



<b>Title:</b>	London Workforce Board update
<b>Author: (name, organisation and job title)</b>	Aurea Jones Local Director for South London Health Education England

# Strategic Partnership Board

29 September 2017

## 1. Purpose

1.1. At the last Strategic Partnership Board meeting on 10 August 2017, the Board asked for an update from the London Workforce Board.

## 2. Action required by Board members

2.1. The Board will be asked to COMMENT on the outline delivery plan and give a steer to the London Workforce Board.

## 3. Partnership considerations

3.1. The London Workforce Board is made up of partners from across health, local government, and employer organisations. The membership is as follows:

- Skills for Health: 1 representative
- Skills for Care: 1 representative
- Health Education England (HEE): 1 representative
- A senior lead from each of the five London STPs
- Representatives from the London Devolution Pilots with an interest in integration, being Hackney, BHR (Barking and Dagenham, Havering and Redbridge) and Lewisham (so far as these are not coterminous with the London STP leads)
- Health and care trade unions
- Association of Directors of Adult Social Services (ADASS): 1 representative
- Association of Directors of Children’s Services (ADCS): 1 representative
- Department of Health: 1 representative
- Local Government Association: 1 representative
- Local Councils: 1 representative
- Greater London Authority (GLA): 1 representative

- 3.2. The purpose of the LWB is to facilitate integrated working and meaningful discussion about workforce issues at a London level. The LWB provides a forum for partners to exchange ideas and proposals, discuss relevant issues of joint concern and seek to reach an aligned view on matters concerning workforce skills, development and transformation to support London's health and care ambitions, now and in the future.
- 3.3. The draft Terms of Reference is attached at appendix 1. These will be reviewed, together with the membership, at the Board meeting to be held in December 2017.

## 4. Background

- 4.1. The Board held its first meeting in March 2017 to bring together partners across health and social care. The Board has come together to consider common challenges and solutions to ensure that London's health and social care systems have the workforce to deliver now and in the future.
- 4.2. The Board has received 'Devolution and Health and Social Care Workforce Integration in London' - a report that provides an overview of the workforce in both health and social care, a description of the barriers faced in integration and suggested actions to address these. This has enabled a common understanding of the core issues that the Board will need to engage with.
- 4.3. The Board has also considered examples of workforce integration already underway in local areas, supported through STPs, networks, employers and HEE to improve services to patients and clients. Examples include:
- In Newham, Tower Hamlets and Waltham Forest, as part of 'Transforming Services Together', HEE and Skills for Care commissioned research and local intelligence gathering into local attitudes in to working in health and social care. This work aims to ensure that future recruitment and retention initiatives are developed in line with local need and aspirations.
  - The 'City and East London Excellence Centre' is one of 10 National Skills Academy for Health Excellence Centres, bringing together employers from the NHS, independent sector and voluntary sectors to implement high quality skills programmes for support workers including promoting the highest quality of apprentice opportunities and training.
  - Community Education Provider Networks providing the opportunity for partners across health and social care to train and learn together to address the needs of the local population.

## 5. Delivery plan

5.1. The London Workforce Board met for the third time on 21<sup>st</sup> September. At this meeting, the Board agreed the delivery plan attached at appendix 2.

5.2. The Board's agreed priorities for consideration are:

- To further develop its strategic leadership role, continue to build and develop communication, relationships and collaboration across health and social care partners.
- To consider the impact of the introduction of the apprentice levy on the health and social care workforce, learn from employers and networks that are working in partnership and identify opportunities to maximise the apprenticeship benefit.
- To explore the potential impact of Brexit on the health and social care workforce across the Capital to support discussions with partners and workforce planning.
- Establishing a London-wide view of the current health and social care workforce in London.

## 6. Risks

The following risks have been identified:

- Collaborative resourcing and delivery arrangements across all partners to support the programme to be agreed. Whilst HEE will continue to support the London Workforce Board partner organisations have been asked to consider resource availability and opportunities to contribute to the resource required to support the programme management and delivery of the Board.
- Engagement of all partners across the health and care system in the Board activity. The Board membership will be reconsidered in December and the format of meetings is also under review to ensure that the work of the Board is prioritised by partners.
- The workforce across health and social care is spread across NHS, Local authority, private and voluntary sector employers. There remains the risk of competition across the labour market reducing effectiveness of partnership working. Close collaboration of partners through the London Workforce Board focussing on common agreed issues will be key to ensuring effective delivery.

## 7. Next steps

London Workforce Board partner organisations have been asked to consider contributing to the resource required to support programme management and delivery as agreed.

Sub groups of the London Workforce Board to be set up to take forward the priority areas agreed and in particular apprenticeships and the potential impact of Brexit on the health and care labour market in London.

# **London Workforce Board**

## **DRAFT Terms of Reference**

### **1. Context and objective**

The people that work in health and care are critical to the delivery of high quality health and care services, and enabling London to achieve its transformation goals. London has recognised the need for joint health and care training and workforce development, to support integrated working as a key enabler to new models of care. To achieve this, relevant partner organisations (including Health Education England (HEE), Skills for Health (SfH) and Skills for Care (SfC)) took the decision to establish the London Workforce Board (“LWB”) for issues related to London, to ensure a collaborative and strategic approach. On [date TBC] London and national partners signed a London Health and Care Devolution Memorandum of Understanding (MoU), which contained provision for the LWB and illustrates the support of central government.

This LWB will be developed in conjunction with health and local government partners, and trade unions, to facilitate robust integrated working and meaningful discussion around workforce issues at London level. The LWB will provide a forum for partners to exchange ideas and proposals, discuss relevant issues of joint concern and seek to reach an aligned view, as appropriate, on matters concerning workforce skills, development and transformation to support London’s health and care ambitions, now and in the future.

Through the LWB, London will build on its position as the home of popular and world-class health education, to develop new roles, secure the workforce it needs and support current and future staff to forge successful and satisfying careers in health and care.

### **2. Role and legislative framework**

It is recognised that the LWB is an innovative partnership forum, and it is therefore appropriate that members take a phased approach to establishing the LWB, ensuring adequate time for engagement to co-develop the role, shape and functions. These Terms of Reference (ToR) will govern the initial phase of the LWB, and will be reviewed and updated as required.

The LWB will commence operation by building on the existing structure of the London and South East Local Education and Training Board (LETB). The LWB membership will initially contain both the LETB membership in its entirety and wider partners, and LETB business will be conducted at meetings which serve both the LETB functions and the wider functions of the LWB.

It is recognised that the LETB is a decision-making body with a statutory role<sup>1</sup>, and nothing in this document changes its legal accountabilities or functions. It is noted that the LETB’s decision making powers cannot be delegated another committees or person or committee of HEE, however the LETB may establish advisory machinery to inform its planning and decision making. The LWB, with its wider membership could, subject to HEE Board approval,

---

<sup>1</sup> See the LETB ToR for a fuller description of the LETB role, and applicable statutory framework.

act as an advisory function to the LETB and make collective, non-binding recommendations on matters falling within its functions.

The Common ToR for LETBs (“the LETB ToR”) is attached as Appendix A. The LWB ToR and LETB ToR should be read in conjunction, and the functions, membership and processes within this document have been drafted to ensure complimentary with the role of the LETB, to enable the LWB/LETB meetings to effectively fulfil this dual function.

### **3. Membership and chairing**

The LWB includes the members of the London and South East LETB, in addition to the following members

- Skills for Health: 1 representative
- Skills for Care: 1 representative
- A senior lead from each of the five London STPs
- Representatives from the London Devolution Pilots with an interest in integration, being Hackney, BHR (Barking & Dagenham, Havering and Redbridge) and Lewisham (so far as these are not coterminous with the London STP leads)
- Health and care trade unions
- Association of Directors of Adult Social Services (ADASS): 1 representative
- Association of Directors of Children’s Services (ADCS): 1 representative
- Department of Health: 1 representative
- Local Government Association: 1 representative
- London Councils: 1 representative
- Greater London Authority (GLA): 1 representative

Membership will be reviewed in September 2017.

Recognising the critical importance of clinical representation, the LWB will ensure appropriate clinical membership. The LWB will consider in its initial phase if the clinical expertise brought through the LETB membership is sufficient to provide this representation going forward.

Membership will remain under review and will likely be subject to change as the LWB matures. During the initial phase the LWB will consider whether the membership provides sufficient representation from the full cross-section of key partners within the London system, including health and care employers.

In addition to the above membership, the LWB may invite additional individuals or organisations to attend meetings on an ad hoc basis, where their expertise is required to either facilitate discussion or inform/support decision-makers.

All members of the LWB are required to declare any professional or personal interests which may affect their contributions to the LWB. These interests should be declared and reviewed as and when they occur.

The LWB will aim to ensure continuity of individuals attending as members. If members are unable to attend they must advise the Chair in advance, and must provide details of any nominated deputy. Deputies may attend in place of members, but should be clear as to the limits of any decision-making abilities they may have.

In the first instance, the LWB will be chaired by the LETB Chair.

## 4. Functions

The LETB will continue to carry out its statutory functions, as set out in Appendix A.

The functions of the LWB will be phased, and the members will update these ToR to add or delete functions as appropriate. In its first phase, the LWB will undertake the following functions:

- Ensuring there is early discussion at London level on emerging issues, and maintaining a dialogue on policy and priorities, including workforce implications of service change/transformation.
- Promoting effective communications between partners and a collective approach to supporting and developing staff affected by service changes and transformation.
- Providing oversight for London level delivery of devolution commitments and supporting pilots in their workforce transformation. Progressing commitments contained in the London Health and Care Devolution MoU will include:
  - Working with central government to ensure that employers can take advantage of policies with workforce implications (e.g. the apprenticeship levy).
  - Establishing a collaborative, London-wide workforce delivery.
  - Exploring single employer framework opportunities.
- Ensuring processes are in place for sharing learning amongst partner organisations and within the system more broadly.
- Mapping the activities of member organisations to identify further opportunities for collaboration and more efficient working.

The LWB will agree priority work areas for the first six months at the first meeting. Functions will then be reviewed in September 2017.

## 5. Decision making

The LETB will continue to take decisions in line with its delegated responsibilities, as set out in the LETB ToR.

The LWB will not initially take any formal decisions, but will act as a collective discussion forum and advisory function. This process will be phased as follows:

- In the first instance, the LWB will simply enable a discussion forum. Members will use discussion at the LWB to inform their own decisions, and the aim is that, through this partnership working, members will take decisions which are better aligned and informed by a full range of views.
- In the LWB members will review the operation of the Board and consider whether it would be desirable for the LWB to take on a more formal advisory function and collectively make non-binding recommendations to member organisations and/or the wider system. This could include recommendations from the LWB to the LETB, as regards application of its transformation funding. It is noted that for this transition to take place, there would likely be a need to agree a fuller operating framework or MoU to set out detailed ways of working.

Over time, it may be appropriate for member organisations to increasingly take certain decisions within the forum of the LWB. This could be possible by way of internal delegations



to individuals within member organisations, would take decisions, informed by discussion and recommendations made from within that forum.

## **6. Meetings**

Initially the LWB will meet every two months unless otherwise agreed by the members. As explained above, the meetings will consider the business of both the LETB and the LWB. The Chair may convene additional meetings of the LWB to consider business that requires urgent attention.

Ordinarily notice of meetings confirming the venue, time, date and agenda shall be forwarded to LWB members and any other person required to attend, no later than five working days before the date of the meeting. The Chair may give a shorter notice period at his/her discretion, if this is necessary to enable to LWB to meet and consider business that requires urgent attention.

The meetings will be minuted to make clear the distinction between LWB and LETB business, and the wider membership of the LWB will not be included in quorum or decision-making for the purposes of the LETB decisions.

Working groups may also be established on an ad hoc basis to undertake specific pieces of work as required.

## **7. Operational costs and hosting**

HEE will initially host the LWB, and any operational costs will initially be borne by HEE, so far as these do not materially exceed those which are already expended on the running of the LETB.

Going forward, members will agree a funding plan as necessary.

## **8. Accountabilities**

The LWB will not initially have statutory or legal responsibilities, but will provide a forum for strategic discussion and planning. The LWB will not affect or replace the statutory responsibilities and accountabilities of each member or of the LETB.

The LWB will provide regular updates to the London Health and Care Strategic Partnership Board, which has been designated as the operational oversight vehicle for London. Political oversight will be provided through the London Health Board.

Individual members will continue to be accountable to their consistent organisations for any recommendations and decisions which may ultimately be taken within the forum of the LWB.





**Healthy London  
Partnership**

## Priority areas for the London Workforce Board:

### Work programme Appendix 2

**Agreed by London Workforce Board**

**21<sup>st</sup> September 2017**



Public Health  
England

**NHS**

**LONDON  
COUNCILS**

SUPPORTED BY  
**MAYOR OF LONDON**

London's NHS organisations include all of London's CCGs, NHS England and Health Education England

# Workforce is a key priority for the London Health and Care Strategic Partnership Board (SPB)

## Developing areas of focus for the SPB

**Estates**

- Receives reports from the London Estates Board (LEB).
- Identifies opportunities for greater strategic alignment with emerging clinical strategies.
- Assesses progression against gateway criteria and ratifies progression through phases of operation by way of recommendations to accountable member organisations.

**Workforce**

- Receives reports from the London Workforce Board (LWB).
- Identifies opportunities for greater strategic alignment.
- Escalates to London Health Board where political support is required.

**Prevention**

Receives reports from the London Prevention Board (LPB).

**Integration**

*Devolution/ delegation of NHS England functions*

- Supports the development of the Partnership Commissioning Board.
- Ultimately becomes the forum for decisions on the application of transformation funding.

*Provides governance and oversight of integration*

- Develops principles for ACSs in London;
- Ratifies pipeline of emerging health and care systems;
- Oversight of Better Care Fund work in London;
- Oversight of regulation programme of work;
- Oversight of wider integration support offer, including mechanisms to share and spread learning and development of core visions and narrative.

**Wider Strategic Leadership Functions**

Functions include:

- Supporting strengthening of relationship with London Health Board and associated political oversight of devolution;
- Supporting and provides oversight of wider health and care transformation;
- Advocating for London.

# The London Workforce Board has been set up to deliver on devolution commitments

## **Workforce devolution commitments:**

1. Establishing and developing a London Workforce Board, bringing together health and care partners and ensuring a collaborative strategic approach to London-wide issues
2. Maximising the opportunities offered by the apprenticeship levy.
3. Developing a London-wide workforce delivery system, including HEE, Skills for Health and Skills for Care
4. Exploring a single employer framework, to re-distribute and better target the existing pay envelope.
5. Exploring London weighting in the context of the current challenges in staff retention and turnover.

## Effective delivery will require clear 'homes' and 'owners' for each devolution commitment

A draft approach was discussed at the recent London Health and Care Strategic Partnership Board meeting. For workforce:

Context: London has recognized the need for joint health and care training and workforce development to support integrated working as a key enabler to new models of care.

- *Governance:* London Workforce Board
- *Accountable officer:* Aurea Jones/ADASS (TBC)
- *Delivery lead:* TBC
- *Team:* TBC
- *London partner leads:*
  - ADASS: TBC
  - HEE: Aurea Jones
  - GLA: Amanda Coyle
  - NHSE: Oliver Shanley
  - Others: TBC

**We need to collectively determine:**

- **A programme of work that incorporates delivery of devolution commitments**
- **Preferred accountable officer arrangements and leads**
- **An approach to resourcing**

**A draft approach can then be taken to the 29<sup>th</sup> September London Health and Care Strategic Partnership Board.**

# Health & Care Workforce – DRAFT FOR DEVELOPMENT

This programme aims to ensure a workforce that supports health and care integration and examines workforce challenges and opportunities that could better be met through a collaborative approach.

## Key deliverables

<b>1 Strategic leadership</b>	<p>Support the set up of the London Workforce Board (LWB), including clear ToR and phased development. The LWB will:</p> <ul style="list-style-type: none"> <li>• Ensure there is early discussion at London level on emerging issues, and maintain a dialogue on policy and priorities, including workforce implications of service change/transformation.</li> <li>• Promote effective communication between partners and a collective approach to supporting and developing staff across health and care affected by service changes and transformation.</li> <li>• Provide oversight for London level delivery of devolution commitments and support pilots in their workforce transformation.</li> <li>• Ensure processes are in place for encouraging co-working and sharing learning amongst partner organisations and within the system more broadly.</li> <li>• Map the activities of member organisations to identify further opportunities for collaboration and more efficient working.</li> </ul>
<b>2 Development and training</b>	<ul style="list-style-type: none"> <li>• Identify opportunities arising from the apprenticeship levy in London.</li> <li>• Develop a London-wide workforce delivery system, including HEE, Skills for Health and Skills for Care.</li> <li>• Identify opportunities for greater awareness of integrated and other sector roles during development and training e.g. social care placements during medical school; Ensuring Local Workforce Advisory Boards are aware of all the training programmes available from Skills for Care and Health, to develop local proposals for staff training together across health and social care.</li> </ul>
<b>3 Recruitment/retention</b>	<ul style="list-style-type: none"> <li>• Explore the impact of Brexit on London’s health and care workforce to support discussions with national partners and central government.</li> <li>• Identify opportunities to attract young Londoners to careers in health and care.</li> <li>• Explore the employment contract and if there is a case for change to enhance recruitment and retention into the capital. This to include exploring a single employer framework, to re-distribute and better target the existing pay envelope.</li> <li>• Further develop and increase adoption of opportunities for professional mobility through ‘passporting’.</li> <li>• Exploring London weighting in the context of the current challenges in staff retention and turnover.</li> </ul>
<b>4 Integrated roles and working</b>	<ul style="list-style-type: none"> <li>• Clearly identify base case, built up from STP (&amp; ACS) analysis.</li> <li>• Examine different workforce requirements to support emerging delivery or commissioning models – bringing together the findings of the STPs and LWABs.</li> <li>• Identify any opportunities to accelerate or support STP efforts to develop team-based care models, including a plan for up/side-skilling existing workforce.</li> <li>• Form a London wide view, from the work of STPs, of the projected changes needed in the workforce to ensure that it is fit for purpose to meet London’s changing needs.</li> <li>• Describe options for a more integrated workforce including proposing solutions to challenges facing health and care workforce integration such as: co-location and pay parity.</li> </ul>

### Reports to

- The London Workforce Board, then to the London Health & Care Strategic Partnership Board.
- Political oversight: London Health Board.

### Delivery, funding and resources

- Collaborative programme – key partners include NHSE, NHSI, HEE, London Councils, ADASS, STPs, LWABs and emerging health and care systems
- Resource requirements include programme management and subject matter expertise.