

AHSCP Workforce Plan – Supplementary Information

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The National Context

The Independent Review of Adult Social Care

As part of the Programme for Government 2020 Scottish Government committed to an Independent Review of Adult Social Care in Scotland. A central recommendation of the Review was the creation of a National Care Service, with Scottish Ministers being accountable for adult social care and support. The Scottish Government will be working and engaging with people and partners on the development of the National Care Service, a key focus of which will be a national approach to workforce planning.

National Workforce Strategy for Health and Social Care in Scotland (2022)

The National Workforce Strategy for Health and Social Care in Scotland is a comprehensive strategy containing a commitment to many short, medium and long-term actions. The AHSCP Workforce Plan has been informed by this strategy. We will continue to link closely with those actions identified at a national level, so as to better support a nationally co-ordinated response to current and future workforce challenges. The Five Pillars of Workforce Planning outlined within the National Workforce Strategy (Plan, Attract, Train, Employ, Nurture) have been used as the basis for outlining our proposed actions to secure sufficient workforce to meet local projected short-term recovery and medium-term growth requirements across our health and/or social care services. This can be viewed in the information pack.

Following the recent publication of the National Workforce Strategy for Health and Social Care in Scotland, a national group has been established by Scottish Government to obtain a national picture of workforce planning capacity, methodology and capability across Local Authorities and Health and Social Care Partnerships for planning Social Care services. The AHSCP will maintain connections with this national group and the direction of this work. Linked closely to this, it is noted that Scottish Government will, by the end of 2024 also publish its strategy for Remote and Rural workforce recruitment.

The Integrated Health and Social Care Workforce Plan for Scotland (December 2019)

This plan describes the need for effective workforce planning across the health and social care sector. The AHSCP workforce plan has particular focus on some of the key commitments highlighted in the integrated plan. In particular :

- Support the shift in balance of care into community settings, by delivering more care at home and reducing rates of admission to acute hospital services.
- Support additional Mental Health Officer (MHO) capacity in local authorities by providing funding to help address the current shortfall in capacity of 55 WTE by 2022-23.
- In the medium term, modelling work will take place to assess the impact of reforms to adults with incapacity requirements, particularly around guardianship applications on mental health services workload and demand for MHOs.

- Provide additional support to the third and independent social care sectors to enable their contributions to the developments in workforce planning to be supported through this Workforce Plan.

Exit From the European Union (EU)

The end of free movement of labour brings additional recruitment challenges to both the health and social care workforces. Research by the Nuffield Trust suggests that in the short term, exit from the EU may lead to gaps in the workforce being larger than they would otherwise have been.

Since June 2021, EU doctors, nurses and adult social care professionals have been eligible to apply to work in the UK under the Health and Care Worker Visa scheme. In February 2022, the UK government widened the scheme, extending eligibility to the following:

- Care assistants
- Care workers
- Carers
- Home care assistants
- Home carers
- Support workers (nursing home)

In the long term however, new trade deals with large developing countries may expand rights for their citizens to move to the UK and work in health and social care, and we note the Scottish Government's recent commitment to work in partnership with UK Government's Department of Health and Social Care on developing partnerships with individual countries which will support direct access to international labour markets.

Fair Work

In February 2019, the Fair Work Convention published its report "Fair Work in Scotland's Social Care Sector". The report called for urgent reform to improve the quality of work and employment for the 200,000 people who work in social care support in Scotland. The Independent Review of Adult Social Care references the Fair Work convention and recommends rapid delivery of the recommendations it contains, along with a national job evaluation exercise and national minimum terms and conditions as a key component of new requirements for commissioning and procurement. It also recommends establishing a national organisation for training, development, recruitment and retention for adult social care support. Key to recruiting the workforce we need is ensuring that employers and employment across the health and social care sector is seen as attractive. The general levels of pay within social care are low, with the majority of workers at the lower end of the pay scale. Stability of staff and continuity of care is important for people who access support, and progression and professional development for social care workers will result in better quality services and more rewarding careers. Social care workers do a critical and invaluable job and there requires greater consistency in recognition across the workforce. During 2021, Scottish Government announced an increase in pay for frontline adult social care workers, raising pay from at least £9.50ph to at least £10.02ph.

Whilst recruitment is critical, a focus on providing better working conditions for the existing workforce is key, especially where this is often cited as the reason for leaving. The vision within the draft National Workforce Strategy for Health and Social Care below, illustrates the national priority being given to both Fair Work and recruitment challenges facing the health and social care workforce at a national level:

" ...A skilled, sustainable and respected Health and Social Care Workforce in Scotland, offering attractive career choices and where Fair work is available to all..."

In April 2022, Scottish Government began a process of engagement with Local Government, COSLA and other partners across the sector to develop a work programme to oversee distinct areas aimed specifically at improving and sustaining the social care workforce. That programme will include Pay and Conditions; Workforce Planning and Learning and Development.

The Health and Care (Staffing) (Scotland) Act 2019

The Health and Care (Staffing) (Scotland) Act 2019 gained Royal Assent on 06 June 2019. The act places a legal requirement on NHS boards and care services to ensure that appropriate numbers of suitably trained staff are in place at all times. Healthcare Improvement Scotland and the Care Inspectorate, working closely with health boards and care service providers, will have powers to provide improvement support and intervene where necessary when the quality of a service is not acceptable.

The effective application of this legislation will:

- Provide assurance that staffing is appropriate to support high quality care, identify where improvements in quality are required and determine where staffing has impacted on quality of care.
- Support an open and honest culture where clinical/professional staff are engaged in relevant processes and informed about decisions relating to staffing requirements.
- Enable further improvements in workforce planning by strengthening and enhancing arrangements already in place to support transparency in staffing and employment practice across Scotland and through the use of, and outputs from, the Common Staffing Method and associated decision making processes.
- Ensure the clinical voice is heard at all levels by ensuring arrangements are in place to seek and take appropriate clinical advice in making decisions and putting in place arrangements in relation to staffing including: identification of any risks; mitigation of any such risks, so far as possible; notification of decisions and the reasons why and a procedure to record any disagreement with the decision made.

A variety of workload tools have been and are in the process of being developed. Health Improvement Scotland, (HIS), are currently working up the guidance and implementation timetable to remobilise the Health and Care Staffing Programme following the Pandemic. Scottish Government is to redevelop the implementation and transition timetable to take account of NHS recovery and remobilisation, the effective deployment of new innovations and, if necessary, any changes that a National Care Service may bring to the legislative landscape. Pending

implementation, the Government has already notified its expectation to Boards that they will engage with the spirit and intent of the Act, particularly ensuring staff continue to be enabled to report and escalate any safety concerns relating to staffing so that relevant actions are taken and recorded when required.

The AHSCP are currently working with NHS Tayside reviewing and assessing the use of workload planning tools; preparing training and guidance materials for staff; and gathering baseline information to determine staffing levels. The workforce team have drafted a schedule for all areas to run the Professional Judgement tool as a minimum requirement in 2022. The Professional Judgement tool can be used where there is no speciality workload tool available. Some speciality workload tools already exist for certain disciplines. This schedule is anticipated to be starting from mid/end May through to November 2022, although not all services will start at the same time. NHS Tayside will also be reviewing their literature, refreshing their SharePoint pages and providing support sessions for Senior Charge Nurses on 'Preparing to run workload tools, and an overview of the legislation itself.'

Health Inequalities

The changing demography of Scotland and our increasing diverse and multi-cultural population requires that we have in place a health and social care workforce that reflects our diverse communities and is able to respond to these changes. This requires our services and supports to be accessible, available and appropriate which is in congruence with the NHS Recovery Plan principle 'services that promote equality'. This means that we need to be more agile in our understanding of patient experiences regardless of their background and understand that staff might also have similar experiences in and outside of work. We need to ensure that both our workforce and patients are treated fairly, that equality is promoted and that the training that everyone in the health and social care workforce receives is up to date, relevant and impactful.

The Local Context

The Angus Health and Social Care Partnership (AHSCP) Strategic Commissioning Plan 2019 – 2022

The AHSCP vision is "Working together, developing communities that actively care, promoting wellbeing and creating the best possible health and social care across Angus". To support this vision, the plan has 4 main priorities:

Priority 1 - Improving Health and Wellbeing

Priority 2 - Supporting Care Needs at Home

Priority 3 - developing Integrated & Enhanced Primary Care & Community Responses

Priority 4 - Improving Integrated Care Pathways for Priorities in Care

Underpinning all these priorities is delivering a workforce fit for the future. The Angus 6Rs for Improvement and Transformation in Health and Social Care will support this:

- Rebalance care, maximising support for people in their own homes.
- Reconfigure access to services delivering a workable geographic model of care outside the home.

- Realise a sustainable workforce delivering the right care in the right place.
- Respond to early warning signs and risks in the delivery of care.
- Resource care efficiently, making the best use of the resources available to us.
- Release the potential of technology.

The AHSCP Strategic Commissioning Plan states we need to deliver a workforce that is:

- Sustainable
- Integrated
- Capable
- Effective in leadership and management
- Well informed
- Valued for their contributions
- Treated fairly and consistently
- Supported to learn and develop
- Empowered
- Involved in decision making
- Working in a safe environment

We will work with partners to deliver integrated workforce planning which will include:

- Profiling the workforce
- Re-designing jobs and services taking into account grading and terms and conditions
- Delivering a skills gap analysis and workforce development requirements
- Integrated workforce policies and practices
- Integrating approaches to proactive recruitment campaigns
- Our approach will include identifying opportunities to give us better flexibility across roles within the Council, NHS, third and voluntary sector to support.

The Tayside Mental Health and Wellbeing Strategy - A Plan for Whole System Workforce, Recruitment and Retention 2022 – 2025

The strategy states that the aim for Tayside Mental Health and Learning Disability Services in Tayside is to have a workforce that is innovative, confident, able, engaged and empowered to deliver the strategic ambitions of Tayside as a World Class Mental Health and Learning Disability Service".

The Tayside Mental Health and Learning Disability Workforce and Recruitment sub group have developed an approach to workforce planning, attraction and recruitment. They aim to deliver on four key actions:

- Development of a mental health workforce strategy and planning approach
- Development of a mental health attraction and recruitment strategy
- Development of a data set that accurately reflects whole system mental health workforce within NHS Tayside.
- Mapping out workforce priorities across the 6 complex change projects of:

- Good Mental Health for All
- Primary and Community Mental Health
- Specialist Adult Mental Health
- Children and Young People's Mental Health
- Learning Disabilities and Mental Health
- Older People's Mental Health

Medically Assisted Treatment (MAT) Standards

The Scottish Government has introduced MAT standards for all Alcohol and Drug Partnership areas across Scotland. There are 10 standards, and each area has been given an allocation of funding to meet workforce needs, in recognition of the challenges involved in meeting and reporting on the standards.

In Angus, we plan to appoint a project manager to oversee MAT standards implementation, as well as increasing the number of nurses who can prescribe medication and allocating a Social Worker to help with the processes that keep people in treatment services. We also plan to appoint a support worker to support this work. Recruitment is currently being progressed although it is noticeable that the recruitment response for nurses is diminishing. There are few trained prescribers with relevant experience in Angus and, as a result of this, we have identified staff to undertake an 18 month training programme to mitigate this issue.

Section 2

Service-Specific Risks

Below are some of the Service-Specific Risks identified across the AHSCP, some of which reflect the Strategic Risks already mentioned.

- Mental Health Services - As a result of an inability to recruit and retain a multi-professional staff group there is a risk that we will be unable to deliver safe, consistent and effective care, with a detrimental impact on the outcome of patients care and treatment. This is a Tayside wide risk.
- AIDARS - There remains a service risk around increased referrals and complex work, due to ongoing staff vacancies. Complex presentations continue to require significant resources. Team Managers are also holding cases and running clinics to manage demand, as well as being included in a number of workstreams across the partnership.
- Community Mental Health Services - As a result of a lack of trained social work Council Officers there is a risk that all statutory tasks related to Adult Support and Protection and the Adults with Incapacity act will not be undertaken to mandatory timescales. In relation to Mental Health Officers (MHO's) there is a risk of inability to meet statutory duties due to lack of MHOs. There is a risk that the partnership will be unable to undertake its statutory duties if sufficient numbers of staff are not attracted to completing the required training to

become an MHO. Retirement of MHOs over the next 12 months is anticipated and will impact on availability and capacity.

- Disabilities Workforce - Extended vacancy of Band 6 OT post in coastal LD team causing unacceptable delays in service delivery. Training in delegated healthcare tasks is essential. Supported people requiring these interventions cannot receive a service if staff are not trained.
- District Nursing - There is no Team Leader within Brechin and Montrose DN Teams. Post has been advertised externally and internally with no interest. Organisational Change Policy has been implemented.
- Nursing Workforce – There are Challenges with providing safe staffing levels 24/7 when all Angus MfE beds are operational. District Nurse Accommodation is not physically big enough to accommodate the larger numbers of staff that comprise modern District Nursing teams.
- Brechin Clinical Workforce - As a result of ongoing medical recruitment and retention issues within Brechin Health Centre, lack of GP cover may occur, which would result in risks to safe provision of clinical services and potentially an inability to safely deliver Primary Medical Services to the population of Brechin.
- Speech and Language Therapy (hosted service) Workforce – There are ongoing recruitment issues across Angus, Dundee and Perth & Kinross. Vacancies are proving difficult to fill. The issue with this is that affects capacity and flow within Acute and Rehab Services.
- Angus Physiotherapy Workforce - There are 5 band 5 rotational posts that the service has been unable to fill.
- Accommodation and Homecare Workforce - There are a number of workforce issues due to age/qualification requirements/vacancies/sickness absence. We need to ensure we have a sustainable workforce with all relevant training and qualifications in place with succession planning arrangements.

Continuing Workforce Risks

- Continues to have vacant posts, some for up to 2 years that are filled by locum or temporary staff.
- Fails to attract sufficient staff to entry level health and social care posts.
- Relies upon supplementary staffing (bank, overtime, agency, extra hours) to maintain safe staffing levels.
- Fails to recruit, in any significant numbers, staff under the age of 25 to offset age retirements.
- A significant reduction in the level of operational and strategic experience at senior and middle manager level.
- The recruitment of sufficient staff at the appropriate skill-mix.

- The availability of suitable premises capacity to deliver the preferred models of care.
- The refreshed District Nurse role is not implemented across NHS Tayside and the 3 (Dundee, Angus and Perth & Kinross) Health & Social Care Partnership (H&SCP). A delay in the ratification of the District Nurse job description by the agenda for change panel. The number of suitably trained District Nurses across NHS Tayside and the 3 H&SCP falls short of the workforce required to deliver a contemporary District Nursing service. We need to acknowledge the educational requirements and burdens of training ANPs and DNs.
- Maintenance of District Nursing service delivery whilst implementing the transition to the refreshed District Nurse role and training new District Nurses to meet succession planning demand.
- Currently no service level agreement with any university in Scotland for training places on SPQ District Nurse course. This may result in failure to secure the number of training places required.
- The burden of educational requirements for Advanced Nurse Practitioners. Unlike some other advanced clinical roles, the nurse, who has already undertaken a degree, is required to complete another 18month/2year course to enable them to become an ANP. During their course, the nurse requires medical staff to supervise them through their clinical assessment and non-medical prescribing modules. This will place additional strain on a service that is already short of doctors and other experienced staff.

Care at Home Recruitment Initiatives

Recruitment Events

Full day recruitment events were held in each town in Angus over a 2-week period in March 2022. These events were delivered in partnership with the providers and in collaboration with a variety of other organisations such as:

- Dundee and Angus College
- Department of Work and Pensions
- Scottish Social Services Council
- Angus Council Early Years
- Angus Health and Social Care Partnership

Advertising Costs

A one-off payment was made to providers to support increasing advertising costs. Some providers used this payment to enhance their advertising presence on Indeed/Facebook. This resulted in a larger number of people applying for jobs.

Incentivised Payment

A one-off payment was made to providers per new recruit. This payment was only paid if the person employed was new to the care sector. The provider could use this additional payment to cover training costs or as an incentivised payment to new staff.

As a result of the above initiatives, a total of 44 people have been recruited into the care sector.

Staff Health and Wellbeing

Sample of Supports

- National Wellbeing Hub
- Living Life Well strategy - A lifelong approach to mental health in Tayside
- Healthier Scotland's Health and Social Care Workforce and Unpaid Carers Health and Wellbeing Communications Toolkit
- Covid-19 Tayside NHS Staff Voice Care Service
- KNOWYOU MORE – wellbeing coaching
- NHS Tayside Do you need to talk? Service for wellbeing
- People Asset Management (PAM assist) employee assistance programme
- NHS Tayside Staff Wellbeing & Support Service Brief Psychological Interventions Support for Staff
- Employee Assistance Provider (EAP) - Care First Practical and Emotional Support for Staff Care First
- Psychological Resources for Covid-19 – a comprehensive guide summarising all the existing tools and resources which are available to staff
- Spaces for Listening sessions
- Covid-19 Staff Musculoskeletal Service
- Further promotion of spiritual care.
- Resilience Coaching
- A wellbeing champions role which has been developed in NHS Tayside. The role is to:
 - ⇒ signpost colleagues to NHST wellbeing opportunities and services,
 - ⇒ encourage discussions about mental wellbeing and help remove the stigma of talking about mental health promote a culture of wellbeing
 - ⇒ promote approved wellbeing activities to colleagues at a local level
 - ⇒ Identify examples of positive change that have occurred in their area in order to share best practice with colleagues Be familiar with local communication channels and how to access them.
- The AHSCP now has a trained wellbeing champion who attends the Workforce Steering group meetings and contributes to the workforce planning process.