

Stephen Brown (Chief Officer)

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Agenda Item: 12

## **Integration Joint Board**

**Date of Meeting: 19 April 2023.**

**Subject: Orkney Health and Care Workforce Plan 2020 – 2022.**

### **1. Purpose**

1.1. To present the status of outcomes contained in the Orkney Health and Care Workforce Plan 2020 –2022.

### **2. Recommendations**

The Integration Joint Board is invited to scrutinise:

2.1. Progress made in respect of actions detailed in the Orkney Health and Care Workforce Plan 2020-2022, attached as Appendix 1 to this report, in order to obtain assurance that the expected outcomes have been met.

### **3. Background**

3.1. The Orkney Integration Scheme required the development of a Workforce Development Strategy and associated Action Plan by the Parties (i.e. Orkney Islands Council and NHS Orkney).

3.2. The Workforce Plan, which incorporated 12 priorities with expected outcomes, was considered and approved by the Integration Joint Board in December 2020, and ran from December 2020 to December 2022.

3.3. This has now been superseded by the 3-Year Integrated Workforce Plan 2022 – 2025, led by NHS Orkney, which contains health and social care workforce detail, and requires to be reviewed annually.

### **4. Key Highlights**

4.1. Appendix 1 highlights the status of actions at March 2023. From the 12 priority areas a number of actions have been completed or have become embedded in core business practice.

4.2. Some actions were hampered due to COVID-19 but are now on track again – for example, progress the development of clear career pathways and provide opportunities for staff motivated to advance in their chosen career, including investigation of greater use of apprenticeships.

4.3. A number of actions will continue to progress as part of recommendations from the Learning Needs Analysis that is currently underway. This analysis aligns with the current Integrated Workforce Plan 2022 – 2025 for health and social care.

## 5. Contribution to quality

Please indicate which of the Orkney Community Plan 2023 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

<b>Resilience:</b> To support and promote our strong communities.	Yes.
<b>Enterprise:</b> To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
<b>Equality:</b> To encourage services to provide equal opportunities for everyone.	Yes.
<b>Fairness:</b> To make sure socio-economic and social factors are balanced.	Yes.
<b>Innovation:</b> To overcome issues more effectively through partnership working.	Yes.
<b>Leadership:</b> To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	No.
<b>Sustainability:</b> To make sure economic and environmental factors are balanced.	No.

## 6. Resource and financial implications

6.1. There are no financial implications stemming from the progress of the Action Plan as all resources will be available through the training budgets (or training fund) of Orkney Islands Council and NHS Orkney.

## 7. Risk and equality implications

7.1. The Integrated Workforce Plan 2022 – 2025 for health and social care, which was presented to the Board in February 2023 and supersedes the OHAC Workforce Plan 2020 – 2022, will benefit all equalities groups through more robust workforce planning and employee training and development.

## 8. Direction required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.

## 9. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

## 10. Authors and contact information

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## 11. Supporting documents

11.1. Appendix 1: Progress Review of Actions from the Orkney Health and Care Workforce Plan 2020 - 2022.

## Appendix 1: Progress Review of the Orkney Health and Care (OHAC) Workforce Plan 2020 – 2022

<b>1. Workforce Priority: the delivery of effective partnership training and support to protect our children and young people in response to the Children’s and Young People’s Inspection Improvement Plan.</b>	
<b>Expected Outcome.</b>	Staff within OHAC are trained for the roles they undertake in relation to child protection and ‘Getting it Right For Every Child’ in response to the Joint Inspection Report February 2020.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
See detailed Inspection Improvement Plan.	Chief Social Work Officer.	Within existing resources.	2021.	All staff appropriately trained.	Training in neglect has been delivered and general child protection training has been provided. An Annual Public Protection Training Calendar is being developed.

<b>2. Workforce Priority: Facilitation of events that promote further integration of leadership, service delivery and culture across OHAC.</b>	
<b>Expected Outcome.</b>	To improve service user, patient, and carer outcomes through streamlined, seamless, services.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Work with the Scottish Government and key services to develop facilitated	Relevant Head of service.	Within existing resources.	2022.	Staff reporting simpler pathways to support training.	A number of integrated events are provided in-house and offered to staff from both parent organisations – the Training Diary is shared will all colleagues working in OHAC.

Actions.	Lead Officer.	Resources Required.	Target Date.	Measurement of outcome.	Status at March 2023.
integration events designed to optimise seamless service delivery.					
Ensure all learning opportunities are integrated as far as possible.	All Heads of Service.	Within existing resource.	2022.	Evaluation to include a measurement of 'integration rating' using attendee information.	<p>As stated above, a number of integrated learning opportunities are provided on a recurring basis. Examples of integrated training can also be found as part of the Primary Care Improvement Plan, where pharmacists work in practices alongside multi-disciplinary colleagues to promote pharmacotherapy best practice and reduce adverse events.</p> <p>Adult Support and Protection training is offered across the Partnership.</p> <p>A measurement of 'integration rating' has not been implemented to date but could be considered as part of relevant training evaluation.</p>
Promote the concept of 'family' across health and social care.	All managers.	Within existing resource.	2021.	Staff surveys such as iMatter.	Both NHSO and OIC have undertaken staff surveys in the last three years. Results for iMatter were shared with all staff as part of 7-minute briefing communications. It is not clear if this aids promotion of the concept of family but the highest scores achieved related to <b><i>'I am clear about my duties and responsibilities; My work gives me</i></b>

Actions.	Lead Officer.	Resources Required.	Target Date.	Measurement of outcome.	Status at March 2023.
					<p><b><i>a sense of achievement; My direct line manager is sufficiently approachable; I understand how my role contributes to the goals of the organisation; I feel my direct line manager cares about my health and well-being.'</i></b></p> <p>Another example is the Adult Support and Protection (ASP) training provided via Teams to over 300 participants from OHAC, NHS, other OIC staff (e.g. housing, environmental health), third sector and police. In addition, ASP resources have been added to iLearn, which are accessible by all OIC employees. There have been two multi-agency self-harm, self-neglect, and hoarding training sessions (one of which was joint with Shetland and Western Isles), with another planned for early 2023, specifically aimed at those working with service users in their own homes.</p>

**3. Workforce Priority: Ensure that appropriate training and personal support are in place for all OHAC staff to ensure our continued protection as our understanding of the impacts of COVID-19 changes over time**

<b>Expected Outcome.</b>	Orkney Health and Care staff are appropriately trained and supported in relation to the effects of COVID-19.
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<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Essential training is completed regarding PPE etc.	All managers.	Within existing resources.	2020.	Performance Indicators (OIC).	<p>PPE training figures for OIC employees are monitored by line managers. Recent changes have been made to the training programme to make it easier for staff to complete.</p> <p>The Infection Prevention and Control Team at NHSO offer face to face PPE training as requested.</p> <p>Team completion rates of PPE training figures are recorded on TURAS and team completion rates can be viewed by line managers.</p> <p>This has now become a 'business as usual' element.</p>
Learning opportunities are provided to ensure staff are competent in the use of technology tools such as Near Me and Teams.	Relevant Head of Service.	Within existing resources.	2021.	Project reports.	<p>Near Me training was provided, and training videos were designed, for online use. Near Me continues to be used regularly by some services – e.g., Speech and Language Therapists and the Community Mental Health Team.</p> <p>Microsoft Teams training is available and advertised regularly via NHSO.</p>

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
All staff are encouraged to promote their health and wellbeing.	Relevant Team Lead / Manager.	Within existing resources.	2021.	Newsletters and bulletins.	Information regarding available services are advertised on the NHSO blog and are regularly shared as part of the NHSO weekly communication email. During the pandemic, OIC staff were regularly reminded of available materials / where to get help. There is no available mechanism to identify how well the resources are utilised.
All staff are aware of who to contact if they need support.	Relevant Team Lead / Manager.	Within existing resources.	2021.	Staff surveys.	As per information relating to Staff surveys at Action 2.

<b>4. Workforce priority: Improved retention of staff, particularly in relation to highly skilled specialist services.</b>	
<b>Expected Outcome.</b>	OHAC staff turnover is minimised.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Staff support and supervision is standardised across OHAC.	All Heads of Service.	Within existing resources.	2021.	Staff feedback.	Work is currently underway on a joint induction process, and agreed joint surveys via iMatter.



<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Regional networks are utilised to support highly skilled specialist staff, who can be isolated in their role.	Lead Professionals.	Within existing resource.	2021.	Staff feedback.	Some staff groups use regional networks as part of their professional practice on a routine business. Information is then shared with the wider team.

<b>5. Workforce priority: Leadership development and ownership is encouraged and promoted across OHAC.</b>	
<b>Expected Outcome.</b>	Succession planning for OHAC future leaders becomes routine planning.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Leadership learning opportunities are provided for all staff.	Heads of Service.	Within existing resources.	2022.	Staff feedback.	This will be taken forward during next reporting period.
Leadership opportunities are provided, such as shadowing.	Heads of Service.	Within existing resources.	2021.	Staff feedback.	This will be taken forward during next reporting period.

**6. Workforce priority: Safe staffing legislation and caseload weighting tools form rationale for appropriate staffing levels within relevant services.**

<b>Expected Outcome.</b>	Safe Staffing level assurance is provided across OHAC.
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<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Caseload weighting tools to be used across appropriate services.	Relevant Heads of Service.	Within existing resources.	2021.	Performance reports from use of tools.	<p>Specialist Workload Tools run:</p> <ul style="list-style-type: none"> <li>• 2019: <ul style="list-style-type: none"> <li>○ Clinical Nurse Specialist (CNS) Long Term Conditions (diabetic, Cardiac).</li> <li>○ Community Nursing – Mainland (West and East); Small Isles x4.</li> <li>○ Maternity.</li> </ul> </li> <li>• 2020: <ul style="list-style-type: none"> <li>○ Clinical Nurse Specialist (CNS) Long Term Conditions (MND/MS, Diabetic).</li> <li>○ Community Nursing – HV.</li> </ul> </li> </ul> <p>Due to other pressures this is not yet established. Regulated services are assessed as part of the regulatory inspection process.</p>
Outcomes of caseload weighting	Senior Management Team.	Within existing resources.	2021.	Performance reports.	To date, a final report using the Common Staffing Method has not been completed by the clinical team leads +/-

to be considered at SMT.					the senior clinical manager lead/ professional lead.
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<b>7. Workforce Priority: Workforce development plans to respond to the outcome of the independent review of adult social care (this will be fleshed out in more detail once the Scottish Government responds to the Independent Chair’s report).</b>	
<b>Expected Outcome.</b>	Scottish Government’s response to the report of the independent review of adult social care is implemented.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
TBC once the Scottish Government has responded.					Closed. National Care Service legislation has been published.

<b>8. Workforce Priority: Training across the workforce, as appropriate to implement the mental health strategy and the dementia strategy.</b>	
<b>Expected Outcomes.</b>	Staff and carers trained to effectively support people with dementia.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
See mental health and dementia		OHAC, Age Scotland Orkney and Dementia UK	TBC	Post advertised	Work has progressed towards a blended model for social care staff where staff initially complete online training at

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
actions plans once finalised.		are currently collaborating with potential plans for an additional band 7 nurse role to support people living with dementia and families from peri-diagnosis to advanced dementia through to grief and loss.			<p>informed and skilled level of the Promoting Excellence Framework. This will then be followed up by taught stress and distress essentials training.</p> <p>NHS staff complete informed level at induction.</p> <p>An updated Training Needs Analysis is planned for NHSO staff prior to seeking agreement for a targeted and rolling programme tailored to the care setting. The target level for all direct contact staff is at least skilled level of the Promoting Excellence Framework.</p> <p>Bi-monthly training sessions are offered through our national consultant group to all health and care staff. These are themed sessions which continue to be available online for reference.</p> <p>There is continued support to learning through the Dementia Champion Programme through UWS. This programme centred on development of knowledge and skills to support staff to become positive change agents for dementia in hospital.</p>

**9. Workforce Priority: In response to SSSI inspection reports, address specific training needs as identified, including dedicated leadership training for Registered Managers of our in-house social care services.**

<b>Expected Outcome.</b>	Service users' needs are optimally met.
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<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Further leadership training provided for social care managers.	Head of Health and Community Care and Chief Social Work Officer.	Within existing resources and access to Council training budget as appropriate.	2021.	Improved grades in 'Leadership' from SSSI care inspections.	To be taken forward in next reporting period.

**10. Workforce Priority: Progress the development of clear career pathways and provide opportunities for staff motivated to advance in their chosen career, including investigation of greater use of apprenticeships.**

<b>Expected Outcome.</b>	Improved staff retention and morale, providing better care and support.
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<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Clarify staff development opportunities and secure	All Heads of Service.	Within existing resources.	2021.	Number of advancement and apprenticeship opportunities.	Apprenticeships took a back step during COVID-19 and we are only beginning to look at the process again.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
apprenticeship entry level posts.					Currently, there is one Modern Apprentice and two graduate apprenticeships within Primary Care (one was in the Test Centre). For Social Care there are usually up to six Modern Apprenticeships offered annually with variable success. There are also formal links with the Orkney College 'Introduction to Care' course, which guarantees students an interview for social care posts on completion of the course. We are also supporting the achievement of a professional qualification for staff who want to progress into management roles.

<b>11. Workforce Priority: Further develop collaborative working to promote Learning and Development and provision of opportunities across the partnership.</b>					
<b>Expected Outcome.</b>	Improved staff integration, providing more seamless care and support.				
<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
Maintain a culture of collaborative training opportunities, both across the	All Heads of Service.	Within existing resources.	2021.	Increased number of joint training opportunities across the partnership.	This action directly links with Action 2, specifically ' <b><i>Ensure all learning opportunities are integrated as far as</i></b>

partnership and more widely within OIC and NHSO.					<b>possible'</b> and the status is as updated in that section.
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<b>12. Workforce Priority: Develop Primary Care services in line with the Primary Care Improvement Plan (PCIP).</b>	
<b>Expected Outcome.</b>	Improved primary care services for our patient population, better use of clinical time, and more equitable distribution of duties.

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
See PCIP.	Head of Primary Care Services.	Within PCIP allocation of resources.	2022.	TBC through agreed PCIP.	Developments to date include employment of Community Link Workers, Pharmacists and Pharmacy Technicians; First point of contact for physiotherapists and a mental health professional working within GP Practices. The IJB has responsibility for Vaccine Transformation and plans are being implemented for a pilot project of phlebotomy and wound care, for patients within Primary Care settings. While additionality of workforce has progressed, lack of funding has hindered commissioning a seamless service for all of the above, causing challenges during staff absences. This is compounded by a lack of suitable accommodation for the team to

<b>Actions.</b>	<b>Lead Officer.</b>	<b>Resources Required.</b>	<b>Target Date.</b>	<b>Measurement of outcome.</b>	<b>Status at March 2023.</b>
					<p>work together in a Multi-Disciplinary Team approach.</p> <p>To date, the full funding allocation for the PCIP has been spent and unless additional funding streams become available we are unable to progress any further developments. There is a similar picture across Scottish Health Boards.</p>