Partner's staffing gaps), volunteering and apprenticeship opportunities. This will help to develop a broader **talent pipeline**, and have a **positive direct impact on communities', families' and individuals' lives**. By doing this, we will ensure that our workforce reflects our population and has the technology and digital means to connect across sectors to improve population health and outcomes.

## How do we get to one workforce?

**Engage and involve the workforce in designing** how we achieve, supported by digital platforms, provide tools and opportunities for them to work with their peers to redesign ways of working, rotational roles, cross sector working



# Our ICS Leadership Compact



## Trust

- We will be **dependable**: we will do what we say we will do and when we can't, we will explain to others why not
- We will act with **integrity** and **consistency**, working in the interests of the population that we serve
- We will be willing to take a **leap of faith** because we trust that partners will support us when we are in a more exposed position.



## Courage

- We will be **ambitious** and willing to **do something different** to improve health and care for the local population
- We will be willing to make **difficult decisions** and take proportionate risks for the benefit of the population
- We will be open to **changing course** if required
- We will **speak out** about inappropriate behaviour that goes against our compact.



## Openness & Honesty

- We will be **open** and **honest** about what we can and cannot do
- We will create a **psychologically safe environment** where people feel that they can raise thoughts and concerns without fear of negative consequences
- Where there is disagreement, we will be prepared to **concede** a little to reach a consensus.



## Leading by Example

- We will **lead with conviction** and be ambassadors of our shared ICS vision
- We will be committed to **playing our part** in delivering the ICS vision
- We will live our **shared values** and agreed leadership behaviours
- We will positively promote **collaborative working** across our organisations.



## Respects

- We will be **inclusive** and encourage all partners to contribute and express their opinions
- We will **listen actively** to others, without jumping to conclusions based on assumptions
- We will take the time to **understand** others' points of view and **empathise** with their position
- We will respect and uphold **collective decisions** made.



## Kindness & Compassions

- We will show **kindness, empathy** and **understanding** towards others
- We will **speak kindly** of each other
- We will support each other and seek to solve problems **collectively**
- We will challenge each other **constructively** and with **compassion**.



## System First

- We will put **organisational loyalty and imperatives** to one side for the benefit of the population we serve
- We will spend the Staffordshire & Stoke-on-Trent pound **together** and **once**
- We will develop, agree and uphold a **collective** and **consistent** narrative
- We will present a **united front** to regulators.

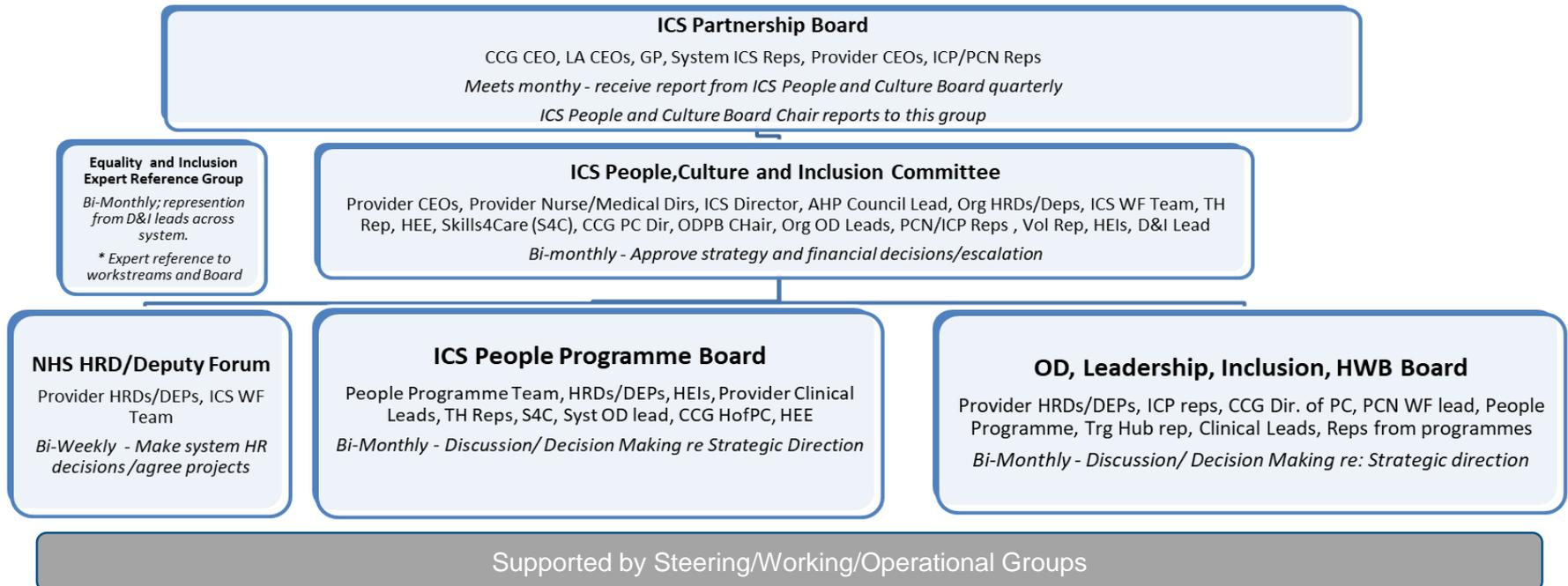


## Looking Forward

- We will focus on **what is possible** going forwards, and not allow the past to dictate the future
- We will be **open-minded** and willing to consider new ideas and suggestions
- We will show a willingness to **change the status quo** and demonstrate a positive 'can do' attitude
- We will be open to **conflict resolution**.

# People, Culture & Inclusion Governance Structure

- The projects and overall deliverables within the programme will be assured via the specific outcome measures (e.g. metrics, KPIS, qualitative data) under the governance structure below
- The outcome measures and benefits realisation will be determined at the start of each project, with continual review and evaluation as milestones are met and transformation programmes embedded
- Performance indicators will be developed, agreed and evaluated in partnership with provider organisations/sectors
- The Interim People Plan is a living document that will morph as the ICS develops. Each iteration will be taken to Partner Organisation Boards to ensure there is system buy-in and support. Where there are significant financial outlays required, or fundamental changes in workforce practice; individual projects will be cited to individual Organisation Executives/ Boards
- The plan will be formally reviewed and updated every 6 months



# Covid-19 Learning & Achievements 2 Years On...

## What advancements have been made as a System?

### New Ways/Flexible Working

- Led Midlands National Reservist pilots, model now approved for roll-out
- Overseas nurses recruitment continued, trialling a new joined up approach to future cohorts
- Flexible / mobile working models grow
- ICS Retention programme kick off
- Continued staff mobilisation through Workforce Cell



### Identified/Supported New Training Needs

- Leadership to manage impact of Covid
- Digital training needs/guidance/support
- Expanding clinical staff skills to support understaffed areas
- Partnership working with education providers
- Staffordshire Training Hub supported the development of general practice staff



### Adapting Roles: Sharing Skills & Resources

- Student nurses/doctors undertaking paid placements
- Conversion & training of vaccination staff to support clinical capacity (e.g. HCA, Care Homes)
- Redeployment of 'Corporate' Nurses, AHPs, and admin to support surge



### Staff Health & Wellbeing

- Launch of ICS Staff Psychological & Wellbeing Hub inc: support & resources, shared across sectors; Psychological & physical initiatives, guidance & support
- Supporting At Risk Staff groups



- Working with partners across the system to support redeployment of staff inc CCG, MLCSU, CCU, Private
- Developing new plans/initiatives as a result of Covid-19 and vaccines
- New to Care Home Care and Care Reserves campaigns – NHS & LA



### Partnership & Collaborative Working

### Digital & Virtual Innovation

- New systems, software & devices
- Remote working/video consultations
- Virtual training/meetings/conferences
- Digital readiness assessment underway, to inform ICS Digital Strategy



# Staffordshire and Stoke on Trent ICS Context

## SSOT Workforce Data (Feb 22)

Staffordshire and Stoke-on-Trent has a Population of 1.1 million



## NHS Trusts (SC SOON)

11.14%  
Vacancy Rate

Target 8-12%

11.12%  
Turnover Rate

Target 8-12%

5.72%  
Annual  
Absence Rate

Target 4.5%

Substantive Staff Group	WTE Mar22
Registered Nursing	5,188.22
Admin & Estates	3,163.67
Medical & Dental	1,472.15
AHP	1,105.05

## Key Workforce Risks

- Workforce Supply/ Ageing Workforce
- Health and Wellbeing ➔ Burnout ➔ Turnover
- Capacity of the System to work in Collaboration
- Changes to NHS Pension



**Social Care:** Social Workers (Children and Adults), Home Care Workers, Care Home Nurses

**NHS:** Nursing, Therapies, Histopathology, MH acute Nursing, Specialist Medical roles

**Primary Care :** GPNs, GPs

## SSOT ICS Vision



**“Working to make Staffordshire and Stoke on Trent the healthiest places to Live and Work.”**

- Improve outcomes in population health and healthcare
- Tackling inequalities in outcomes, experience and access
- Enhancing productivity and value for money
- Helping the NHS support broader social and economic development

## The Money

- £3.1 Billion overall spend
- 0.5% activity increase expected
- Cost increase up to 1%



Challenge to meet overall £200 million deficit

# OUR ICS CONTEXT AND SSOT PRIORITY AREAS

# OUR PEOPLE ENABLERS

## Health Inequalities in SSOT

- We have one of the largest gaps in life/healthy life expectancy in the Region
- SOT is the 14<sup>th</sup> most deprived local authority in England
- 8.8% of Staffs and 17.8% of SOT identify as non-white British
- 50%+ people have 2 long term conditions
- 50% people over 65 have some degree of frailty
- We have higher than national average numbers of citizens with obesity, diabetes, strokes, heart disease, deaths from cancer under 75 years
- Higher than average infant mortality and smoking during pregnancy
- Significant Mental Health needs in all ages
- Loneliness and isolation

## Community Engagement

- Commitment to engaging service users and citizens
- Reaching out to our population to support the development of our people schemes
- Link into System-wide observatory of local intelligence which identifies HIs
- Link with Local Equality Advisory Forum and Communities2gether
- Work closely with education providers (schools, colleges, HEIs) to develop solutions based on local need

## “Someone like me”

- Our Widening Participation activities focused directly on areas of specific need as identified by HI data and Community Engagement
- Creating a more inclusive culture within our own organisations to support a system-wide cultural shift, challenging perceptions, educating and providing personal insight, in order for people to better recognise, identify and challenge inequalities.
- Creating an environment where staff voices influence through Trust and System-wide staff networks creating change and raising awareness of inequalities

## How the ICS is already tackling Health Inequalities

- Creating educational opportunities and care closer to home
- Creating jobs, development opportunities that are accessible to the demographics of our population:
- Community Champions
- Specific programmes to support increased knowledge of HI (using population health) Vaccine inequalities, PCN approaches to neighbourhood health inequalities, digitally enable care provision, prevention and protect the most vulnerable from COVID-19 and restore services.
- Our Widening Participation activities focused directly on areas of specific need as identified by HI data and Community Engagement
- Creating a more inclusive culture within our own organisations to support a system-wide cultural shift, challenging perceptions, educating and providing personal insight, in order for people to better recognise, identify and challenge inequalities.
- Creating an environment where staff voices influence through Trust and System-wide staff networks creating change and raising awareness of inequalities

## ICS People Approach and Place Based Working

- People Function established to enable the workforce elements of the ICS Strategy **delivering the 10 ICS People Function Domains.**
- Supporting workforce planning, development and training at PLACE level; engaging with local clinical leaders/citizens to develop specialised solutions
- Engaging in Provider Collaborations to enhance workforce productivity and experience; across organisational/System boundaries
- Ensuring workforce efficiency by reviewing and developing universal solutions to transaction functions
- ICS-wide OD, Leadership, Inclusion and Staff Health and Wellbeing approaches to support ICS transition and cultural transformation

## Sustainability

- Carbon Zero by 2030
- Education for workforce
- Reduction of travel/waste of resource

## Digital

- People Function programmes supporting the delivery of the Digital Vision
- Digital Leadership module within system-wide development programmes
- “Empowered Patients
- Digitised Care
- Population Health
- Infrastructure and Service
- Capability and Innovation
- Invisible Boundaries”



# “One Workforce”

## ICS People Plan 10 Domains

**1** Supporting the health & wellbeing of all staff



**6** Educating, training & developing people & managing talent



**2** Growing the workforce for the future & enabling adequate workforce supply



**7** Driving & supporting broader social and economic development



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



**8** Transforming people services & supporting the people profession



**4** Valuing and supporting leadership at all levels, and lifelong learning



**9** Leading coordinated workforce planning & intelligence



**5** Leading workforce transformation and new ways of working



**10** Supporting system design & development



# Looking after our people

## Supporting the health & wellbeing of all staff



### What we've achieved...

HWB steering group supports System wide governance of this programme | Launched an ICS-wide, clinically-led staff psychological referral hub, integrated into existing support and supplemented by development of an ICS-wide Health & Wellbeing offer at various levels of intensity depending on need for individuals and teams | Established staff equality networks for Race, Disability and LGBT+ | The Disability network supported the development of the Inclusion school | Men's health network and Menopause Matters groups | Recruitment of ICS Retention Coordinators | Regional Covid Vaccination Workforce Retention Programme lead held by SSOT ICS so wider learning can be shared locally

### In Year Delivery

- Development and sign off of an ICS wide Staff Health and Wellbeing Strategy.
- Further promotion and outreach of staff health and wellbeing support available.
- System wide Health and Wellbeing event.
- Scope for Growth Conversations supporting the Health and Wellbeing of our workforce.
- Promoting the 'Looking after your team and Looking after you too programmes' in primary care.
- Support and training offered to non-clinical practice staff in Well Being, as well as clinical to equip and empower.
- Develop offers to Retain the workforce at system level e.g. People Hub & Reserves, career conversations, flexible working options and support.
- Retention Coordinators in place and scoping System needs
- Development of an ICS wide Wellbeing Ambassador approach

### Future Plans...

- ICS workforce and Psychological support team work closely together to support development of new Wellbeing initiatives linked to evidence.
- Annual ICS Well Being Events
- Well Being Champions across the ICS = community of practice
- Broader Psychological support offer across ICS inc Social Care & Primary Care
- Develop further Wellbeing offers linked to Population Health Data
- Introduction of Wellbeing Ambassadors in Primary Care
- Implement learning from SSOT Regional Wellbeing project within SSOT
- Research good practice in private sector to improve the employment cycle
- ICS Retention programme delivery continues, evaluation undertaken and recommendations considered for next stage of the programme.
- Focus on Retirement and options to return, with schemes to support registered and unregistered to remain in the system
- Test 'Try before you buy' schemes inc. work experience, shadowing and job swaps
- Deep dives into staff experience, reward and recognition offers

### How we will measure success...

- Triangulate and monitor people metrics to provide intelligence and inform programmes of work to address; sickness absence, staff survey, HWB Hub access, pulse surveys. Collection of sickness information in non-NHS and Local Authority
- ICS Retention programme delivery, informed by metrics and insights review.
- Commence National Flex NHS programme locally – scale & spread.
- Continued feedback and pulse check at network meetings and each network has a Board level sponsor who will escalate any issues reported.
- System wide staff survey results analysis.



### What we've achieved...

System Workforce Cell and People Hub Team well established, 80+ requests to mobilise and deploy staff processed | Recruitment and deployment of over 1200 staff to support vaccination programme delivery | Continued delivery of ICS Redeployment Service | Designed and delivered a number of innovative system People Hub recruitment campaigns to support surge (community hospital) and Home Care (in partnership with Stoke CC) | Agreement on capped system bank escalation rates | SSOT Reserves | Home Care (new to care) campaign in partnership with SOT CC | Establishment of the ICS AHP Faculty, The Workforce Race and Inclusion Strategy (WREI) for Midlands and for ICS includes High Impact actions for Inclusive recruitment | Recruitment of ARRS Facilitators to support the ARRS workforce and PCNs | GP Fellowship programme continued

### In Year Delivery

- 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
- Further recruitment to the System People Hub to support System wide (health and care) as required
- More Health and Care Reserves working within SSOT
- 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
- System wide Retention Coordinators' recommendations made and action commenced
- Link up Retention planning between Health and Care to create joint outcomes
- System wide NHS Staff Survey analysis and joint plan in place
- Increased Widening Participation activity in schools/colleges; wider than Cornerstone Schools – scope joint delivery potential between Health/Care
- Launch of Virtual Work Experience programmes; Mental Health and Primary Care
- Focus on increasing access to Health and Care roles from SSOT seldom heard communities
- Cohort 4 of System Health and Care Apprenticeship
- System Pharmacy Technician Apprenticeship in partnership with Primary Care/Training Hub

### Future Plans...

- Recruitment to 'hard to fill' staffing groups at System level
- Retention activities embedded across Health and Care to reduce turnover
- System wide approach to engagement with schools/colleges; promoting all health and care careers
- Movement towards System by default approach to Contingent Workforce and ICS Collaborative Bank
- System approach to Widening Participation activities to attract seldom heard communities
- System wide Work Experience Portal; cross sector approach
- 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
- Targeted engagement work (at scale across System Partners) with wider community aligned to tackling health inequalities.
- Streamlining recruitment processes across the ICS, utilising digital platforms
- Improved staff experience via. Retention activities and OD/culture/leadership programmes.
- Virtual Work Experience programme for Social Care
- Workforce planning across clinical pathways - Case for Change, H2, Cancer, Maternity & UEC.
- Using workforce planning tools to plan at Place level.
- Implementation of the System Workforce Race and Inclusion Strategy Actions inc 3 priority areas: inclusive recruitment and building a diverse workforce, inclusive leadership, understanding and addressing local health and wellbeing inequalities throughout workforce.

### How we will measure success...

- Measurement of workforce metrics; staff in post, WRES data, turnover, system wide “new post” data.
- Workforce data informs planning and supply activity across the system, down to Place.
- Performance of the system wide workforce cell. Demonstrate future workforce planning across the sector to build new roles.
- System wide staff survey analysis; The WRES aspirational targets highlight the required representation of Black Asian and Minority Ethnic staff at Leadership level for ICB and for partner NHS organisations.



### What we've achieved...

ICS WRES Recruitment High Impact Action Plan, System Staff Networks and the EDI leads group have enabled joint learning and actions | Equality networks thrived with System Board level sponsors | Inclusion School - Journey continues: Autumn Inclusion School on Disability and Neurodiversity complete | Cultural Education Change Programme delivered to system very senior leadership | Inclusive Talent Management approaches | Joint working on development of the New Futures programme across the System | Delivery of "Ourselves as Collective & Compassionate Leaders" | Content on the Clinical & Quality Leadership Development Programme | Widening Participation Activities focused on seldom heard communities | ICS Apprenticeship recruitment and Refugee / Seldom heard Community

Project

### In Year Delivery

- Sustained focus on inclusion to influence leadership and development of the System
- ICS Workforce Dashboard to include WRES information
- System Wide Reciprocal Mentoring - Preparing for launch early in 2022-23 using NHS Leadership Academy Reciprocal Mentoring Programme framework.
- Continue Inclusion School journey
- Staffordshire and Stoke on Trent Stepping Up – Cohort 4
- Scope 4 Growth Talent Management Career Conversations.
- 'Comfortable being Uncomfortable' cultural education programme roll-out being extended to more leaders and teams.
- Nominated Clinical Director EDI Champion (Staffs Training Hub)
- Work of Out Reach Project Manager and Retention Coordinators.
- Widening participation from seldom heard groups - ICS Outreach Project in supporting Refugee community into roles with our sector
- System wide inclusive recruitment
- New Futures Diverse Leadership Programme
- WDES Differently Abled Buddy Scheme (Provider pilot)

### Future Plans...

- Leadership OD and Inclusion programme and the Workforce programme to further inform the development of an inclusive culture across the ICS.
- Cultural Education Programme wider System roll out
- Inclusion School Journey to continue.
- Stepping Up/New Futures alumni support, to include ongoing development opportunities and tracking of career progression.
- Reciprocal Mentoring evaluation and learning lessons undertaken and acted upon across system.
- Extend support to non-NHS system partners on developing inclusion.
- Development of the NHS Rainbow Badge programme on a system-basis, including extension of principles to non-NHS partners.
- HPS cohort 2 – increasing participation from those from ethically diverse communities
- Triangulation of system WRES and WDES data with the current and development of EDI System Metrics
- Diverse characteristics are proportionally represented across the ICS

### How we will measure success...

- Workforce Metric info re WRES & WDES data & EDS, turnover, sickness, recruitment. Collection of sickness information in non-NHS and Local Authority
- System wide staff survey and pulse surveys.
- Using employee engagement scores to measure delivery of the NHS People Promise and focus on action for improvement.
- Feedback from System Staff Networks .



### What we've achieved...

ICP North Leadership Development Pilot SYSTEM CONNECTS programme, 120 staff, 2 Trusts, system wide potential: Platinum & Gold - Masterclasses and cohort sessions underway | Scope for Growth - career conversations: SSOT confirmed as pilot site | Leadership Pathway has been drafted for entry level roles | Staffs Uni joint project to ensure the college is better preparing young people with the skills needed for the future | HPS Cohort 1 continues with completing due for Q1 2022 and plans for Cohort 2 to launch Q1 2022 | System Connects programme reaching circa 120 colleagues | Delivery of "Ourselves as Collective & Compassionate Leaders" content on the Clinical & Quality Leadership Development Programme delivered to Cohort 2

### In Year Delivery

- PbP North Leadership Development Programme Systems Connects 120 people, 2 Trusts, system wide potential: Platinum & 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
- Training Hub roll-out of leadership courses and CPD across General Practice, informed by practice-led TNA e.g. Practice Management, Leadership Series.
- 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.
- Completion of Systems Connects Gold and Platinum Leadership Programme.
- New Futures diverse leadership programme delivered
- Talent pipeline/ leadership development activities within Social Care in partnership with Skills for Care

### Future Plans...

- Expansion of our Leadership Programme for Band 6 professionals following the success of the Gold & Platinum System to enable a passport approach to development ensuring an inclusive offer more widely.
- Collaboration has commenced with regional stakeholders including UHNM, MPFT, Derby & Burton Trusts on the system New Futures programme (equivalent Stepping Up) ready for launch March 2022.
- 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
- HPS Cohort 2 – 2 year programme to commenced with a Buddy model with STW ICS.
- Scope for Growth Career conversation tool to form part of all Inclusive talent leadership programmes.
- 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

### How we will measure success...

- Increased number of Ethnic Diverse colleagues in leadership positions.
- Increased numbers of SSOT colleagues taking part in the various leadership programmes/events.
- Career tracking for Leadership courses Alumni.
- System Staff Survey results.
- Development and embedding of products such as System wide talent development tools.



### What we've achieved...

Led and developed Midlands Reservist Pilots | Implemented SSOT Reservist and People Hub contingent workforce models inc. three flexible offers | Currently 645 workers registered with the People Hub | Designed and commenced recruitment of contingent workforce in partnership with Staffordshire and Stoke on Trent Councils | System wide development and leadership opportunities | System Connects Programme allowing collaboration across Trusts | Enhancing staff experience through Health and Wellbeing activities at System level

### In Year Delivery

- Increase People Hub resource /scope of practice through **joint** campaigns with wider system partners and continue to develop training packages & pastoral offer.
- Further develop ICS Reserve model inc. emergency 'Step Forward' workforce.
- Contribute towards and inform the ICS Digital assessment from a workforce perspective. Develop refreshed
- Digital People Strategy.
- Refresh of ICS People Programme website.
- Pilot Digital Staff Passport at system level with People Hub.
- Commence ICS People APP development.
- Scope use of platforms to support system staff sharing e.g. Allocate/Patchwork, NHS Jobs3.
- Lead System-wide Workforce Planning to support clinical transformation pathways e.g. Cancer, Maternity, Urgent Care and wider Staffordshire/Stoke on Trent Case for Change.
- Lead on Workforce components of operational and strategic planning at System level.
- Continue the development of a System wide workforce dashboard and performance metrics.
- Outreach work to ensure our opportunities are tailored to local workforce and deliver the needs of our population

### Future Plans...

- Launch of ICS People APP.
- Implement Digital Staff Passport.
- 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 e-learning packages.
- Pilot Reserves 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.
- 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

### How we will measure success...

- New roles designed and implemented across the system.
- New career pathways designed.
- Development of products e.g. Digital Leadership programme/job descriptions.
- Workforce plans at System level.



### What we've achieved...

Supported HEE funding assignment/delivery inc TNA, system wide apprentices, clinical supervision, cancer, maternity, wellbeing enabler project | Successfully delivered two system apprenticeship cohorts and launched third with focus on Ethnic Diverse and seldom heard groups | Successfully shared £449k Levy funds across the system in 2021 to support 80 apprenticeships in Care Home, Hospices and Home Care providers | System coaching offer through the West Midlands Employers Coaching and Mentoring Pool established for the SSOT system | Talent Steering Group overseeing succession pathways for system and collectively developing an approach where all partner organisations can collaborate to provide development offers across the system for all staff at all levels | Inclusive Talent Management process launched Jan 22 | ICS pilot site for Scope for Growth

### In Year Delivery

- Refresh and launch of ICS System Wide Education, training and development Group. Partners inc. NHS, LA, Social Care, Voluntary, Staffs Training Hub, CCG, Further Education & Higher Education providers.
- Working more closely with Education Providers
- Gather higher and further education and destination data and intelligence.
- 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
- Delivery of cohort 3 of System Wide Graduate Apprenticeship.
- System wide Pharmacy Technician Apprenticeship scheme development and launch in partnership with Staffs Training Hub.
- Commence planning for ICS Career Pathway progression e.g. Nurse Associates, Trainee Nurse Associates, Degree Apprenticeship, and pathway experience at System Level
- Continued delivery of System wide Apprenticeship Levy Share
- Expansion of Coaching Pool, drive to recruit and train coaches from a diverse background eg: stepping up
- GP-S coaches in Primary Care
- General Practice Pathway to progress and retain using apprenticeships
- Developing leadership offers within Social Care to support retention and good staff experience

### Future Plans...

- Develop new courses with Higher Education partners which respond to system need and workforce planning indications, informed by national and local drivers
- Review system wide training delivery to find collaborative solution.
- Develop further Health and Care work experience and information sharing opportunities for all groups
- Implement system wide Clinical Placement Expansion programme in collaboration with partners, and introduce digital platform to understand and increase capacity.
- System approach to commissioning training places and overall engagement with HEIs.
- Development of further ICS career pathways in line with system priorities, informed by workforce planning.
- Leadership Pathway designed to extend the opportunities for Leadership Development from Exec Pathway in early career potential applicants for entry level roles.
- Proposals to be discussed for developing senior leads as Career Coaches to support developmental & career conversations with high potentials and career development toolkit on the intranet
- Focus on developing an offer for Admin and clerical staff – training, career progression inc NHS, LA, Social Care, Primary Care
- Develop system training Academy (2-5 years)

### How we will measure success...

- Understanding the needs of our whole system from a training and education perspective collectively
- Delivering more training across organisational boundaries
- Understanding of and increase in clinical placement capacity



### What we've achieved...

Commenced Asylum and refugee project and recruited an ICS Outreach Advisor | Involvement in ICS Sustainability Planning group | First Traineeship programme cohort commenced successfully | Supported two Step Into Work cohorts | HEE Trailblazer GP Fellows employed - specific focus on deprivation, focus on health and third sector organisations e.g. homelessness, drug and alcohol services | Working with local voluntary sector initiatives to encourage diverse workforce and widening participation projects i.e. employing/work experience with sensory loss communities | Working with diverse community groups (Communities 2gether group) looking for initiatives for encouraging employment and training uptake from these communities | Working with schools and Higher Education to identify local initiatives to support education and employment for people from recognised deprivation index communities | Joint project with Staffs Uni to ensure the college is better preparing young people with the skills needed for the future | Draft Leadership Pathway has been designed to extend the opportunities for Leadership Development at System Level | System wide approaches to Work Experience, Career pathways and volunteering inc. virtual offer

### In Year Delivery

- ICS Widening Participation Strategy agreed and action plan implemented.
- Continue support to workplace learning schemes e.g Step into work, Princes Trust, Traineeships, T Levels, Staffordshire Cornerstone Employer.
- Virtual Work Experience
- Offering job opportunities to disadvantaged or seldom heard communities including Refugee/ Out Reach project.
- Wellbeing Enabler project – linked to inequalities & Mental health priorities.
- Development of workforce specific actions to support Green NHS Sustainability Plan.
- 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.
- System wide NHS Staff Survey Action Planning

### Future Plans...

- Working with education institutions to develop the local future workforce across the health and care system.
- Further engagement and involvement with wider seldom heard communities to promote jobs in our system
- Understand service user experience and staff understanding of health inequalities and impact on population health and access to services/information.
- 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.
- System wide approaches to Widening Participation embedded and joint activities in place.
- System Career Pathways (including Apprenticeships) with various starting points to allow participation (Traineeships)
- Virtual Work Experience Portal
- Digital enablers e.g. APP/Passport
- Robust work directly within Communities to identify how to create opportunities for them
- Appointment of Ambassadors to promote careers in health and care.
- More recruits from seldom heard communities in all NHS Trusts, Local Authorities and ICS People Programmes

### How we will measure success...

- Recruitment from “disadvantaged communities”.
- Wider scope of work experience up take.



### What we've achieved...

System forum of People Directors (NHS) in operation for some time | Best practice sharing via system groups | ICS People, Culture and Inclusion Board well established with programme boards bringing people professionals together to collaborate on key system people matters | Career development conversations taking place with OD Talent Bank to identify gaps to inform future careers | Partnership/collaboration in place with NHS Trusts to review/scope the potential for a transformed approach to the delivery of the following services at System level; Occupational Health, Workforce Planning and Intelligence and Recruitment | SSOT System-wide OD diagnostic completed system wide OD diagnostic completed

### In Year Delivery

- 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 ICS - explore options for delivering at scale.
  - Workforce Planning/Information.
  - ICS-wide planning and reporting functions scoped.
  - Implementation of PCN organisational development plans which supports clinical and managerial leadership support including coaching, workshops, masterclasses and diagnostic work.
  - Scope clinical placement provision within the System

### Future Plans...

- Consider Provider Collaboration and delivering at scale in wider People functions. E.g. Clinical Placements
- 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.
- Deliver benefits realisation of 1 OH Provider.
- Introduce RPA processes and maximise efficiencies through ICS recruitment processes.
- ICS workforce planning and reporting functions established

### How we will measure success...

- Reduce variation in service levels.
- Reduce variation in outcomes.
- Decrease multiple providers and therefore contracts and contract management.

## Leading coordinated workforce planning & intelligence



### What we've achieved...

Development and submission of the system Operational plan for 2021-22 across NHS and Primary Care | Supporting Clinical workforce planning across the system including vaccination programme, UEC, Mental Health | ICS People Metrics & Dashboard developed inc all NHS Trust | Workforce Data sharing agreement in place for some time | Agreement on capped system bank escalation rates | System wide Equality Impact Assessments in place for recruitment and staff transition | Development of PCN ARRS workforce plans | Collaborative development of a 21/22 GPN Strategy (CCG, Training Hub and ICS) | Increased workforce planning skill / resource at system level with the appointment of additional workforce planning managers

### In Year Delivery

- ICS People Metrics & Dashboard to inc Social Care & Primary Care Workforce planning across clinical pathways - Case for Change, Operational, Cancer, Maternity & UEC.
- Using ICS level data for planning inc workforce, population and health inequalities.
- Utilise the STH Primary Care TNA data + Focus Groups to assess workforce risks including retention, retirement.
- Workforce Cell delivery in response to System Pressures
- Performance management of agreed ICS NHS Workforce Metrics
- Delivery of Strategic Workforce Planning in relation to Operational Plans
- More Workforce Planning expertise at System level
- Use population health data and demographics to workforce plan identify areas to focus recruitment and widening participation activities in Health and Care
- Support social care managers to complete WF national minimum data set
- Social Care clear on projected future needs of RGNs and plan to achieve this

### Future Plans...

- Developing overarching dashboards 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 e.g. Staff Experience, Workforce Sustainability Dashboards.
- Ensure project outcomes are recorded and impact evaluated to allow us to prioritise the work at system level, creating value for money
- 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 Place level.
- Collaboration/streamline Agency/Bank rates at System level.
- Dashboard and metric development and assurance at System level.
- Commence working on a Workforce planning tool across whole sector.
- Increased workforce planning capability and capacity across the System via training/mentoring/community of practice.
- Continue workforce planning across clinical pathways - Case for Change, H2, Cancer, Maternity & UEC.
- More staff working in Health and Care from seldom heard communities.

### How we will measure success...

- Live workforce plans in place which clearly identify our workforce gaps and actions plans to address with innovative solutions.
- System wide workforce picture including NHS, Social Care, Primary Care and voluntary sector.



### What we've achieved...

Well established Shadow ICS Board with full Provider engagement, anointment of ICS Board Chair, following national recruitment processes | Appointment to Acting ICS Chief Executive role | Appointment to 5 Non-Executive Director roles including Chair of the System People, Culture and Inclusion Board (to transition to Committee) | ICS Governance structure agreed | TUPE/HR processes in place with affected CCG workforce

### In Year Delivery

- 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 place-based focus.

### Future Plans...

- ICB structures and functions established, in place and operating
- Safe ICB Staff transfer complete and roles and responsibilities established.
- People Plan reviewed to directly align to the ICS Strategic Aims and Population Needs.
- Transfer of System People functions to new ICB People function.
- ICB/ICS system wide OD strategy and programme developed to support evolution and development of new ICB/ICS.
- Ongoing support to the emerging future functions ICS/ICP/ICB.
- Supporting design, delivery and embedding of clinical leadership approach.

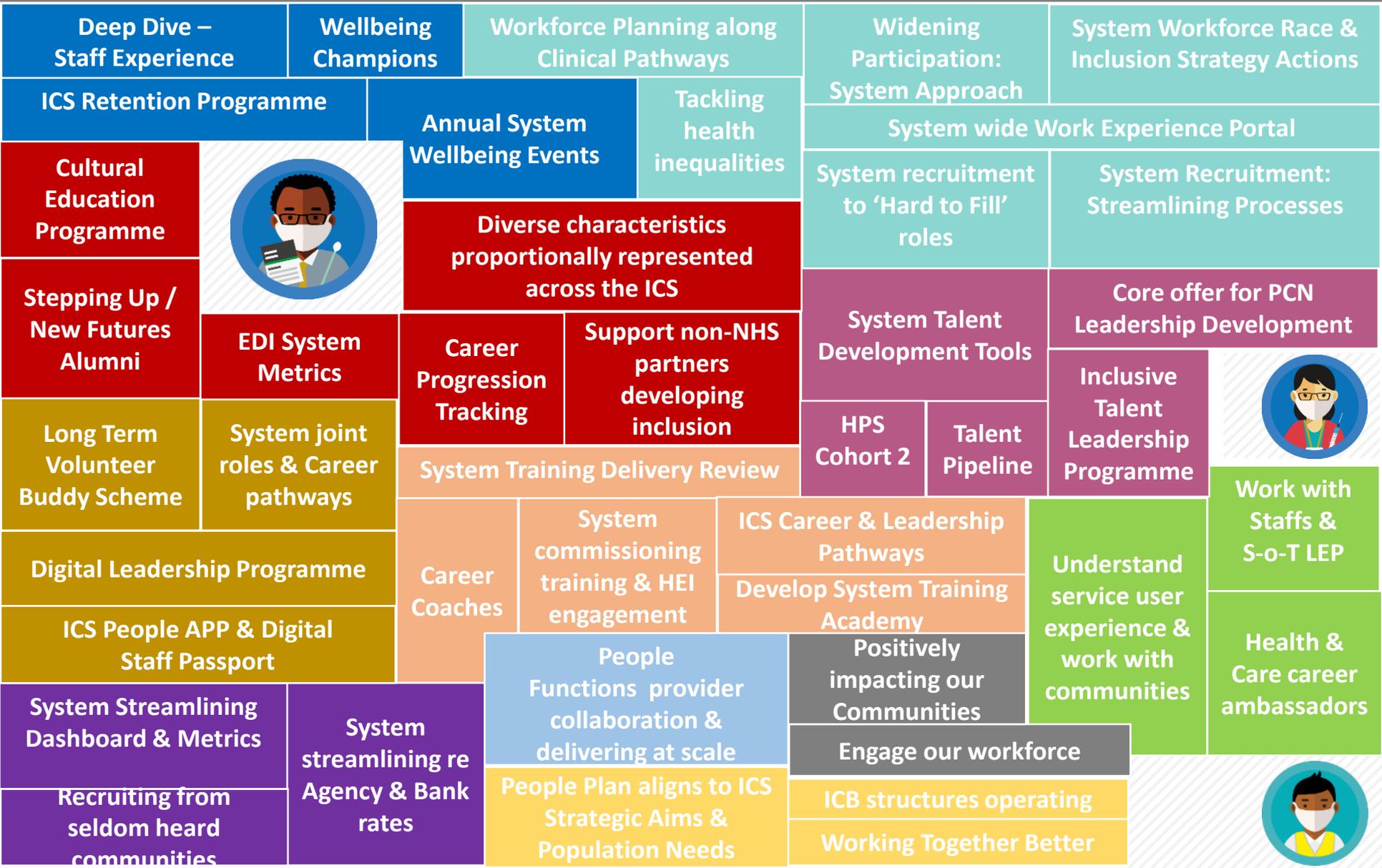
### How we will measure success...

- Safe transfer of staff to the new ICB/ICS with roles and responsibilities defined.
- Change processes complete for affected staff.
- Functions in place and ready to operate.
- Readiness to operate assessment complete and assurance given by NHSEI.

# Summary of In Year Delivery 2022-2023

System Staff Health and Wellbeing Strategy		Retention Co-ordinators	++ Health & Care Reserves		Cohort 3: System Health & Care Apprenticeship		GP & GPN Fellowship	ARRS Facilitators	
System wide well being Event		Scope for Growth Conversations		System NHS Staff Survey	Pharmacy Technician Apprenticeship	Jobs access for seldom heard communities		Virtual Work Experience	
Stepping Up	Inclusion School			Clinical Retention Champions	System Health & Care Recruitment	People Hub Recruitment			
System Reciprocal Mentoring	Out Reach Project Manager		Clinical Director EDI Champion		Diverse Coaches	Our System Connects			
Talent Management Career Conversations		New Futures Diverse Leadership Programme		High Potential Scheme Cohort 1 completed				Scope for Growth	
ICS People Programme Website		Digital People Strategy		GPS Coaches: Primary Care	GP Apprenticeships	Potential & Development Conversation Toolkit		Leadership development within Social Care	
Step Forward Workforce	System Workforce Planning	System Apprenticeship Levy Share		System Education, Training & Development Group			ICS Widening Participation Strategy		
ICS People Metrics include Social & Primary Care	Workforce planning across clinical pathways		ICB Director Appointment (inc. Chief People Officer)		System Approach Clinical Placements	Wellbeing Enabler Project	System Staff Survey Action Planning		Workforce Green NHS Plan
Workforce Cell response to System Pressures	System Workforce Planning Expertise		HR & OD efficiencies programme		Refugee/ Out Reach Project		Workplace Learning Schemes		
ICS OD Programme	Formalised ICS People Function	Anchor Employer	ICB People Function						

# Summary of Future Delivery Plans (2-5 Years)



# How will our plan represent our Workforce Views?

- It is imperative that this plan **represents the workforce** and is not a “top down” strategic document which would be unrecognisable to front line workers. In order to ensure that the initial draft is accurate we have taken feedback from Provider representatives from across the Health and Care sector. They have fed in themes from their own engagement with their workforce; outlined their organisational workforce challenges and reviewed the current priority areas for our People, Culture and Inclusion Programmes.
- This plan and **priority action areas for 22/23** has been drafted following this feedback, however the following actions will be taken with various staff groups during the next 12 months as we continually refine our direction:
- **Involvement via various engagement means** including digital platforms /tools, webinars, events, forums, face to face workshops (as appropriate) and staff surveys.
- **Establish links** with existing forums, networks and groups including Staff Networks and via system-wide trade union partners (inc. NHS, CCG, Local Authority, Primary Care, Voluntary and Independent sectors)
- Ensuring there is **ICB senior leadership ownership** and buy-in to gain System wide commitment.
- **Taking feedback from service user groups** regarding the priority areas for them for the development of our workforce.
- Reviewing, with expert partners, the **potential further use of technology** as an enabler to support collaboration across the System.

