Trust Board Report

Meeting Date: 1st July 2019

Title: The Interim NHS People Plan

Executive Summary: The plan focuses on 5 themes as follows:

- Make the NHS the best place to work
- Improve our leadership culture
- Prioritise urgent action on nursing shortages
- Develop a workforce to deliver 21st century care
- Develop a new operating model for workforce

In addition to this, there is also a focus on the NHS Pension Scheme and the impact of the annual allowance.

The final people plan is due to be published at the end of the calendar year and is subject to the spending review, however a national team is currently being recruited to support the plan.

Action Requested: Receive and note

For the attention of the Board

Assure

Advise Items in the paper/report outline areas of potential concern and action now or in the future, where the risk is not determined.

Alert

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Trust Strategic Objectives Attract, retain and develop our staff, and improve employee engagement

Resource Implications: None

CQC Domains Well-led: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.

Equality and Diversity Impact None specifically related to this paper, although there may be an impact with regards to the individual projects.

Risks: BAF/TRR SR1- Workforce - Recruitment and Retention of staff across the Trust and in particular the future pipeline of nursing and medical staff.
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<th>Risk: Appetite</th>
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<td>Public or Private:</td>
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<td>Other formal bodies involved:</td>
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<td>References</td>
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**Appendices**

| A | NHS Employers Briefing for board members - NHS Interim People Plan. |
The Interim NHS People Plan

1.0 Background

NHS England/Improvement has recently published the Interim People Plan for the NHS. This has been developed over the last few months and sets an agenda to tackle the range of workforce challenges in the NHS with a particular focus on the actions for this year.

The plan is structured into 5 themes, with each theme having a number of immediate actions that need to be taken to enable the delivery of the NHS Long Term Plan. The full list of actions is available on page 66 of the plan, included within the ‘reading’ room.

NHS Employers have produced a board briefing of the Interim People Plan and is included at Appendix A.

2.0 Themes

The 5 themes are outlined as follows:

2.1 Make the NHS the best place to work

Paying greater attention to why staff leave the NHS, taking action to retain existing staff and attract more people to join. There is an acknowledgement that actions to improve supply risk being undermined if the cultures of our workplaces are not consistently compassionate, supportive and inclusive.

2.2 Improve our leadership culture

Addressing how we need to develop and spread a positive, inclusive person-centered leadership culture across the NHS, with a clear focus on improvement and advancing equality of opportunity. The linkages between this work stream and the best place to work stream are made clear.

2.3 Prioritize urgent action on nursing shortages

Supporting and retaining existing nurses while attracting nurses from abroad and ensuring we make the most of the nurses we already have within our NHS. To support this, there is an action to deliver a rapid expansion programme to increase clinical placement capacity by 5,000 for September 2019 intakes, as well as a commitment to work directly with trust directors of nursing to ensure the widespread adoption of good practice which maximises clinical placements.

2.4 Develop a workforce to deliver 21st century care

Developing a multi-professional and integrated workforce to deliver primary and community healthcare services, while ensuring we have a flexible and adaptive workforce that has more time to provide care. In supporting this, the aim is to establish a national programme board to address geographical and specialty shortages in doctors, including staffing models for rural and coastal hospitals and general practice.

2.5 Develop a new operating model for workforce

Putting workforce planning at the centre of our planning processes, continuing to work collaboratively with more people planning activities devolved to local integrated care systems (ICSs). A key action will be to co-produce an ICS ‘maturity’ framework that
benchmarks workforce activities in STPs/ICSs which also informs decisions on the pace and scale of devolution of workforce activities

The plan also includes specific commitments to:
- increase the number of nursing placements by 5,700
- increase the number of nurse associates to 7,500
- increase the number of doctors and nurses recruited internationally.
- work with Mumsnet on a return to the NHS campaign
- better coordinate overseas recruitment.

3.0 NHS Pension Scheme

As part of the theme of making NHS the best place to work, there is alongside the plan an acknowledgement of the impact, and potential impact, of annual allowance and taper tax policy in relation to the pension earnings of senior medical staff (consultants and general practitioners). Accordingly, the government is bringing forward a consultation on a new pension flexibility for senior clinicians. The proposal would give senior clinicians the option to halve the rate at which their NHS pension grows, in exchange for halving their contributions to the scheme.

4.0 Final People Plan

This interim plan will be followed by work over the summer, led by Prerena Issar (Chief People Officer) with a range of stakeholders, to help develop a fully-costed final plan. Investment in the plan is dependent on government-wide, treasury-led spending review, a process now also dependent on the outcome of the Conservative Party leadership election and reshuffle, as well as Brexit.

The final plan will include:
- measures to embed culture change and develop leadership capability
- more detail on changes to professional education and on investment in CPD
- more detail on additional staff needed.

It will also aggregate information from local (ICS/STP) workforce plans and work on digital transformation.

5.0 Work at a National Level

Nationally recruitment is currently underway for 18 posts to form part of the interim programme team. That team will be contributing to work in the following key areas:

Making the NHS the best place to work:
- Developing a new ‘core offer’ for all staff working in the NHS, based on widespread engagement with staff, staff representatives and employers across the country
- Developing a new approach to how we assess people issues in the NHS Oversight Framework and the CQC’s well-led assessment
- Overseeing an independent review of HR and OD practice in the NHS
- Removing practical barriers to movement of staff between organisations, including streamlining of induction and on boarding processes
• Supporting trusts in developing tech-enabled banks and establishing collaborative banks
• Improving the leadership culture
• Developing a new leadership compact, based on widespread engagement with trusts, CCGs and local health systems
• Developing competency, values and behaviour frameworks for senior leadership roles
• Reviewing regulatory and oversight frameworks to ensure greater focus on leadership, culture, improvement and people management
• Rolling out talent boards to every part of the country
• Addressing outstanding themes from the Kark review

Releasing time for care:
• Establishing a Releasing Time for Care programme to distil and spread best practice in how to plan and deploy clinical teams more effectively and efficiently
• Supporting consistent and effective implementation of e-rostering systems and e-job planning systems, including expanding to multidisciplinary teams in primary care

Workforce redesign; optimising skills:
• Reviewing current models of multidisciplinary working across primary and secondary care
• Developing accredited multidisciplinary credentials for mental health, cardiovascular disease and older people’s services
• Targeting investment in development of advanced clinical roles to areas of greatest service/workforce growth
• Helping STPs/ICSs establish collaborative approaches to apprenticeships
• Developing a new approach to multidisciplinary training hubs

Securing current and future supply:
• Developing plans for expansion of undergraduate medical places
• Addressing geographic and specialty medical shortages
• Developing incentives to attract students to shortage professions

Analysis:
• Working with STPs/ICSs to develop better estimates of the number and mix of staff needed over the next five years

A new operating model for workforce:
• Working with STPs/ICSs and partner organisations to agree respective roles and responsibilities and ways of working at national, regional, system and employer level
• Agreeing development plans to improve STP/ICS capacity and capability in relation to people issues.

6.0 Next Steps for RWT

Rather than await the publication of the final version of the plan, there are a number of steps that RWT can start to progress now. These include:

• Given our current People & OD Strategy expires in March 2020, start to incorporate key elements of the plan within the next version of the People & OD strategy
• Review the interim plan to identify the potential for any early actions/quick wins to be undertaken this year, in order to support the plan
• Under the theme of *Make the NHS the best place to work*, review the current position within RWT in relation to work already being undertaken and identify any potential gaps.
NHS Interim People Plan

Briefing for board members
Introduction

The **Interim People Plan for the NHS** has been developed over the last few months and sets an agenda to tackle the range of workforce challenges in the NHS with a particular focus on the actions for this year.

Baroness Harding has described the interim plan as follows:

“This interim People Plan doesn’t answer all the questions we know need answering, nor does it set out a detailed 5 -10 year roadmap.

“It does, however, set out our vision for our people and the urgent actions we all need to take this year, both to make immediate improvements but also to build a plan for our people that is fully integrated with those for financial and operational delivery.”
Background

- Workforce supply is acknowledged as the biggest challenge facing the NHS but the plan is clear that the quality of staff experience must be improved or those extra people will not stay, or come at all.

- The NHS Interim People Plan has been developed with involvement from NHS Employers and a wide range of other stakeholders to set out an initial approach to tackling the range of workforce challenges.

- The substantive People Plan will be published following the Spending Review. Key financial commitments will be decided as part of the Spending Review.

- NHS organisations will be expected to undertake initial actions and further action following the publication of the final People Plan.
Key themes

☐ Making the NHS the best place to work

☐ Improving NHS leadership culture

☐ Addressing workforce shortages

☐ Delivering 21st century care

☐ Developing a new operating model for workforce.
Making the NHS the best place to work

- The plan acknowledges that people working in the NHS report ‘growing pressure, frustration…, and rising levels of bullying and harassment’.

- BME staff report the poorest workplace experiences.

- Sickness absence runs 2 percentage points higher than the rest of the economy.

- 1 in 11 staff leave the NHS permanently each year.
Making the NHS the best place to work

☐ NHS organisations will be asked to develop their approach to making their organisation the best place to work.

☐ They will also be asked to contribute ideas to the development of a new offer for staff setting out the support they can expect from the NHS as a modern employer.

☐ There will be a summer of conversation led by the new chief people officer to develop this offer to staff.
Making the NHS the best place to work

This offer would cover:

- creating a healthy inclusive and compassionate culture (including ensuring equality and diversity, tackling bullying and reducing violence)
- enabling great development and fulfilling careers (including CPD and ensuring recognition of qualifications between employers)
- ensuring everyone feels they have a voice, control and influence (including freedom to speak up, health and wellbeing and flexible working).

A balanced scorecard will be developed to assess organisations in these areas via the NHS Oversight Framework and the CQC Inspection Framework (Well Led Assessment).
As part of the theme of making NHS the best place to work, there is an acknowledgement of the impact of the current pension taxation policy on staff retention, particularly in relation to senior clinicians.

Accordingly, the government is bringing forward a consultation on a proposal for new pension flexibility for senior clinicians.

The proposal would give senior clinicians the option to halve the rate at which their NHS pension grows, in exchange for halving their contributions to the scheme.

This consultation is expected to take place over the summer, and it may lead to changes from April 2020.
Improving leadership and culture

The plan says NHS leaders should have:

- 'a compassionate inclusive culture' including senior leaders, clinical and non-clinical roles and the 'vital middle manager layer.'

- It should have a greater focus on collaborative talent management and a range of measures for greater board assurance.

NHS England/Improvement will work to develop an agreed set of competencies for senior leadership roles and will engage widely on options for assuring leadership (which will enable a response to the Kerr and Kark reviews).

They will agree a new compact setting out the ‘gives and gets’ to shape the development of senior leaders.
Leadership priority areas

- System leadership
- Quality improvement
- Talent management
- Inclusion and diversity.

These leadership challenges apply just as much to the national NHS arms-length bodies, which have an equally important role to play in fostering a new leadership culture.
Addressing workforce shortages

The plan includes measures to improve workforce supply and retention across the NHS clinical workforce. There will be a focus on nursing in terms of immediate actions which include:

- NHS England/Improvement expanding its retention support programme with a focus on the most challenged areas
- increasing clinical placements by 25% to 5,000 by September 2019
- developing a new return to practice scheme in conjunction with Mumsnet
- better coordination of international recruitment with a national procurement framework for lead agencies.
Addressing workforce shortages

The final People Plan, which is scheduled for release later this year, will cover:

- entry routes into the profession building on the nurse apprenticeship and nurse associate routes
- the development of a 'blended learning nursing degree' programme working with higher education providers
- greater focus on primary and community nursing.

Subject to resources being allocated within the spending review, the aim would be to achieve a phased restoration of previous CPD funding levels over five years.
Delivering 21st century care

In order to deliver the vision of care set out in the NHS Long Term Plan, the report calls for a reshaping of the NHS workforce. It specifically calls for:

- a transformed workforce with a more varied and richer skill mix, new types of roles and different ways of working
- the scaling up of new roles via multi-professional credentialing and more effective use of the apprenticeship levy.

There will be further detailed planning work across all major NHS workforce care groups and discussion with the service over future needs before the final plan.
Delivering 21st century care

On nursing, the plan calls for further expansion of the nursing associate role to reach 7,500 nursing associates by the end of 2019.

On medical workforce, it pledges an expansion of doctors in primary care by 5,000, further roll out of medical credentialing and support for shortage areas and for the development of more generalist roles.

There will also be action to expand AHP, scientific and other roles as well further develop multi-professional team working starting in primary care networks.

A new programme entitled Releasing Time to Care, which has a focus on using technology to support better deployment of staff time and increase productivity, will be launched.
The interim plan accepts that the workforce planning model in the NHS needs to change.

It argues that functions should be undertaken at the best level to meet the needs of the services. It commits to devolution of responsibility to the Integrated Care Systems (ICSs) as over time they will 'take on greater responsibility for people planning and transformation activities, in line with their developing maturity.'

A newly developed ICS workforce ‘maturity framework’ will be used to assess the readiness of ICS to take on responsibilities including workforce planning.
Developing the final People Plan

This interim plan will be followed by work over the summer with a range of stakeholders to help develop a fully-costed final plan.

The aim is to publish a full, five-year plan later this year, following the Spending Review and the development of five-year STP/ICS plans.

The final plan will include:

- measures to embed culture change and develop leadership capability
- more detail on changes to professional education and on investment in CPD
- more detail on additional staff needed.
Developing the final People Plan

☐ The final plan will be developed via National People Board (to be chaired by the CPO, Prerana Issar) and an advisory board (to be chaired by Baroness Harding).

☐ The way of working will reflect that established in the last phase with working groups chaired by senior leaders including chief executives drawn from the service (Navina Evans, Rob Webster, Julian Hartley).

☐ The plan will seek investment from the CSR, but is clear that there must be a focus on the things that are in the control of the NHS.