



Health and Care Partnership for Cheshire and Merseyside

Strategic Workforce Programme & Supporting Documentation

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Contents

Section		Page
Section 1	Introduction and objectives	3
Section 2	Governance: Health & Care Partnership for Cheshire & Merseyside Strategic Workforce Programme Board Local Workforce Action Board Social Partnership Forum	5
Section 3	Key Work Programmes	8
Section 4	Risk Register	15
Appendix 1	Terms of reference – Strategic Workforce Programme Board	18
Appendix 2	Terms of reference – Local Workforce Action Board	21
Appendix 3	Draft Terms of Reference – Social Partnership Forum	24
Appendix 4	Plan on a Page	28

Version Control

Version No	Type of Change	Date	Description of Change
1	New	April 2018	



Section 1

Strategic Workforce Programme

Introduction and objectives

The strategic workforce programme is one of four enabling programmes to support the delivery of the place based care systems and the clinical and transformational programmes across Cheshire and Merseyside.

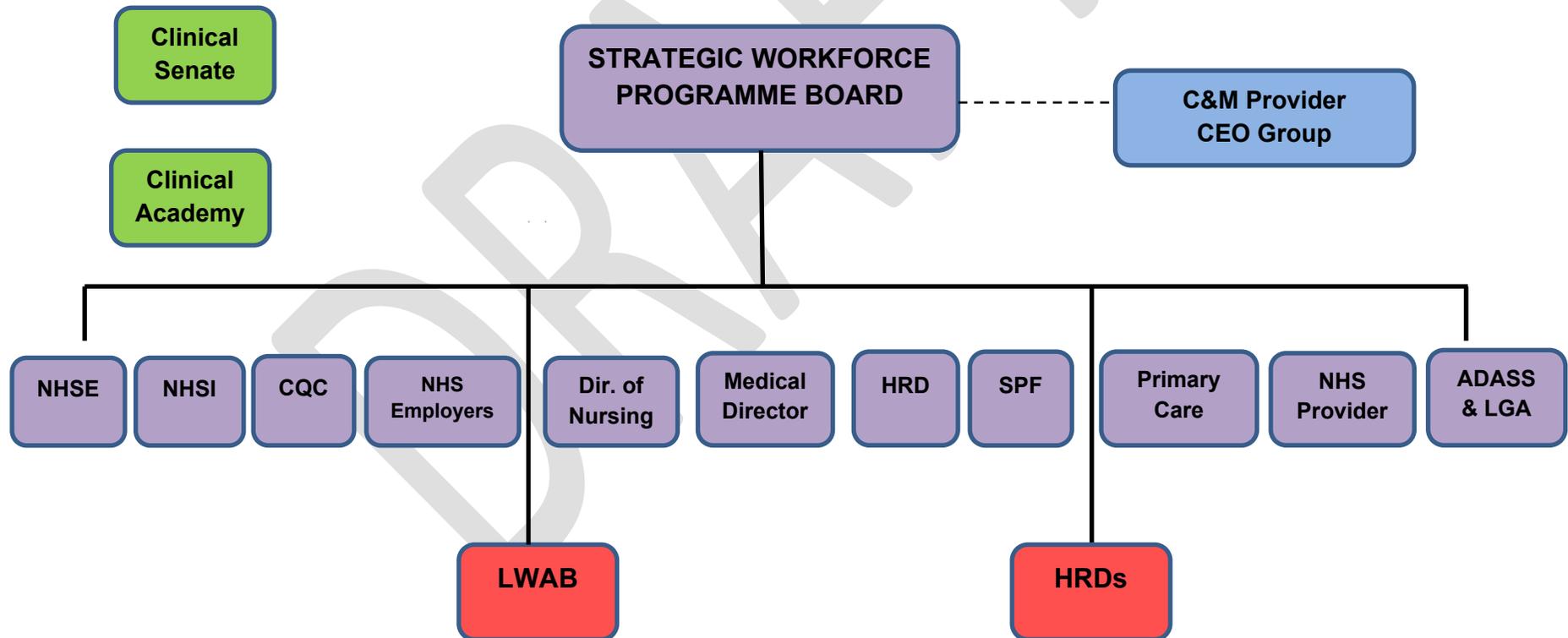
The agreed aims of the programme are as follows:

- To understand the workforce aspects (challenges and opportunities) of the clinical work streams, place based programmes and other cross cutting programmes across Cheshire and Merseyside, understanding the implications and the scale of change required.
- To develop key programmes of work on those elements of the workforce agenda, which are better done together, including the development of a Cheshire and Merseyside employment offer and the streamlining of workforce processes and systems.
- Identify the workforce implications of the back office / Carter programmes of work, including the opportunities of having a consistent payroll and Occupational health offer.
- Develop a Cheshire and Merseyside integrated workforce and development plan and strategy including identification of the workforce implications of system and organisational change such as restructuring, mergers and acquisitions, integrated care systems and new models of care and care delivery.
- Understand the impact of national skills shortages on the wider system and develop strategies to minimise the impact.
- Create a knowledge repository which enables anyone working in the health and care system to engage with each other, share best practice and research in workforce issues and celebrate success/ share learning across Cheshire and Merseyside.

Section 2

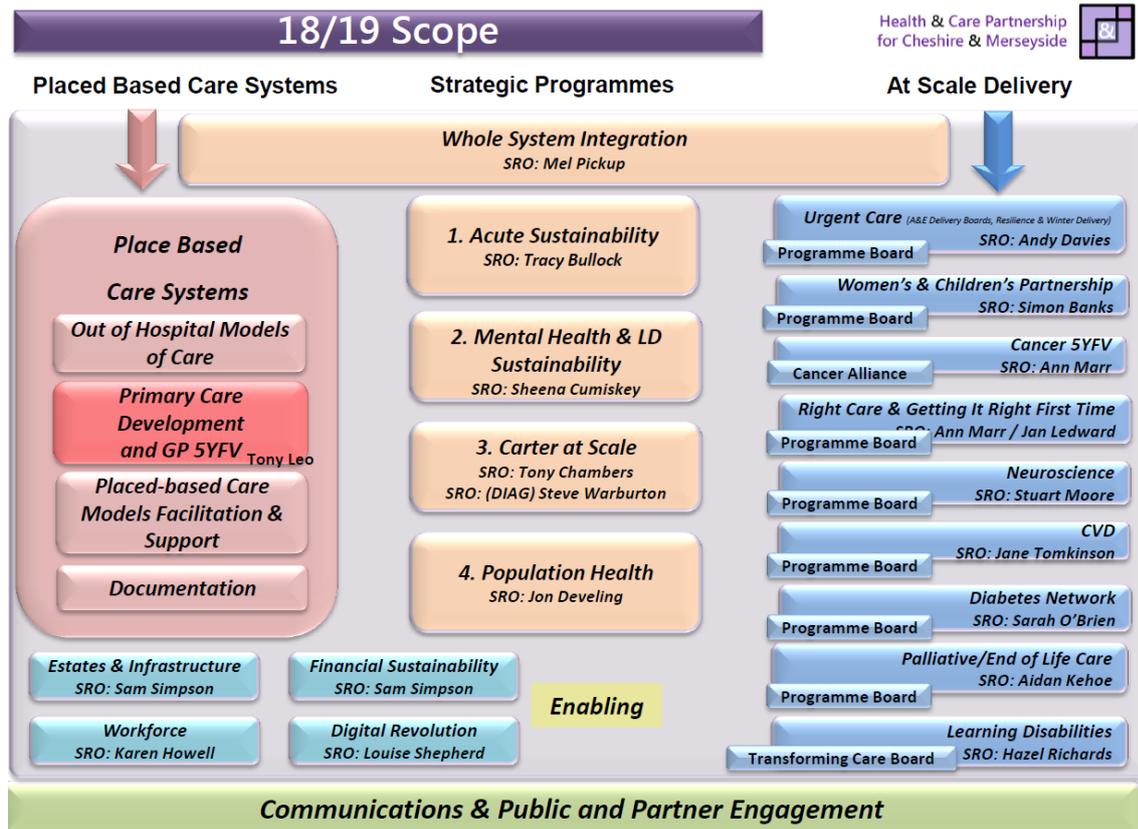
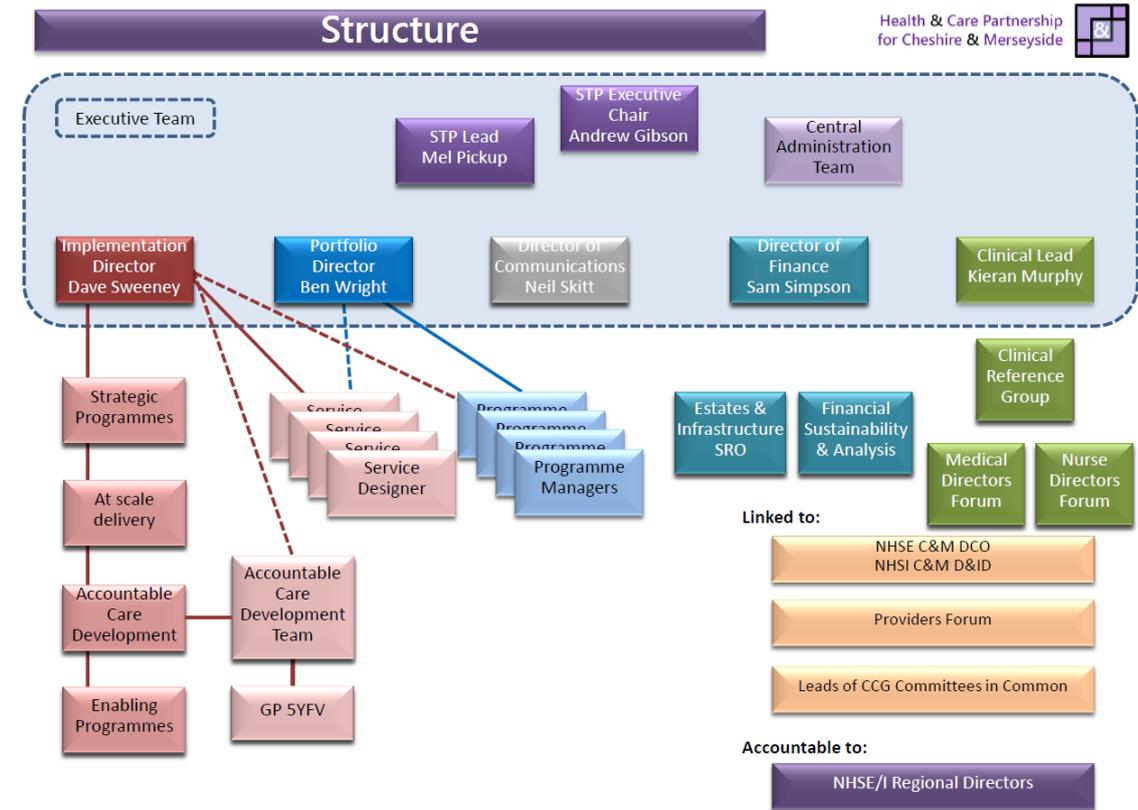
Diagram 1

Strategic Workforce Programme Board Governance Structure



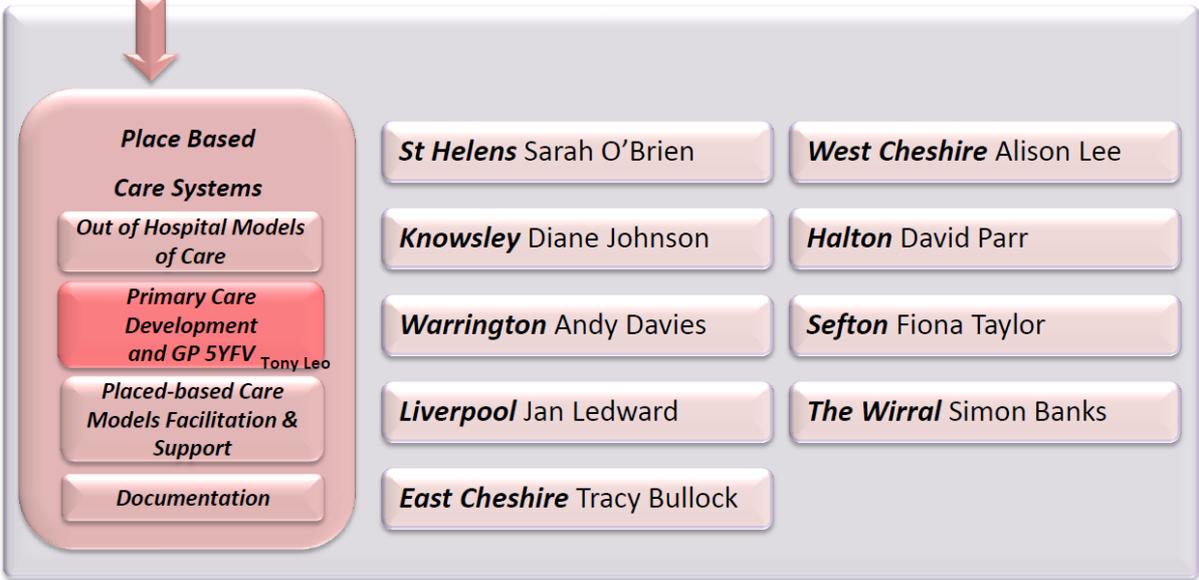
Diagrams 2-6

Cheshire & Merseyside Partnership Governance

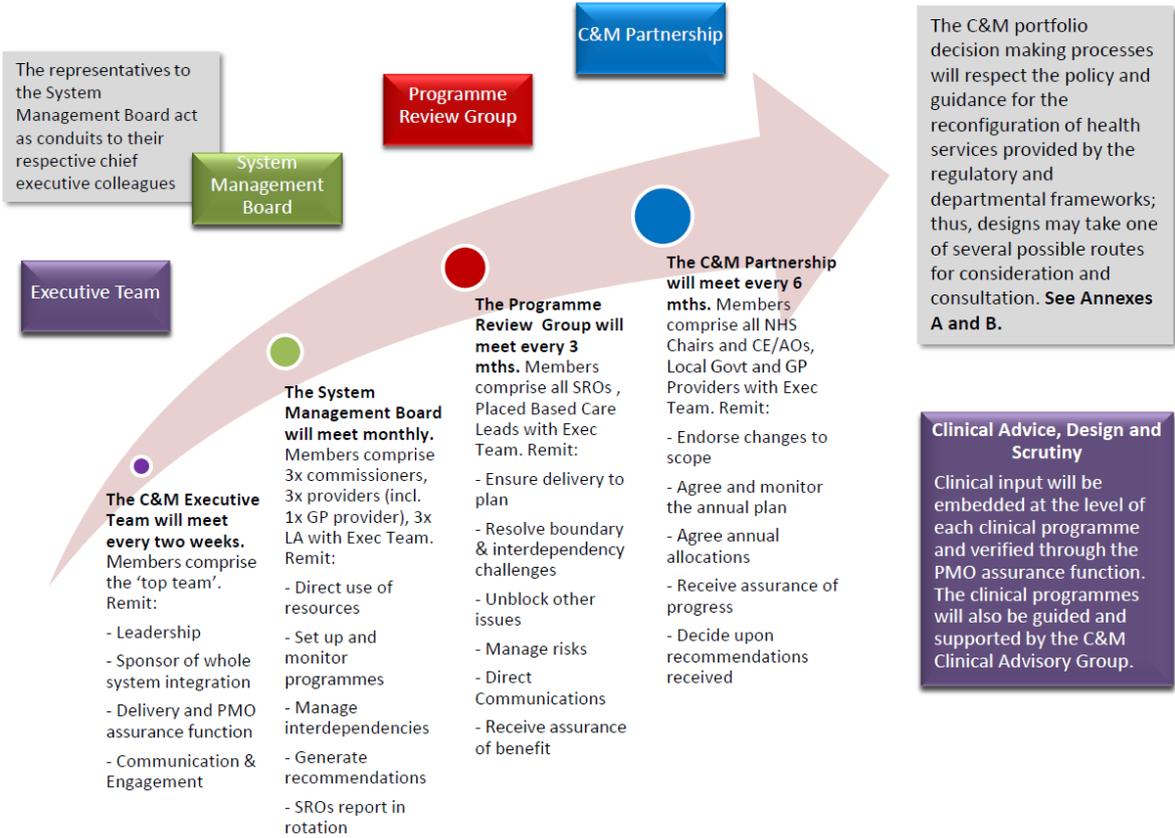


18/19 Scope

Placed Based Care Systems



Working



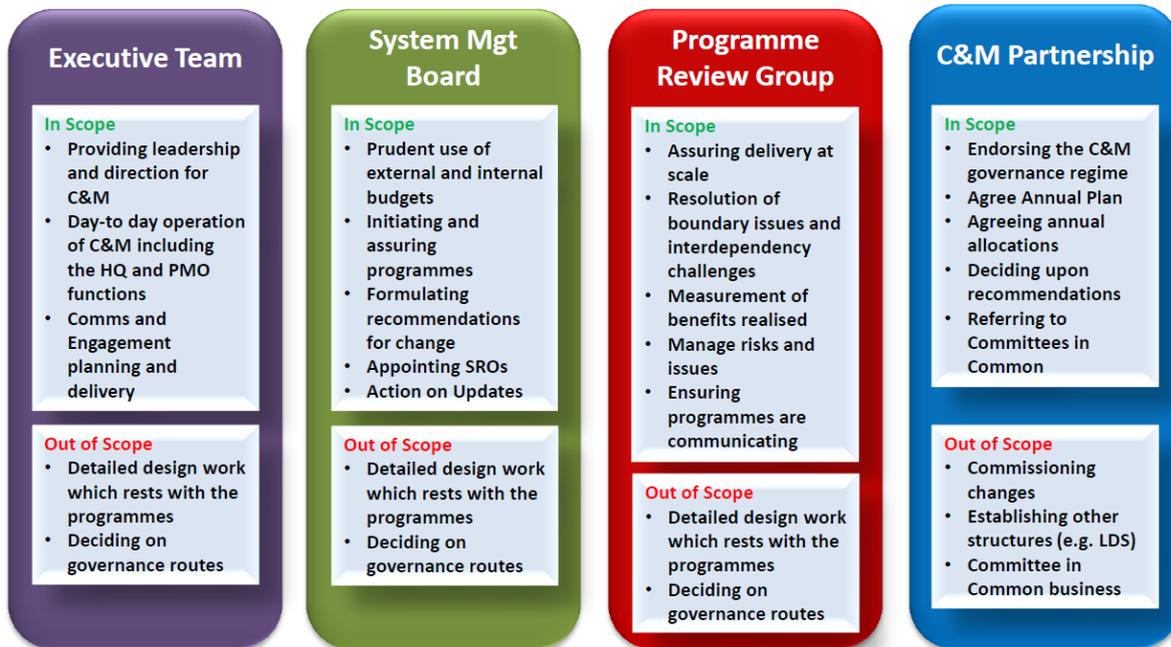
Duties



It is the role of each Programme Board to govern each programme from 'Initiation' through to 'Sustain and Review'. This responsibility may be handed down through the 3 levels but assurance must remain at a central point for reporting to the C&M Partnership:



In this context the C&M Partnership, Programme Review Group, System Management Board and Executive Team should focus on the roles described below; these provide the framework for the Terms of Reference for each Group:



Strategic Workforce Programme Board

The Board provides oversight, leadership and support for the delivery of a sustainable, high quality workforce for the Cheshire and Merseyside health and care system. The Board will meet quarterly and be aligned to the LWAB.

The Board will work with clinical leaders to create a shared vision for the future workforce across Cheshire and Merseyside and ensure that there is an appropriate infrastructure to enable clinical staff to focus on clinical service delivery. Terms of reference have been reviewed and agreed and the membership of the group has been amended to include NHSI, NHSE, the CQC and NHS Employers.

A key challenge for the Board is how it engages across all health organisations, with the 387 GP practices, local authorities and seven place based systems including independent care providers. Briefings will be produced following each meeting of the Board.

Terms of reference can be found at Appendix 1.

Local Workforce Action Board (LWAB)

The LWAB is the delivery board for the strategic workforce programme. Terms of reference have been reviewed and agreed. The Board meets bi monthly and has a membership that spans health and care providers, place based care representatives, Local Authorities, Public Health, the voluntary sector, commissioners, education providers, The Innovation Agency, the NHS Leadership Academy and Skills for Care.

A revised funding application process has been introduced which will require applicants to provide clarity on expected outcomes and detail how the benefits can impact across health and care .It is essential that there is an alignment between the work of the LWAB and the funding streams from HEE to ensure that there is a cohesive work programme that is focused on outcomes and benefits the Cheshire and Merseyside system.

Terms of reference can be found at Appendix 2.

Social Partnership Forum

The first meeting of the Cheshire and Merseyside SPF is scheduled for June 2018 and brings together the full time officers of professional organisations and trade unions. This forum will not replace local consultation and negotiation arrangements but provides a regional forum for engagement on matters of transformation at scale and across organisations and geography. All of the recognised trade unions will have a representative at the forum.

Draft terms of reference can be found at Appendix 3.

Section 3

Key work programmes

The following is a summary of the agreed priorities and projects for the strategic workforce programme:

Understand and support when necessary the workforce aspects of the strategic programmes and place based developments:

Actions: Ensure that there is an appropriate framework to understand the workforce implications of each programme, that these are shared at the appropriate time with the social partnership forum and approved by the Strategic Workforce Programme Board and that the workforce elements are fully understood and that there is an implementation plan for meeting the revised workforce requirements, having involved the appropriate partners, Higher Education Institutes, commissioners and regulators.

Ensure that any workforce implications are shared with the Social Partnership Forum and that robust consultation and negotiation takes place at organisational and programme level.

Identify any adverse workforce implications of the programmes/ place based schemes and facilitate reskilling and redeployment across the health and care system wherever possible.

Identify any implications for the care sector of the programmes and work , via Skills for Care to minimise these.

Risks:

- WP 1a: Workforce implications of a number of programmes not yet identified or known.
- WP 1b: Timing of meetings results in delays in decisions, commissions etc.
- WP 1c: Identification and lack of funding for training of new posts and development of current workforce.
- WP 1d: Time to train may be prohibitive to implementing change; interim solutions to be identified which are safe and quality.

Develop key programmes of work on the various elements of the workforce agenda which are better done together across the Cheshire and Merseyside health and Care system:

Actions: To develop a Cheshire and Merseyside offer of employment, with consistent benefits and incentives, supported by an employment charter. This work will be developed in partnership with the HR Directors / Deputy Directors of HR and

tested through the Directors of Nursing, COO's, Primary Care representatives, Local authority officers and Skills for Care (through the registered manager forums) before sharing with the Social Partnership forum. The work will report into the LWAB with oversight by the Strategic Workforce Programme Board.

To develop a model recruitment and retention strategy which will include an ethical and sustainable approach to overseas recruitment for Cheshire and Merseyside with a range of initiatives and campaigns to cross all sectors.

To develop a validated and quality assured bank of investigators to support all health and care organisations in minimising the amount of time it takes for investigations to be concluded, reduce the time and impact of suspensions and ensure that the quality of reports and evidence is to a level required at Employment Tribunal. To ensure a consistent approach to investigations, report production and collection of evidence and an on-going relationship with the individual trust or organisation until the case is concluded.

To determine the merits of having a consistent and standard legal service to all organisations, through a centrally negotiated contract/procurement.

To ensure implementation and evaluation of the recommendations from the various streamlining programmes developed across Health organisations in Cheshire and Merseyside.

Risks

- WP 2a: Lack of support for a Cheshire and Merseyside employment offer.
- WP 2b: Inability of the independent care sector to fulfil the offer / Charter due to financial or other pressures.
- WP 2c: Lack of support funding available to prosecute recruitment campaigns including overseas.
- WP 2d: Lack of early identification of emerging gaps and shortages of staff in specific groups.

Identify the workforce implications of the back office / Carter programmes of work

Actions: Identify areas of workforce savings through the streamlining programmes including the potential for a Cheshire and Merseyside payroll service, a standard Occupational health service/ provider , a collaborative bank and an pool of validated and quality assured investigators to minimise costs (both human and physical) of disciplinarys/ grievances and dignity at work/ whistle blowing cases.

Determine the workforce implications of any proposed shared service models and ensure that these are shared through the Social Partnership Forum.

Risks:

WP 3a: Lack of organisations commitment

WP 3b: Risks to current providers within the Cheshire and Merseyside system

WP 3c: Costs associated with change of providers

WP 3d: Length of time to implement to avoid contractual penalties

Develop an integrated workforce and development plan including identification of the workforce implications of system and organisational change such as restructuring, mergers and acquisitions and new models of care and care delivery.

Actions: To understand, collate and co-ordinate the NHS workforce plans (submitted to HEE / NHSE at the end of April 2018) and understand the current and forecasted establishment and vacancies (both paid and unpaid workforce). Work with Skills for Care to collate information on local authority and independent provider workforce.

Understand and articulate the impact of the place based development on the employment status of staff and provide guidance on the various employment models, together with the risks and implications of each model. In partnership with individual organisations develop appropriate strategies to manage organisational change such as mergers and acquisitions.

Understand the new roles and competencies required within the systems and work with HEE to commission appropriate programmes of education to meet those needs.

Develop a comprehensive workforce strategy and development plan to support the Health and Care Partnerships overarching strategy.

Determine, in partnership with the digital work stream, the impact and opportunities of technically enabled roles.

Risks

WP 4a: Lack of accurate workforce information from both health and care providers

WP 4b: Lack of consistency in the requirement for new roles resulting in an inability to commission at scale from education providers.

Understand the impact of national skills shortages on the wider system and develop strategies to minimise the impact.

Actions: Gather information on regional 'hard to recruit'/ national shortage posts and understand the impact of this on local providers, including workforce implications, quality and financial impact and the resultant regulatory consequences.

Determine, in partnership with providers, the priority areas and develop appropriate strategies to attract candidates/ change roles / develop new roles. Understand and influence the commitments of HEE to commission new roles, additional placements etc. and how this will impact on providers.

In partnership with the communications team and organisations, develop an appropriate Cheshire and Merseyside recruitment and retention campaign to promote careers across Cheshire and Merseyside.

Maximise the opportunities available through the apprenticeship schemes.

Risks:

WP 5a: Inaccurate or inconsistent information on hard to recruit / national shortage posts

WP 5b: Pace of development of clinical apprenticeship frameworks and service pressures impact on the viability of engaging apprentices.

Create a workforce knowledge repository which enables anyone working in the health and care system to engage with each other, share best practice and research and celebrate success.

Actions: Ensure that there is a facility/ portal on the Health and Care Partnership website for all partners to access and contribute to research, best practice, case studies, local information and OD / change tools.

Collect relevant evidence based benchmarking data and research to develop a range of scenario modelling, with a suite of tools and techniques.

Develop a library of local case studies.

Share the learning from all funded programmes of work agreed by the LWAB/ HEE.

Risks:

WP 6a: Lack of input from partners to share case studies

Additional programmes/ projects being supported by the workforce programme

The workforce programme is also supporting the following areas of work:

Streamlining: The focus is on recruitment processes to reduce the length of time it takes for the appointment process, improving the applicants experience and enabling a more agile workforce that can easily move from one employer to another. The aim is to ensure that all organisations adopt the standardised processes during 2018.

Collaborative Bank: The aim of the collaborative bank project is to create a workforce that is able to be mobile and work across the Cheshire and Merseyside area undertaking bank shifts with a common system of recording and a single agreement payment structure thus reducing agency spend and improving the provision of safe effective patient care.

Cancer and Mental Health workforce planning: The team have fulfilled the requirements to submit the required cancer and mental health workforce plans in line with the national strategy requirements.

Endoscopy staffing/ diagnostic radiology: Working with the programmes to determine the appropriate options for endoscopy and radiology staffing across Cheshire and Merseyside.

Talent management: The aim of this work is to create a standard approach to talent management and succession planning across health and care, linking into the regional talent banks managed by the Leadership academy.

Advanced clinical practitioners/ IAPT staffing: Through the offices of HEE NW we will be commissioning additional training posts for advanced clinical practitioners and IAPT staff.

Skills for Care: Working in partnership with Skills for Care and their networks of registered managers, to understand the challenges and opportunities that face care providers in recruiting and retaining staff.

Working in conjunction with Directors of Nursing - Nurse Directors across Cheshire and Merseyside recognised that significant change is required to enable Trusts to be able to retain its current nursing workforce and safeguarding its future supply. Collectively, the Nurse Directors have developed a programme of work with five key priority areas:

- A. **Nursing Workforce Intelligence & Dashboard** to enhance understanding, standardise reporting and making better use of the available nursing workforce intelligence.
- B. **Quality Clinical Placements** to ensure sufficient clinical placement capacity and excellent learning experiences. There are current placement capacity issues, inefficiencies and quality risks in Cheshire and Merseyside which need to be addressed.
- C. **Development of a Core Continuing Professional Development Offer** aiming to seek consensus and application of a common model, ensuring that this model makes best use of significant resourcing opportunities such as the Apprenticeship Levy and the wider education resources

- D. **Towards Zero Vacancies** will progress collaborative activity designed to help reduce nursing vacancies within Cheshire and Merseyside, through activities such as celebrating the joy of nursing, standardising recruitment through the streamlining of processes and Continuous Professional Development offers to help strengthen attraction, share learning from the Rapid Retention programme and exploring how recruitment initiatives such as international recruitment can be maximised.
- E. **Shared Services at Pace** will use a coalition of the willing to consider how shared service models can be safely planned and efficiently advanced in the proposed following areas; Emergency Planning, Safeguarding, Infection Prevention, Complaints and Mortality Reviews.

There will be an Executive Nurse sponsor for each of the 5 areas with support from a Deputy Director and a PMO.

WRaPT (workforce modelling tool) – we are promoting the use of the WRaPT workforce modelling tool to better understand the workforce outputs of the revised models of care .

Section 4

Strategic Workforce Programme Risk Register

Introduction

The workforce programme risk register provides the Strategic Workforce Programme Board with a simple but comprehensive method for the effective and focused management of the principle risks associated with delivery of its objectives and the current programmes of work. It also provides a structure for providing evidence and assurance and identifying if the delivery of an objective is at risk. The following risk management matrix has been used to assess the risks.

Likelihood	Almost Certain	5	5	10	15	20	25
	Likely	4	4	8	12	16	20
	Possible	3	3	6	9	12	15
	Unlikely	2	2	4	6	8	10
	Rare	1	1	2	3	4	5
			1	2	3	4	5
			Insignificant	Minor	Moderate	Major	Catastrophic
			Impact/Consequence				

Objective/task	Risk	Rating	Control	Assurance	Gaps
Understand the workforce aspects of the strategic programmes and place based care	WP1a - Workforce implications of programme not yet identified or known.	3x3	Standard reporting within each programme	Regular reporting to SWPB from each scheme workforce lead	Programme management reporting not yet in place
	WP1b - timing of meeting schedules may result in delays in decision making	3x3	Schedule of meetings to be developed and shared across HCP – delegated authority given to SWPB/LWAB chair should decisions need to be taken urgently	Schedule of workforce committees published	Meeting schedules currently programme focused
	WP1c – Lack of funding for training new posts	3x4	HEE commissioning plan and funding agreed nationally Local LWAB funding notified in May/ June	All HEE commissioning decisions now have HCP input through the LWAB/ SWPB HEE funding of new posts/ training must be agreed at SWPB	Workforce plans not yet developed to detail new posts required. Current commissions not based on agreed HCP workforce trajectories
	WP1d -Time to train may be prohibitive to implementing change quickly	4x3	HEI providers are members of the SWBP and LWAB and will be able to influence other providers in developing	HEI's , HEE, NHSI, NHSE, CQC and NHS employers now full members of the SWBP	Not yet tested the ability of HEI's to respond to requests for revised training , accreditation etc

			revised curriculum, new courses etc		
Develop key programmes of work on elements of the workforce agenda that are better done together across the HCP	WP2a – Lack of support for C and M employment offer	3x3	Memorandum of understanding across all partners to engage in this programme	CEO/ Chairs / HRD endorsed approach and Deputy HRD's leading in developing the offer	No MOU in place
	WP2b - Inability of the independent care sector to fulfil the offer/ charter due to financial or other pressures	4x4	Skills for Care represent the independent care sector on the LWAB	CEO/ Chairs / HRD endorsed approach and Deputy HRD's leading in developing the offer	No contact with all registered managers to date. Independent providers not contracted to engage in this piece of work
	WP2c – Lack of funding to support recruitment campaigns	2x4	HEE allocation of monies and agreed funding mechanism / approval and monitoring via LWAB and SWPB	Funding process agreed at LWAB and this is a standard item agenda for all LWAB meetings	Confirmation of ability to use HEE funding on wider health and care sector initiatives yet to be confirmed
	WP2d – shortage of staff in specific groups results in limited outcomes	4x3	Workforce plans for health organisations due to be submitted at the end of April 2018	Understand the current commissioned places across Cheshire and Merseyside	Lack of robust data on current workforce gaps across both health and social care
Identify the workforce implications of the back office / Carter programmes of work	WP3a – Lack of organisational commitment	3x2	Memorandum of understanding across all partners to engage in this programme	CEO/ Chairs / HRDs endorsed the programme fo work	No MOU in place
	WP3b – Risks to current providers (i.e. payroll/ Occupational Health) within C and M system	4x4	C and M risk / gain share agreement.	Contract reviews for all providers (where services outsourced)	No information on services used outside of health organisations. No understanding of the contractual terms of current arrangements or variance in costs and quality of services. No C and M risk/ gain share agreement in place
	WP3c/ 3d – costs and time associated with a change of provider	3x3	Improved negotiation potential over larger numbers of providers Streamlining of HR processes	CEO/ Chairs / HRDs endorsed the programme fo work	No information on services used outside of health organisations No understanding of the contractual terms of current arrangements or variance in costs and quality of services

Develop integrated workforce and development plans including the identification of the workforce implications of system and organisational change	WP4a- lack of accurate workforce information	4x3	Workforce plans for health organisations due to be submitted at the end of April 2018	HEE / NHSE collection of data Skills for Care staffing database	Lack of robust data on current workforce / gaps across both health and social care Primary care data not included in workforce plans
	WP4b- lack of consistency in the requirement for new roles results in an inability to commission at scale from education providers	3x3	Workforce plans for health organisations due to be submitted at the end of April 2018 WRaPT tool NHSE/NHSI/ NHS employers on SWPB	HEE / NHSE collection of data Skills for Care staffing database	Clinical leadership across both health and social care in determining new roles and competencies Primary care data not included in workforce plans
Understand the impact of national skills shortages on the wider system and develop strategies to minimise the impact	WP5a- Inaccurate or inconsistent information on hard to recruit/ national shortage posts	3x3	National data sets Workforce plans for health organisations due to be submitted at the end of April 2018	HEE / NHSE collection of data Skills for Care staffing database	Organisational perception varies Lack of data on independent care provider staff
	WP5b- Pace of development of clinical and care apprenticeship frameworks and system pressures impacts on the viability of engaging apprentices	4x4	National and local apprenticeship frameworks and guidance Financial implications of the apprenticeship levy	Cheshire and Merseyside NHS apprenticeship group in place	Lack of knowledge of progress in both health and care organisations
Create a workforce community of practice and knowledge repository which enables anyone working in that system to engage, share best practice and research and celebrate success	WP6a- Lack of input from partners to share case studies	2x2	HEE funding spreadsheet and monitoring process in place Reporting through to SWPB	Funding and progress item on every agenda of the SWPB LWAB agenda based on the 6 principles of the draft national workforce strategy and so will capture success stories	Mechanisms for reporting not fully embedded



Appendix 1

Strategic Workforce Programme Board Terms of Reference

Strategic Workforce Programme Board Terms of Reference

Constitution: The members of the Cheshire and Merseyside Health and Care Partnership (CMHCP) hereby resolve to establish a programme entitled: Strategic Workforce Programme Board

Purpose: The purpose of the programme is to provide oversight, leadership and support to the delivery of a sustainable, high quality workforce for the Cheshire and Merseyside health and care system

This programme will be delivered through 4 stages;

- design,
- approve,
- implement and
- evaluate.

with system-wide engagement throughout.

This will include:

- The design of a Cheshire and Merseyside-wide workforce strategy, to deliver a sustainable, high quality and safe workforce.
- Liaising with, and supporting each programme to bring workforce requirements to the fore and to articulate these in a strategic workforce context focusing on place as well as function / programme
- Working with clinical leaders to create a shared vision for the future clinical workforce across Cheshire and Merseyside and to ensure that there is an appropriate non clinical / support infrastructure to enable clinical staff to focus on clinical work
- Identification of key priorities and/or core themes for workforce solutions in the short, medium and long term
- Creating the Cheshire and Merseyside 'offer' and 'brand' for our workforce
- Ensuring that workforce changes are managed on a Cheshire and Merseyside footprint rather than at an organisational level (ie redeployment / clearing house facilities to minimise unnecessary severance payments)
- Ensuring workforce collaboration through the development of

initiatives such as the Cheshire and Merseyside collaborative bank and streamlining approaches to enable the development of an agile workforce

- Determine where savings can be made by working at system level
- Agreeing process for CMHCP-level responses to national workforce strategies and plans

The strategy will exclude individual organisation workforce plans and will not replace the need for organisation and place-based workforce plans, but it will give the system a shared framework and principles to support delivery of the future workforce.

It is anticipated that individual organisations, places, and integrated care systems will fundamentally be responsible for implementing the Cheshire and Merseyside Workforce Strategy for Health and Care in their area.

For this to happen, it is required that:

- Each partner understands the future service models and workforce implications and impact
- The subsequent future requirements of their workforce to inform the Strategic Workforce Programme Board
- The SWPB will work through the Local Workforce Action Board (LWAB), and other networks such as the HRDs Forum, the Strategic Partnership Forum and clinical networks, to enable the system to deliver the workforce requirements of the Partnership's whole system transformation

Membership: The Strategic Workforce Programme Board shall consist of:

Karen Howell	CEO/SRO for the Cheshire & Merseyside Strategic Workforce Programme (Chair)
Christine Samosa	Programme Director for the Cheshire & Merseyside Strategic Workforce Programme
Neil McLauchlan & Liz Thomas	Health Education England
Mike Gibney	SPF
Melissa Swindell	HRD Network representative
Hazel Richards	DoN and CN representative
tbc	Medical representative
tbc	Public Health representative
Delyth Curtis tbc	Local Authority advisor
tbc	Place-based care representative (interim)
Angela Parfitt tbc	CQC
Tony Leo	Primary Care/NHSE
Jill Copeland	NHSI
Jane Raven	NHS Employers
Carole Spencer	The Innovation Agency

Members are expected to attend each meeting of the Programme Board; members who cannot attend should ensure that wherever possible their nominated deputy is in attendance.

Attendance: Each meeting will require the attendance of all of the membership; members who cannot attend should ensure that their brief is covered in advance and a representative is arranged (where necessary to the conduct of business).

Quorate: A quorum shall be the SRO (or nominated deputy) with 50% members in attendance

Wider Attendance: Invitees to the Strategic Workforce Programme Board will be on an 'as required' basis. The Chair of the Strategic Workforce Programme Board reserves the right to invite other colleagues from local government/NHS to attend for particular items.

Frequency: A meeting shall be held every quarter unless advised otherwise.

Approach: The approach of the Strategic Workforce Programme Board will be exercised, and constrained, as follows:

In scope: the Strategic Workforce Programme Board will be accountable for the delivery of the identified deliverables and act as a reference group for workforce matters.

Out of scope: the Strategic Workforce Programme Board will not be responsible for individual organisation's workforce planning and development.

Duty: The duty of the Strategic Workforce Programme Board Review is delivery of a Cheshire and Merseyside Workforce Strategy for Health and Care, and oversight and leadership in implementation.

Reporting: The notes of the Strategic Workforce Programme Board meetings shall be recorded. The notes will routinely be reported to the C&M Executive Team and System Management Board; moreover, specific items for information/action will form part of communications bulletins to the wider membership.

Approved by: SRO Strategic Workforce Programme

Version: Issue 1.0

Date: March 2018

Review Date: October 2018

Appendix 2

Local Workforce Action Board (LWAB) Terms of Reference

Local Workforce Action Board Terms of Reference

Constitution: Health Education England developed Local Workforce Action Boards (LWAB) in each Sustainability and Transformation Partnership (STP) to be the workforce arm of the STP.

In Cheshire and Merseyside, the LWAB is the Delivery Board for the STP Workforce Programme Board. The Workforce Programme Board provides oversight and leadership of the delivery of a sustainable, high quality workforce for the Cheshire and Merseyside health and care system

Purpose: LWABs have two main areas of responsibility:

- Supporting STPs across a broad range of workforce activity
- The local delivery of the HEE mandate from the Department of Health and other key workforce priorities in line with national policies

LWABs will utilise the six principles of future NHS decisions, developed by Health Education England in *Facing the Facts, Shaping the Future* (2017)¹, to support both areas of responsibility, these being:

1. Securing the supply of staff that the health and care system needs to deliver high quality care in the future
2. Enabling a flexible and adaptive workforce through investment in education and training new and current staff
3. Providing broad pathways for careers in health and care
4. Widening participation in health and care jobs so that people from all backgrounds have the opportunity to contribute and benefit from public investment in our healthcare
5. Ensuring the NHS and other employers in the system are inclusive model employers with flexible working patterns, career structures and rewards
6. Ensuring that service, financial and workforce planning are intertwined

Membership: The LWAB shall consist of representative roles including Chief Executives, Medical Directors, Nursing, Allied Health professions, HR/OD Directors, Finance Directors and will represent the organisations and sectors outlined below and constituted by HEE.

Health and Care Providers

- CEO/SRO for the Cheshire & Merseyside Strategic Workforce Programme (co-chair)
- Programme Director for the Cheshire & Merseyside Strategic Workforce Programme
- Place-based care representation
- Secondary care representation
- Tertiary care and specialist care representation
- Director of Social Care (Association of Directors of Adult Social Services)
- Director of Children's Services
- Voluntary Sector representative
- Chair from one of the Cheshire and Merseyside Health and Wellbeing Boards
- Director of Public Health

Commissioners

- Health Commissioner representation
- Social Care Commissioner representation
- Public Health Commissioner representation

Education Innovation and Development

- Health Education England Local Director (co-chair)
- Post Graduate Medical and Dental Education Dean or local Deputy Dean from Health Education England
- Health Education England Workforce and Education Transformation Lead
- Higher Education Institute representative
- Further Education Colleges representative
- Innovation Agency
- NHS North West Leadership Academy
- Skills for Care

Attendance: Each meeting will require the attendance of all of the membership; members who cannot attend should ensure that their brief is covered in advance and a representative is arranged (where necessary to the conduct of business).

Quorate: A quorum is required due to the financial responsibilities of the board. The quorum will be the SRO (or nominated deputy) with at least 50% Board members in attendance.

Wider Attendance: Invitees to the LWAB on an 'as required' basis. The Chair of the LWAB reserves the right to invite other colleagues from local government/NHS to attend for particular items.

Frequency: A meeting shall be held bimonthly unless advised otherwise.

Approach: The approach of the LWAB will be exercised, and constrained, as follows:

In scope: the LWAB will report to the Strategic Workforce Programme Board its two areas of responsibility.

Out of scope: the LWAB will not be responsible for individual organisation's workforce planning and development.

Duty: The duty of the LWAB is to support STPs across a broad range of workforce activity and guide the local delivery of the HEE mandate from the Department of Health and other key workforce priorities in line with national policies

Reporting: The notes of the LWAB shall be recorded. The notes will routinely be reported to the Workforce Programme Board; moreover, specific items for information/action will form part of communications bulletins to the wider membership.

Finance: The majority of funding that HEE allocates or distributes to C&M is activity driven and is based upon national payment mechanisms and tariffs and predominantly goes to NHS and other providers. As a result of huge education funding reforms for non-medical education the funding associated with university tuition fees and student bursaries distributed will no longer be distributed through HEE. Underpinning the allocation of training places and funding are the quality requirements set out by the HEE Quality Framework and regulators and medical colleges. Workforce development funding needs to support the delivery of the HEE Mandate, workforce transformation and other nationally determined priorities set by the DH or ministers. HEE would look to work with CMHCP to ensure there are mechanisms to influence investment in support of C&M workforce priorities.

Finance will be governed by Health Education England North's LWAB Funding Framework with the LWAB Chairs' holding ultimate responsibility for the overall allocation and utilisation of the local resources. This will be monitored by the HEE Workforce Transformation Lead for each LWAB.

Chairs' actions: In the event of Chair's action being taken by either co-chairs outside of the meeting, it is agreed that membership will be advised virtually of the issue and asked to respond. The final decision will be with the co-chairs. The co-chairs will report on any action at the next meeting.

Approved by: Local Workforce Action Board
Version: Issue 1.0
Date: November 2017
Review Date: October 2018

Appendix 3

Social Partnership Forum – Draft terms of Reference

Health & Care Partnership
for Cheshire & Merseyside



Health and Care Partnership for Cheshire and Merseyside Social Partnership Forum

(DRAFT) Terms of reference

Purpose:

The Cheshire and Merseyside Social Partnership Forum (SPF) brings together NHS organisations from across Cheshire and Merseyside, trade unions, NHS employers and staff-side representatives. The forum acts as a way of communicating to and from the North West SPF sub group, highlighting specific workforce issues and ensuring a clear flow of information to and from local employer organisations.

It is recognised that effective partnership working will bring important benefits to staff, patients and our partner organisations and the Cheshire and Merseyside Health and Care Partnership are committed to working in partnership to ensure the delivery of high quality services through an appropriately skilled and resourced workforce.

The forum is a sub group of the North West SPF and the North of England SPF and will report formally through to the North West SPF.

The Partnership recognises respective roles and responsibilities will establish shared objectives, a common purpose and formulates principles for effective partnership working.

The forum will consider the workforce implications of the Health and Care Partnerships plans, recognising that the implications may be across both organisational and sector boundaries. This forum will not replace the need for organisational consultation and negotiation mechanisms and agreed organisational processes.

The forum will support the aims of the North of England and North West SPF, namely:

- Providing constructive comments on implementation at a formative stage
- Contribute ideas on the workforce implications of schemes
- Promote effective communication between partners
- Promote good practice
- Keep the patient at the centre of everything we do

Roles and responsibilities

To enable effective operation of this partnership arrangement, all parties must agree to recognise and respect each other's roles and functions which are distinct but complementary. The partners recognise that individual organisations have responsibility for implementing national policies but are independent organisations in their own right. Trade Unions have a responsibility to represent and act in the interest of their members and other stakeholders will have views which will need to be taken into account.

Shared approach

The partnership is underpinned by the following shared values and common purpose:

We will have a shared commitment to continuous improvement including access to high quality services and delivering value for money to the public.

We believe that the NHS should promote good practice in all areas of staff management, including equality and diversity and a commitment to security of employment.

The NHS should take a collaborative approach to supporting staff that may be affected by change.

Principles:

All partners recognise the importance of formal and informal working relationships, built on trust and a shared respect, whilst respecting differences.

All partners commit to building trust and a mutual respect for each other's role and responsibilities.

All partners commit to having a positive and constructive approach.

All partners commit to engaging in early discussions of emerging issues and maintaining dialogue on progress and priorities.

All partners commit to openness, honesty and transparency.

All partners commit, where appropriate to maintain confidentiality and an agreed external position.

All Partners commit to make the best use of available resources.

Working arrangements

The partnership forum will meet on a bi monthly basis scheduled to allow feedback into the North West Social Partnership Forum.

The meeting will be formally recorded and minutes and agenda circulated at least 5 working days in advance of the meeting.

Membership

The forum is made up of representatives from:

Staff-side representative groups from NHS organisations across Cheshire and Merseyside

- The British Medical Association
- CSP
- Chartered Society of Physiotherapy
- GMB
- Managers in Partnership
- Royal College of Nursing
- Royal College of midwives
- Society of Radiographers
- The Federation of Clinical Scientists
- The British Dietetic Society
- The British Dental Association
- The British Association of Occupational Therapists
- The British Orthoptic society
- The Royal College of Speech and Language Therapists
- The Society of Chiropodists and Podiatrists
- UNISON
- Unite Union

Management side:

Karen Howell	CEO/SRO for the Cheshire & Merseyside Strategic Workforce Programme (Chair)
Christine Samosa	Programme Director for the Cheshire & Merseyside Strategic Workforce Programme
Anne-Marie Stretch	Director of HR/Deputy CEO St Helens & Knowsley Teaching Hospitals NHS Trust (Secondary Care)
Mike Gibney	Director of HR & OD at The Walton Centre NHS FT (chair – HRD Group and SPF Liaison)
Tracy Hill	Director of Strategy & OD, North West Boroughs Healthcare NHS FT (Mental Health)
Jo Harvey	Director of HR & OD, Wirral Community NHS FT (Community Services)

Heather Bebbington	Director of Workforce and OD, The Clatterbridge Cancer Centre NHS FT (Tertiary Care)
Jane Raven	Area Head of Engagement, NHS Employers
Liz Thomas	Health & Care Partnership Executive Director (tbc)

Key Stakeholders/ partners – to attend as necessary

SRO's for programmes and place based schemes

Workforce leads supporting the SRO's

Communications

Every effort will be made to provide information in good time for meaningful discussion and consultation. All partners will undertake to respect confidentiality where that is required or requested and otherwise conduct their dialogue openly.

Partners also have a responsibility to bring the views of those they represent to the SPF and to disseminate and cascade agreed communications.

From time to time joint communications will be required and all partners will be required to agree that in advance of any publication.

At the close of each meeting the group should be clear on the agreed communication points for wider dissemination or escalation

Review of Terms of Reference

The terms of reference will be reviewed at least on an annual basis



Appendix 4 Strategic Workforce Programme – Plan on a Page



Understand the workforce aspects of the strategic programmes and place based care

- Understand the implications and scale of change required
- Understand the time lines , investment and partners to make change happen



Develop key programmes of work on elements of the workforce agenda which are better done together across the Health and Care Partnership .

- Develop a Cheshire and Merseyside recruitment and retention strategy
- Develop a Cheshire and Merseyside brand
- Develop a Cheshire and Merseyside Offer



Identify the workforce implications of the back office / Carter programmes of work

- Identify areas for workforce efficiencies , including payroll, Occupational health
- understand the streamlining benefits of the Cheshire and Merseyside offer



Develop integrated workforce and development plans, including identification of the workforce implications of system and organisational change such as restructuring, mergers and acquisitions, accountable care systems and new models of care and care delivery.



Understand the impact of national skills shortages on the wider system and develop strategies to minimise the impact

- Explore new sources of recruitment including global recruitment
- Maximise the opportunities from the apprenticeship levy



Create a Workforce community of practice and knowledge repository which enables anyone working in that system to engage with each other, share best practice and research and celebrate success across Cheshire and Merseyside.