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Report to: Leeds Health and Wellbeing Board

Date: 20th June 2017

Subject: Being the best city for health requires the best workforce

Are specific geographical areas affected? If relevant, name(s) of area(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

Leeds faces a number of workforce related issues. Some of these are more immediate and some can be addressed by the longer term strategic approach suggested in the Health and Wellbeing Strategy. These have been outlined in the Partnership Executive Group paper (November 2016) which also outlined governance structures for workforce issues and workforce workstream priorities:

- Recruitment and retention (nursing, GPs, social care) remains a key challenge and the removal of nursing bursaries, the impact of Brexit and competition from other sectors such as retail, all impact on our ability to attract and retain staff at all levels.
- Changing patterns of health and social care need (ageing population, more people with long term conditions) require us to better understand our future workforce needs.
- The urgency of the situation requires both short and long term plans to ensure we develop a workforce fit for the future and are able, as much as it is ever possible, to control our own destiny as a City.

- The workforce challenge offers an opportunity to utilise opportunities to grow our own workforce and we can use this to increase aspirations in young people, promote social mobility and provide more pathways into employment for people with disabilities.
- The paper outlines three ways we can 'up our game' on the workforce challenges and asks some key questions of the Board and its members.

Recommendations

The Health and Wellbeing Board is asked to:

- Consider the role of the Health and Wellbeing Board in overcoming challenges relating to workforce and provide direction for progress towards the priorities of the Leeds Health and Wellbeing Strategy 2016-21.
- Support the engagement of members in discussions about the Living Wage and attend the Low Pay Seminar when arranged.
- Oversee/raise the profile of the Supporting Disabled People into Employment Project to ensure it remains consistent with the city's health and wellbeing priorities and participate in a 'health, wellbeing and employment workshop' in October 2017.
- Continue to note and support the development of Leeds Health and Care Academy and to receive regular updates on progress.
- The City Workforce Workstream should be used to understand and plan responses to these challenges and keep the Board up to date with progress.

1 Purpose of this report

- 1.1 Leeds has a bold ambition to be the best city for health and wellbeing. The best city needs the best workforce able to work in an integrated manner aware of the current and future challenges and opportunities. This is set out in the Leeds Health and Wellbeing Strategy 2016-21, which also describes twelve supporting priorities, including 'a valued, well trained and supported workforce' and 'a strong economy with quality, local jobs'. The PEG paper 'Workforce Workstream Update and Next Steps' outlined our current response and key objectives in November 2016. Since then Board members have requested further discussion on the challenges we face plus updates on our responses such as Living Wage, the Academy and the Supporting Disabled People into Employment Project (aka Disability Employment Project).

This report sets out a short summary of the city's challenges relating to workforce and presents information on three potential and developing solutions and asks the Board to consider their role in progressing, steering and directing future work to address challenges and help achieve our bold ambition.

2 Background information

- 2.1 This report is set within the context of some key challenges/opportunities:

- The Leeds Health and Wellbeing Strategy 2016-21 and Leeds Plan both outline the importance of workforce as an enabler to a sustainable and successful health and care system. The Leeds Plan approach includes recruitment and retention, workforce profile, culture change, skills mix and the promotion of apprenticeships.
- There are 57,000 people currently working in the Health and Care workforce in Leeds with many more people employed in areas that influence health and wellbeing such as housing, employment, skills/training and community services.
- A large number of people (600,000 in Leeds City Region by 2020) are set to retire from the Leeds workforce over the next few years, creating capacity gaps throughout the system. In the medium term, we also face numerous strategic challenges/opportunities such as the impact of Brexit, the digital agenda, reduced budgets, and competition for the best staff from other cities and the city's growing retail sector.
- Partners have held a workforce organisational development event that has prioritised key facets of workforce integration such as shared leadership training, common induction and shared visions for workforce development. The event sought to understand the perceived level of workforce integration across public sector partners and to develop a shared understanding of the level of integration supported by the system.

3 Main issues

3.1 This section of the report introduces chapters relating to three aspects of workforce development in Leeds.

3.2 Leeds Health and Social Care Academy

3.2.1 Leeds Health and Social Care Academy is a huge opportunity to shape our existing workforce, promote common culture and ensure the workforce reflects the diversity of the city's population, promotes social mobility and career choices in deprived areas. Ultimately, it positions Leeds as being a city that is fit for the future and ready to meet the challenges posed by rapid change.

3.2.2 Health and Care employers and the three universities in Leeds, through the Leeds Academic Health Partnership, have come together to establish the Leeds Health and Care Academy to deliver a place-based workforce education, training and development that:

- Covers the whole workforce at all grades and disciplines, including primary care and the care home/social care sector.
- Engages with research and innovation.
- Grows in its investment and supports the delivery of a system-wide workforce plan.
- Provides professional development of existing staff to respond to the changing needs of citizens.
- Develops a compelling 'Leeds offer', backed by investment, which attracts young people and working age adults to consider a career in health and social care in Leeds.

3.2.3 The Academy supports the delivery of the Leeds Health and Wellbeing Strategy 2016-21 and the Leeds Health and Care Plan, which promote our priorities for inclusive economic growth and a valued, well-trained and supported workforce.

Benefits of a mature Health and Social Care Academy

Benefit	Potential milestones
Support System Sustainability	<ul style="list-style-type: none">• Secure alternative (internal) supplies of qualified and registered staff, making best use of our existing workforce and attracting people into the workforce• Develop new system-wide roles at pace and shared purpose• Potential for agreement investing in the apprenticeship levy to enhance social mobility and ensure a good stream of staff across the workforce
Bring Health and Care Innovations Rapidly to People and Patients	<ul style="list-style-type: none">• Capitalise on unique links with Leeds' universities to accelerate learning and education in the workplace and ensure research is put into practice• Bring research expertise to classroom learning where hospital nurses, district nurses, doctors, social workers, and GPs etc, could agree changes in practice required to enhance the pathway for patients• Link with the developing rapid evaluation capacity to help scale up community based / third sector projects
Maximise the Benefits of the Digital	<ul style="list-style-type: none">• Potential to agree changes to the curriculum for undergraduate students to improve digital literacy and fluency• Develop training for existing staff to support people in their homes, in the

Health Landscape	<p>community and in hospitals to maximise the use of digital applications and social media</p> <ul style="list-style-type: none"> Equip staff at all levels with digital literacy, including healthcare assistants, front line third sector and social care staff often on lower wages and with limited career ladder opportunities
Engage with Citizens through Meaningful Employment	<ul style="list-style-type: none"> Double the number of health and social care apprentices, maximising the city's investment in the apprentice levy and ensuring significant numbers rotate in health and social care and that we maximise primary care placements. Enhance social mobility, ensuring access to disadvantaged candidates such as people with disabilities or recovering from mental health problems Ensure that employees take healthy lifestyle messages and techniques home, benefitting both employees and our communities
System-wide engagement and building confidence in the Health and Care system	<ul style="list-style-type: none"> Develop links with the broader health economy, particularly the third sector and community organisations Bring staff together to train and promote system thinking and leadership in a supportive environment Reach into communities and schools to develop apprenticeships and open up careers in the sector, strengthening credibility and confidence in the Health and Care system

3.3 A shared approach to the Leeds Living Wage

3.3.1 At the October 2016 meeting of the Health and Wellbeing Board, members discussed a report on the linkages between poverty and ill health, including the impact of low pay on household budgets.

3.3.2 Within the Leeds Health and Wellbeing Strategy 2016-21 there is commitment to fair pay by monitoring the number of "People earning a Living Wage". The Strategy recognises that "health and care organisations employ a huge number of people in Leeds and [are committed to doing all that they can to...] reduce social inequalities through how people are employed".

3.3.3 The National Living Wage and National Minimum Wage set by government are compulsory for employers while the Living Wage Foundation (LWF) Living Wage is voluntary. The current rates are stated in the table below. The gap between government levels of pay and the LWF's indicates that workers on the minimum wage/national living wage are not earning enough to cover basic living costs.

Year	LWF Living Wage	National Living Wage	National Minimum Wage			
			21 to 24	18 to 20	Under 18	Apprentice
2017	£8.45	£7.50	£7.05	£5.60	£4.05	£3.50

3.3.4 In May 2017, the Integrated Commissioning Executive (ICE) considered a report on the Living Wage Foundation's 'Living Wage' and sought to establish the

current rates of pay across local NHS providers and Leeds City Council, including for contracted providers and services. Responses from NHS organisations can be summarised as follows:

Organisation	Employees	Living Wage Foundation's Living Wage
Leeds NHS Clinical Commissioning Groups	Direct	Not known (North CCG: all, except one apprentice)
	Sub-contracted	Not known
Leeds & York Partnership Foundation Trust	Direct	Yes
	Sub-contracted	Not known
Leeds Teaching Hospitals Trust	Direct	No
	Sub-contracted	Not known
Leeds Community Healthcare	Direct	Yes
	Sub-contracted	Not known

3.3.5 Leeds City Council (LCC) currently pays all employees a minimum rate of £8.25 (the 2016 LWF rate) and discussions are ongoing on how the current Living Wage Foundation rate of £8.45 can be achieved. Contracts within Adults and Health have a commitment to pay the living wage across the life of the home care contract as part of the Ethical Care Charter. More widely, procurement and commissioning areas are being considered.

3.3.6 Recognising the need to explore complexities, common barriers and opportunities of becoming a living wage employer, officers sought ICE's support for a Living Wage and Low Pay Seminar for public sector organisations in Leeds. The aim of the seminar would be to work towards a consistent approach to offering the living wage across the public sector in Leeds.

3.3.7 The Integrated Commissioning Executive agreed to the following actions:

- LCC officers to liaise with Leeds workforce group to confirm if Leeds NHS organisations are legally able to amend pay scales for directly employed staff as part of their constitution.
- LCC officers to liaise with West Yorkshire and Humber workforce group around possible impact at a West Yorkshire level of workforce flow.
- Members were supportive of the seminar once feedback from the ICE has been taken into account and the above actions followed up.

3.4 Supporting disabled people into employment

3.4.1 The Supporting Disabled People into Employment Project aims to improve the health and wellbeing of disabled people living in the poorest communities in Leeds, by supporting more disabled people to achieve their work aspirations. This includes becoming 'work-ready', gaining, sustaining and progressing in employment.

- 3.4.2 The project is a response to Leeds Health and Wellbeing Strategy 2016-21, Leeds City Council's Best Council Plan and Equality Improvement Priorities, and the government's green paper 'Improving Lives: Health, Work and Disability'. It is being informed by the Leeds Growth Strategy and the city's priority for inclusive growth which demonstrates the commitment to ensuring employment opportunities are open to all. It is also being informed by the More Jobs, Better Jobs Breakthrough Project which has a workstream that aims to seek greater integration of health and employment support services in order to support those with a health condition to stay in work or secure employment. The project is using a collaborative, strength-based approach and will run until April 2018.
- 3.4.3 The project is currently being steered by senior staff within LCC whose responsibilities include commissioning and partnership working across health, care, employment and skills in Leeds. It is being managed on by a LCC-funded resource based in the Health Partnerships Team.
- 3.4.4 One ambition of the project is to connect, consolidate, promote and refocus existing work to improve the health and wellbeing of disabled people and employment of disadvantaged groups in Leeds. The approach taken to engagement throughout the scoping stage has taken steps towards achieving this ambition, for example:
- A discussion with LCC, LTHT and LCH senior staff has supported the Community Neurological Rehabilitation Service with service developments in relation to interventions supporting people into work.
 - Connections have been made between the Autism Employment Group and NHS colleagues with a view to the 'Leeds stand' being used to promote NHS job vacancies at the Hidden Talents Employment Fair in July 2017.
 - LCC's HR Service is recommending that the council joins the Disability Confident Scheme, further evidencing the council is an employer that actively seeks out and hires skilled disabled people, and helps to positively change attitudes, behaviours and cultures, within the council, its networks and communities.
 - LCC's Employment and Skills Service, which supports over 6,000 local residents into work and 7,500 with skills training each year, is seeking to refocus services to more effectively support those with health barriers starting with the delivery of the £2.8m Skills Training and Employment programme (STEP) to support over 1,500 people into work.
 - Changes are being proposed to Employment and Skills obligations on contracts and S106 planning agreements which include targeted support to disabled people and those with health conditions; these are going to Executive Board in June.
 - LCC's Legal and Procurement Services have confirmed that a clause provided by Disability Rights UK relating to the employment of disabled people can be used in contracts where appropriate and proportionate to the contract. Consideration is being given to including the clause in the employment toolkit annexed to the social value framework being developed for commissioners across the council to use to support them in considering social value as part of the procurement process.

3.4.5 Next steps include:

- A report will be submitted to LCC's Adults and Health DLT to confirm the project's revised aim, scope, governance and delivery arrangements and provide an update on progress to date.
- Further information on progress will be provided to the June Health and Wellbeing Board.
- A communication and engagement plan will be developed and implemented.
- Analysis, including consultation, will be undertaken to inform priorities for action, outcomes to be achieved, benefits to be delivered and measurement of success.
- Planning for a 'health, wellbeing and employment' workshop will continue. We expect the workshop will provide a mandate for development of a 'health and wellbeing strategy and commissioning plan'.

4 Health and Wellbeing Board governance

4.1 Consultation, engagement and hearing citizen voice

- 4.1.1 In April 2016 and February 2017, the Health and Wellbeing Board received information on initial proposals for the Academy. Managers and senior leaders (workforce/planning) across partner organisations have also been consulted in the development of the vision and the outline business case for the Academy.
- 4.1.2 At the October 2016 meeting of the Health and Wellbeing Board, members discussed a report on the linkages between poverty and ill health, including the impact of low pay on household budgets. Officers have engaged with the Integrated Commissioning Executive on the Living Wage Foundation's 'Living Wage' and have worked with partners across the Health and Care system to establish the current rates of pay across local NHS providers and Leeds City Council, including for contracted providers and services. Next steps include planned engagement with the Leeds workforce group and a seminar to bring Health and Care partners together to work towards a consistent approach to offering the living wage across the public sector in Leeds.
- 4.1.3 Since its inception in June 2016, a collaborative approach has been used to inform the Supporting Disabled People into Employment Project. Stakeholders from health, care, employment support and skills/training organisations in the statutory and third sector have been engaged to date. During the next stage, other partners will be engaged with including disabled people, Leeds Academic Health Partnerships (The LAHP), Leeds City Region Enterprise Partnership (The LEP), West Yorkshire Combined Authority (WYCA), and other local authorities. A communication and engagement plan for the period to April 2018 is currently being developed; this will include appropriate and proportionate engagement with disabled people which takes into account the views expressed through other consultation and engagement activities undertaken by the council and partners.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 Meeting the workforce challenge requires an approach rooted in developing the talents of our existing workforce, developing more pathways into the sector from deprived areas and disadvantaged groups and building better connections with schools, colleges and universities. This will support our aim for the Leeds workforce to better reflect the diversity of the city's population. Our conversations with the public will be more successful if people can relate to, and understand, the care they receive. If health messages are transmitted in an empathic and empowering manner by staff that understand the communities in which they live then behaviour change and population health management are more likely to impact positively.
- 4.2.2 Any future changes arising from this work will be subject to equality impact assessment.

4.3 Resources and value for money

- 4.3.1 Development of the Health and Care workforce and improving the health and wellbeing of disabled people through employment will potentially support development of a financially sustainable Health and Care system and positive outcomes for the city. For example, Leeds has a working-age benefit claimant group of around 51,000 residents: of these 63% (over 32,000) claim Employment Support Allowance; increasing the number of these people who secure employment should have a positive impact on public expenditure and local public services, as well as potentially improving citizens' personal financial position.

4.4 Legal Implications, access to information and call In

- 4.4.1 There are no access to information and call-in implications arising from this report.

4.5 Risk management

- 4.5.1 If the city is unable to ensure a good stream of front-line staff that are prepared to work across organisational boundaries the challenges we face will be compounded and be harder to resolve.

5 Conclusions

- 5.1 Leeds faces a number of workforce related issues. Some of these are more immediate and some can be addressed by the longer term strategic approach suggested in the Health and Wellbeing Strategy. Initiatives like the Leeds Health and Social Care Academy, Supporting Disabled People into Employment Project and paying people a living wage with clear opportunities for career progression, are all likely to improve confidence in our approach and provide a supportive platform for our plans to improve quality and the overall experience of Health and Care.

Understanding our shared workforce challenge will assist in future proofing the health and care system, as will growing our Leeds workforce offer by investing in social mobility and promoting the health and care sector as an exemplar of good, inclusive growth. By progressing, steering and directing the work outlined in this

report the Health and Wellbeing Board will take us closer to being the best city for health and wellbeing with the best workforce.

6 Recommendations

The Health and Wellbeing Board is asked to:

- Consider the role of the Health and Wellbeing Board in overcoming challenges relating to workforce and provide direction for progress towards the priorities of the Leeds Health and Wellbeing Strategy 2016-21.
- Support the engagement of members in discussions about the Living Wage and attend the Low Pay Seminar when arranged.
- Oversee/raise the profile of the Supporting Disabled People into Employment Project to ensure it remains consistent with the city's health and wellbeing priorities and participate in a 'health, wellbeing and employment workshop' in October 2017.
- Continue to note and support the development of Leeds Health and Care Academy and to receive regular updates on progress.
- The City Workforce Workstream should be used to understand and plan responses to these challenges and keep the Board up to date with progress.

7 Background documents

- 7.1 There is a strong relationship between the workforce issues described in this document and the Leeds Health and Care Plan, which is also being discussed at the Health and Wellbeing Board meeting on 20th June 2017.

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How does this help reduce health inequalities in Leeds?

Meeting the workforce challenge will require an approach rooted in developing the talents of our existing workforce, developing more pathways into the sector from deprived areas and disadvantaged groups and building better connections with schools, colleges and universities. This will support our aim for the Leeds workforce to better reflect the diversity of the City population. Our conversations with the public will be more successful if people can relate to, and understand, the care they receive. If health messages are transmitted in an empathic and empowering manner by staff that understand the communities in which they live then behaviour change and population health management are more likely to impact positively.

How does this help create a high quality health and care system?

Workforce issues are central to the delivery of our plans. Initiatives like the Leeds Health and Care Academy, Supporting Disabled People into Employment Project and paying people a living wage with clear opportunities for career progression are all likely to improve confidence in our approach and provide a supportive platform for our plans to improve quality and the overall experience of health and care.

How does this help to have a financially sustainable health and care system?

Development of the Health and Care workforce and improving the health and wellbeing of disabled people through employment will potentially support development of a financially sustainable Health and Care system and positive outcomes for the city. Reducing the numbers of people claiming health-related out-of-work benefits from over 32,000 through supporting more of them to secure employment should have a positive impact on public expenditure and local public services including the Health and Care system, as well as potentially improving citizens' personal financial position.

Future challenges or opportunities

There are a number of challenges including changing patterns of health and social care need, recruitment and retention, particularly in light of the numbers due to retire from the Health and Care workforce and competition from other growing sectors. The Leeds Health and Care Academy, Supporting Disabled People into Employment Project and paying people a living wage with clear opportunities for career progression will help to address these challenges. In addition, other work that is underway and/or planned could assist in addressing the identified workforce issues and support improved health and wellbeing of citizens through employment. For example, LTHT's apprenticeships scheme, LCC's Supported Internship scheme for young people and the refocussing of LCC services to more effectively support those with health barriers which is starting with the delivery of the £2.8m Skills Training and Employment programme (STEP) to support over 1,500 people into work.

Priorities of the Leeds Health and Wellbeing Strategy 2016-21 (please tick all that apply to this report)	
A Child Friendly City and the best start in life	X
An Age Friendly City where people age well	X
Strong, engaged and well-connected communities	X
Housing and the environment enable all people of Leeds to be healthy	
A strong economy with quality, local jobs	X
Get more people, more physically active, more often	
Maximise the benefits of information and technology	X
A stronger focus on prevention	
Support self-care, with more people managing their own conditions	X
Promote mental and physical health equally	
A valued, well trained and supported workforce	X
The best care, in the right place, at the right time	