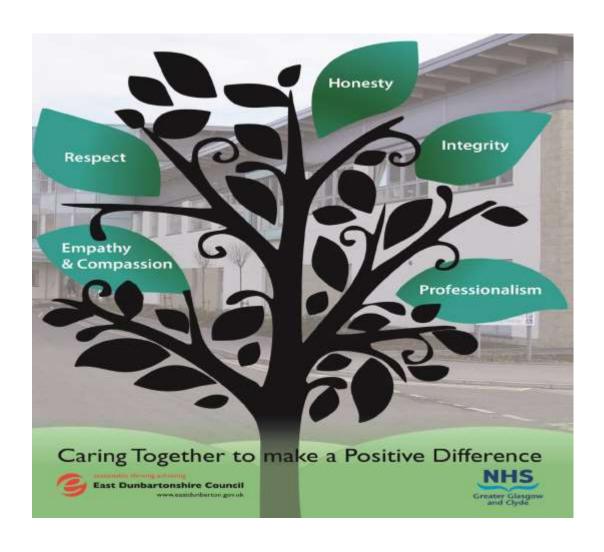


East Dunbartonshire HSCP Workforce and Organisation Development Plan 2022-25



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*NB- Please note that Appendices 1, 2 and 3 will be updated annually during the course of this plan to ensure that they adequately reflect the needs of staff.

Foreword:

This workforce and organisational development plan covers the same period as our Strategic Plan 2022-25. The plan highlights many of the key issues we face in ensuring that we have the right workforce in the right place at the right time to successfully achieve the challenging objectives set out in the strategic plan.

Workforce planning is a key challenge across health and social care services as set in the National Workforce Strategy for Health & Social Care by Scottish Government in 2022. It is likely that as we move forward in subsequent years the shape of the plan will change as we receive further Scottish Government guidance with regard to planning for the wider care sector workforce as part of the National Care Service.

This plan is based on the six step model for integrated health and social care services, which encourages us to identify the future workforce based around the identified service drivers. However it is important to ensure that we are clear about how we will develop our services which is why we have integrated our organisational development plan. Within the plan we have identified the need to continue to promote Health & Care as positive careers for people of all ages but with a particular focus on encouraging school leavers.

Also important is the robust governance framework which is designed to ensure that we are able to report on our action plan activity and were necessary take the appropriate action to achieve our objectives.

Caroline Sinclair

Chief Officer

East Dunbartonshire HSCP

Section 1 East Dunbartonshire HSCP

East Dunbartonshire Health and Social Care Partnership (HSCP) was established in 2015 following Scottish Government legislation to integrate health and social care services. The work of the Partnership is governed by the HSCP Board which comprises members from both East Dunbartonshire Council and NHS Greater Glasgow and Clyde Board, as well as those representing the interests of the third sector, staff, service users and carers and provider organisations. The HSCP is designed to be collaborative at every level, involving partners, stakeholders and representing the interests of the general public.

The ways in which health and social care services are planned and delivered across Scotland has significantly changed through integration. The HSCP Board is responsible for the integrated planning of a wide range of community health and social care services for adults, children and criminal justice. The delivery or arrangement of those services is then carried out by the Council and the Health Board on behalf of the HSCP Board, in line with its strategic and financial plans. The HSCP Chief Officer is responsible for the management of planning and operational delivery on behalf of the Partnership overall.

East Dunbartonshire HSCP is one of six in the Greater Glasgow area. To ensure consistency and for economy of scale, some health services are organised Greater Glasgow-wide, with a nominated HSCP hosting the service on behalf of its own and the other five HSCPs in the area.

East Dunbartonshire HSCP is not an employer in itself but advises both East Dunbartonshire Council and NHS Greater Glasgow and Clyde on the expected staffing required to deliver services.

THE HEALTH AND SOCIAL CARE NEEDS OF THE EAST DUNBARTONSHIRE POPULATION

Despite relatively low average levels of deprivation, East Dunbartonshire faces challenges in terms of demand for health and social care services. These demands are in a significant part due to an ageing population and high life expectancy, with East Dunbartonshire having experienced the largest growing 85+ population in Scotland, which is the age-group most in receipt of services.

The significantly longer life expectancy in East Dunbartonshire (compared to the Scottish average), means that proportionately more older people here are likely to be affected by long-term conditions such as cancer and arthritis that can lead to further health complications. This is supported by the finding that significantly more emergency admissions in East Dunbartonshire were aged 65+ compared with Scotland as a whole. East Dunbartonshire also has a higher elective hospital admission rate than Scotland, which is also associated with an ageing population.

With the growth in the 85+ population projected to continue to rise by around 5% per year, it should therefore be expected that East Dunbartonshire will continue to see a rise in requirements for health and care services that support people in their own homes and in the community, and elective admissions in the coming years, with associated frailty also leading to a higher risk of unscheduled hospital care. With the COVID-19 pandemic causing a backlog of elective admissions nationally, this may be particularly felt in East Dunbartonshire which may result in further increasing demand for community-based services.

HSCP Vision and Values

East Dunbartonshire HSCP's vision is "Caring Together to make a Positive Difference", supported by five values of Professionalism, Integrity, Honesty, Respect, Empathy and Compassion. These values are at the heart of both our Workforce Plan and our Strategic Plan and set the tone for how we intend to deliver the plan for the people of East Dunbartonshire.

The HSCP Strategic Plan

East Dunbartonshire HSCP like all HSCP Boards is required to produce a Strategic Plan that sets out how it intends to achieve, or contribute to achieving, the National Health and Wellbeing Outcomes. Strategic Plans should also have regard to the National Integration Delivery Principles.

Strategic Plans should consider how to best meet the particular population needs of their areas and should also set out their plans for localising services into smaller communities within their overall geography.

The East Dunbartonshire HSCP Workforce Plan is aligned with the Strategic Plan (2022-25) and will set out the workforce required to achieve the ambitions set out in the Strategic Plan, which have been widely consulted on across East Dunbartonshire.

East Dunbartonshire Strategic Priorities

The East Dunbartonshire Strategic Plan for 2022-25¹, sets out 8 Strategic Priorities, these being:

Empowering People
Empowering Communities
Prevention and Early Intervention
Public Protection
Supporting Carers and Families
Improving Mental Health and Recovery
Post-pandemic renewal
Maximising operational integration

As one of the 4 strategic enablers, the workforce is critical to the success of the overall strategic plan.

The Financial Challenge:

Financial Context

A Medium-Term Financial Strategy (MTFS) has been developed to pull together into one document all the known factors affecting the financial sustainability of the partnership over the medium term. This strategy establishes the estimated level of resources required by the

¹ www.eastdunbarton.gov.uk/health-and-social-care/health-and-social-care-services/east-dunbartonshire-health-and-social-care

partnership to operate its services over the next five financial years, given the demand pressures and funding constraints that we are likely to experience.

This Medium-Term Financial Strategy for East Dunbartonshire HSCP outlines the financial outlook over the next 5 years (2022 - 2027), which covers the period of both the Strategic and Workforce Plans, and provides a framework which will support the HSCP to remain financially sustainable. It forms an integral part of the HSCP's Strategic Plan, highlighting how the HSCP medium term financial planning principles will support the delivery of the HSCP's strategic priorities and therefore the workforce required to deliver.

There are a number of key opportunities and challenges for the HSCP at a national and local level. The most significant opportunity being the Review of Adult Social Care, elements of which have now been reflected in the new programme for government, and will see investment across a range of areas including the development of a National Care Service, expansion of support for lower-level needs and preventive community support, increasing support to unpaid carers and sums paid for free personal care.

We are committed to making the best use of our resources to deliver best value in improving outcomes for people. Careful consideration is given to the allocation of financial resources to our many partner agencies who deliver commissioned services.

We will always seek to invest in those functions and services which can demonstrate a positive impact on people's health and wellbeing, and are aligned with the aims, commitments and priorities of our Strategic Plan. There will be times, however, when disinvestment options will be considered, particularly when the impact, alignment or value for money delivered by a service is not as strong as it could be.

Our investment/disinvestment decisions will always be rooted in the sustainability of our local market and the delivery of our Strategic Plan. We hope that any changes can be as a result of planned service reviews or known commissioning cycles, but we accept that there will be times when circumstances arise that present us with an opportunity to reconsider the allocation of resources.

Section 2

Known Drivers for Change and Transformation

Over the duration of this plan we will need to take recognition of a number of emerging and known strategic drivers that might impact on both service delivery and our workforce. It is important that we are flexible in recruitment strategies to respond to these challenges.

2.1 Competitive Recruitment Market

Currently the Social Care recruitment market place is impacted by the widely varying rates of pay and differing terms and conditions that are available across the sectors rather than the standard remuneration package that is available across NHS Scotland providers. It is hoped that the proposed National Care Service will standardise the salaries available to staff in a positive manner.

2.2 National Care Service²

The emerging legislation to develop a National Care Service, subsequent to the recommendations set out in the Feeley Report, is likely to have a major impact across the Social Care sector. The consultation in 2021, had a focus on several areas including the Commissioning of services; National set of Terms and Conditions; and eligibility and access to services.

2.3 East Dunbartonshire Strategic Plan 2022-25³

East Dunbartonshire HSCP launched its Strategic Plan for 2022-25 in March 2022, the plan set out the 8 key areas for delivery and has 4 Strategic Enablers, including the workforce. The plan sets out how we will achieve the 9 key National Outcomes.

2.4 National Health and Social Care Workforce Strategy⁴

The strategy launched in April 2022, sets out a series of 109 actions to be undertaken either by National or local employers to ensure that we have the right workforce, in the right place with the right numbers going forward. The strategy is set out against 5 key pillars, those of Plan, Attract, Employ, Train and Nurture. In looking to achieve its overall objectives the strategy places great importance on our ability to retain staff, to look after the staffs' wellbeing and to ensure are reward for their efforts. It is an ambitious plan that for the first time looks to support the whole of the Health & Social Care Workforce and will be central to a successful workforce planning process.

2.5 Recovery from Covid

It is hoped that with the success of our vaccination programmes then we will be in a better position to manage any future impact of Covid. However, the impact of the last 2 years has been significant on the population and will be impacting on service delivery for a number of years. As a significant increase in both elective and non-elective operations are undertaken, this is likely to have an impact on community services across both Health and Social Care, enabling patients to return home at the earliest opportunity and for effective rehabilitation where necessary. In addition we will need to find ways of supporting service users with Long Covid to live as normal a life as possible

² National Care Service Bill published - gov.scot (www.gov.scot)

³ www.eastdunbarton.gov.uk/health-and-social-care/health-and-social-care-services/east-dunbartonshire-health-and-social-care

⁴ Health and social care: national workforce strategy - gov.scot (www.gov.scot)

with the necessary community supports that will emerge from on-going research. We also expect a large increase in the incidences of Mental Health issues across the spectrum from mild to severe which will impact across our service delivery models. The East Dunbartonshire HSCP will follow its Covid-19 Recovery and Transition Plan which sets out key principles and priorities for the recovery and transition period. It outlines our wide-reaching planning approach and the arrangements being put in place to oversee recovery and remobilisation. The role of the workforce in achieving the objectives of this plan will be central to its success.

2.6 The Promise⁵

Scotland has an ambition 'to be the best place in the world to grow up' so that children are 'loved, safe, and respected and realise their full potential' (The Promise, 2020).

The Independent Care Review (February 2017 – February 2020) aimed to identify and deliver lasting change in Scotland's 'care system', and leave a legacy that will transform the wellbeing of infants, children and young people.

In February 2020, the Independent Care Review published The Promise. The Promise outlines five foundations that must be at the heart of plans and priorities for children and families; voice, care, people, scaffolding & family. East Dunbartonshire HSCP is committed to identifying and supporting the changes needed to become better corporate parents for our care experienced young people.

The foundations of The Promise will structure our corporate parenting priorities and actions over the next 3 years.

The Promise is a foundation for the Integrated Children's Services Plan 2020/23. Key priorities are: Keeping Children Safe, Corporate Parenting, Healthy Lifestyles (Children and Young People) and Children's Mental Health and Emotional Wellbeing.

East Dunbartonshire HSCP is committed to both protecting and promoting Children's Rights. The Local Outcomes Improvement Plan 2017-27 includes Local Outcome 3: Our children and young people are safe, healthy and ready to learn. One of the priorities of this Outcome is applying the Getting It Right For Every Child principles. These principles are based on the children's rights and reflect the United Nations Convention on the Rights of the Child.

Children's Rights are an integral objective of the Health & Social Care Partnership's Strategic Plan 2022-25. This Plan identifies the Unite Nations Convention on the Rights of the Child as a key policy driver. The Plan is published online and is available here: East Dunbartonshire Council

2.7 Criminal Justice

Covid has impacted on our ability to provide unpaid work activity, as required by Courts, within the timescales required due to physical distancing requirements. The team are now working to maximise opportunities to ensure that we can meet the necessary timescales. All staff involved in the service have been undertaking Trauma Informed practice training to ensure that we provide trauma informed services.

⁵ What is the promise? - The Promise Version 1.12, Oct 2022

Public Protection remains a priority for the HSCP and the Criminal Justice Team continue to work with the Multi Agency Public Protection priorities. This includes VISOR technology, workforce vetting and training. The Community Justice Partnership ensures partner agencies are working collaboratively, focusing on prevention, early intervention and throughcare

2.8 Moving Forward Together - Mental Health Strategy

NHSGGC in taking forward its Clinical Strategy, Moving Forward Together, will impact on a number of our service delivery areas but is likely to have a more direct impact on Mental Health Services as it looks to refresh that section of the strategy in light of the impact of Covid-19. Whilst the main features will be around In-patient service provision, areas like "Effective and Efficient" CMHTs might impact on our local service delivery model, likewise proposed new development for Rehabilitation models in the community and subsequent reduction in beds, and the development of both Dialectical Behaviour Therapy (DBT) and Metallization Based Therapy (MBT) services.

2.9 Health and Care Safe Staffing Legislation⁶

Although this legislation has been paused during the pandemic we will now see an increased focus during forthcoming inspections and it will also have implications across a wider range of service provision including health services than previously covered. Therefore it is imperative that we continue to use our agreed workload tools and to develop new tools when necessary to ensure that we have sufficient numbers of suitably qualified and registered staff on duty throughout the working week.

2.10 Digital Strategy

The use of digital solutions has grown significantly during the pandemic as a way of engaging with people safely and efficiently. Looking ahead, there is substantial opportunity to embed and extend the use of digital solutions, as part of a range of engagement approaches. Digital has the potential to prevent unnecessary visits to hospital for a short review consultation, has the ability to better equip service users to remain at home for longer with appropriate safeguards in place to respond to potential emergencies, has the ability to enable appropriate consultations with clinicians without the travel and waiting times, has the ability to increase the availability of consultations by enabling a greater flexibility in the working day and digital has the ability to save travel time for meetings, thus enabling more clinical time to become available. However, as suggested we need to have a strategy that does not discriminate against service users and carers due to lack of appropriate equipment or poor reception areas and a need to be mindful of the confidence and cognitive capacity of the people that we support. We also need to invest in the appropriate training of our staff to maximise the use of new technology within the digital strategy.

2.11 Hybrid Working Practice

As we adjust services and service provision in our recovery from the pandemic, we need to be mindful of the needs of our staff to seek a more blended or hybrid way of working, having provided a number of these services in that format over the last 2 years. As we look at the capacity to provide hybrid working, we need to take recognition of the best way to offer services to maximise

⁶ <u>Health and Care (Staffing) (Scotland) Act 2019 (legislation.gov.uk)</u> Version 1.12, Oct 2022

their potential for both service users and staff, we need to ensure that we can still provide core services during core times and then look at the flexibility that other patterns of work might provide for us going forward. This might impact on our accommodation and technology strategies to ensure that we have a synergy that delivers for service users.

2.12 Transforming Roles

Whilst a longer term strategy, Transforming Nursing and AHP Roles will impact across a number of our service areas from Rehabilitation services, Mental Health, Addictions, Learning Disability, Adult Community Nursing, Health Visiting and School Nursing as they look at the scope of practice. There is also the opportunity to develop new roles to support new service delivery models and or support a greater skill mix in more complex procedures once the domain of medical staffing. The advent of Advanced Practitioners is refocusing the way skill mix is used in service delivery models and this is likely to continue over the next few years.

2.13 Current and Emerging Alcohol and Drug Recovery Programmes

To support the reduction of drug related deaths and harm in Scotland, new National Priorities have been established by the Scottish Government. The Drug Death Taskforce has also been established and a detailed improvement programme developed with additional funding provided by the government to support a number of priorities including Medication Assisted Treatment Standards (MAT), increased access to residential rehabilitation, and targeted support for non-fatal overdose and increased harm reduction. The National Priorities will ensure individuals are offered more choice and control over their treatment, including the option of same day prescribing and access to treatment for longer. These initiatives will have significant implications for the work of our Alcohol and Drug Recovery Service and upon increased caseloads. In order to implement the National priorities successfully our Alcohol and Drug Recovery Services will require additional resources in both nursing and social care staffing. New initiatives to support the development of a human rights based approach which includes the voices of those with lived and living experience will also require to be supported and the development of peer support initiatives across recovery services will require additional investment.

Continued support for all staff to be trained in trauma informed practice will also assist with the focus on recovery.

2.14 Primary Care Improvement Plan

Our Primary Care Improvement Plan (PCIP) is closely linked to our Accommodation Strategy, which will hopefully provide additional, accessible clinical consultation and treatment areas for us to provide many of the services including CTAC (Community Treatment and Care), mental health supports, pharmacotherapy services and physiotherapy. As we emerge from the pandemic it is important that we find a way of highlighting the work which is being undertaken as part of the PCIP activity in conjunction with our General Practice colleagues to provide more capacity within the system to have patients and service users more appropriately assessed and treated without delays or duplication of appointments, by the right person at the right time.

2.15 Potential use of Apprentice Schemes (including Graduate)

In reviewing the age demographic for the HSCP we see a very low number of employees under the age of 25yrs, 22, (2.3%) of staff across both East Dunbartonshire Council and NHSGGC, therefore we need to look at ways in which we could make employment in health and social care more attractive to younger people. We need to look at the opportunities to offer more apprenticeships, including Social Care and Business Administration, with the potential to see if there might be opportunities to undertake some Graduate Apprenticeships perhaps working with the NHS Skills Academy.

2.16 Need to increase awareness of employment opportunities across the Health & Social Care Continuum of care

As the environment for staff recruitment becomes ever more difficult the HSCP has to be able to attract staff by both promoting Health & Social Care as an attractive and rewarding career and explaining and exploring the opportunities available both within the HSCP and through the Higher and Further Education route for more professional qualifications. It is important that students on placement within the HSCP have a fulfilling and rewarding experience, one in which they have felt not only valued but included, one which would encourage them to come to East Dunbartonshire HSCP once they qualify due to the exceptional experience we have offered whilst on their placement.

2.17 Financial landscape

The continuing tightening of financial settlements to both of our strategic partners, on whom we rely for funding of health and social care services, will be a significant challenge over the period of this plan. This is particularly relevant given the proportion of overall expenditure we invest in staffing. Indications from SG are that staffing budgets will remain at 2022/23 levels despite rates of pay increasing year on year which will inevitably mean a contraction of the workforce despite levels of investment during 2021/22 in increasing capacity across a range of health and social care workforce in response to demand increases for services.

Section 3

Future Workforce Expectations

Our projections for future workforce is based around our known age demographic of the existing workforce and emerging service demands as identified within Section 2, known drivers for change, and particularly our focus on achieving our 2022-25 Strategic Plan.

- 3.1 It is likely that given our average turnover rate over the last 3yrs has been around 10% per annum, then it is envisaged that we will need to recruit approximately 100 staff per annum to maintain our current delivery model without any changes to service delivery.
- 3.2 Therefore having a clear strategy as set out at 2.14 and 2.15 to promote Health & Social Care will become an imperative as we compete in a very competitive employment market. As many of our opportunities will require a professional qualification in either Health, Social Work or Social Care it is likely that staff availability will come from existing workforce or newly qualified staff.
- 3.3 We will need to review our "hard to fill" posts from recent years, including Mental Health Officers, qualified Social Workers, Advanced Practice MSK Physiotherapists, Pharmacist and pharmacy Technicians to ensure that we are offering an employment package similar to other local employers across the Health & Social Care sector.
- 3.4 We will need to look at our service delivery models to support areas of the Primary Care Improvement Plan, which will see us needing to recruit additional Advanced Nurse Practitioners, Advanced Practitioners in Physiotherapy and Pharmacy. It is also likely given our investment in new accommodation for clinical activity in both the Milngavie and Bishopbriggs areas that we will be able to enhance our existing Community Treatment and Care service activity in line with expectations.
- 3.5 In a competitive employment market we need to ensure that we are utilising the staff skills effectively and therefore we need to consider the benefits of investing in a skill mix that includes administrative and business support staff to better focus professionally qualified staff to use their expertise and experience in front line services.
- 3.6 We need to continue to modify and enhance our revised Care at Home service model and the critical part that it fulfils in maintaining residents in their own homes longer and enabling patients to return from hospital services quicker. We need to look at opportunities for prospective and current employees to use their skills and experience to undertake further education if desired to take up other opportunities within the wider Health & Social Care field thus enabling Care at Home to become an access route to a career in Health & Social Care.
- 3.7 The impact of Covid has required us to review our service delivery model for many of our existing day services. Alongside that work was already underway to review our approach to Learning Disability Services in anticipation of our move to a new facility at the new Allander Leisure Centre in Bearsden. Work is also underway to review social support including building based day care services for Older People with a greater focus on Local Area Co-ordination and maximising the use of informal community resources which have the potential to enhance independence for service users.

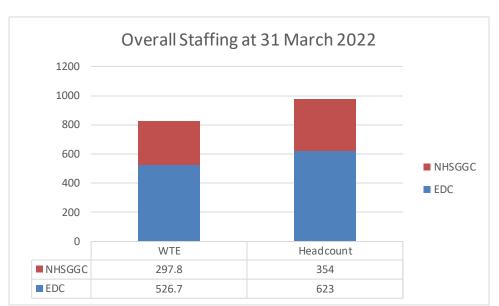
- 3.8 In line with expectations we will need to monitor our staff in both Health Visiting and School Nursing to ensure that we can deliver on both the Universal Pathway for Health Visiting and on the revised expectations for School Nursing. It is important that we focus on recruitment trends to ensure that we have the desired number of appropriately trained and qualified staff working in the services.
- 3.9 It is expected that we will get additional resources for Alcohol and Drug Recovery Services as we look to reduce the number of avoidable deaths and support people in their recovery journey. We have also started to look at more of skill mix within the service to better support service users and maximise the skills of staff within the service.
- 3.10 In relation to District Nursing, we are currently looking at extending the core hours of the service to provide a more consistent approach to patient care from 8.30am 10pm, and managing these extended hours through a single point of access. This will be fully assessed and monitored to evaluate the impact on both patient care and effective service delivery.
- 3.11 The HSCP is currently looking to establish an early access Mental Health and Wellbeing Service to support service users experiencing mild mental health issues at the earliest stage in their journey. This work will enhance and support the continuum of Mental Health Care provided across already established Primary Care Mental Health and Community Mental Health Teams, and support the development of increased capacity to manage mental health in General Practice linked to the rollout of Link Worker or Wellbeing Worker type roles within the areas, and mental health Link workers being established through the Primary Care Improvement Plan.
- 3.12 Impact from National Care Service (NCS) considerations work with our commissioned providers to improve pay and staff terms and conditions across the sector. Work in partnership and collaboration with providers to ensure seamless service provision across social care services under a new collaborative approach for commissioning and working with the independent sector.
- 3.13 Working within a more digitalised environment requiring staff to have differing skills and embrace different ways of working.

Section 4

East Dunbartonshire HSCP Workforce Baseline Data 31 March 2022

4. Current Workforce

- 4.1.1 This plan looks only at the staff directly working in the HSCP and employed by ether East Dunbartonshire Council or NHS Greater Glasgow and Clyde. These figures are based on the available workforce at 31 March 2022 and will be used as the baseline for the 2022- 25 Plan.
- 4.1.2 Separate workforce plans are available for Oral Health for which East Dunbartonshire HSCP provides the hosting arrangements for the Primary Care Dental Service on behalf of NHSGGC
- 4.1.3 East Dunbartonshire HSCP had 977 staff delivering services at 31 March 2022, of the 977 staff, 623 are directly employed by East Dunbartonshire Council and a further 354 are employed by NHS Greater Glasgow and Clyde.

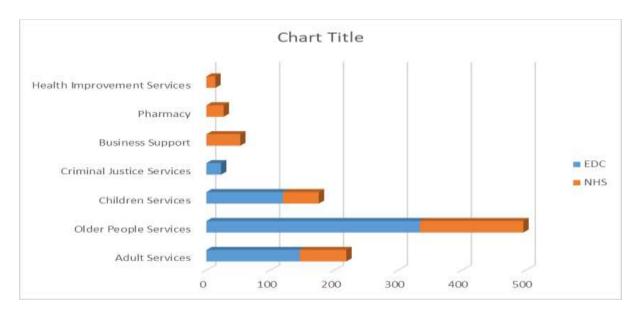


Graph A - East Dunbartonshire HSCP – Workforce at 31 March 2022

4.1.4 Our workforce is distributed across the 7 care groups as identified below. Further work is required to look at the entry level qualifications required by these occupational groups as we look to maximise the opportunities for employment within the HSCP.

Care Group	EDC	NHS
Adult Services	146	67
Older People Services	334	142
Children Services	120	51
Criminal Justice Services	23	
Business Support		53
Pharmacy		27
Health Improvement Services		14

Graph B - Staffing by Care Group



- 4.1.5 In looking at the age profile (Graph C), it is clear that the majority of staff are in the age band of 45-65yrs of age, with the highest incidence in the 55 59 age group. We also have a high percentage of staff who are aged over 60yrs of age.
- 4.1.6 This is in contrast to a relatively low number of staff under the age of 25yrs (22 staff). Further work is required to look at the staff roles and qualifications required to see if this is the main reason for the relatively low number of staff under 25.

Graph C: Age Profile

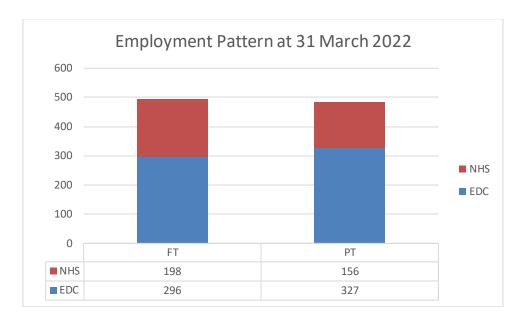


4.2 Work patterns

4.2.1 An overview of working patterns highlights an unusual almost 50:50 split between full time and part time posts

Version 1.12, Oct 2022

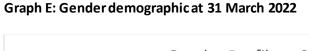
4.2.2 This unusual split is predominantly due to the working pattern of our Home Carers who work either 30hrs or less which is classified as part time.

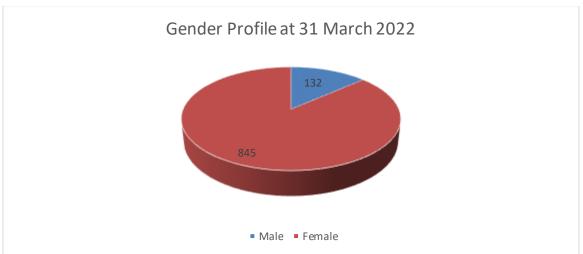


Graph D: Full-Time and Part Time split at 31 March 2022

4.3. Gender Demographics

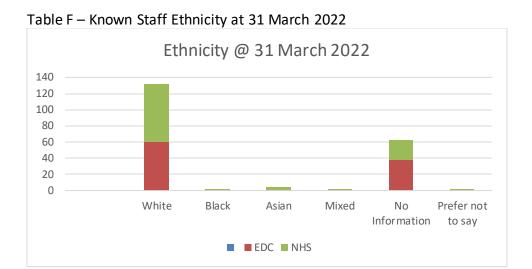
4.3.1 Our workforce as demonstrated in Graph E is predominantly female, with 86.5% female which is not unexpected within a health and social care workforce, however this is a 2% decrease in the number of male staff employed in the HSCP since March 2021. Therefore we need to be better able to promote care as a career for male staff.





4.3.2 This variation in the gender balance of our workforce does not at this time provide any difficulties in our service delivery models.

- 4.3.3 When we compare our known workforce ethnicity with that of the 2011 Census, we see a very similar pattern, although we do have a considerable number of staff who have "preferred not to say"
- 4.3.4 Table F, shows the known ethnicity of our workforce at 31 March 2022, this highlights that 60% (EDC) and 72% (NHSGGC) staff identify as White, with a further 38% (EDC) and 24% (NHSGGC) that we have no identifiable information at present, therefore 98% of EDC and 96% of NHSGGC staff are within these classifications, followed by Asian at around 2%.



Ethnicity	EDC	NHS
White	60	72
Black	0.4	0.4
Asian	1.3	2.2
Mixed	0.3	0.1
No Information	38	24
Prefer not to say	0.3	0.7

4.3.5 In the 2011 Census, 96% of both East Dunbartonshire and Scotland wide residents identified their ethnicity as White, followed by 3% Asian in East Dunbartonshire and 2.7 Scotland, with others identified as 1% East Dunbartonshire and 1.4% Scotland, therefore the known East Dunbartonshire HSCP ethnicity breakdown at least matches if not exceeds the resident population. Further work is required to try and minimise the number of staff for whom we have no identifiable information recorded.

Section 5

Action Plan 2022- 2023

Thematic Theme	Area	Activity to achieve	Lead	Date	Update
Theme	Governance	The workforce action plan will be review quarterly and reported to the JB, HSCP SMT and Staff Forum	T. Quinn	Dec 2022	
		The HSCP will ensure that processes are in place to support the introduction of Safe Staffing legislation	L. Connell	Mar 23	
Ø	Recruitment	During 2022-23 the HSCP will look to develop and identify opportunities to increase our intake of apprenticeships for future vacancies	Heads of Service	On-going	Initial meeting with Key stakeholders organised for Oct 2022
Plan	Strategy	The HSCP will work with its Primary Care Group to identify the potential vacancies and recruitment challenges that the sector is experiencing and look at potential solutions	D Pearce	Mar 2023	
		The HSCP will hold 6monthly reviews with individual services to plan for forthcoming recruitment activity and update recruitment materials	HR/Head of Service	Mar 2023	
		The HSCP will develop a local strategy to promote the work of the HSCP within the wider East Dunbartonshire Community, this will include Monthly focus on service teams within Our News and on our Twitter account.	T. Quinn	Dec 2022	
Attract	Publicity	The HSCP will develop a local strategy to promote employment in the wider Health & Care Sector. To achieve this the HSCP will work with the Communication teams in both EDC and NHSGGC; we will highlight the work being undertaken by students through our Twitter	C. Smith	Dec 2022	

		account; we will actively look at opportunities to promote through career services in schools and colleges; we will also look to ensure that we advertise our employment opportunities through local social media. HSCP will work with our Public Service Users and Carers Group to highlight the impact that career in Health & Social Care has had on them	T. Quinn/ C. Smith/ PSUC	Dec 2022	
		and for the people for whom they provide care The HSCP will look to hold regular focus meetings with students on placement to review how their placement has gone and what would attract them to work in East Dunbartonshire HSCP when qualified.	T. Quinn / Professional Leads	Dec 2022	
		The HSCP will develop a recruitment strategy that highlights the advantages of working within East Dunbartonshire – including short video clips that can be used on social media from existing staff.	C. Smith/ T. Quinn	Nov 2022	
Employ	Recruitment	The HSCP will develop a robust Induction programme for all new starts to enable them to feel fully included from day one	C. Smith/ T. Quinn	Dec 2022	
		The HSCP will introduce a Welcome Pack for new starts which will include information on Wellbeing Supports	T. Quinn	Oct 2022	
	Practice Development	The HSCP will continue to Promote Trauma Informed Practice training via TURAS, looking to have 50% of staff trained by Dec 2022, 75% of staff by March 2023.	Heads of Service	On-going	

Train	Promoting Lived Experience Staff Governance	The HSCP will look to identify and train sufficient "Peer" support workers across service areas. The HSCP will ensure that all statutory and mandatory learning is updated as required by the employers	Heads of Service Head of Service	On-going On-going
		The HSCP Wellbeing Plan will be reviewed quarterly and reported to HSCP SMT and Staff Forum	T. Quinn	Mar 2023
		The HSCP Healthy Working Lives Group will continue to lead on "Wellbeing" activity locally and the Staff Governance Group will review wider activity	HWL/Staff Governance Groups	Oct 2022
<i>C</i> 0	Wellbeing	Further use of QR codes will be highlighted as a way of reaching the wider audience	T. Quinn	On-going
Nurture		The HSCP will look to identify and train sufficient "Peer" support workers across all our service areas. Our initial target will be 2 staff per service area, with 50% of staff undertaking the Introductory self-help module by Dec 2022 and 75% of staff completing by March 2023	Heads of Service	On-going
	Staff Development	The HSCP will continue to promote and report on the success of our PDR /KSF/ SOARS processes with a target of 80% compliance by Dec 2022.	T Quinn	On-going
	Staff Inclusion	The HSCP will continue to encourage local teams to celebrate their successes from their iMatter action plan	T Quinn	Mar 2023
	Staff Awards	The HSCP will continue to promote good practice, good leadership and exceptional team	SMT	Mar 2023

	working through our local annual staff awards		
	programme.		

Section 6

Governance and Monitoring Arrangements

6. Governance and monitoring

- 6.1. The Governance for the Workforce and Organisational Development plan is through the HSCP Board.
- 6.1.1 The HSCP Board will receive 6 monthly updates on progress against the agreed action plan which will highlight areas that by exception are not on target.
- 6.1.2 The Workforce Co-ordination group (membership at Appendix (4), will have the local responsibility for monitoring progress and responding to changes required to meet the emerging guidance being developed by Scottish Government.
- 6.1.3 The Workforce Co-ordination group will report on a 3 monthly basis to both the Senior Management Team and local Staff Forum on progress against the agreed action plan highlighting by exception areas of concern

Appendix 1

EAST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNESHIP ORGANISATIONAL DEVELOPMENT PLAN 2022/25

An organisational development approach has been adopted to ensure that all areas within the HSCP are supported to identify current and future development needs required to equip our workforce with the skills, knowledge and attitude they require to deliver the outcomes of the strategic plan as well as the various elements of the workforce plan. Key areas are outlined below:



An annual implementation plan aligned to the HSCP Annual Delivery Plan will be developed to describe the organisational development activity required to deliver identified changes. The HSCP has identified Organisational Development as a key enabler in achieving its commitment therefore the following 4 themes will be prioritised:

- 1. HSCP Culture and Ways of Working Continue to embed the values, attitudes and behaviours that support a healthy organisational culture by ensuring staff are engaged, learn from experience and can demonstrate how they live the HSCP's vision and values
- **2.** Effective High Performing Integrated Teams Effective team development process to support and sustain team development and measurement of the impact of team leader's involvement are in place for each team

- **3.** Leadership development Effective leadership is key to delivering the plan the HSCP therefore must encourage and nurture leaders at all levels to help build collaborative relationships. New leaders need to be identified and nurtured.
- **4. Service Improvement and Change** Local experiences during Covid-19 demonstrated excellent examples of genuine co-production as a way of changing how we deliver services in unprecedented circumstances across the full health and social care spectrum. To sustain change the HSCP needs to continue to expand on lessons learnt during this period. Change also needs to be sustained by identify new and best practices.

Over the next 3 years the immediate priorities for staff and workforce development will be:

- Team effectiveness, leadership, development & engagement
- Succession planning to ensure staff are fit for integrated working with a focus on relationship development, influencing and collaboration
- Identify how we work better together by changing our ways of working to support and enable each other to take on improved ways of working that contribute to the HSCP outcomes
- Revisit the HSCP's vision and values to capture learning from the Covid experience
- Identify and focus on embedding digital working into the wider skills base
- Identify ways in which the quality agenda can be embedded into all HSCP work streams and becomes part of the way we conduct our business.

Appendix 2

Staff Training Plan 2022 -23

NB – We will provide links to the existing EDHSCP Social Work Plan and NHSGGC generic training provision.

Appendix 3

Staff Wellbeing Plan 2022 – 23



Staff Wellbeing Plan 2022-23

This plan has been developed to support staff to look after themselves and their colleagues during the period 2022-23. The plan is consistent with the ambitions set out in the "Nurturing" component of the recently launched "National Workforce Strategy for Health and Social Care Staff". The plan builds on work being undertaken by East Dunbartonshire Council, NHS Greater Glasgow and Clyde and Scottish Government to promote staff wellbeing. The plan will be a key component of the East Dunbartonshire HSCP Workforce Plan for 2022-25 to support the retention of staff. Updates on the plan will form part of regular reports to both the Senior Management Team and the Staff Forum during 2022-23.

The plan has been designed to be an integrated document that has "collaboration" at its centre, in that it is for staff but requires staff to engage and participate. The importance of the role of Line managers is key along with the supportive activity provided by our "Healthy Working Lives" group in disseminating information about organised activities.

Whilst the plan is an overarching document it will be supplemented and communicated by a monthly "events" calendar and we will try to make better use of QR codes to enable staff who do not regularly access email to be updated and to provide accessibility.

Area of Activity	Activity	Lead	Further details
	National Wellbeing Hub	Tom Quinn	Regular updates to be circulated on the availability of resources on the National Wellbeing Hub site and if possible the increased use of QR codes to assist staff access Home - National Wellbeing Hub for those working in Health and Social Care
Promotion of National campaigns and activity	Trauma Informed practice	Tom Quinn	Promoting the use of the level 1 – module on Understanding the Impact of Trauma: available on TURAS Learn Search Results Turas Learn (nhs.scot)
	Psychological First Aid	Tom Quinn	Promoting the Turas learning module in "Taking care of yourself" Search Results Turas Learn (nhs.scot)
	Access apps through National Hub	Tom Quinn	Regular updates on some of the free apps available on the

		National Hub site or others and some bespoke wording on how best to use. To be cascaded through the Staff Wellbeing Teams page for Team leaders and managers
Coaching for wellbeing	Tom Quinn	To continue to make staff aware of how to access the coaching for wellbeing resources available
Joy in Work	OD Lead	To develop a culture which promotes the ambitions of "Joy in Work" to help team development and engagement
Access to specialist services	Tom Quinn	A confidential mental health service for all regulated professionals working in health and social work/social care sectors in Scotland Accessing the service in Scotland (practitionerhealth.nhs.uk)
Informed and recorded conversation	Line Managers	To continue to promote the use of both PDR and KSF as an ideal opportunity to have that wellbeing conversation with staff

Promotion of local activity	Financial Wellbeing Support and Advice	NHSGGC HWL Team	Provisional of Webinars, Good practice ideas and general signposting to advice services. Development of a poster with QR code for ease of access
	Peer Support – level 1	Tom Quinn	Promotion of the learnpro module available through both EDC / NHSGGC elearning platforms
	Peer Support level 2	Tom Quinn	To work with Managers and Team Leads to identify suitable staff to train as "Peer Supports" for both their and the wider HSCP workplace
	Review of space for quiet areas	Vandrew McLean	To ask the Accommodation Group to review all our accommodation to see if we can identify a quiet area for staff to Reflect/Chill
	iMatter	Line Managers	To encourage staff to participate in the annual iMatter survey and to develop action plans to address issues raised

	Using Hybrid Working	SMT	To ensure that the Hybrid Working Policy is promoted to staff.
	Seminar sessions	Various	To develop a programme of interesting staff seminars throughout the years
	Using Green Spaces	HWL Group	To ensure that General and specific information is regularly communicated to staff
Promotion of Healthy Working Lives Initiatives	HWL Campaign activity	HWL Group	To ensure that General and specific information is regularly communicated to staff
	Financial Wellbeing	HWL Group	To ensure that General and specific information is regularly communicated to staff
	Active Staff	HWL Group	To ensure that General and specific information is regularly communicated to staff
	Staff Engagement	SMT	To develop a local communications strategy that promotes opportunity for staff to

		hear from and ask questions of
		the Senior Management Team
Greater access through use of QR codes	All	To ensure that for general
		information we try and provide
		posters in staff common areas
		that have quick access QR codes
Maximising Information on The EDC Staff Hub	Caroline Smith	To ensure that we can "post"
		information to the EDC Staff Hub
Staff Enquiry email box	Tom Quinn	To ensure that the generic staff
		email box is regularly monitored
		and that staff emails are
		responded to in a timely fashion
		EDHSCP.Staff@ggc.scot.nhs.uk
Spotlight on activity	SMT	To ensure that we distribute and
		promote our "Spotlight on
		Activity" report to staff and
		capture key messages for sharing
		across the wider organisation
Celebrating Success	Vandrew McLean	To encourage maximum use of
		our Celebrating success
		nomination process through
		publishing in Our News
	Maximising Information on The EDC Staff Hub Staff Enquiry email box Spotlight on activity	Maximising Information on The EDC Staff Hub Caroline Smith Staff Enquiry email box Tom Quinn Spotlight on activity SMT

	Our News	Lorraine Arnott	To ensure we capture the good news stories from across our service to publish in our news
	Thank You Pack	SMT	Provision of a small Thank You pack for all staff
Thank You	Welcome Pack	SMT	Provision of a small welcome pack to East Dunbartonshire HSCP
	Appreciation Cards	SMT	Making available to Heads of Service a number of Postcard Type appreciation cards

Appendix 4 -

Group Membership

The initial Workforce Planning Group:

Derrick Pearce	Head of Community Health and Care Services
David Aitken	Interim Head of Adult Services
Claire Carthy	Interim Head of Children and Criminal Justice Services
Jean Campbell	Chief Finance and Resources Officer
Leanne Connell	Interim Chief Nurse
Stephen McDonald	Joint Services Manager – Older People
Richard Murphy	Resources and Registered Services Manager
Ann Innes	Chief Officer - EDVA
Caroline Smith	HR Business Partner (EDC)
Margaret Hopkirk	HR Manager (NHSGG&C)
Craig Bell	Unison – EDC (Joint Chair – Staff Forum)
Andrew McCready	Unite the Union (NHSGGC Staffside Rep)
Fiona Munro	Locality Manager/ Lead AHP
Lorraine Currie	Service Manger - Adult
Tom Quinn	Head of Human Resources (NHSGGC)
Kirsty Kennedy	Adult Protection Co-ordinator
Jackie Todd	Senior Learning and Education Advisor (NHSGGC)
Vandrew McLean	Corporate Business Manager
Alison Willacy	Planning, Performance and Quality Manager