

### **OUR PEOPLE PLAN**

### Introduction

Welcome to the HL&SC People Plan. This document sets out the L&SC approach to delivering the national NHS People Plan, published in July 2020. The plan covers the 4 areas of the national plan and highlights the actions required by employers and systems under the national plan, together with L&SC specific activity:

- Looking after our people particularly the actions we must all take to keep our people safe, healthy and well both physically and psychologically.
- Belonging in the NHS and care highlighting the support and action needed to create an organisational culture where everyone feels they belong.
- New ways of working and delivering care emphasising that we need to make effective use of the full range of our people's skills and experience to deliver the best possible patient care.
- Growing for the future particularly by building on the renewed interest in NHS careers to expand and develop our workforce, as well as retaining colleagues for longer.

Our People Plan builds on the work that we have already started through our Workforce Strategy and combines these actions with those set out in the national plan. Whilst there are specific actions in the national plan for the NHS, our intention is to work with all ICS partners and deliver these ambitions for all our health and care workforce.

### Our Vision: Background and Context for Our People Plan

Our vision for Lancashire and South Cumbria for healthy communities with local people that have the best start in life, so they can live longer, healthier lives. At the heart of this vision are the following ambitions:

- We will have healthy communities
- We will have high quality and efficient services
- We will have a health and care service that works for everyone, including our staff

Our ability to do this requires us to have the right workforce in relation to skills, experience and numbers, to provide the right care to our local population and support them in preventing ill-health and maintaining well-being. There are significant health inequalities in our area and we need the workforce to help us address these. We want to develop a system wide approach to tackle the range of issues affecting our workforce. Foremost is our ability to recruit and retain the workforce needed to provide care to our local population. We want to attract the workforce from our local population as well as growing our own so that we can maximise the wider social benefits arising from good employment opportunities.

Our success also relies upon having the right leadership and system level culture creating the right conditions for our workforce to innovate and thrive.

Our ability to grow our own talent, and develop and embed new ways of providing health and care will be dependent on an inclusive, compassionate and open culture which facilitates risk and gain sharing as well as diversity. This will help us maximise the wider benefits of effective and reflective talent management, and compassionate leadership practice.

Never has this been more important than in the current Covid pandemic which has highlighted even greater health inequalities across many of our communities. Our call to action to address these includes the development of a Health Inequalities Charter, which includes a commitment to developing good employment opportunities for all and developing workforce pipelines from underrepresented groups.

### Our Progress So Far...

In 2018/19, we worked with a range of stakeholders to develop our workforce strategy (click here to view) to help us attract, recruit, retain and develop our health and care workforce:

Our vision is to deliver an integrated workforce for the future with the capacity and capability to provide sustainable care and support to our local communities

The strategy focused on 4 priorities, which align well with the 4 chapters of the national People Plan:

- Compassionate leadership and systems development
- A positive employment experience
- Opportunities for all
- Building a sustainable workforce

Since then, we have made progress in a number of these priority areas:

- Developed a careers hub for health and care, supporting over 1200 work/work experience placements and preemployment programmes leading to employment for over 130 people.
- Held a Social care recruitment forum, together with local support for the national recruitment campaign, helping over 150 people access jobs
- Successful programmes of International Recruitment with over 400 staff joining local trusts
- Development of mobility hub to support staff movement and retention in L≻ piloting the digital staff passport
- Supported digital innovation in the workforce and new roles and ways of working
- Development of bespoke volunteer on-line mandatory training and Volunteer Certificate Standards (being adopted nationally)
- Established a Talent and OD Network;
- High Potential scheme to develop staff from under-represented groups for executive roles

  Delivery of 2 system wide EPIC events which saw partners sharing best practice, networking and innovating together

### **Our Priorities**

- Our Workforce Strategy was built around four priorities: Compassionate leadership and systems development; a positive employment experience; opportunities for all and building a sustainable workforce. These align with the national People Plan and we will align our current work against the national plan headings.
- Our original workforce plan includes priorities which are now reflected in this document, recognising that these are local to Lancashire and South Cumbria.
- We are also working with NW ADASS to deliver the Strategic Workforce Framework, including recruitment and retention; employer of choice; leadership; training, support and development and new models of care and integration.
- We have established our L&SC People Board, which will over see our people plan and associated actions, and held our first meeting
- We have also put Talent, Leadership and OD at the centre of our workforce plan and people board, and developed an ICS level team to drive forward initiatives in these areas.
- Our aim is to deliver these, where possible, across all partners in our system NHS, social care, primary care,
   VCFSE
- Following the Covid period, we are in the process of developing plans for how we will restore and reset services in Lancashire and South Cumbria. We will continue to build on the incredible work done by all our workforce and volunteers and the innovative ways of working that were developed in this period. Our People Plan will focus on supporting our workforce and developing the future workforce needed to deliver care to our communities.

## **Our People Board**

- Our People Board will be instrumental in overseeing the delivery of our People Plan and its associated action plans
- It is recognised that the People Plan reflects a wide range of current work programmes and responses to the specific actions set out for employers and systems in the national People Plan
- The People Board's focus over the coming months will be to develop better alignment of the plan with our emerging system-wide priorities and ensure that the workforce implications of these across the health and care sector are addressed
- These will include:
  - System reform, with a focus on place based development and implementation of the next phase of national planning guidance
  - Addressing the issues of fragile services in our area
  - Implementing the clinical strategy which will develop our models of care, accelerate the redesign of our services to future-proof them for the decade ahead and ensure health and care services work together in a more seamless and efficient manner.
  - The development of new healthcare facilities in two of our health systems, through the National Health Infrastructure Plan (HIP2) programme. This is a unique opportunity for the whole of L&SC to ensure future generations have access to modern facilities which effectively meet their needs and that of our workforce

### **Our People Promise**

The People Plan focuses on delivery of the People Promise, with a wide range of actions for employers. As an ICS, our ambition is to work with our partners – NHS, primary care, social care, VCSFE – in order to deliver this across the whole of our health and care workforce and volunteers.

We will also embed these across any ICS level talent and leadership development initiatives to keep them central to everything we deliver in L&SC.



### OUR NHS PEOPLE PROMISE

We are passionate about Inclusion and Diversity and recognise the differences that exist across our system as well as a lack of diversity at senior levels, we are developing programmes of work tailored to the needs of specific underrepresented groups to address issues of inequality.

Key to delivery of the People Promise, NHS Provider trusts have existing Workforce and People strategies in place with a strong focus on culture, leadership and staff engagement. The wider employer actions will be building on this.

### To Deliver Our People Promise we will...

- NHS Provider trusts: undertake a gap analysis in relation to current people/workforce strategies and implement actions to address these, including joint programmes of work across all providers (Dec 20)
- Undertake work at ICS and NW level to address high levels of sickness absence in the provider trusts. (March 21)
- Undertake a baseline survey with primary care to inform an action plan for support and delivery of the employer actions in the People Plan (March 21)
- Establish a system wide Equality, Diversity and Inclusion collaborative and action plan which brings partners from across the provider trusts together with ICS staff (Sept 20)

For staff seconded to and working in the ICS:-

- Developed a H&WB survey and access to support for staff (April 20)
- Developed an agile working protocol with homebased DSE assessment and provided equipment accordingly (Sept 20)
- Develop an ICS staff 121 conversation and induction which covers: flexible working, ED&I, Health and wellbeing (Dec 20)
- Ensuring all roles are flexible and requesting flexibility is easy and encouraged (April 21)
- Develop recruitment processes to ensure the diversity of the community is reflected in our staffing (April 21)
- Ensure that people have access to continuing professional development, supportive supervision and protected time for training, talent management conversations and career progression. (Dec 20)
- Establish a coherent long-term data tool for collection of data to improve quality and understanding of the workforce needs in social care across Lancashire and South Cumbria (March 21)
- Support the continued use of NHS mail and digital technology to enhance the experience of staff working in social care through improved communication with health colleagues (March 21)

# **Looking After Our People**

### Staff Health and Wellbeing

We have established a L&SC Health and Wellbeing leads network which is continuing to develop this activity, focusing on:

- sharing of good practice and learning from organisations and providing opportunities for collaboration and peer support
- sharing of best practice and expert resources in the field of health and wellbeing
- particular focus on how COVID has affected staff from a BAME background and those from the LGBTQ+ community and tailored support for them
- maximising and feeding back in the national H&WB offer

We are working to make sure our support is available across NHS organisations, primary care, social care and our VCFSE organisations, recognising that there are differences in provision and funding across the sector which may impact on our ability to have a comprehensive offer.

Our priority areas include identifying and delivering a L&SC coordinated approach relating to:

- Physical health and wellbeing
- Psychological health and wellbeing
- Financial health and wellbeing
- Occupational health
- Line manager and peer support to create a wellbeing climate and culture at a team level.
- Supporting our Carers and Volunteers

# **Looking After Our People**

### Lancashire and South Cumbria Psychological Resilience Hub

We have provision of psychological wellbeing support for all health and care staff across L&SC in response to Covid-19, with 3 strands:

- Targeted fast track wellbeing screening via an integrated pathway for all health and care staff.
- Consultation, advice and training for all line managers of healthcare staff and facilitated peer support at team level via the workplace trauma support and wellbeing model.
- Support for families of targeted essential frontline workers (September 20)

### **Wellbeing Conversations and Risk Assessments**

NHS providers are to work across the system to take a consistent approach to wellbeing conversations, wellness action plans and risk assessments for all staff. (September 20)

### **Review of Occupational Health Provision**

A scoping exercise will be completed to review Occupational Health provision across the system mapping capacity and demand to ensure the offer is fit for the future. (March 21)

### Agile/Home-working support

Agree agile working policy and principles for L&SC (Dec 20)

## **Looking After Our People**

Working with named leads from each Trust to establish a carers task and finish group which will develop an aligned approach for LSC with a focus on:

- Sharing good practice about flexible working
- Development of a support package for carers
- Roll out of the working carers package (via Employer for Carers) and support for subsequent conversations with staff which will support retention (December 20)
- Ensure ongoing communications to the 850+ Regulated Care providers through L&SC system updates, provider forums and events to ensure that managers and care staff are aware of tools to support their health and wellbeing needs (Existing project continuing)
- Share best practice for workforce from colleagues across health and social care, including support to BAME staff, resilience, infection prevention and control and shared education and training resources. (Existing project continuing)

### Belonging in the NHS/Lancashire & South Cumbria

### Inclusive System Talent, Leadership and OD

Many system level actions are allocated to NHSE/I and or employers and some of these system actions will be supported, cascaded and coordinated locally by our Talent, Leadership and OD geography lead.

There are also a number of actions for employers which will impact upon the TM, OD and Leadership agenda, these will need to be embedded into any system level action and any local delivery or initiative will need to take account of and follow these people plan actions.

Our actions at ICS level will be to ensure ICPs, Trusts and Organisations can access and navigate the new and digitised offers and toolkits from NHSE/I. These will include:

- Local deliverables around the talent management process and ready now talent pool including embedding an ED&I focus throughout the talent pipeline and developing talent management programmes for people in underrepresented groups (March 2021).
- Embedding of the people promise, competency frameworks and leadership compact into local system leadership or development programmes (March 21)

#### **Talent**

Delivering local Talent, OD and Leadership initiatives:

- Delivering the L&SC High Potential Scheme (HPS) Pilot (March 2021)
- Working with local universities to influence, support and develop their health and care leadership and management development qualifications (March 21)
- Undertake a gap analysis to inform whether any positive action strategies need to be developed to ensure succession planning and the HPS are creating a truly representative workforce at all levels (March 21)

### Belonging in the NHS/Lancashire & South Cumbria

Inclusive System Talent, Leadership and OD

### **Organisational Development**

- OD and TM system wide community of practice re-energised (Jan 2021)
- Establish need for OD support for ICP / ICS relationship and place based working culture development (Summer 2021)
- OD and TM system wide capacity review to identify the capacity in OD and Talent Management across the ICS and within each ICP (March 2021)
- Support for PCNs and CDs established and promoted (March 2021)

### Leadership

- Deliver a L&SC system leadership development programme (March 2021)
- Deliver ICS board and SLE level diagnostic based on people promise and compassionate leadership actions and subsequent board development programme (March 2021)
- Shadow Board Programme designed to progress BAME members of staff from Band 8 roles to Board level, limited success due to there not being a proportionate amount of BAME staff in Band 8 roles

### Belonging in the NHS/Lancashire & South Cumbria

### **Equality, Diversity and Inclusion**

As a system, an explicit commitment has been made to being intentionally inclusive in our local People Plan and to focus our efforts on all colleagues who belong to a group currently under-represented in our system workforce.

A group has recently been established to bring together inclusion leads from across the system with the intention to connect across a smaller locality. The emerging areas for prioritisation are as follows:-

- RCN Cultural Ambassador Programme designed to be delivered within organisations but there is an appetite to commission this at ICS level.
- Coaching and mentoring organisations across the system are at different levels of maturity with this but would welcome a system-wide register, similar to that of the NWLA. (March 2021)
- Piloting a reciprocal mentoring programme for ICS team members, learning from our partner organisations.
   (March 2021)
- Developing diverse leadership teams We will scope an ICS leadership development, positive action programme offer, similar and possibly linked to <u>Ready Now</u> and <u>Stepping Up</u> from the NWLA but providing opportunities for those in all under-represented groups which could then provide a diverse talent pipeline for the High Potential Scheme. This would be a pioneering approach not currently taken by any of the other HPS pilot sites. (Jan 2021)

# **New Ways of Working and Delivering Care**

Deliver a programme to develop the nursing & midwifery workforce across L&SC. Work streams include: careers development and progression; Specialist and Advanced Practice; Improving how we attract people to working in L&SC including the development of our L&SC offer; understanding what we need to do better to retain our staff (July 21)

Delivery of the Enabling Effective Learning Environments (EELE) project. Its primary aim is to improve the learning environment for all learners and increase placement capacity in all sectors to help increase our future workforce supply:

- East Lancashire hospitals to develop a system (referred to as a Placement Hub) as a proof of concept that maps every single student from every Higher Education Institution to provide better visibility of every placements occurring in an organisation on a weekly basis to help to manage better both placement and educator capacity (Jan 21)
- Evaluate the proof of concept with the intention to roll out across the L&SC system (July 21)
- Provide financial support for the 2<sup>nd</sup> phase of the project to trial the use of Collaborative Learning in Practice (CLiP) in maternity settings which is due to commence in April 21 and will be evaluated by Oct 21.
- Develop a system-wide infrastructure for the ongoing education for mentorship, coaching and supervision to ensure we can support all learners across the system (July 21)
- Increase number of placements in regulated care across 150 nursing care providers in L&SC (April 21)
- Develop a system-wide infrastructure for ongoing education -10% of Trust training offer to be extended to care providers (April 21)
- Develop a clear plan for the priority specialties for Advanced Clinical Practice for the next round of applications (April 21)

# **New Ways of Working and Delivering Care**

- Develop a full business case for a decision on the development of a L&SC School of Nursing to support our ability to grow our own workforce (Dec 20)
- Implementation of the Psychology Graduate entry programme to increase the number of psychologists and develop a range of career pathways (March 21)
- Involvement in system graduate management trainee pilot working with provider partners and NWLA to provide one placement across our system (Jan 2021)
- Develop a Skills Passport encompassing a L&SC ICS-level agreement for Mandatory Training and Training Needs Analysis (TNA), that enhances mobility of staff across the L&SC ICS and supports the principles safe, effective practice and reduces and/or avoids duplication of training. (July 21)
- Develop virtual Work Experience programmes and support for wider college placements (Dec 20)
- Agree standards and bank rates of pay across all L&SC Trusts as the first step to building a robust bank of staff for critical and enhanced care and AHPs (starting with Speech & Language) to reduce reliance on agencies (Dec 20).
- Develop a programme of work across L&SC to improve the quality and compliance of temporary staff, whilst
  increasing shift fill rates across all trusts to ensure that Trusts get the best value for money from their use of temporary
  staff without impacting upon patient safety (April 21)
- Develop flexible working options to support our staff to achieve a home/work life balance, enable agile working and improve retention (April 21)
- Continue to work with the national central team to develop the scope and use of the digital staff passport to enable better staff movement across organisations (April 21)

# **New Ways of Working and Delivering Care: Social Care**

As an ICS, we are committed to working with the social care sector to develop our workforce. There is range of activity in place to support the wider workforce integration, education and training across social care and health partners in the ICS, and in addition, there is a specific project in place to focus on promoting nursing in regulated care.

- Additional oversight of nursing provider requirements in the sector scoping exercise via questionnaire to be undertaken (Nov 20)
- Review the training available to social care providers post COVID developments including e-learning and development of guide for easy accessibility (Dec 20)
- Scope regulated care providers' priority training and co-ordinated competency development with Trusts/PCNs to include delivery plan for investment of HEE CPD funding( March 21)
- Delivery of CPD programme for regulated care staff (March 21)
- Create digital resource to educate and promote the career opportunities to any individual wishing to progress a nursing career in social care for L&SC – based on GM model (March 21)
- Hold Social Care Workforce Forum listening event for care providers and establishing follow up groups for networks (Oct 20)
- Develop nursing networks in each ICP footprint to support better working, training and professional development across the health and care sector (July 21)

# **New Ways of Working and Delivering Care: VCFSE**

As an ICS, we are committed to working with the Voluntary, Community, Faith, Social Enterprise (VCFSE) sector and have established a VCFSE Alliance, which is represented on the ICS Board.

The Integrated Voluntary Services Project has been initiated against a backdrop of constant growth in demand for services and support recognising that the VCFSE sector has continued to suffer from lowering investment income. There is a strong collective will to capitalise on existing assets in the light of COVID-19 experience and have a plan in place to support Voluntary Services through recovery and restoration. The ultimate aim of the project is to implement a transforming Integrated Voluntary Services Strategy, building upon strong community spirit. This is being offered across all sectors through six work streams:

- Align NHS Volunteer Responders (subject to model development post Mar 21) to support sustainable Community Hubs (target date Dec 2020)
- Scope and pilot system wide Digital Volunteer Passports to enable easier and safer access to opportunities (March 21)
- Implement pathways to health and social care employment through volunteering for Young People' and Carers and Young People who are Carers, targeting the Regulated Care Sector ((March 21)
- Facilitate system wide Volunteer Management Learning and Development programme (March 21)
- Embed mandatory training and Volunteer Certificate Standards for volunteers and Carers (December 21)
- Implement volunteers MIS platform for NHS Trusts (March 22)

# New Ways of Working and Delivering Care: Digital Readiness

- Workforce Strategy and Planning Realising the 'Digital Dividend' underpinning all workforce plans. Mature our attempts
  to calculate and present the 'digital dividend' and impact on the workforce progressively across 1, 3 and 5 years (Sept
  21)
- System Leadership & Digital investment Ensure 'system by default' underpins the Digital Strategic Plan and includes support for the digital confidence of our System Leaders (Dec 20)
- Workforce and wider engagement Ensure workforce plans are afforded the 'best of breed' digital, technology and enterprise infrastructure that will optimise the impact of our workforce (ongoing and subject to ongoing digital investment)
- Digital First Care Models embedded Remaining sensitive to digital exclusion, improve awareness, expectation and confidence in a digital first approach where our frontline workers are the champions respecting the additional offer and promoting the use of technology to empower people and patients (ongoing and maturing)
- Current readiness & predicting need Ensure strategic planning in place for digital literacy training; including clear plans
  to measure need, understand it and address the upskilling required across health, social care and VCFSE (Dec 21)
- Informatics workforce leadership Support for career frameworks and professional development of this key workforce;
   Ensure diversity of this IT workforce is addressed (Sept 21)
- Innovation and Exponential thinking: Driving change that puts innovation and acceleration at the heart of places, systems and organisations (ongoing and maturing)

## **Growing for the Future: System Recruitment**

- Continue to deliver L&SC collaborative International Recruitment programmes for nurses via a combination of GLP and recruitment agencies (April 21)
- Develop plans by December 2020 to show we will fill the L&SC share of the Government's 5000 extra nurses' ambition and that demonstrate realistic future demand forecasts that combine both short term and longer-term recruitment strategies. We recognise that our 'grow our own' strategy needs to strengthen future supply numbers and be largely predicated with the use of the nursing apprenticeship routes.
- Implement the conversion programme for Assistant Practitioners to Registered Nurse via apprenticeships to increase nurse supply (April 21)
- Re-launch a 'Return to Practice' campaign for registered staff across the ICS following the positive publicity of the NHS during Covid (March 21)
- Develop a joined-up strategy to maximise use of the apprenticeship levy (April 21)
- Support PCN development and recruitment into primary care under the Additional Roles Reimbursement Scheme (ARRS) CCGs and systems are expected to explore different ways of supporting PCNs (April 21)
- Work in partnership with HEE and our HEIs to form better relationships with GP trainees at the right time, offering more opportunities for work experience within general practice and develop a portfolio offer for a career pathway in Primary Care in order to employ more of the increased numbers of trainees

# **Growing for the Future: System Retention**

- Utilise programmes of support including the New to Partnership programme and the new General Practice Fellowship, which will now be offered as a guaranteed right to all GP/GPN trainees on completion of their training. (All programmes commence 2020)
- Implement the support packages targeted at under-doctored areas which will include offering financial incentives available through the TERS programme to all new GPs (rolling programme already in place)
- Retaining people in primary care: Systems should ensure that we are supporting our GP workforce through full use
  of the GP retention initiatives currently on offer incl. Digital GP Retention, GP Retainers, GP Returners, GP
  Fellowships (all programmes ongoing)
- Develop 'It's Your Move' voluntary scheme across L&SC, enabling staff to seek alternative
  posts across organisations for career development or where they are seeking a change in role, to increase staff
  retention (April 2021)
- Develop a collaborative approach across L&SC to supporting our doctors in working towards their Certificate
  of Eligibility for Specialist Registration (September 2021)
- Establish the L&SC offer and promote to attract and retain individuals to work within our region (September 2021)
- Developing innovative approaches to agile working and flexibility of employment models to attract and retain different groups of staff and potential employees (September 2021)

# **Growing for the Future: Workforce Planning**

Develop our workforce hub to oversee the creation of ICS and ICP plans and the deliver against them, as well as the other functions set out in the central guidance for mature workforce planning:

- Understand the needs and current position of each ICP, working with a named ICP lead;
- Develop a process for workforce planning and redesign across the ICPS into the ICS, and document and implement it;
- Develop available training and development programmes to improve workforce modelling, planning and redesign skills across ICPs
- Ensure that there is a plan for each ICP, and support those that require additional input;
- Put in place the monitoring, sharing and new project funding arrangements. (December 20)
- Use the outputs from the workforce planning activity to inform the priority workforce redesign areas and develop plans to deliver our commitment to grow our own workforce, including the financial resources to support redesign and training/education of the future workforce over the next 3-5 years (March 21)
- Support the development of PCN workforce planning capacity and capability through the Primary Care Training Hub (March 21)
- Continue the work underway with Trusts working in partnership with WRaPT to develop the Stroke workforce plan that addresses current workforce shortages and delivers the workforce needed following the redesign of Stroke Services across the Stroke Delivery Network (Sept 21).
- Develop a workforce plan to address the shortage of diagnostic radiographers and radiologists (April 21)
  - Develop the Mental Health and Learning Disabilities workforce plan to address workforce gaps (April 21)

## Growing for the Future: Recruitment/Staff Deployment

- Develop a Cancer workforce plan which addresses the gaps and shortages of supply in the workforce across the cancer alliance by March 2021.
- Optimise the 'digital dividend' in all relevant care pathways to ensure we utilise our workforce where their expertise is most needed
- Work with GM and C&M on a NW Bringing Back Staff programme to develop a Reservist model, providing other alternatives to deploy and employ qualified (and non-qualified) individuals who expressed interest in coming back to work in the NHS as a result of the Covid-19 pandemic. (Nov 20)
- Continuing to target those who are disadvantaged or fall under widening participation categories and ensuring through our partnership working that we provide a range of programmes and opportunities for people within their own communities (April 21)
- Continued development of employability programmes targeting those who are unemployed; have disabilities and who have been recently made redundant (Dec 20)
- Fully utilising the digital opportunities and access to social media platforms created during Covid to ensure maximum reach of new virtual programmes and activity to our target audiences (April 21)
- Work via the L&SC SEED Alliance to develop and deliver innovation and improvement in workforce issues, raising the profile of workforce and creating ways of working that ensures the whole population benefits as staff become the innovators and arbiters of change. (September 21)

## **Growing for the Future: New employment routes**

- Fully utilising the digital opportunities and access to social media platforms created during Covid to ensure maximum reach of new virtual programmes and activity to our target audiences (April 21)
- Development of clear signposting to routes into NHS, Health and Care, including routes into Volunteering, Apprenticeships, direct-entry roles and wider programmes delivered (ongoing)
- Continue to develop the careers work across Social Care, developing the range of promotional resources and opportunities for direct entry into roles for those who study at colleges; whilst building a wider profile for Social Care roles overall (September 21)
- Continue work via the Health and Social Care Sector Skills Group (in partnership with the LEP) to develop pathways into volunteering and employment from disadvantaged groups. Promotion of employability in economically inactive pockets/wards across L&SC, in order to drive social inclusion and population health improvement (September 21)
- Develop plans for a single ICS-wide careers and engagement service (building on the existing hub and spoke model) (September 21)
- Undertake career pathways development with easy guides to encourage implementation for social care providers (September 21)

## **Growing for the Future: Temporary Staffing**

- Implement the Temporary Workforce programme (Nursing and Midwifery, Bank, and Medical) to create a shared operational framework for temporary staff which will improve the quality and compliance of temporary staff, whilst increasing shift fill rates across all trusts and ensure that Trusts get the best value for money from their use of temporary staff without impacting upon patient safety. (April 21)
- Incorporate social care providers into Trusts 'bank' availability (Sept 21)
- Locum Support Scheme: Groups of PCNs will be directly supported to create an offer to GPs who want to continue to work on a locum basis. As well as helping to meet demand at practice and PCN level through additional sessions, locum GPs will benefit from greater peer support and networking opportunities, each locum GP engaged through the LSS will also receive a funded session of CPD per month in exchange for a minimum contribution of sessions per week to the group of PCNs (implementation 2020/21 awaiting guidance)



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