

Fourth IAPT Leadership and Innovation Forum Transforming Workforce Planning

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Themes

- HEE and what we do
- NW Planning processes
- Planning for Five Year Forward, Vanguard, near Vanguard, Successor Regimes, Pioneers and Service Reconfiguration
- What is WRaPT?
- IAPT workforce (PPN and PP groups)



Who is Health Education England (HEE)?

“We are the NHS engine that will deliver a better health and healthcare workforce for England. We are responsible for the education, training and personal development of every member of staff, and recruiting for values. We are England’s health and healthcare people service.”

Who are the Local Education & Training Boards

(LETB's)?

North Geography

- North East
- Yorkshire & The Humber
- North West

Geographical efficiency –
local flexibility and
engagement



“Quality education for quality patient care, transforming our workforce.”

Our vision

Our mission

“To support the delivery of excellent healthcare and health improvement through high quality education and training so that the quality of services, the patient experience and that of staff and learners will be improved.”

Our Focus

What we do commission:

- Under-Graduate or pre-registration programmes (nurses, AHPs, etc.)
- Post-Graduate Medical Training
- Programmes that lead to changes to registration (Health Visitors, School Nurses)

Generally outside of our scope:

- Professional Development (*responsibility of employers*) – *however some funds are available locally via the LETB's*
- Leadership Programmes (*responsibility of NHS Leadership Academy*)

What is Workforce Planning?

“A robust workforce planning process ensures we have staff in the right numbers, with the right skills and the right values and behaviours to deliver high quality care.”

“...right number of people with the right skills are in the right place at the right time... in an integrated way”

What is Workforce Planning?

The term 'workforce planning' tends to embrace a diverse and extensive range of activities, which may vary between organisations and situations.

- **Operational** level (today): What tasks need doing? Who can do them? Principles of Care?
- **Management** level (this year): Which roles? How many?
- **Strategic** level (over 1-5 years): How many do we need to train? What capability and competences are required.

The Current Reality...

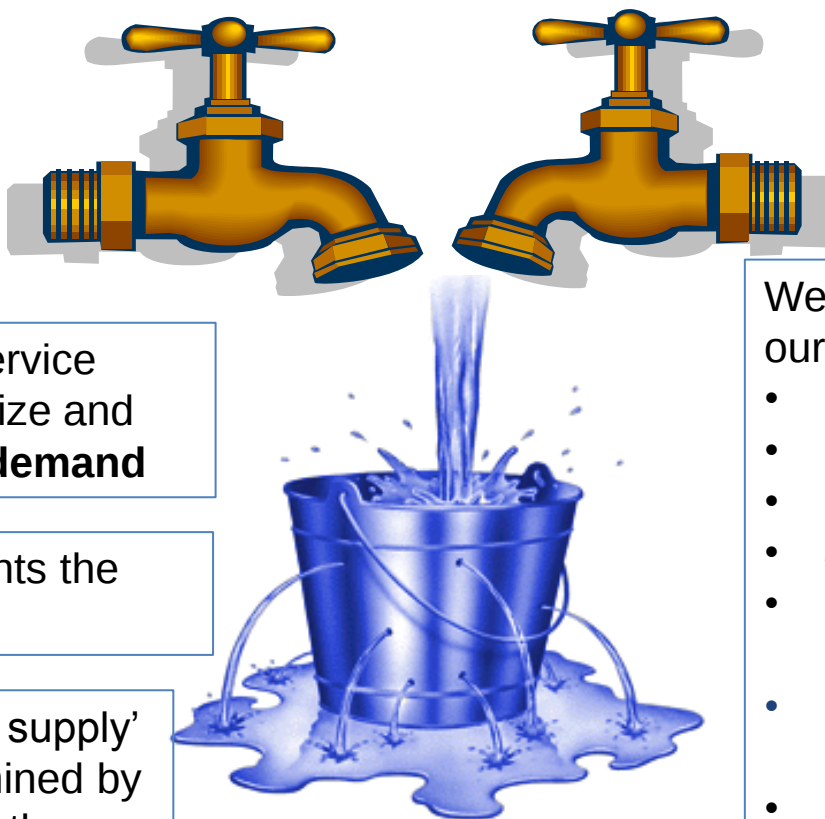
Other supply (e.g. labour market, RTP, international recruitment)

HEE – newly qualified supply

Commissioners and service providers specify the size and shape of the bucket - **demand**

The water represents the **supply**

'Leaks' and 'other supply' are largely determined by the choices of the workforce, but can be influenced by employers



Filling the bucket is not all about the flow from HEE!

We include the following in our models:

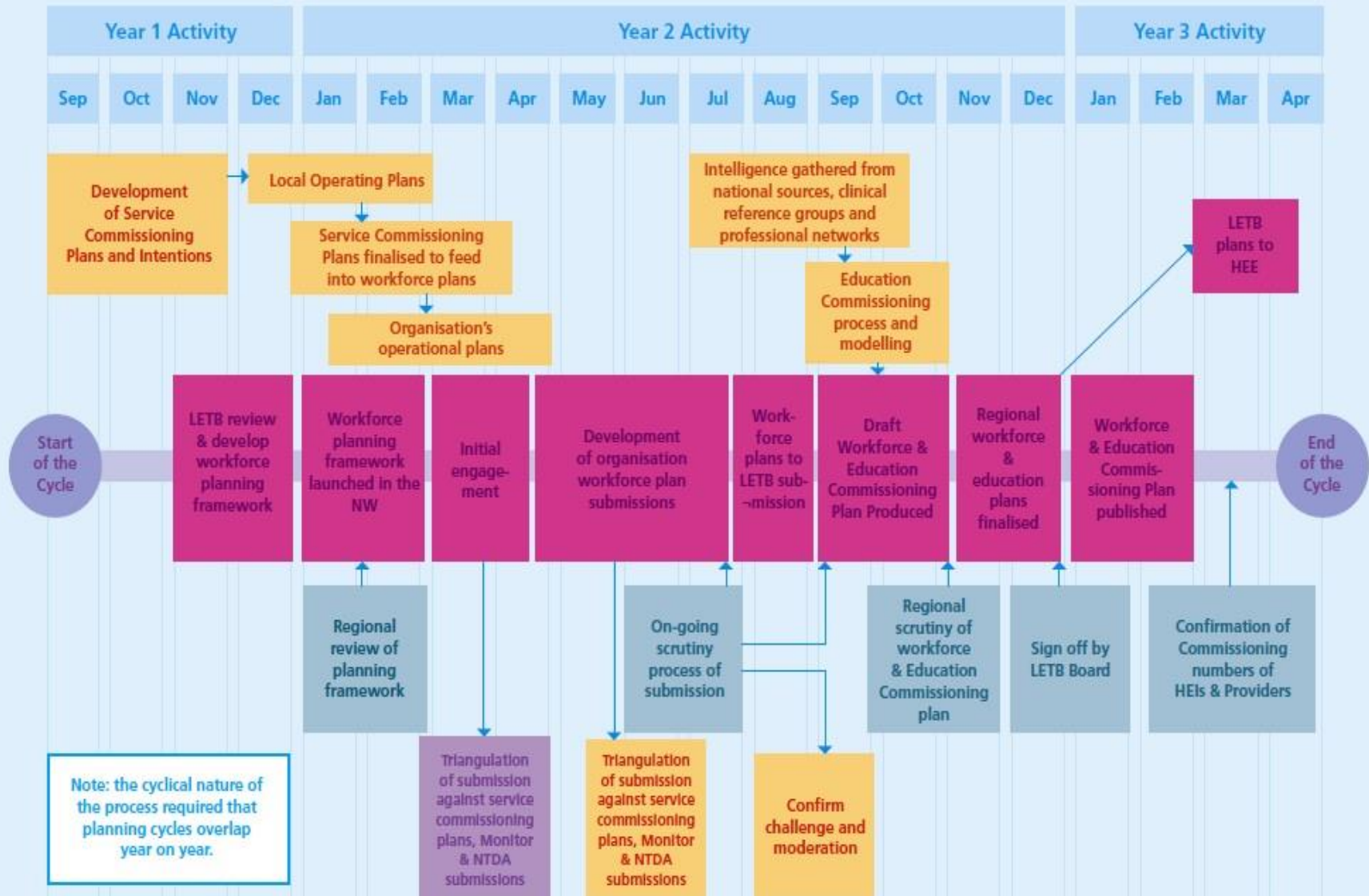
- Retirements
- Non-retirement leavers
- Return To Practice
- Joiners
- Recruitment to commissions
- **Attrition from programmes**
- Recruitment by employers
- Participation rates

Workforce Transformation – (1) More of the same (2) Do something different (3) Up-skill Current Workforce (4) New Ways of Working

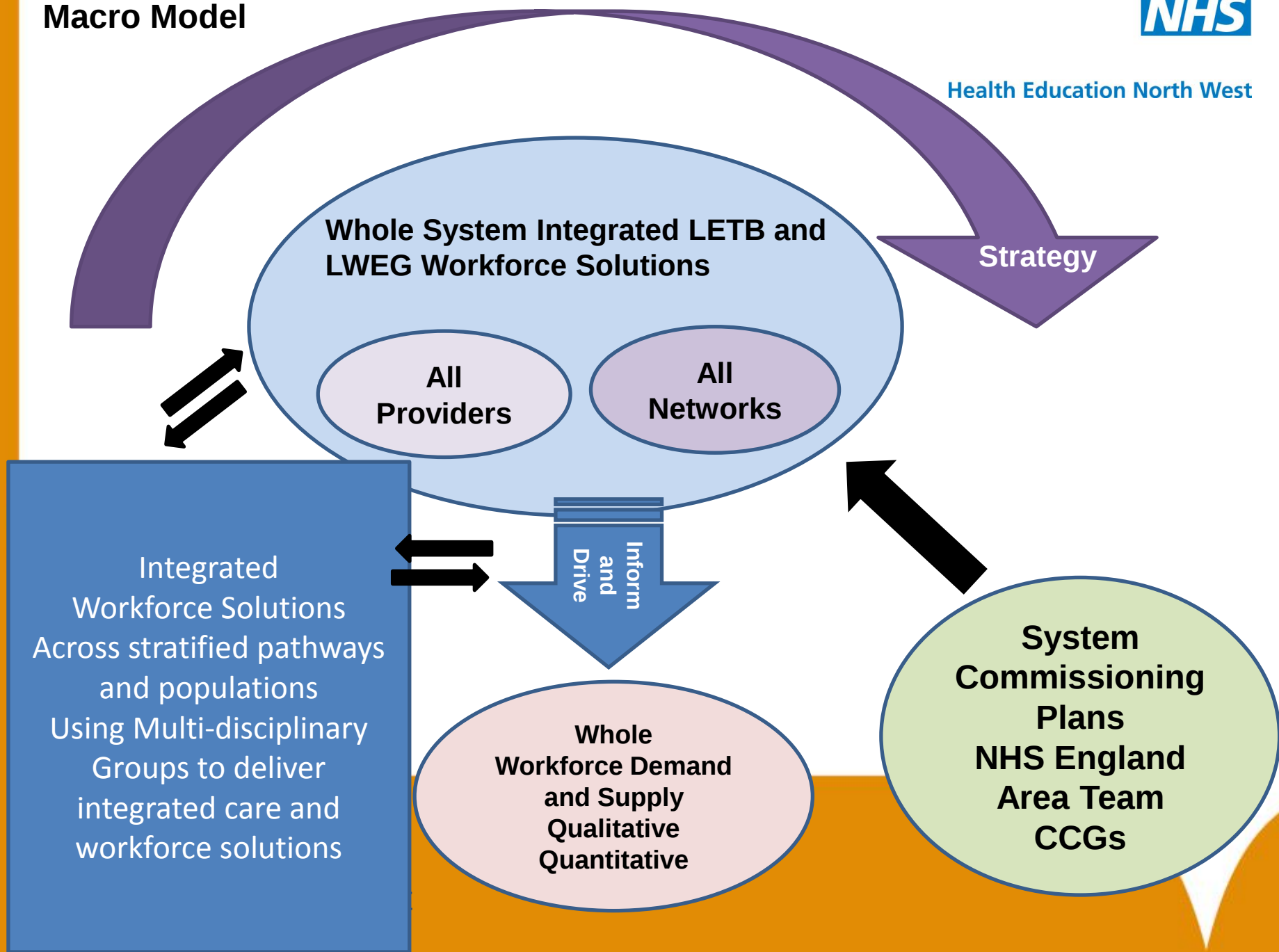
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Health Education North West: Workforce Planning Cycle



Macro Model



Engagement Process

Health Education North West

Commissioners

NHS England
Area Teams
CCGs
Local Authorities
PHE
Skills for Care
Skills for Health

Providers

Primary
Secondary
Tertiary
Community
3rd Sector
AQPs (IHAS)
Mental Health
Ambulance

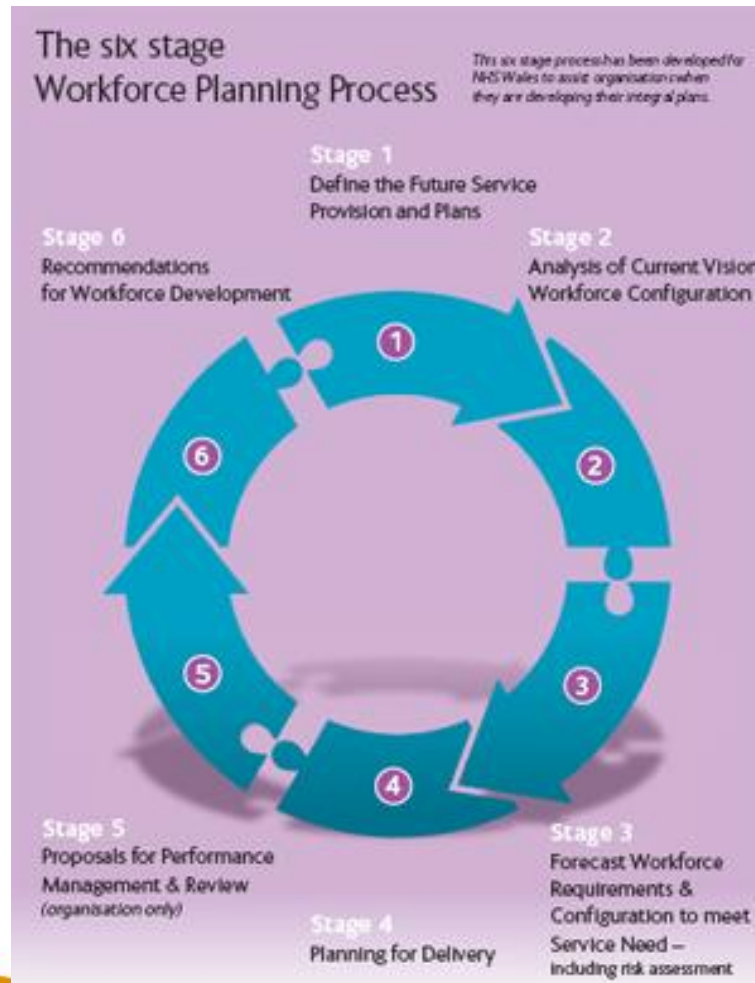
Education

HEIs
Skills Academy
CPD Systems
E-learning
Simulation

Networks and
Others

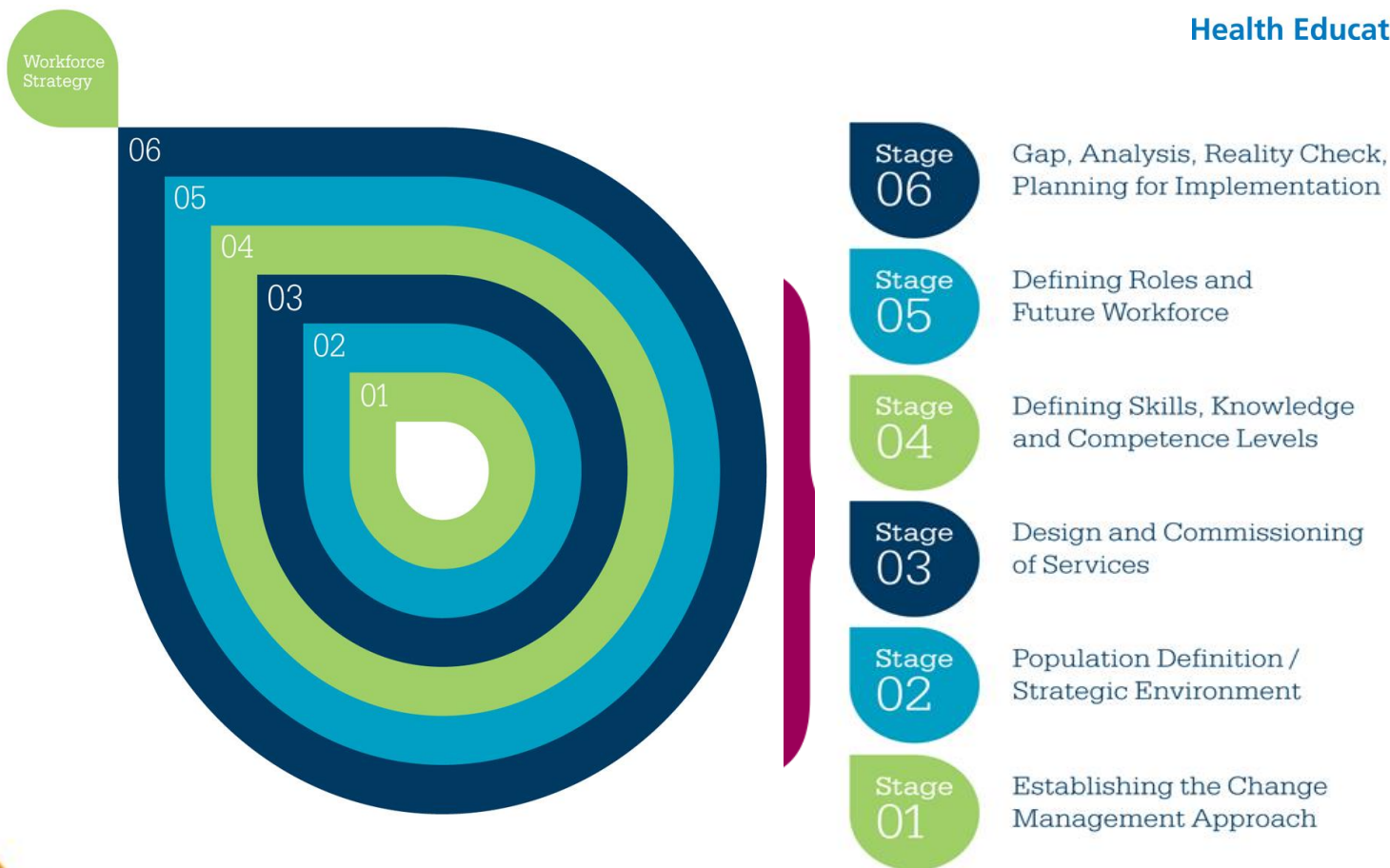
AHP
Scientists
Pharmacy
Psychology
Critical Care
AHSNs
NWRD
Clinical Senates
Dentistry
Optometry

Planning Models

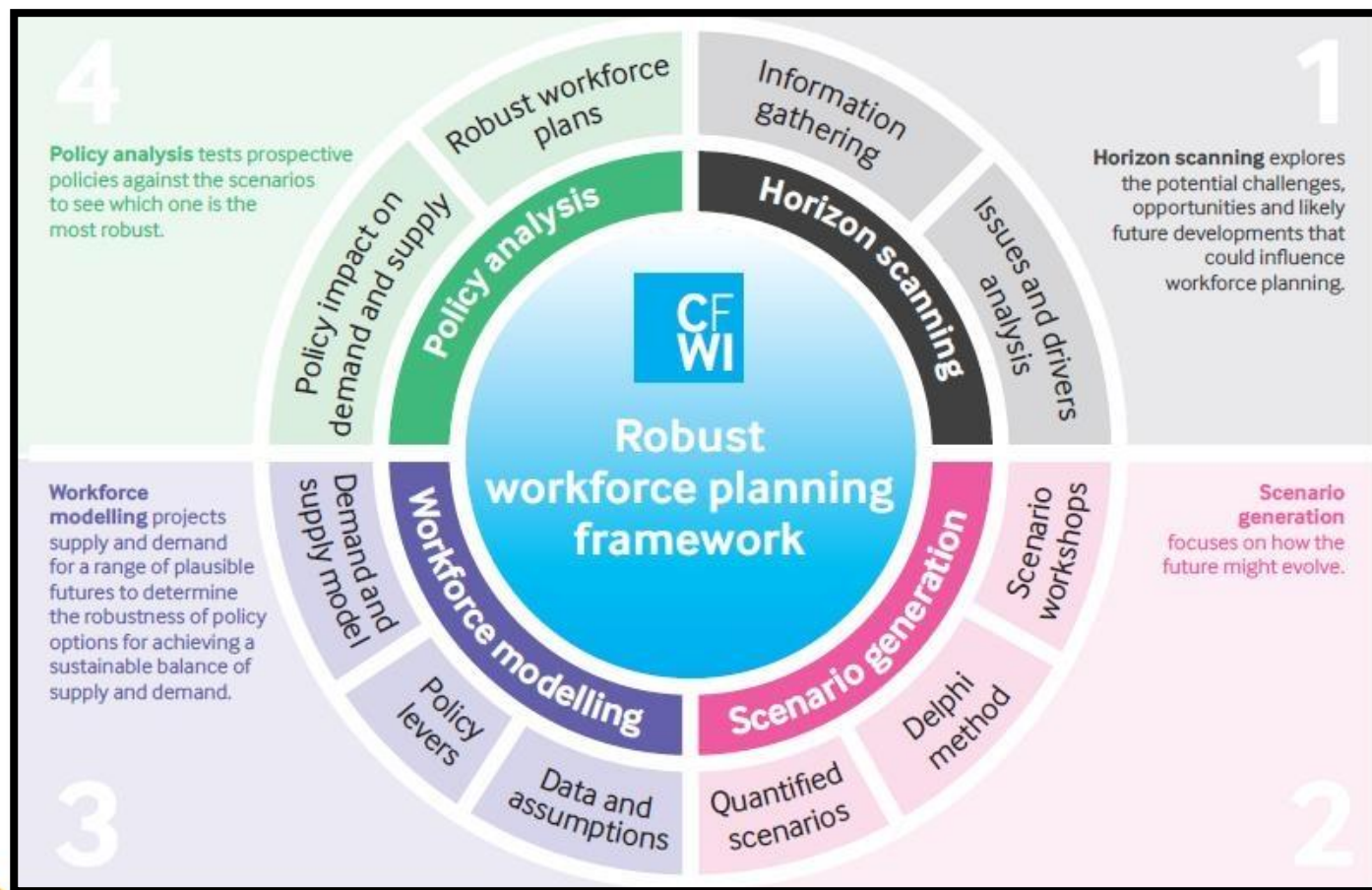


Skills for Health
6 Step Model

Planning Models



Planning Models



Introduction

Workforce Planning and Strategy

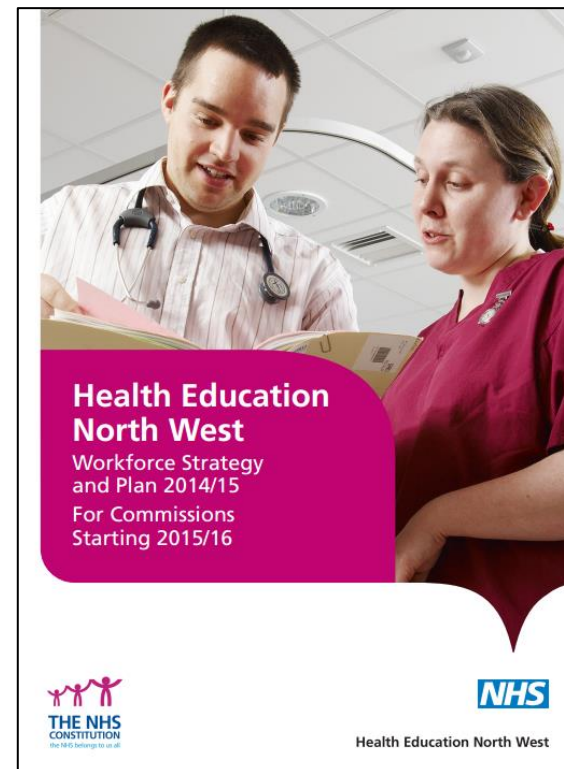
Whole economy – Providers, Primary Care, Community Care, Social Care, Vanguard and Service Transformation Programmes

Produce the 5 year view

Investment Plan £680+M

<https://nw.hee.nhs.uk/our-work/workforce-planning-strategy/2014-15-henw-workforce-strategy-and-plan/>

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Engagement and understanding

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- How do commissioners and providers for IAPT and Children IAPT workforce plan?
- Who does workforce transformation and workforce development?
- Utilise the IAPT Census
- Engagement via NW Employers, ADASS, CCG Commissioners and LGA
- How do we engage to get future demand?
- How do we factor in population health demand?
- Acknowledgement HENW need to refine questions it wishes to ask
- Understand the high level and granularity of the social care (adult and children's) workforce
- How do we do this?

NHS Five Year Forward View

Health Education North West
Health Education North West



- Published in October 2014
- A shared vision across seven national bodies
- New care models programme key to delivery
- Focuses on both NHS and care services



Public Health
England

NHS
Health Education England

NHS
Trust Development Authority

NHS
England

Monitor

NICE National Institute for
Health and Care Excellence

The challenges we face

Health Education North West
Health Education North West

1 Health and wellbeing gap
Radical upgrade in prevention

2 Care and quality gap
New care models

3 Funding gap
Efficiency and investment

Five new care models

Multispecialty community providers

moving specialist care out of hospitals into the community

Enhanced health in care homes

offering older people better, joined up health, care and rehabilitation services

Integrated primary and acute care systems

joining up GP, hospital, community and mental health services

Acute care collaboration

local hospitals working together to enhance clinical and financial viability

Urgent and emergency care

new approaches to improve the coordination of services and reduce pressure on A&E departments

Our core values



37 vanguards

Health Education North West



	Urgent and emergency care (UEC) vanguards
30	Greater Nottingham Strategic Resilience Group
31	Cambridgeshire and Peterborough Clinical Commissioning Group
32	North East Urgent Care Network
33	Barking and Dagenham, Havering and Redbridge System Resilience Group
34	West Yorkshire Urgent and Emergency Care Network
35	Leicester, Leicestershire & Rutland System Resilience Group
36	Solihull Together for Better Lives
37	South Devon and Torbay System Resilience Group

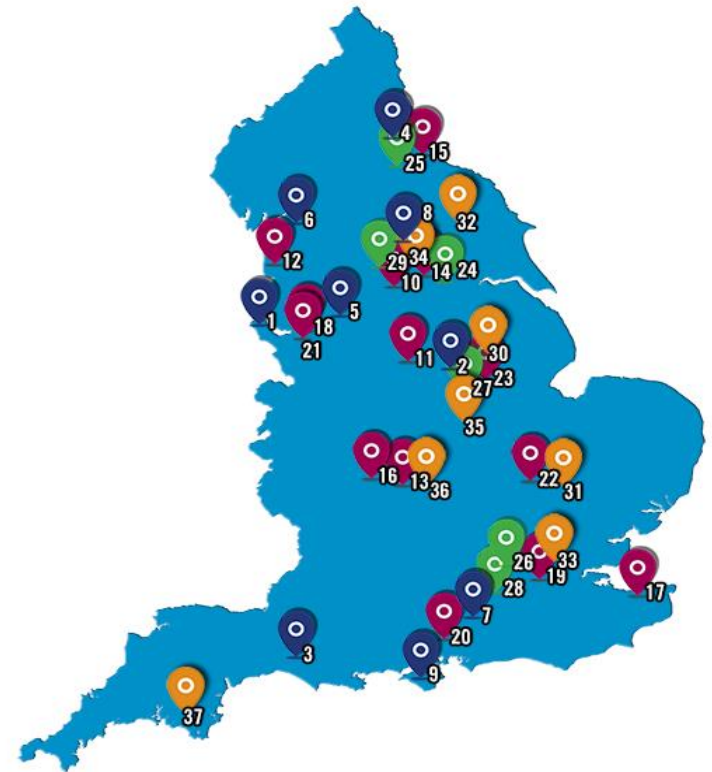
	Integrated primary and acute care systems (PACS) vanguards
1	Wirral Partners
2	Mid Nottinghamshire Better Together
3	South Somerset Symphony Programme
4	Northumberland Accountable Care Organisation
5	Salford Together
6	Better Care Together (Morecambe Bay Health Community)
7	North East Hampshire and Farnham
8	Harrogate and Rural District Clinical Commissioning Group
9	My Life a Full Life (Isle of Wight)
	Multispecialty community providers (MCPs) vanguards
10	Calderdale Health and Social Care Economy
11	Erewash Multispecialty Community Provider
12	Fylde Coast Local Health Economy
13	Vitality (Birmingham and Sandwell)
14	West Wakefield Health and Wellbeing Ltd
15	Better Health and Care for Sunderland
16	Dudley Multispecialty Community Provider
17	Whitstable Medical Practice
18	Stockport Together
19	Tower Hamlets Integrated Provider Partnership
20	Better Local Care (Southern Hampshire)
21	West Cheshire Way
22	Lakeside Healthcare (Northamptonshire)
23	Principia Partners in Health (Southern Nottinghamshire)
	Enhanced health in care home vanguards
24	Connecting Care – Wakefield District
25	Gateshead Care Home Project
26	East and North Hertfordshire Clinical Commissioning Group
27	Nottingham City Clinical Commissioning Group
28	Sutton Homes of Care
29	Airedale and partners

What will success look like?

- Nationally replicable models
- More accessible, more responsive and more effective health, care and support services
- Fewer trips to hospitals
- Care closer to home
- Better co-ordinated support
- 24/7 access to information and advice
- Access to urgent help easily and effectively, seven days a week



- Leadership and organisational development – including how we learn from international partners
- Workforce – including the need for new and extended job roles
- Commissioning and contracting models – including organisational boundaries which make it hard to care around patients
- Evaluation – are new ways of working improving the quality of care patients receive?
- Information management and technology – we maximise new technology



Workforce redesign as a key enabler

Health Education North West

- The support package is built on eight key enablers of transformation that have been identified from vanguard site visits and further engagement and co-design with vanguards
- Vanguards face common challenges surrounding the creation of a modern, flexible workforce which is organised around patient's and the local population's needs
- The aim is to design and develop a workforce that leads to a sustainable improvement in the health outcomes for a population. A whole population workforce planning approach will shift focus from traditional siloed, profession-based activities towards a workforce model for the whole local health economy system, and will require strong system leadership



The WRaPT team have now made contact with 128 organisations throughout the North West health and social care economy and are actively supporting 72 projects from small scale single department transformation to large scale multi-organisation transformation projects within cross-economy transformation.

They are continuing to deliver demonstrations and practical user support sessions to organisations which register their interest in discovering more about the tool and how it can be used in working planning activities.

The WRaPT team has been focusing over the last few months on supporting cross-economy transformation at Stockport Together and throughout North Lancashire and South Cumbria with the Better Care Together programme.

Workforce Repository and Planning Tool

<http://www.lancashirecare.nhs.uk/about-us/WRaPT-Welcome/WRaPT-Explained.php>

<https://prezi.com/4ot1zhfiu4jb/wrapt-tool-nano/>

Planning the IAPT Workforce



Workforce Planning

We have a strategic model

We have an operational model

We understand the drivers and challenges

We understand the new models of care

We have some workforce intelligence from IAPT Census

We have NICE guidelines to follow and adhere too

We do need to understand more.

Who do we engage?

Workforce Development and Workforce Transformation

IAPT

- We really need to understand the capacity, capability and competence of the workforce either delivering NHS services, NHS funded services or services outwith the NHS.
- Work with Commissioners and providers to ascertain this and what is the gap?
- We need to develop a NW IAPT strategy for future workforce but also developing existing workforce

IAPT

- Developing excellence in the workforce is the key to achieving the best **patient recovery rates** and greater **maxmisation of resources** to both the NHS and the wider economy.
- The IAPT workforce is specifically developed to deliver NICE-recommended low and high intensity interventions for people with mild, moderate to severe depression and anxiety disorders in a system of stepped care.
- Different skill mixes can result in different cost effectiveness so, rather than prescribing the exact workforce numbers and types of staff, IAPT workforce guidance emphasises the functions/competences and levels of work of staff in IAPT services.
- High quality services use agreed frameworks adapted to local need.

IAPT

IAPT Census gives us some of the capability around:

Low intensity

High intensity

Modalities

Older People IAPT

Children IAPT

Findings So Far...

- Some data on the IAPT workforce – cross check on IAPT Census
- Little evidence on parity of esteem
- Currently planned reductions in clinical psychology and psychotherapy*
- Providers are making progress on EIP – identifying capacity and capability and training staff to meet demand, access and delivery targets. Monitor measurement may help...+ funding
- Psychiatry and Liaison services well referenced in the narratives, just calculating impact on commissions
- CAMHs and Children IAPT – pending conversation with Barry Nixon

Current Challenges and Drivers

- Early Intervention in Psychosis
- Parity of Esteem
- Learning Disabilities
- CAMHs and Children IAPT
- IAPT
- Psychiatry Liaison Services
- NHS Mandate access and delivery targets
- HEE Mandate supporting
- Mental Health Nursing
- Psychiatry Workforce
- Psychological Workforce

Linkages

Trying to understand more and linking with:

Psychologists and Psychological Therapies Workforce
Working Group

NHS England – IAPT Census Kevin Jarmin / Matthew
Dance

The Psychological Professions Network (PPN North West)