

Meeting: Primary Care Commissioning Committee			
Meeting Date	26 September 2018	Action	Receive
Item No.	14	Confidential	No
Title	Workforce Leadership & Development Update Paper		
Presented By	Rachele Schofield, Primary Care Manager		
Author	Rachele Schofield, Primary Care Manager		
Clinical Lead	Dr Jeff Schryer, NHS Bury CCG Chair & Clinical Lead for Primary Care		

Executive Summary

A paper was presented to the Primary Care Commissioning Committee on 23 May 2018 to provide an overview of the Workforce Development & Leadership Work Stream, an enabling programme of work to support the delivery of the Primary Care Health and Wellbeing Strategy 2016-2021.

The paper detailed the local achievements made by the work stream and asked for approval from PCCC to take the project forward on a Greater Manchester basis as it was felt that the project had reached a pause in progress working solely within Bury with the resources available. The GM direction of travel was supported by PCCC and this paper has been written at the request of the Committee to provide a further update now work with GM has commenced.

Recommendations

It is recommended that relationships continue with GM and further links made with regards to workforce leadership and development whilst Bury CCG continue to work locally within our Workforce Leadership and Development Group, securing a solution for local recruitment and retention initiatives, tailored to our needs as an organization.

Links to CCG Strategic Objectives

To encourage people so that they want to, and do, take responsibility for their own health and well-being.	<input type="checkbox"/>
To drive and support system wide transformation.	<input checked="" type="checkbox"/>
To commission joined-up health and social care for people in Bury through a Single Commissioning Framework.	<input checked="" type="checkbox"/>
To achieve financial sustainability for the Bury health and social care economy.	<input checked="" type="checkbox"/>
To support the Locality Care Alliance to deliver high quality services in line with commissioner intentions.	<input checked="" type="checkbox"/>
To be a high-performing, well-run and respected organisation with an empowered workforce	<input checked="" type="checkbox"/>

Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:
GBAF <i>[Insert Risk Number and Detail Here]</i>

Implications

Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
---	-----	--------------------------	----	-------------------------------------	-----	--------------------------

If you have ticked yes provide details here. Delete this text if you have ticked No or N/A

Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
--	-----	-------------------------------------	----	--------------------------	-----	--------------------------

<i>General Practice</i>

Have any departments/organisations who will be affected been consulted?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
---	-----	--------------------------	----	--------------------------	-----	-------------------------------------

< *If you have ticked yes, Insert details of the people you have worked with or consulted during the process :*
 Finance (insert job title)
 Commissioning (insert job title)
 Contracting (insert job title)
 Medicines Optimisation (insert job title)
 Clinical leads (insert job title)
 Quality (insert job title)
 Safeguarding (insert job title)
 Other (insert job title)>

Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
--	-----	--------------------------	----	--------------------------	-----	-------------------------------------

Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
---------------------------------------	-----	--------------------------	----	-------------------------------------	-----	--------------------------

Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
--	-----	--------------------------	----	--------------------------	-----	-------------------------------------

Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
---	-----	--------------------------	----	--------------------------	-----	-------------------------------------

Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
---	-----	--------------------------	----	--------------------------	-----	-------------------------------------

Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
---	-----	--------------------------	----	-------------------------------------	-----	--------------------------

If you have ticked yes provide details here. If you are unsure seek advice from Lynne Byers, Email - lynnebyers@nhs.net about the risk register.

Governance and Reporting

Meeting	Date	Outcome

Workforce Leadership & Development Update

1. Introduction

- 1.1 A paper was presented to the Primary Care Commissioning Committee on 23 May 2018 to provide an overview of the Workforce Development & Leadership Work Stream, an enabling programme of work to support the delivery of the Primary Care Health and Wellbeing Strategy 2016-2021.
- 1.2 The paper detailed the local achievements made by the work stream and asked for approval from PCCC to take the project forward on a Greater Manchester basis as it was felt that the project had reached a pause in progress working solely within Bury with the resources available. The GM direction of travel was supported by PCCC and this paper has been written at the request of the Committee to provide a further update now work with GM has commenced.

2 Background

- 2.1 Since September 2017, the Primary Care Team (PCT) has been working to obtain a baseline of General Practice workforce data. Historically, the only workforce data repository and data source for General Practice has been collected and housed by Health Education England however, Practice response rates and completeness of data was not sufficient to form a baseline on which to build.
- 2.2 Working across the borough, the PCT developed a simple workforce data collection tool and asked that all Practice Managers complete it as fully and completely as possible, detailing all staff in post at each Practice. We asked for job roles, staffing grades, age range and whole time equivalent information (WTE) as well as capturing those posts that were vacant.
- 2.3 This was coupled with a targeted Training Needs Analysis (TNA) allowing us to develop a comprehensive education plan ensuring our General Practice workforce remains up to date and, by working together, creating a locality where talent is attracted and retained. Our workforce is working in a transformational environment that will see a greater focus on prevention, care closer to home and this will lead to new and changing roles which may require new knowledge and skill sets. This has implications both for our existing workforce and the upcoming workforce.
- 2.4 From this, we were able to establish an accurate, up to date position statement giving us baseline staffing information for Bury. After exploring a number of options to take this work forward, it was decided that the best course of action for Bury would be to take a joined up approach with Greater Manchester with Bury forming an active part of the GM process to workforce leadership and development.

3 Workforce Leadership & Development Update

- 3.1 Bury Clinical Commissioning Group (CCG) Primary Care Manager is now working closely with the GM Lead for Workforce Development and this paper serves to provide an update against this work programme since May 2018. Actions are now underway

however, given the project is still in its embryonic stage at a GM level, the timescales have been difficult to ascertain.

- 3.2 In order to reinforce Burys advanced position within GM at this juncture, we shared the following documents with Kirsty Roberts, GM Lead for Workforce Development both to ensure a strong understanding of Burys current position and to establish how Burys data & expertise in workload data collection can be used across GM thus ensuring Bury remains the lead CCG for this piece of work given our established data set:
- May 2018 PCCC Paper regarding Workforce Leadership & Development
 - Bury CCG's workforce data collection template
 - TNA collection tool
- 3.3 Kirsty confirmed that she has met with Dr John Jean regarding the GM roll out of Business Intelligence (BI) Tableau and its intended use for workforce modelling. Dr Jean is to draft an options appraisal for GM consideration who will consider how this is then taken forward ensuring the opportunity for accurate, real time data across the whole of primary care is secured. It should be noted that GM Tableau was partially launched in GM in July 2018 however; the workforce module is not included until Dr Jean concludes his work.
- 3.4 Kirsty is to meet with Dr Jean again in late September 2018 to secure an update on Primary Care workforce data. Dr Jean will also be inviting a team of key data specialists to that meeting in order to inform the conversation and drive this project forward. In advance of that, Kirsty wishes to meet with workforce leads from GM CCGs so local views can be fed in. We will endeavor to ascertain timelines for BI Tableau workforce launch, next steps with regards to Bury's local workforce collection data refresh, an update on other CCGs progress (e.g. does Burys still hold an advanced position?), and how we can influence / assist the GM direction at this time. The meeting is scheduled for 18 September 2018.
- 3.4 Running in tandem with systems conversions, as part of an NHS England primary care contingency to discuss Primary Care at Scale plans with CCG's, Kirsty met with Senior Managers including the CCG Chair from the CCG Bury CCG, GP Fed and LCA to talk more in depth about the workforce plans in place at Bury and what support CCG's need from GM. Information obtained through the Primary Care at Scale Visits will form the GM Workforce Plan. The aim is to produce a GM wide work plan for Workforce for wholesale implementation. Marie Clayton, Deputy Director for Primary Care and QIPP attended.
- 3.5 In terms of wider primary care;
- Dr Paul McCrory (LDC Representative) has been introduced into GM so that guidance on Dentistry workforce data collection can be offered

- GM confirmed that they will take the lead on Pharmacy workforce collection data, establishing what has been collected to date and timescales for ongoing work which will feed into Bury's project plan
- There are no additional optometry updates at this stage

3.6 GM are taking the lead on Leadership Training for Clinicians and Asset Based Approach & People Centered Learning for administrative staff within Practice and will widely promote course availability, prompting CCG's to participate. A Post-CCT (Certificate of Completion of Training) Fellowship Programme with Primary Care Focus is being delivered and Kirsty will link in with Dr Alison Leigh and Tracy Bell via CCG Local Medical Committees (LMCs) to deliver this on a GM wide footprint. Information will be passed to Bury CCG in due course.

3.7 In addition to the partnership working with GM, Bury CCG are working closely with the GP Federation and the Locality Care Alliance at a local level. The following programmes of work are currently underway:

- GP Federation has met with Dr Jean to discuss the progression of BI Tableau workforce modelling tool based on the needs of Bury CCG
- GP Federation to meet with Bolton CCG regarding the Mental Health Workers in Practice initiative
- Locality Care Alliance (LCA) to undertake high level thinking regarding Workforce including:
 - Skills mapping
 - Ability to baseline and continually update the data including equality analysis data e.g.:
 - ratio of M/F staff in each staff group
 - ethnic diversity
 - do staff live locally to the practice population they service
 - Future gazing of potential capacity gaps e.g. retirements/maternity etc
 - See current staffing against versus prevalence's and activity primary/secondary care
 - Highlight what good practice/skill mix might look like for a practice based on the above
 - Understand the wider workforce e.g. dental, optometry and pharmacy, social care, Pennine care and the ability to see this at a neighbourhood level
 - LCA to recruit to a Workforce lead for Programme 6

3.8 Bury CCG are also moving ahead with Workforce Leadership and Development independently at a local level so that momentum is not lost. The following programmes of work are currently underway:

- Bury CCG will determine timeline for workforce data refresh and push back to practices to determine – what next?

- Primary Care Team to attend GM Primary Care Workforce Reference Group
- Refresh the Workforce Strategy ensuring it is aligned to GM picture
- Define a list of all new roles in Primary Care alongside with Burys recruitment plan to these roles
- Recruitment to Bury CCG Nurse Lead role
- Review of Workforce Leadership and Development Group membership and consideration to inviting HCA and pharmacists to future meetings
- Consider reformation of Practice Managers Forum

3.9 The CCG Primary Care Project Manager is also promoting multiple education programmes to support local progress both in terms of supporting practices to upskill their existing workforce but also to ensure Bury is an attractive place to work for potential candidates coming into the Bury CCG health and social care footprint. This includes a review of engagement in national programmes to actively retain, grow and attract staff as follows:

Table 1

Education Programme	Timelines
Care Navigators	Roll out complete by September 2018
Nurse Prescribing	Ongoing (awaiting details of 2018 allocation)
Practice Manager Diploma	Offered to all practices in 2017, uptake was low
GP Excellence	Ongoing - Clinical Lead attending September ongoing engagement event
GP Retire, Return, Retention Programme	Ongoing
GP International Recruitment	Application Submitted May 2018 with NHSE undertaking further scoping in September 2018
Comprehensive Education Schedule to support TNA and Practice Training Requirements	Published direct to practices via CCG every month
MECC	Ongoing – to be discussed at September CCG Workforce, Leadership and Development Group
What matters to you campaign	
Redefining consultations	
CMFT Nursing Retention Programme	
Wider focus on promotion of recruitment into Bury as affordable place to live, green spaces, good schools, access to care, better quality of life to attract people into the area	

4 Associated Risks

4.1 The risks identified in the previous report have been mitigated against by adopting a joined up approach to workforce leadership and development across GM however, Burys progression with regards to workforce modelling has been restarted as we move to review the Workforce Leadership and Development Strategy and as we move to secure the development of a workforce modelling tool tailored to Burys requirements (BI Tableau).

- 4.2 We also continue to secure a robust direction of travel by remaining close to the GM approach to avoid duplication at a local level and, by retaining commitment to a GM approach, we are able to tap into the workforce analysis of wider primary care (dental, optometry and pharmacy) and the wider educational offers including leadership training for our Clinical Leads.
- 4.3 This allows Bury to focus on local recruitment and retention initiatives, concentrating on the workforce needs in General Practice by honing the relationship between the CCG Primary Care Team and the GP Federation to shape the future. We will also working in partnership with the LCA on Programme 6 to transform primary and social care, ensuing Bury CCG is instrumental in pushing forward the drivers for change in workforce in terms of skills, competency and training needs across health and social care, changing the face of Primary Care.

5 Recommendations

- 5.1 It is recommended that relationships continue with LCA, GP Federation and GM with regards to workforce leadership and development whilst Bury CCG continue to work locally within our Workforce Leadership and Development Group, securing a solution for local recruitment and retention initiatives, tailored to our needs as an organisation.

6 Actions Required

- 6.1 The PCCC is required to:
- Receive the updates within this paper

Rachele Schofield

Primary Care Manager

racheleschofield@nhs.net

September 2018