Agenda

• A re-introduction to HEE KSS Intellectual Disabilities workforce programme & TCP workforce partners
• Workforce planning; a rational for the offer of bite sized workforce workshops to Surrey TCP
• Why the Population Centric Model?
• Review work completed in and since part I
• Part II: Strategic Environment (Population definition)
• Part III: Design and Commissioning of Services
• What next?
• Evaluation & signposting
Housekeeping

- Fire alarms
- Toilets
- Respect
- Questions (car park)
- Catering (1215hrs light lunch)
- Start and finish times (0945hrs – 1230hrs)
Health Education England working across Kent, Surrey and Sussex’s Intellectual Disability Programme & TCP workforce partners

Rhona Westrip
George Matuska
In 2013 we took over functions of Strategic Health Authorities (SHAs) and their Deaneries for workforce planning, education commissioning and education provision.

We operate a single system of dispersed leadership, working through 13 local teams.

HEE Mandate with deliverables - Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values. A mandate from the Government to Health Education England: April 2016 to March 2017.
The Mandate

Annex A 1.10: “lead the health and care system to transform the workforce and ensure it is available in sufficient numbers and possesses the right skills, values and behaviours to deliver care in the community and support for people with learning disabilities, autism, mental health problems and multiple and complex needs. As part of this, HEE will work with Skills for Health and Skills for Care to develop a Learning Disability Core Education, Training and Skills Framework, which will set out expected learning outcomes and minimum standards for delivery of education and training on core skills and knowledge which can be used across different services. The Framework will be published in July 2016”
The are many more Mandate Objectives related to this workforce covering areas such as:

- Leadership
- Pre-registration placements
- Preventing avoidable ill health and premature mortality
- Nurse associate roles including primary, secondary and social care
- Developing plans to promote parity of esteem between the health and social care workforce

*This list is not exclusive and just includes a few of the many themes*
Three Tiered Delivery Approach

**National Level**
- New Role Development
- Enabler development
- Forum facilitation
- Cross agency co-ordination
- National workforce planning
- PBS accreditation
- Workforce Modelling
- Workforce Intelligence

**Regional Level: North/ South/ Mid & East/ London & KSS**
- Workforce planning workshops
- Facilitation with and support for local office leads
- Sharing good practice between regions
- Supporting enabler development
- Workforce Intelligence

**Local/ Partnership Level**
- Workforce planning workshops
- Workforce workstream support (Membership & ToR Competency Framework)
- Facilitation with support for LETB leads and Skill for Care Leads
- Learning Needs Analysis
- Market Intelligence
- PBS funding
- PBS training with people and families
- Learning Disability Awareness
- Autism Awareness resources
- Leadership for commissioners and system leaders
- Education Commissioning
The offer of support

- Workforce work stream
- Planning and meeting needs
- Understanding the existing and available workforce
- Understanding future workforce needs
- A link to more resources as they come online
An example of outcome

- During 2013 HEE KSS commissioned a report to scope out the LD nursing workforce
- The report detail population data of PWLD, and the workforce also highlighting areas provider felt there where workforce gaps
- The report made 10 recommendations
- In 2015 HEE KSS employed a full time programme manager to run its intellectual disability workforce project and realise the 10 recommendations

Working across Kent, Surrey and Sussex
An Update

Since the publication of the initial scoping report the ID workforce project has developed into three areas:

1. Supporting the local TCP’s to plan to transform their existing workforces and/or develop new models of practice

2. An offer of support to all ID stakeholders across KSS

3. To support the development of the KSS Learning disability Community of Practice
Understanding the current workforce
Individuals with an intellectual disability

Whole ID Workforce

- 1: 57%
- 2: 17%
- 3: 23%
- 4: 02%
- 5: 01%
### ID Workforce: registered/unregistered

<table>
<thead>
<tr>
<th></th>
<th>NHS Employed</th>
<th>Non-NHS Employed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered</td>
<td>223 (0.4%)</td>
<td>1700 (2.9%)</td>
<td>1923 (3.3%)</td>
</tr>
<tr>
<td>Un-registered</td>
<td>380 (0.6%)</td>
<td>56800 (96.1%)</td>
<td>57180 (96.7%)</td>
</tr>
</tbody>
</table>
Making an offer of support to the ID workforce
What we supported

- Staff Retention and Recruitment Coaching Programme
- Employing People with Learning Disabilities
- Learning Disability Workshops for non-LD clinical staff
- PECS Training
- Health Equalities Framework Intelligence Review
- Implementation of the Anticipatory Care Calendar
- PBS Workforce Training
- Working with Deaf and Blind Clients
- Epilepsy and Medication Administration Train the Trainer
- Springwell – Supporting People with Learning Disabilities and Complex Needs to have a Voice in their Care Planning Process
- Workforce Development Perspective from Service Users Report
Supporting the development of a platform for the workforce to share and develop
Workforce planning

A rational for the offer of 4 bite sized workforce workshops to Surrey TCP
Multi agency workforce group

Mapping service change

Defining the plan

Defining the required workforce

Developing an action plan(s)

Understanding workforce availability

Implementing, monitoring and refreshing

@HEE_KSSID  #IDHEKSS
Why the Population Centric Model?

Population Centric™ Integrated Planning for Workforce Transformation

Carol Brooks
Business Psychologist
Gold Consulting

carol@wearegold.co.uk
Population Centric Model

Stage 06: Gap, Analysis, Reality Check, Planning for Implementation

Stage 05: Defining Roles and Future Workforce

Stage 04: Defining Skills, Knowledge and Competence Levels

Stage 03: Design and Commissioning of Services

Stage 02: Population Definition / Strategic Environment

Stage 01: Establishing the Change Management Approach
Review & update: Part I

- Surrey TCP changes and updates
- Proxy development
- Stakeholder mapping
Stage Two

- **Star** = where you will be by 2020
- **Mountain** = what will you achieve along the way
- **Chessboard** = strategic landscape
- **You** = proxies, family, workforce, you, the team
Strategic Landscape

Map yours

Political   Economic

Sociological  Technological
Stage Three

- How will you put yourself in your proxies shoes?
- What techniques are already used locally?
Understanding your proxies

1. Data Detective
2. Journalist
3. Anthropologist
4. Impersonator
5. Co-Creator
6. Scientist

(Strategyzer.com Osterwalder et al)
Consider your proxies.

Which of these techniques are possible for you locally and how might you go about planning and using that technique/techniques.

Consider how to engage partners - the what, how and who.
Pains and Gains?

Pain Relievers
• Addressing and alleviating customer/client/patient “pains” - e.g. For 1 of the proxies, a “pain” might be having to get up at 0500 to be ready for transport to day centre
• What might a pain reliever be for this (service and workforce)?
• Which “pains” might you focus on?
• Essential – Nice to have??

Gain Creators
• How can the service and workforce create a “gain” for the proxy?
• What service provision?
• What is relevant?
• What will we do to produce the benefits and outcomes Tom expects, needs, desires?
• Essential – Nice to have??
Reviewing current services

**Boston’s Matrix**

<table>
<thead>
<tr>
<th>Stars</th>
<th>Question marks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prioritise</td>
<td>Divest</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cash cows</th>
<th>Dogs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invest</td>
<td></td>
</tr>
</tbody>
</table>

@HEE_KSSID    #IDHEKSS
Future proofing your service

Ansoff’s Matrix

- Existing Service
  - Market penetration
- New Service
  - Product development
- New
  - Market development
- Existing
  - Diversification
Discussion

• Using one or both tools, begin applying to the service, for which you are designing and planning your workforce

• Think about how you will involve stakeholders in your discussions here

• Think about how you will incorporate any current previous work on service design, models of care and pathways
What's next

• You will be able to download these slides from:
  www.idhekss.wordpress.com
click on “Workshop”

• By identifying the services your proxies need you can start to sense check against existing & future services

• You may be able to free up workforce and finances by identifying which services will help your proxies and which services you proxies will need in the future

Part III could cover:

- Stage 04: Defining Skills, Knowledge and Competence Levels
- Stage 05: Defining Roles and Future Workforce
- Stage 06: Gap, Analysis, Reality Check, Planning for Implementation

But 1st we need to know from you how we can help next
Evaluation

One thing you learned

One thing you will do as a result of today

One thing you would change for next time
Useful details

George Matuska
George.Matuska@nhs.net
@George.Matuska

Rhona Westrip
rhona.westrip@hee.nhs.uk
@HEE_KSSID

www.idhekss.wordpress.com
www.ldcop.org.uk
www.hee.nhs.uk “Learning disability”