# RECRUITMENT AND RETENTION OF HEALTH AND SOCIAL CARE WORKFORCE- CHALLENGES AND PLANS

Joint Report Associate Director of Commissioning (Care and Health) (Devon County Council) and Chief Executive Officer Livewell Southwest CIC

#### 1 Recommendations

- **1.1** It is recommended that Members:
  - Look for opportunities to promote careers in Health and Social Care
  - Promote Proud to Care, as the brand representing all Devon STP organisations working together, on social media or in other communitybased opportunities
  - Assist in the education of communities to help them be better informed about access to NHS services in the most appropriate way to help reduce demand on front line or emergency services.

#### 2 Purpose

- **2.1** The purpose of this paper is to provide information about:
  - Health and social care workforce challenges in Devon.
  - The Devon STP Workforce Plan.
  - Outline some of actions being taken to address the workforce challenges.

#### 3 Background

- 3.1 There are many complex workforce challenges facing the Health and Social Care system. Demand for services is increasing and services users' expectations growing. Within Devon we have an above average aging population with more complex needs as people are living longer. At the same time our pool of workforce is decreasing. High employment locally means competition with other sectors is high and our pipeline of school and university leavers is similarly squeezed. The perceived low status of unqualified social care workers particularly in the Private, Voluntary and Independent (PVI) sector, coupled with poor terms and conditions for that group can make this an unattractive option for people who, in a relatively thriving local economy, can secure employment in other sectors for better pay. Career pathways and opportunities for personal development are also poorly defined in within social care sector and 48% of the adult social care workforce in Devon have no external qualifications.
- 3.2 Within the Health Service recruitment and retention is a major workforce challenge across the NHS, including primary care. Professional roles, (including medics, pharmacists, nurses, social workers, OT's and other Allied Professions) have experienced high demand/expectations, stress, 'burn-out', long working hours and lack of flexibility around working hours. All of these things have had an impact on retention, turnover and sickness absence rates. Agency usage rates have been very high as services struggled to maintain staffing requirements.

- 3.3 Each STP is required by NHS England to develop a local long-term plan. Local systems have been asked to set out the population health challenges they will face over the next 10 years and the plans they will put in place and deliver to address the challenges. This includes plans around workforce.
- 3.4 Devon has a diverse workforce economy and as a result the high numbers of vacancies within the health and social care economy will not be filled without attracting more people to come to live and work in Devon, without an adequate pipeline of staff training to undertake new roles or without identifying future workforce members from within existing Devon Communities who may not previously have considered a career in health or social care.
- **3.5** The Appendices to this report summarise some workforce statistics and the workforce challenges facing our Health and Social Care system.

#### 4 STP Workforce Strategy Priorities

# 4.1 The Devon STP Workforce Strategy was agreed in November 2018 to address these challenges and includes a focus on:

Priority	Purpose
Right person, right skills, right place, right time	To attract, retain and support the development of the health & social care workforce across Devon.
Growing the future workforce	To develop a planned sustainable supply of people who want to work in health & social care in Devon to ensure we have the right people in the right place at the right time.
Effective use of flexible workforce	To reduce agency spend in Nursing, Medical & Social Care in order to support the development of a stable workforce while reducing high cost spend on agency workers.
Strengthening strategic     partnerships e.g. HEE, SW     leadership academy	To influence the numbers, content and delivery of training for the Devon Health & Social Care workforce.
Health & social care sector is the best place to work	To develop a healthy culture that supports staff wellbeing and allows staff to flourish and reach their potential.
6. Digital Devon workforce	To ensure that we maximise the potential of technology to support the quality and sustainability of service delivery.

4.1.1 STP workforce activities have been focussed on recruitment and retention initiatives, system wide workforce development and talent management at all levels. This includes recruitment campaigns focussing on specialist or hard to recruit professions i.e., nurses, primary care, pharmacists, the use of apprenticeships, developing career pathways etc. Outlined below are some details about some of these activities.

#### 4.2 Proud to Care Brand

4.2.1 The Devon system has already implemented a successful recruitment marketing brand and website 'Proud to Care Devon'. We currently have 290 Proud to Care Ambassadors who promote health and social care careers at schools, colleges and job fairs. Now well established, Proud to Care enables us to market all vacancies as a health and care system alongside the strong employee value proposition.

#### 4.3 International Recruitment

4.3.1 A system approach will continue for the international recruitment of nurses, medical and allied health professional staff for the next three years. One Trust has recruited internationally on behalf of all acute providers across Devon. DCC have also undertaken successful international recruitment for social workers.

#### 4.4 General STP Recruitment

- 4.4.1 In March 2019 our first STP wide recruitment fair took pace in Exeter. Overall this was a great success showing good collaboration between organisation and across health and social care. Over 200 people attended providing an opportunity for them to meet different employers within the STP and understand the variety of roles and careers on offer. Work is underway to develop this joint approach further and next year to run a number of recruitment fairs across the County.
- 4.4.2 It is recognised that individual values are important in recruitment and values-based recruitment is a developing approach within individual organisations across the STP. Working with Skills for Care, values-based recruitment training is now being offered to the PVI sector to help recruit a future workforce with the right values which will support retention.

#### 4.5 Recruitment Hub

4.5.1 There are plans to develop a Devon recruitment hub to support recruitment and address the immediate and high-risk areas of workforce shortages. This will initially be focussed on Primary Care in Plymouth.

#### 4.6 Grow your Own

4.6.1 The 'grow our own' approach will expand by training both nursing and physician associates and developing local education schools such as pharmacy with local education providers. Devon was one of the first 11 pilot sites for Nursing associates and the only successful STP bid. To date the approach has grown over 100 new practitioners supported by a Devon wide Programme Board. The system has also worked to increase student numbers in nursing by developing programmes with two additional Universities reflecting true partnership between providers and academia. DCC already have successful grow your own practice in place for Adult Mental Health Practitioners (AMHP's) whereby we train and develop social workers into this specialist role, and also offer ongoing opportunities for staff to train to become Social Workers via a bursary scheme.

#### 4.7 Apprenticeships

- 4.7.1 The increased use of apprenticeships and the apprenticeship levy will be maximised across the STP to increase new entrants into the system and develop the existing workforce with the use of higher-level apprenticeships. Rotational apprenticeships (Level 2 Health and Social Care Apprenticeship) across health and social care have been piloted and we are examining the benefits for other roles. Work is underway to maximise the gifting of the apprenticeship levy.
- 4.7.2 The initial focus for this has been to fund leadership and management qualifications and nursing associate programmes in the private, voluntary and independent sector to enhance qualification opportunities and support the development of solutions to address the critical qualified nursing staff shortages within this part of the system.
- 4.7.3 Apprenticeships have been developed for professional roles such as Social Work. With DCC aiming to recruit its first Social Work Apprentices in 2020.

#### 4.8 Career Pathways

- 4.8.1 Programmes such as grow your own and apprenticeships, together with rotational and portfolio careers support the development of sustainable career pathways, and further support the move to out of hospital care. If we are to retain staff working in the health and social care system, it is critical that they can see career development opportunities. It is also recognised that skills need to be shared and flexed across the system.
- 4.8.2 The STP has undertaken research to understand more about recruitment and retention issues in adult social care to understand the high turnover rates and low levels of qualified staff. A joint STP bid for £3.5m of European Social Funding, led by Devon County Council on behalf of all the Trusts and local authorities, working with the education providers, has the potential to significantly improve the qualification rates of the community workforce and also to attract people to careers and career pathways across health and social care.
- 4.8.3 DCC and NHS Devon CCG are part-funding a pilot programme introducing student nursing associates into Devon's independent nursing homes. This programme will establish a career pathway into a registered healthcare position and support the recruitment and retention of the social care workforce. Livewell have also introduced the role of student nursing associates into independent nursing homes.

#### 4.9 Network Models

4.9.1 The networked workforce models for fragile services (e.g. shared clinical teams or on-call rotas, out of hours services) will expand.

#### 4.10 Memorandum of Understanding (MoU)

4.10.1 An MoU has been developed to assists with the smooth, faster and more efficient movement between employers working in the system. It aligns policies and process regarding working arrangements and ensures that organisational boundaries will not prevent the flexibility and prompt mobility of staff to move and deliver services where needed. As more people are needed

to deliver services out of hospital the MoU will be further developed to see how it can support employment moves into primary and social care.

#### 4.11 Retire and return

4.11.1 Work has been started to create a system wide policy to enable retire and return for workers across health and social care system in Devon - attracting more retired workers back through flexible employment approaches

#### 4.12 Health and Wellbeing

4.12.1 Keeping people physically and mentally happy, healthy and supported within the workplace is of vital importance and supports the retention of staff. Health and Wellbeing initiatives are underway within organisations across the STP with information and practice being shared.

#### 4.13 Agency and Bank

- 4.13.1 NHS providers in Devon are working together and have produced a set of measures to reduce costs and usage across the system.
- 4.13.2 The aim of the piece of work being undertaken is to maximise conversions of agency workers to permanent contracts, pay consistent rates, reduce competition for agency workers, satisfy demand all at the same time as reducing spend and saving money.
- 4.13.3 The County Council has established a Peripatetic Social Work team within Adult Social Care which has reduced reliance on agency and agency spend

#### 4.14 Flexible working – hours and contract types

4.14.1 We know that flexibility is important to the whole workforce. The STP has a critical role in ensuring that working practices, policies and procedures and contracts help support the workforce achieve the work life balance they need and also supports those with caring responsibilities outside of work thus supporting retention, enabling us to make better use of our existing workforce and improve retention for all parts of the health and social care system.

# 4.15 Pay and Reward in Adult Social care (Private, Voluntary and Independent (PVI) sector)

- 4.15.1 The County Council is a commissioner of Adult Social Care and now only has a very small direct provision workforce (Adult Social Care Workforce in Devon is 86% independent sector, 9% direct payment recipients and just 5% Local Authority).
- 4.15.2 The STP has to work with the PVI sector to support them in seeking solutions to their workforce issues which impact on all parts of the system. New initiatives include allowing CCG or joint commissioned PVI providers to use 'Working with the NHS Branding' and logos to enhance their image and allowing staff to access the NHS or other discount schemes. This development has already had a positive impact in some areas. Devon Cares staff can use the template for NHS ID badges and also use NHS lanyards.

Staff say they 'feel' a part of the NHS and some have said it makes a difference to how others treat them. Devon is enhancing its parking scheme to help community-based workers in health and social care park in areas with restricted parking when undertaking community visits.

4.15.3 Some Local Authorities are working with their PVI colleagues to improve the wages of care workers. Bristol City Council encourages commissioned providers to sign up to the Living Wage on a voluntary basis. Currently within Devon as part of our procurement process, we require commissioned providers to comply with the minimum wage and to ensure that all travel time is paid at minimum wage rate and travel expenses are provided. Devon County Council is currently considering the impact of taking a similar action to Bristol in respect of commissioned social care services.

#### 4.16 Other solutions

4.16.1 Addressing workforce shortages will not solve the problem alone - ultimately the workforce numbers are not out there so we need to find other ways of providing Health and Social Care.

#### 4.17 Digital Solutions

4.17.1 A critical and important part of the plan for Devon focuses on the need to develop digital solutions to ensure continual growth in productivity. The development of improving access to care records will, in addition to improving patient care, enable organisations to work better with each other and remove unnecessary duplication of workforce activity and reduce travel time. The introduction of artificial intelligence and more established communication technologies will improve how we outpatient appointments. The use of erostering systems will also be maximised to support the more effective rostering.

#### 4.18 Demand and Expectations of the population –

- 4.18.1 Our communities need to be supported to manage their own health. A number of initiatives within our Health and Social Care system is working towards this:
  - Promoting independence underpins much of our social care activity and works with individuals to enable them to live as independently a possible.
  - Looking after our own health Public Health play a vital role in supporting and promoting the health and wellbeing of people in Devon.
  - Preventative work such as active Devon are dedicated to inspiring and supporting Devon to be active to enhance both physical and mental wellbeing.
  - Directing people to the right place an integral part of the system needs to be signposting people to support outside the substantive health and care system.

#### 5 Summary and Conclusion

#### 5.1 Outcomes and Benefits of Workforce Transformation

5.1.1 This paper gives a sense of the workforce challenges facing the Health and Social care system and actions to address these. Transformations will enable the following for both our workforce and the citizens of Devon

#### 5.2 Living in Devon

- 5.2.1 I will see a transformed workforce through the health and services I receive because:
  - I will wait less to access services.
  - Staff are able to support me to make the best choices for my health and care.
  - I will see different roles supporting my health and care needs.
  - Staff will be using digital communication technologies to help me to save time and contribute to reducing my carbon footprint by travelling to fewer appointments.
  - Staff will be using more digital technology to deliver my health and care needs.
  - Staff will only have to ask me once about my health and care history.

#### 5.3 Working as a member of staff in Devon

- 5.3.1 I will be part of a team delivering health and care service and as result we will:
  - Have more opportunities to work flexibly across organisations.
  - See a workplace less impacted by staff vacancies and turnover because new roles and digital technology have supported us to do our work.
  - · Be more supported in our health and well-being.
  - Be able to provide better patient care because we are working more digitally and can access patient information when needed.
  - Spend more time on health and care matters that need professional attention and less time on work that can be completed by computers using artificial intelligence and robotics.
  - Use digital technology to reduce outpatient demand.
  - Be a diverse team that reflects our community, and which promotes equality.
  - Be supported in our development and have opportunities to reach our potential

#### 5.4 Equality Considerations

5.4.1 These are accommodated through the DCC and partner organisations' HR policies.

#### 5.5 Legal Considerations

5.5.1 None

#### 5.6 Carbon Impact Considerations

5.6.1 Reduction in carbon footprint due to less appointments and fewer staff needing to travel

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**Electoral Divisions**: All

Cabinet Member for Adult Social Care and Health Services: Councillor Andrew

Leadbetter

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LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS

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5.6.2

5.6.3 BACKGROUND PAPER DATE FILE REFERENCE

Nil

## Appendix 1. Current Workforce Data in Health and Social Care

### **POPULATION**







13% rise in Devon's population by 2039 Devon's older 1 in 3 people population live with one or (65+) projected more long term to rise 45% condition

#### PHARMACY

Increased demand for pharmacists but pipeline is squeezed fewer people applying for University places.



#### PRIMARY CARE

Need to recruit 50 GPs over the next 5 years, as well as 45 primary care nurses per year. Further recruitment of 300 new recruits into other Direct Patient Care roles and over 500 into admin roles.



#### SOCIAL CARE

290,000 care workers needed in Devon by 2033. 33 additional Adults SW's needed in DCC over the last 2 years and losing an average of 15 per year.

There is an
estimated 1200
care worker
vacancies in Devon
as well as 93 AHP
vacancies



Need to increase the %age of nurses with specialist skills to support management of long term conditions within the community rather than acute setting 33.3% turnover

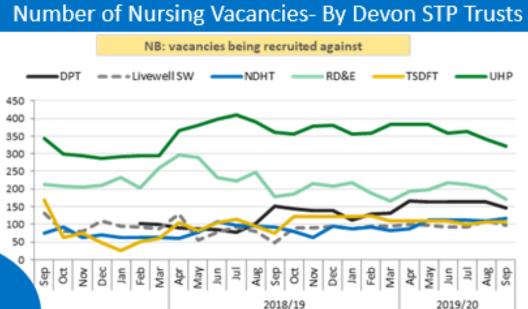
in adult social

care in Devon

12% turnover in registered nurses in Devon

Why people are leaving the sector?

- Too much responsibility (for the level of reward)
- · Lack of flexibility over working hours
- Lack of time for and between appointments
- Lack of opportunity for personal or professional growth.
- Lack of guaranteed hours
- Cost of childcare
- · Emotionally demanding roles
- · High workloads



### Appendix 2. Current workforce challenges in Devon

