Summary of Main Workforce Issues Facing NHS Boards 2013/14

NHS Grampian

Local Delivery Plan – Workforce Implications – 2013/14

Introduction

The NHS Grampian Healthfit 2020 vision\(^1\) is now established in Grampian as the picture for the future healthcare delivery across NHS Grampian. The 2020 vision represents the strategy for NHS Grampian and all other actions and activities are regarded as plans which will move the Board and its services in that direction under the banner of Healthfit 2020.

What is the Grampian 2020 Vision?

“The health of the people of Grampian and the health service in the area is radically different than how it was in 2011. People are healthier because they take responsibility for their own health… a reduction in premature death… people are less dependent on the health service…[but] when health services are needed, they are more effective and tailored to individual needs… possible because of release of staff, funding and buildings from traditional ways of working... The focus on the individual has been undertaken in partnership with local authorities and the third sector...”

Healthcare is delivered by people, working in teams and in communities. Only through the people we employ and the people we serve can we deliver this vision. The Strategy has a number of overarching principles which highlight the overall “direction of travel”:

Principles

a. Integration of health, social & individualised care
b. Health improvement and inequalities focus
c. Large scale application of best practice
d. Re-allocation of resources to target need and deprivation

There are also common themes identified via the pathfinder projects and relevant work which will be essential to the framework’s implementation.

Implementation

a. Organisation of healthcare around communities
b. Reducing the need for inpatient care
c. Developing and empowering communities
d. Improving access to acute services

e. Transform services for older people

The Strategic Framework describes a future service in 2020 in terms of a picture of how, what and where services will be provided in the future.

Coupled with the NHS Grampian Visions and Values (below) this Framework provides a clear direction of travel for the organisation

- Improving Health & Reducing Inequalities
- Delivering High Quality Care in the Right Place
- Involving our Patients, Public, Staff & Partners
- Developing and Empowering our Staff

Underpinning this is the need to continue to ensure patient safety, achieve overall financial balance and achieve efficiency and effectiveness.

**Developing Workforce 2020**

In March 2012, the Grampian Area Partnership Forum (GAPF), at its Annual Away Day dedicated some time to the 2020 vision. The GAPF supported the aspirations outlined by the 2020 vision but identified that clarity of direction for services and for those people who deliver services would be required. They recognised the need for greater flexibilities in and between roles but that all change needed to be developed in partnership with the workforce, both with those on the ground and through the formal partnership structures. The need to identify, develop and maintain different skills and competencies, particularly in new ways of working were identified as important, particularly in relation to telemedicine and other technologies for diagnosing and treating patients remotely.

The requirement for staff to strengthen their role in supporting health improvement, both as part of their work and as citizens was identified.

In September 2012, the Staff Governance Committee hosted a workshop for Executive and Non-Executive Directors of the Board; General Managers, Clinicians from primary and secondary care, Senior Staff Side Representatives, staff from partner Boards, local authorities and NHS Education for Scotland. 68 delegates attended the event, which aimed to:

“To develop a workforce vision for NHS Grampian that supports the delivery of the 2020 vision and fundamental aspects of the Health and Care Framework. This will inform Workforce 2020 and the Development Plan.”

NHS Grampian’s detailed Workforce Plan 2012² provides comprehensive demographic and workforce projections for the Board, however, the key messages about the current workforce in NHS Grampian suggest a number of challenges:

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• The growth in the ageing population and more modest growth in the younger age groups is well known.
• The average age of the workforce is 43 years, rising from 42 last year.
• 62% of the workforce are over 40 years of age and of these 29% are aged over 55 years.
• Gender split is 82% female and 18% male and this has consistently been the case over the last 6 years.
• Whole/Part-time split is 49% whole and 51% part-time.
• As expected nursing staff account for 42% of the workforce.
• Grampian experiences 5.1% higher employment then Scotland as a whole.

Workforce 2020?

The following vision was offered at the Workshop:

By 2020:

NHS Grampian will employ a leaner, more flexible, multi-skilled workforce, who will enable and empower people to take responsibility for their own health. The workforce will be organised in an integrated way, focussing on the needs of the individual rather than the desires of the professional. Whilst managing growth and demand, healthcare professionals will be more accessible to the public and to each other. There will be a sense of responsibility across the organisation that will focus on:

• Results & value for patients;
• Enablement, anticipation & rehabilitation;
• Safety & Quality; and
• Those who need it most.

The following provides a response to the key questions asked around the NHS Grampian workforce, giving examples rather than a comprehensive set of information covering all areas. These examples are then supported by more generic information at the end of the document.

**Significant changes in skill mix and the plans to take this forward**

Through the Workforce Planning process the need to change the overall skill mix of the organisation has been identified; Nurses and Midwives, Allied Health Professionals (AHPs), Healthcare Scientists, Facilities staff and Administrative staff groups all identified this to be a clear strategy to ensure that they had a suitable and sustainable workforce. Clearly this strategy relies on natural wastage to create opportunities in the right services and departments. For example, a review is continuing on an on-going basis, of the Child and Adolescent Mental Health Service Community Mental Health teams and the provision of Psychological Therapies.
There continues to be a difficulty in recruitment and retention in some services due to the geography, local competition (e.g. Estates, Home Care Assistants and eHealth staff groups), short term nature of some funding (e.g. Health Coaches) and the level of skill required e.g. in health visiting and children’s services. Children’s services remain vulnerable from a generalist staffing perspective with a particular emphasis on medical staffing which is consistent with the picture across NHS Scotland.

There have also been challenges in relation to accessing a sufficient workforce supply in areas such as Advanced Nurse Practitioners and Health Care Support Workers/Home Care Assistants.

Work is continuing in relation to Health Care Support Workers which will make up a core part of the future workforce. To date, a Framework has been drafted and is being piloted. Currently there is a small NES funded pilot underway to support the development of Recognised Prior Learning for Band 2 nursing assistants to support this group in moving into Band 3 roles. It will be used to identify learning and education needs of the HCSW and options for meeting their development.

Allied Health Professions (AHPs) in Grampian have undergone a significant review of their staffing structure and this continues to be monitored. The aim is to allow greater levels of continuity of service and cohesion between the AHPs across sectors. This has meant that some roles have been redesigned to a lower banding, creating a skill mix that better reflects the overall service needs.

The North of Scotland Paediatric Sustainability Review is supported by Boards across the North. There will be a requirement for enhanced cross-board collaboration and to explore opportunities around the A96 corridor as identified in the review. The Paediatric Unscheduled Care project is progressing in association with NHS 24. With a trial of the service planned and further work-up of the associated rota and cost model for approval by NoS planning group.

**Existing and planned new service areas with particular workforce pressures and possible solutions;**

NHS Grampian, in collaboration with the University of Aberdeen, has implemented a Physician Assistant (PA) course with the aim of supporting the longer term aspiration of a trained multi-disciplinary workforce. The second year PA students are about to enter their intern year in autumn 2013 and planning for this is progressing. The clinical placements for the first year PA students is currently being organised including NHS Highland providing placements. There are a number of strands behind the introduction of this workforce 1) to develop a trained workforce 2) to support the educational experience of doctors in training 3) to improve patient and service continuity in wards and theatres and 4) in the longer term to support the delivery of care in the community.

With the opening of the new Emergency Care Centre (ECC) in Autumn 2012 NHS Grampian has seen changes in the delivery of services and the ways in which staff work. There has been significant work completed to understand what these changes are and how the organisation and staff will deliver services. To achieve this significant time has been invested in ensuring that the workforce are fully prepared
and developed for the service and facility in which they are working. Ongoing development and workforce planning will further support these staff in achieving the required new ways of working. The treatment time guarantee along with the opening of the new ECC has however, resulted in demands on the workforce that are creating current pressures. These are being explored by senior management with various strategies being implemented including addressing the increased level of vacancies.

The primary care workforce is experiencing some retirement and recruitment issues in common with other areas of NHS Scotland. Resilience and re-design is required to support the future of small general/rural GP practices. These are currently being explored and detailed by a local primary care workforce survey planned for the near future for General Practices within Grampian.

**Other significant workforce issues that the Scottish Government should be aware of that may require a national focus; and**

In common with all other health boards in Scotland, NHS Grampian must achieve financial balance without compromising patient care. This means finding more effective and different ways of working and ensuring we have the right mix of skills. Over the last few years the turnover rate in NHS Grampian has continued at a healthy 11% (approximately) but this ranges between 7 and 17.5% dependent on the staff group. The Board also has a robust vacancy management programme. This requires managers to scrutinise every vacancy to assess whether and how it should be filled, not filling certain posts when they become vacant and re-designing services. The ability to fill existing vacancies and recruit to new posts will remain a challenge as this process must ensure a balance between safe and sustainable operational service delivery and affordability. There has over the last few years been a high level of live vacancies within the recruitment system.

More details relating to the changes to the workforce can be found within the NHS Grampian Workforce Plan 2011 and 2012.

http://www.nhsgrampian.org/nhsgrampian/gra_display.jsp.jspSessionID=D2792202513EB23B21B5FAD938F4C32A?pContentID=6847&p_appli=CCC&p_service=Content_show &


Over the last year or so, NHS Grampian has had a number of vacancies in the nursing and midwifery staff group and in order to maintain a safe, quality service has utilised bank staff. Staff on the bank are recruited to the same robust standards as other staff in NHSG and can provide flexibility in teams to meet service demands. Often bank staff are already employed on a part-time basis within the organisation ensuring continuity of care in some ward areas. In some circumstances, individuals have chosen to work as a professional bank nurse as a career option.
The national reshaping medical workforce workstream has paused for the majority of specialties for admission in 2013. As with other boards in Scotland the Medical Workforce Risk Analysis Tool developed by South East and Tayside regional planning group is being introduced in NHS Grampian. The first area this tool is being used in is Emergency Medicine due to the significant risks associated with national recruitment from 2013 for this specialty across Scotland.

For the medical workforce the General Medical Council process of revalidation is starting in 2013. Appraisal and reporting systems are in place locally to support the successful facilitation of positive recommendations to the GMC.

**How the workforce is contributing to efficiency savings.**

Through the Workforce Planning process (6 Steps Methodology) NHS Grampian has encouraged services, sectors and CHPs to look at how efficiently and effectively they are utilising their workforce. This process encourages services to identify opportunities for working differently and ensuring that workload and tasks are appropriately assigned to those best placed to carry out that work. Nursing staff have also been working closely with their colleagues to reduce duplication and streamline working practice where boundaries of roles or geography could be clearer.

NHS Grampian is also in the process of reinvigorating an initiative called Safe Affordable Workforce for 2020 (SAW 2020). Patient safety and clinical care remain a top priority and the process involves an organisation wide review of staff numbers, grades and skills. It aims to deliver a safe, affordable and sustainable workforce at the same time as achieving cost reductions in each sector and directorate and is one of the ways the organisation is seeking to achieve financial balance. The process has been fully aligned to the workforce planning process and the 2020 Vision which are already embedded in NHS Grampian. During 2011 and 2012 the change in workforce numbers were part of the SAW process and organisational reorganisation. Managers and teams were involved in this process as well as staff side representatives.

Some outcomes of this process included redesigned teams as well as examples of employing administrative staff to support the nursing teams in order to release nurses to concentrate on nursing tasks. This was a positive strategy to minimise the amount of time nurses were required to complete admin type tasks that did not require their particular skills or knowledge. Other changes to the nursing workforce over the last few years include the introduction of specialist nurses to support services and medical staff and improve the patients experience and quality of care. These posts generally require nurses to have specialist qualifications and are focused within specific clinical services.

NHS Grampian continues to work towards achieving the 25% reduction in management grades. Last reported figures as at 31st March 2012 reported that there had been an in year reduction of (11.3) wte of Executive Management A to I posts or (-9.3%). During 2010/11 and 2011/12 cumulative reduction is (24.66) wte A to I posts or (-18.27%). The actual Projected Reduction to 31st March 2015 is well on target.
NHS Grampian has recognised the value of the suite of Nursing and Midwifery Workload Workforce tools, using them, where available, within a triangulated method as part of the workforce planning process. The Adult In-Patient and Professional Judgement tools were used by Senior Charge Nurses and Nurse Managers to aid conversations around staffing for the move to the ECC. Senior Charge Nurses are, with training, to use these tools on a regular basis to support them and their managers to make informed decisions around workforce planning. However, gaps have been identified in areas such as out-patients which do not currently have tools available to them. NHS Grampian continues to have strong clinical involvement in the development and use of Perioperative, Neonatal, Maternity, Paediatrics and Childrens Community and Specialist Nurse Tools as well as having recently taken part in the national pilot run for the Community Workload Tool for all community nursing staff.

As the national supplementary medical staffing standards have become widely circulated, the organisation is now exploring how to implement these standards locally. This involves being cognisant of what is occurring nationally and exploring how we can build upon the processes that currently exist for nursing.

Evidence supports the success of Aberdeen Dental School in increasing access to NHS dentistry across the North of Scotland. Current work is exploring how to ensure that this skill is now organised optimally for the patient pathway across primary and secondary care.

**Risk Management Plan of Local Delivery Plan**

Within the Risk Management Plan of the Local Delivery Plan there are many other examples of Workforce risks relevant to each of the targets which have been identified. A significant number of these risks relate to changing culture, access to appropriate development, availability of staff and their competence/capability to support the achievement of the targets. Each target has identified how the risk will be managed and this detailed information has not been repeated within this document but used illustratively.

What is significant, however, is the need to strengthen development opportunities in conjunction with primary care, voluntary services and local authority. It is vital that all parties are assured that competence and skills are consistent and relevant across the patient pathway. The organisation will need to manage learning across several other systems and organisations and key to this is an effective learning management system which can be utilised by all partners.

The use of the Learning and Education Plans from within the Service based Workforce Plans and identification of development through the Knowledge and Skills Framework will be essential in prioritising and resourcing development needs. A blended learning approach and more flexibility are required in terms of methods of delivery to ensure that staff can access the required and agreed development. For front line staff suicide prevention is being offered both as an initial eLearning package and is further supported with in depth “classroom” based development.
activities. There have, however, been challenges accessing the general practice population and ensuring the appropriate staff received development.

A number of the workforce risks identify the recruitment of additional staff and the introduction of new roles to cope with increasing service demand. This is underpinned by the need to utilise the wider workforce differently such as the GPs or charity sector as highlighted in the diagnosing cancer early target.

A review of Induction and Statutory and Mandatory training is currently underway to ensure that the process, content and delivery method meets both organisational and individual requirements and is prioritised based on agreed need. This will also support the overall monitoring of the achievement of an agreed development activity underpinning a number of the HEAT targets. Some of this content will be provided through eLearning which can be made available through the current learning management system to partners outwith NHS Grampian.