



# OXFORDSHIRE CLINICAL COMMISSIONING GROUP BOARD

<b>Date of Meeting:</b> 27 September 2018	<b>Paper No:</b> 18/60
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<b>Title of Paper:</b> Oxfordshire Workforce – Update
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<b>Paper is for:</b>	<b>Discussion</b> ✓	<b>Decision</b>	<b>Information</b> ✓
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<b>Conflicts of Interest</b>	
No conflict identified	✓

**Purpose and Executive Summary:**  
The purpose of this paper is to update the CCG Board on current workforce challenges and system responses.

An Oxfordshire Workforce Strategy that focuses on the short to medium term workforce challenges is in development and focuses on 4 key areas of workforce where there is substantial pressure Urgent and Emergency Care, mental , unregistered/support workforce and Primary Care.

The strategy will need to be revised to incorporate a longer term view of workforce that will support a new model of care linked to an agreed way of working within an Integrated Care System.

Key themes within the new workforce strategy will be recruitment and retention, enabling a 'workforce without walls' and developing integrated teams.

**Engagement: clinical, stakeholder and public/patient:**  
Not Applicable

**Financial Implications of Paper:**  
None

**Action Required:**

- Note the progress that is being made to develop an Oxfordshire Workforce Strategy alongside implementing initiatives to directly impact on current workforce pressures

**OCCG Priorities Supported**

✓	Operational Delivery
✓	Transforming Health and Care
✓	Devolution and Integration
✓	Empowering Patients
✓	Engaging Communities
✓	System Leadership

**Equality Analysis Outcome:**

Not Applicable

**Link to Risk:**

Work being led through the Oxfordshire System Workforce Group and by providers aims to impact on the following Operational risks 797 'There is a risk that there is not enough capacity (workforce infrastructure) in the Urgent Care system to enable flow, improve performance, patient safety and support patients' and 799 'There is a risk that a lack of Primary Care workforce will affect the sustainability of Primary Care and affect services to patients'

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## 1. Introduction

Workforce issues are one of the key drivers for change at Buckinghamshire, Oxfordshire and Berkshire (BOB and Oxfordshire system levels, informing both local and BOB wide training and recruitment and retention plans. The headlines at BOB STP and Oxfordshire system level are very similar:

- Housing that is among the least affordable in the UK
- A rapidly ageing population and a declining working age workforce
- A very tight labour market making it very difficult for employers to recruit
- Brexit-related uncertainty for European nationals working in Oxfordshire
- Labour shortages in competing sectors (retail, hospitality and catering and logistics and the new Westgate outlet in the city centre that has provided 600 new job opportunities)

## 2. System Workforce Challenges

### 2.1. Adult Health and Social Care

Oxfordshire's Adult Social Care is experiencing increasing demand for care as Oxfordshire's population grows and has a need to both increase the numbers of staff as well as increasing skill levels as care needs become more complex. Oxfordshire's social care workforce has a high staff turnover rate. The job groups most affected are professionals (39%) and Direct Care (31%). High rates of staff turnover are also being experienced in the independent sector. One of the greatest needs is for nurses in the nursing home sector.

### 2.2. NHS Trusts

The medical workforce in Oxfordshire University Foundation Trust (OUHFT) is very stable and has a high overall stability rate (92%). However Health Education England (HEE) has projected that supply across the non-medical workforce in Oxfordshire will be insufficient to meet demand beyond the next 3 years.

This has implications not just for managing demand based on the delivery of current models of care but has implications for Oxfordshire's stated aim of delivering Care Closer to Home, working in integrated teams to meet population needs and providing increased levels of care in community based settings.

### 2.3. Primary Care

The 2017 Oxfordshire Primary Care Framework sets out a model for primary care and highlights the challenges faced by general practice including workforce shortages and difficulties in recruiting staff.

A survey in August 2017 highlighted current GP vacancies of 21 FTE with an estimated additional 67 FTE GPs needed to meet growth in service demand over the next 5 years and 106 FTE's in the next 10 years.

In Oxfordshire 18% of GPs are aged 55 years and over meaning that it is likely they will retire within the next ten years. The estimated number retiring in the next 5 years is 79 FTE's and 139 FTE's in 10 years, creating further pressure in Primary Care.

Some of Oxfordshire's practices are experiencing difficulty recruiting to posts due to their geographical location or lack of availability of appropriately trained staff.

#### **2.4. Ambulance Services**

South Central Ambulance Service (SCAS) has chronic Paramedic shortages and needs to recruit significantly increased numbers of newly-qualified students each year to keep up with demand and to replace staff turn-over it also has skills shortages in nursing (CSD/111).

SCAS reports that high levels of paramedics trained by them are recruited by other sectors, notably general practice, which impacts on the workforce gap they currently experience.

### **3. The System response**

#### **3.1 Developing an Oxfordshire Workforce Strategy**

The Oxfordshire System Workforce Group has identified the unregistered /support workforce, Urgent and Emergency Care, Mental Health and Primary Care as the priority areas within the new Oxfordshire Workforce Strategy that is being developed.

The key themes are an emphasis on recruitment and retention, enabling a workforce without walls and integrated team working.

#### **3.2 A Workforce Without Walls**

In Oxfordshire we are on a journey towards integrated care and there is need to create a local workforce that will support this change. To do this we need to revise our HR and governance systems to enable health and social care staff to work in an integrated way, in teams that include health and social care, that are able to move across organisations to provide a flexible workforce that can react to shortages and demand.

Working in this way will provide an enriched work experience for staff and opportunities for career development across the system. It will help in retaining staff not just in individual organisations but within the system, allowing them to move between organisations as they make career choices, as well as attracting others to come and work in Oxfordshire.

A system level bid (£120K) has been agreed by BOB Local Action Workforce Board (LWAB) that supports Oxfordshire's Winter Plans that promotes this new way of working with integrated teams working across organisations to maximise the use of resource and skills and respond quickly to surges in demand.

Evaluation of this bid will identify and mitigate barriers and enable new ways of working to emerge. The monies will also be used to ensure staff have the skills to assess people in their place of residence to safely manage their care in the most appropriate setting.

### **3.3 The Support Workforce**

There is a significant body of work focused on the Support workforce being led by Oxfordshire County Council (OCC) working with Health Education England (HEE) and BOB LWAB on:

- Joint Recruitment and retention
- Portable Care Certificates (sponsored by BOBLWAB) - OHFT & OUHFT are going through a quality approval process to gain the kite mark as providers of Care Certificate.
- Establishing an Excellence Centre (Sponsored by BOB LWAB and hosted by Oxford Health and Oxford University Hospitals )
- Key Worker Housing  
A bid to encourage young people into the health and social care workforce (£45k) has been supported by BOB LWAB linking with schools to showcase school leavers the breath of opportunities to work in social & health care

## **4 Provider Workforce Strategies**

All of our local organisations have their own internal Workforce Strategies and are developing solutions for their specific workforce problems.

### **4.1 Oxford Health Foundation Trust (OHFT)**

OHFT is focused on 'growing its own' and has recruited 50 nursing associates through external advert enabling people who had not envisaged having a nursing career the chance to join the nursing workforce. This is in addition to 50 internal candidates who are presently Health Care Support Workers. OHFT's internal candidates who do not have the qualifications for the nursing associate scheme are offered a place on a level 3 apprenticeship as a means of retaining skilled and interested staff.

### **4.2 Oxford University Hospitals Trust (OUHFT)**

OUHFT has a significant gap in the numbers of Band 5 nurses required for its nursing establishment and continues to push forward with all its nurse recruitment initiatives, including recruiting from outside the UK, whilst maintaining a strong focus on retention and turnover reduction.

OUHFT is the only local NHS Hospital Trust that recruits nurses from abroad. Recruitment of registered nurses from within the European Union (EU), which over the last 3 years has offset the nurse vacancy position This has decreased significantly since the introduction of a mandatory International English Language Test prior to gaining registration. The test has stringent criteria for passing and has led to a 95% reduction in applications to the NMC nationally.

None the less OUHFT continues to actively recruit within the European Union. As of August 2018 7 of the 11 (63%) international nurses in OUHFT have passed their Objective Structured Clinical Examination (OSCE) and are now working as Registered Nurses in the organisation. The four resits will take place in September along with three new first sits. The recruitment agency are predicting that a further 15 nurses will have all their documents in place to arrive by the end of October 2018. Nurses that are currently undergoing their English language

training in the trust are working as Band 3 nurses until they have successfully passed their examinations.

The aim of OUHFT's international nurse recruitment initiative is to successfully secure and take through the OSCE programme 200 nurses over the next 2 years. Plans are in place for a further nurse recruitment event in India in October 2018. Both Trusts are working with NHS improvement on retention of staff and sharing good practice from other systems.

#### **4.3 Primary Care**

OCCG has commissioned a report on the Primary Care Workforce which is looking at skill mix, new ways of working, developing career pathways and a Practice Nurse Induction and Training Programme. A draft workforce plan is currently under review by the Locality Clinical Directors (LCDs)

### **5 The Oxfordshire System Workforce Group/BOB Local Workforce Action Group**

#### **5.1 Challenges**

The CQC Beyond Barriers, July 2018 is a report on the reviews it undertook in 20 local systems, including the Oxfordshire system. The report recognises the need to work across boundaries in order to provide integrated care. It recognises the need to be innovative in how NHS and Social care recruit train and use the workforce, so that staff have the ability to provide joined up care that is seamless for people who need it. Currently workforce planning is undertaken within an individual organisation not as a whole system. Organisations need to work collaboratively to develop a health and care workforce that will meet the needs of people now and in the future. The successful BOB LWAB workforce bid will consider how this can begin to become a reality in Oxfordshire.

#### **5.2 Planned Work**

This includes developing our links with all secondary schools to showcase the breadth of career opportunities in health and social care and revising our approach to joint recruitment so it works for the whole system. We also need to implement the streamlining work to enable staff to work across boundaries. Longer term we need to consider the role of technology to address some of the workforce challenges for example a recent evaluation of artificial intelligence found it is equal to experts in detecting eye diseases.

### **6 Conclusion**

In order to deliver high quality health and social care we need a skilled competent workforce this paper has identified some of the challenges we face locally and some of the solutions we are working on. The challenges of workforce planning at a system level should not be underestimated we will work with colleagues across health and social care with colleagues in HEE and BOB STP to make this a reality locally.

The attached governance structure, Appendix 1, provides detail.

Oxfordshire System Workforce Group Governance Structure

