NORTH WALES SOCIAL CARE AND COMMUNITY HEALTH WORKFORCE STRATEGY
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INTRODUCTION

The strategy sets out our strategic commitment as a North Wales Regional Workforce Partnership for the social care and community health sector, confirming our priorities over the next 3 years.

The North Wales Workforce Strategy (NWWS) has been developed by the North Wales Workforce Board (NWWB) and is our commitment to having a joined up approach to the workforce challenges and opportunities across the sector.

The Strategy supports embedding the principles within the Social Services and Well-being (Wales) Act 2014 and is aligned to the North Wales Regional Partnership Board Priorities.

The Strategy has been produced jointly with partners and discussions with partner organisations.
The North Wales Regional Partnership Board (NWRPB), which is a Statutory Board under Part 9 of the Social Services and Well-being (Wales) Act 2014 has agreed its work priorities for partnerships and integration which provides the context and scope for the North Wales Workforce Strategy, this work is led through the North Wales Workforce Board (NWWB).

The NWWB has been in existence for 3 year and reports to the NWRPB, the NWRWB has gone through a number of transitions over this period developing and changing to meet the needs of the sector and align with the Social Services and Wellbeing (Wales) Act 2014.

The membership reflects a wide range of organisations that are part of the Social Care & Community Health Workforce and reports to the NWRPB.

North Wales Workforce Board Membership

OUR SHARED COMMITMENT

We are committed to working together, through a confident, engaged, motivated, knowledgeable and properly skilled workforce to support integration, recognising the value of all partners.
RESOURCES

The health and social care sector is large, growing and economically significant

It is important to continue to raise the profile of the sector via the Regional Skills Partnership, to secure future funding for training and skills development as well as promoting the opportunities of the sector to the wider population. Supporting entry level programmes, career opportunities and workforce development programmes at all levels.

ECONOMIC SIGNIFICANCE

The health and social care sector in North Wales is large, growing and economically significant, it is recognised as an area of growth within the North Wales Economic Ambition Board’s Regional Skills Plan and work is ongoing to ensure it continues to be a significant priority as part of the skills priority statement.

A UK project to explore the full economic impact of the social care sector is currently underway and will report before the next regional priority skills assessment is completed.

The sector is also important to the government’s priorities around employability and the foundational economy by providing entry level jobs ranging from porters and cleaners to higher skilled jobs of health and social care support workers.

The current public spend for the NHS to provide all services in North Wales is around £1.4 billion and on social care for all services £260 million per year. In addition an ONS survey in 2015 estimated an additional 17% of NHS private spending on health and social care including opticians, dentists, medicine, therapies, counselling and self-funded social care to another £240 million in North Wales.

ECONOMIC PRESSURE

We will continue to work together sharing resources in order to ensure that they can be best utilised and to provide optimum opportunities for the development and stability of our current and future workforce.

There are a number of pressures on resources within the sector including both financial and people that are challenging.

The North Wales Social Care Market is under significant pressure with rising costs through changes in the way services are delivered and the implementation of new legislation and regulation as well as the continued and projected demands across the sector, with the continued sustainability of the market at risk. Therefore a significant priority of the Strategy is to address the workforce and sector
sustainability issues across the market through an engaged, collaborative and supportive approach. Including having sufficient resources to meet training and development needs across the health and social care workforce and Implementing and embedding new legislative and regulative requirements including Social Services & Wellbeing (Wales) Act 2014, the Well-being of Future Generations (Wales) Act 2015 and the Regulations and Inspections of Social Care (Wales) Act 2016

The North Wales Regional Skills Plan states that “With BREXIT now being triggered, we now need more than ever to invest in the skills and talents of our domiciled current and future all-age apprenticeships in North Wales, to support employers, our key and growth sectors, and our current & future workforce.” “With a current reliance on European Social Fund (ESF) and European Regional Development Fund (ERDF) for delivery of funding to projects supporting skills and employment across North Wales, the questions over future replacements of funding to support these areas of activity on the skills and employment agenda are still yet to be agreed and made clear.”

WORKFORCE PLANNING & DEVELOPMENT

As a partnership we are committed to continue to share the knowledge, skills, expertise and experience of the wide range of people that contribute and invest in our North Wales Social Care and Community Health Workforce

The NWWB has a small amount of resources through grants and Local Authority partner funding, however other resources that support workforce planning and workforce development are held within individual organisations, these are either core funding or grant based funding, whereby there are conditions associated with how the funding can be spent. The region has and continues to work collaboratively through both the delivery and funding of workforce development, recruitment and training activities, funding that has supported this has been provided through a varied range of resources including:

- North Wales Regional Collaborative Team
- Social Care Workforce Development Programme
- Social Care in Partnership
- Social Care Wales
- Apprenticeships
- Workforce Education and Development Services
- Third Sector
- Independent Sector
- Careers / Job Services and Programmes
- Further and Higher Education Institutes
The North Wales workforce strategy is not a static document and will continue to grow and develop alongside changes in the sector; having a workforce strategy that responds to the needs of the social care and the community health workforce.

Due to the size and complexities of the social care and community health workforce the strategic priorities are not able to cover all aspects but we have taken a pragmatic approach focusing on areas of need / risk, whilst referencing other areas including other workforce programmes / initiatives.

The North Wales workforce strategy recognises the value of our wider partnerships such as the North Wales Police, Welsh Ambulance Service Trust, and the North Wales Fire & Rescue Service. Through the implementation plans links to joint working initiatives and activities with these services will be acknowledged and built upon where appropriate.

**SCOPE**

For the purpose of this strategy we have identified the following workforce sectors.

- Local Authorities Social Care Services
- Health in the context of integrated services and the interface with social care provision
- Private and Independent Sector
- The Third Sector
- Individual Employers
- Carers

**CONTEXT ~ LEGISLATION**

We will respond to the impact of the new legislative frameworks on the workforce and identify changing roles, tasks, responsibilities, skills and knowledge required.

The North Wales Social Care and Community Health Workforce is in a time of unprecedented change whereby they are required to deliver services differently with a focus on prevention, protection, intervention, partnership and integrated working, coproduction and empowerment; requiring a different emphasis on workforce skills and training.
The sector provides a wide range of care and support across a range of settings including people’s homes, residential and nursing homes, hospitals and community settings, making it one of the most diverse workforces across a range of organisations and people including social care, health, the independent and third sector and carers.

Delivering the Social Services & Well-being (Wales) Act 2014 requires that not only health and social care partners deliver integrated services, but that there is a greater emphasis on partnership working with other sectors such as housing, education and corporate services, to meet an individual’s needs.

The introduction of new working practices in meeting the requirements of the Social Services and Well-being (Wales) Act 2014 is likely to lead to skills gaps in the social care and health workforce reflecting the substantial changes in social care and health organisations, including the introduction of new legislation and the re-structuring of services.

**Social Services and Well-being (Wales) Act**

The range and level of preventative services needs to be sufficient to meet the needs of the population; promote well-being and prevent delay or reduce the need for formal care and support.

The focus within the Social Services & Well-being (Wales) Act is to enable people to live as independently as possible, focusing on achieving outcomes that promote well-being and working in new ways and in partnership with communities, at local and regional levels.

The Act aims to “Increase the level of effective early intervention / preventative services, access to information and advice for everyone, and well-being support for those who need some help, more people will be able to be supported without need for managed intensive support, fewer citizens will need care and support planning for managed, complex care”.

The five key principles of the Social Services & Well-being (Wales) Act underpinning services are:

- Voice and control
- Prevention and early intervention
- Well-being
- Co-production
- Multi Agency

**Well-being of Future Generations (Wales) Act 2015**

Public bodies need to ensure that when making their decisions they take into account the impact they could have on people living their lives in Wales in the future. The 7 principles of the Act are:

- A healthier Wales
- A prosperous Wales
- A resilient Wales
- A more equal Wales
- A Wales of cohesive communities
- A Wales of vibrant culture and thriving Welsh Language
- A globally responsible Wales

It expects us to:

- work together better
- involve people in planning and delivering the principles outlined above, reflecting the diversity of our communities
- look to the long term as well as focusing on now

**Regulation and Inspection of Social Care (Wales) Act 2016**

The new system of service Regulation and Inspection of Social Care (Wales) Act 2016 includes several areas

- Social Care Wales
- Future of Social Care Workforce Development Programme
- Registration and workforce
- Regulation of Social Care Training and inspection established by the Regulation and Inspection of Social Care (Wales) Act 2016

Social Care Wales, created under the Regulation and Inspection of Social Care (Wales) Act, brings together workforce regulation, workforce development, service improvement and research in one organisation, extending registration of the social care workforce to domiciliary care workers by 2020 and residential care workforce 2022.

**CONTEXT ~ NATIONAL & REGIONAL PROGRAMMES**

**Regional Partnership Board Programme**

The NWRPB is a statutory board required under Part 9 of the Social Services & Well-being (Wales) Act. The NWRPB provides the strategic direction relating to the planning of services, integration and partnership working between its partners ensuring effective services and that care and support services are in place to best meet the needs of the population.
Part 9 of the Social Services and Well-Being (Wales) Act provides statutory requirements on the NWRPB and the NWRPB has agreed its programme of work to deliver the ambitions set out and the regional priorities.

North Wales Population Needs Assessment

The population needs assessment pulls together information about people’s care and support needs and the support needs of carers in North Wales. It aims to show how well people’s needs are being met and the services we will need to meet them in future. Local Authorities in North Wales worked together with Betsi Cadwaladr University Health Board (BCUHB), supported by Public Health Wales, and additional partners, to produce the assessment which is a requirement of the Social Services and Well-being (Wales) Act (2014).

The population needs assessment will be used to make decisions about the services we need to provide in North Wales to meet people’s care and support needs and the support needs of carers. It will help us make decisions about where to use our resources, meet other requirements of the act and inform the work of the Regional Partnership Board.

Betsi Cadwaladr University Health Board Workforce and Organisational Strategic Priorities

The Workforce and Organisational Strategic Priorities for Betsi Cadwaladr University Health Board are set out under four strategic themes which are:

- Achieving cultural change to that which better support staff and through them the patients we serve.
- Planning for and attracting the staff we need to deliver services now and in the future.
- Ensuring that the staff resource is deployed and used as effectively and efficiently as possible.
- Ensuring that staff have the skills necessary to fulfil their roles.

Social Care Wales Business Plan

The newly established Social Care Wales has identified its priorities, these include:

- Care and support at home, providing improved care and support in the home, or enabling more people to receive care and support at home, addressing the needs for care and support at home for those that choose to receive this in their own home
- Supporting people with dementia
- Children who are looked after by the local authority
Our workforce strategy aims to engage and align to this work which will be undertaken nationally.

**The Care at Home Strategic Plan**

The care and support at home strategic plan covers a complex, dynamic system involving citizens, carers and many agencies to deliver effective care and support at home. Within the strategic document one of the six key actions is

“The workforce needs the knowledge, skills and values to be able to deliver outcomes focussed, flexible care and support at home. Social Care Wales should drive the development and delivery of a workforce strategy, inclusive of carers and communities, with a range of partners”.

Social Care Wales state that

“To achieve the vision of this strategic plan, people need to commit to making changes together. Work needs to begin now. We have developed a plan that shows some of the first things that need to be done. We will work with people across Wales to plan what improvements need to be made, and how they will be achieved”.

**National Commissioning Board**

The aim of the National Commissioning Board and Provider Forum, is to improve commissioning practices, including integrated commissioning, in supporting the development of a better understanding of processes and the social care markets.

Key activity for 2016/17 include:

- **Market Analysis of Care Homes**, completion of pilot in North Wales followed by a national approach
- **Market Position Statements for Care Homes**: Support partnerships to develop market position statement(s) describing future requirements
- Develop outcomes focused model contract and specification for Care Homes covering both long term and short term placements
- Develop an integrated and coherent model for the quality assurance
- Development of Guidance on options for securing services which will encompass the new requirements of the EU. This will be developed through practical examples of home care and supported accommodation (for people with learning disabilities).
- Examine the Skills and Capacity Pilot training and examine its effectiveness before broader roll out across Wales
Association Directors Social Services Cymru Workforce Policy Group

The ADSSC Workforce Policy Group has lead responsibility in ADSSC for issues relating to:
- Workforce Planning & Development
- Training and Qualification frameworks
- ADSSC representation and links with National Regulatory and training bodies

The NWWB has a work programme that is aligned to the overall priorities of ADSSC

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North Wales Citizen Panel

The North Wales Citizen panel put a round of questions to their members, both existing and new contacts were made in order for a broad range of responses from different geographical areas to take part.

The panel provided a report outlining their preferences and expectations in relation to each of these questions, as detailed below.

The questions asked were:
1. What type of assistance do you think would be most helpful?

   **Citizen Panel Members identified that the type of assistance they wanted included:**
   - Availability of Information
   - More leaflets in Welsh
   - Understanding the concept and practice of Co-Production
   - Use of Social Media

   - The availability of information was an area that was reported as being important to individuals, this included areas such as knowing where information is available and access to information which isn’t on line.
   - More leaflets available in Welsh
   - Describing my circumstances once
   - Staff to fully understand the concept and practice of co-production and support to work with them as an equal to identify personal wellbeing outcomes and not to be constrained by generic outcomes from frameworks.
   - Receiving information prior to any face to face meetings
   - Information and advice on affordable care
   - Using Social Media more to share information
- Availability of GP surgeries after 5pm
- Additional information on job and college services

2. Who do you think could assist you?

Citizen Panel Members identified that those that could assist them included:
- Family and Friends
- Integrated Teams
- Communities
- Community based services, such as befriending and carer’s services
- Social Care Staff

- Whilst individuals recognised the importance of family and friends providing support, there was some concern raised on the expectations and pressures of unpaid carers, as well as those who did not have this support available to them
- Some individuals identified that they preferred an independent carer to support them and share their caring needs with.
- Having a single point of access was seen as a solution, however a number of those spoken to were not aware of it within their Local Authorities
- The use of community based services was highlighted both in terms of a community and the support it could offer, some concern was raised on how long this would take and also ensuring the support you receive being from staff with the knowledge and skills required. Services identified that were already accessed included Age Cymru, Citizen Advice Bureau, local authority venues and notice boards from community councils.
- Some people acknowledged that they had become dependent on Social Care Staff, but also commented that this wasn’t always a good thing to rely on Local Authority Services
- There was support for access to voluntary services, that some people were in receipt of such as the North East Wales Cares Information Service (NEWCIS) and a befriending service
- A suggestion was a regional advocacy service that provided consistency of access as they had experience of changing providers and did not feel this was acceptable at a time you are vulnerable
- Multi-agency approaches were also discussed in that individuals liked this approach as it meant information was easier to access and support was more streamlined with better communication between organisations as to who was doing what aspect of the work with the individual. One individual told us that multi-agency work had worked well for them as the
agencies involved were talking together and that when meetings were held they all attended and it felt very person centred and very focused on them and their needs.

- Two individuals also referred to their church as providing support including, meeting new people and getting out more, moving home and sorting out finances

3. What skills, knowledge and expectations would you have from those that assist you?

<table>
<thead>
<tr>
<th>Citizen Panel Members identified the skills, knowledge and expectations of have from those that assisted them included:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Honest, Reliable &amp; Consistent</strong></td>
</tr>
<tr>
<td><strong>Professional</strong> having a good knowledge or a willing to learn more about the topic and the individual they are working with in order to establish all the facts.</td>
</tr>
<tr>
<td>Being <strong>kind</strong> natured and willing to <strong>help</strong></td>
</tr>
<tr>
<td>Someone who had a sense of humour had a big effect</td>
</tr>
<tr>
<td>Being a <strong>positive</strong> person</td>
</tr>
<tr>
<td>Not being patronising and speaking to individuals as a person</td>
</tr>
<tr>
<td>To keep things that are said between the assistance and the individual <strong>confidential</strong></td>
</tr>
<tr>
<td>To be <strong>caring, friendly</strong> and <strong>cheerful</strong>.</td>
</tr>
<tr>
<td><strong>Realistic</strong> in their approach so not promising the individual anything that would not be achievable</td>
</tr>
<tr>
<td>Being <strong>polite</strong></td>
</tr>
<tr>
<td>Don’t like people who** judge** before they know</td>
</tr>
<tr>
<td><strong>Open minded</strong></td>
</tr>
<tr>
<td>An individual said it was important to them that their team works well together</td>
</tr>
<tr>
<td>Two individuals said that they would like their assistance to be <strong>trustworthy</strong></td>
</tr>
<tr>
<td><strong>Supportive</strong></td>
</tr>
<tr>
<td><strong>Encouraging</strong></td>
</tr>
</tbody>
</table>

- **Good Communication** in different formats
- **Time**
- **Following up on actions** that they agree to support with.
- **Contactable** and accessible e.g. **needs of deaf people**.
- **Complaints procedure** that is streamlined for the use of individuals.
- Pride in their job.
- Needs met for all young people in terms of social care.
- A better and more streamlined discharge procedure from hospital.
- Skill of getting to know the person and their circumstances
- The ability of staff getting to know their likes, dislikes, how they like things done and what the individuals needs are
- National level qualifications and for organisations to be monitored on actions and the way they deliver the service
A local knowledge of the geographical area you are working is important, ‘Know enough about the local community and third sector to be able to pinpoint any immediate informal support that might be available’

THE WORKFORCE

Social Care Wales collates a range of data in relation to registered and commissioned care services including the:

- Profile of commissioned care services 2015,
- Profile of domiciliary care service managers working in Wales 2016,
- Profile of adult care home managers working in Wales 2016,
- Profile of Social Workers in Wales 2015
- The Profile of the Residential Child Care Managers and Workers in Wales 2015,

The highlights from the latest data reports are broadly covered.

The North Wales Economic Ambitions Board Report\(^1\) states that although health and social care are not identified as economic drivers, they are considered sectors that demonstrate above average growth and productivity and are projected to perform well into the future being of significant importance to North Wales and its economy.

The table below shows the percentage top three industries of employment based on the 2011 census for each Local Authority in North Wales, identifying the health and social care sector in North Wales as one of the largest employers and therefore contributes significantly to the economy.

The North Wales Ambitions Board

<table>
<thead>
<tr>
<th></th>
<th>Health &amp; Social Care</th>
<th>Education</th>
<th>Retail</th>
<th>Manufacturing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglesey</td>
<td>15%</td>
<td>11.2%</td>
<td>14.4%</td>
<td></td>
</tr>
<tr>
<td>Gwynedd</td>
<td>14.7%</td>
<td>12.6%</td>
<td>14.5%</td>
<td></td>
</tr>
<tr>
<td>Conwy</td>
<td>16.7%</td>
<td>10.2%</td>
<td>17%</td>
<td></td>
</tr>
<tr>
<td>Denbighshire</td>
<td>19.1%</td>
<td>10%</td>
<td>14.4%</td>
<td></td>
</tr>
<tr>
<td>Flintshire</td>
<td>11.1%</td>
<td></td>
<td>16.3%</td>
<td>18.9%</td>
</tr>
<tr>
<td>Wrexham</td>
<td>14.6%</td>
<td></td>
<td>15.2%</td>
<td>18.3%</td>
</tr>
</tbody>
</table>

\(^1\) North Wales Economic Ambition Board: Regional Skills & Employment Plan 2015
There are a number of challenges in securing consistent data across organisations, sectors and their workforce whilst every effort has been made to source accurate data there is evidence to suggest that some of the data provided may need further interrogation. It is acknowledged that moving forward we should consider how this can be achieved, in order to have better workforce intelligence for workforce planning and utilise resources effectively.

Each Local Authority is required to collate information about directly employed staff of Social Services departments on an annual basis to provide to Welsh Government to be included in the annual National Statistics.

**Number of Domiciliary Care Staff Qualified**

<table>
<thead>
<tr>
<th>Category</th>
<th>Staff in Post</th>
<th>Qualified</th>
<th>Percentage Qualified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domiciliary Care Managers</td>
<td>18</td>
<td>18</td>
<td>100%</td>
</tr>
<tr>
<td>Deputy Domiciliary Care Managers</td>
<td>28</td>
<td>26</td>
<td>92%</td>
</tr>
<tr>
<td>Domiciliary Care Workers</td>
<td>1262</td>
<td>933</td>
<td>73%</td>
</tr>
</tbody>
</table>

**Number of Residential Care Staff Qualified**

<table>
<thead>
<tr>
<th>Category</th>
<th>Staff in Post</th>
<th>Qualified</th>
<th>Percentage Qualified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Care Managers</td>
<td>30</td>
<td>30</td>
<td>100%</td>
</tr>
<tr>
<td>Deputy Residential Care Managers</td>
<td>27</td>
<td>20</td>
<td>74%</td>
</tr>
<tr>
<td>Residential Care Worker</td>
<td>719</td>
<td>580</td>
<td>80%</td>
</tr>
</tbody>
</table>
Number of Domiciliary Care Staff Employed supporting Adults and Children 2014-15 and 2015-16

There has been a slight reduction in the number of domiciliary care staff in adults and children’s services.

Number of Residential Care Staff Employed supporting Adults and Children 2014-15 and 2015-16

Whilst adults with learning disabilities has seen a small increase, residential services for the elderly and residential children and young people services have seen a small reduction.

SOCIAL WORKERS

We will work together on approaches to social work workforce planning and development to meet the emerging and future requirements for Social Workers workforce

We will support Social Workers development pathways through a regional approach to the first 3 years in practice.
Within North Wales it is not identified that there are significant recruitment issues for social workers, however there is some evidence to suggest that more specialist roles are difficult to recruit to. The age profile of the social work workforce may show differences as more experienced Social Workers leave the sector through Local Authority transformation programmes and we may have a younger social work workforce, whilst the National CPEL programme supports continued development and support, additional approaches may need to be considered in supporting a younger, less experienced workforce.

The staffing data shows that within Local Authorities there has been a slight increase of Social Work Services in Adults and Children’s & Young People.

The continued professional development of social workers is identified as an on-going priority to support their professional development.

The North Wales Heads of Service Children’s and Adults have been working with training managers across the region to create a consistent learning and development pathway for Social Workers within their first 3 years of practice. This includes a core Social Work training programme across the region.

**COMMISSIONED CARE WORKFORCE**

*We will work together as a sector to address retention and recruitment pressures, developing cross sector and regional approaches.*

*The data from workforce surveys indicates both high levels of workforce turnover and at least a quarter of the workforce leaving the sector each year to take up employment elsewhere.*

The 2016 Surveys based on a return rate as detailed below showed that 38% of domiciliary care workers and 36% of the residential care workers are unqualified, this is a significant number of workers that will need training in order to meet registration requirements under the Regulation and
Inspection of Social Care (Wales) Act 2016, demonstrating significant resource implications within the sector.

The recent *Transforming care in the 21st century: A consultation setting out the proposed changes including*:

- fees for Registration
- qualification requirements for domiciliary care workers
- code of practice for employers
- Fitness to practise rules.

This indicates that the cost of fees for registration will rise from £10 (2017/8) to £20 from 2018/9 and be £35 by 2021/22, this does not take into account the cost of training or the costs of DBS for the sector.

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**10,000 WORKERS**

85% Private and Independent Sector

15% Third Sector

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<table>
<thead>
<tr>
<th>Local Authority</th>
<th>% of surveys returned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ynys Mon</td>
<td>85%</td>
</tr>
<tr>
<td>Gwynedd</td>
<td>99%</td>
</tr>
<tr>
<td>Conwy</td>
<td>35%</td>
</tr>
<tr>
<td>Denbighshire</td>
<td>44%</td>
</tr>
<tr>
<td>Flintshire</td>
<td>37%</td>
</tr>
<tr>
<td>Wrexham</td>
<td>83%</td>
</tr>
</tbody>
</table>

In 2015……..

Out of those that left their roles

- 42% left the sector
- 33% left to work for another sector provider
- 22% unknown

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**Commissioned Care Sector**

- Domiciliary Care Managers: 107 (87%), 94 (75%)
- Deputy Domiciliary Care Managers: 80, 60
- Domiciliary Care Workers: 2634, 1649 (62%)

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10,000 WORKERS

85% Private and Independent Sector

15% Third Sector
BCUHB WORKFORCE DATA

The age profile of the organisation remains broadly consistent with previous years, the ageing workforce is a challenge for BCU, with around 17% of the workforce in the age band 56 and over and therefore at or approaching possible retirement. The % of the workforce aged 30 and under is 14.65%.

Workforce challenges that impact on the Health Board and ultimately our patients is the shortage of registered nursing staff and the difficulty that both Primary care and nursing homes have in recruiting and retaining registered nurses.

<table>
<thead>
<tr>
<th>No. Of Employees Per Organisation</th>
<th>Under 10 Employees, 13%</th>
<th>10-25 Employees, 38%</th>
<th>26-50 Employees, 32%</th>
<th>51-100 Employees, 14%</th>
</tr>
</thead>
</table>

**Commissioned Care Sector**

- Residential Care Managers: 152, 95%
- Deputy Residential Care Managers: 145, 81%
- Residential Care Worker: 3821, 64%

**From 2014—2015**

- There was a reduction in the number of staff moving from one provider to another by 22%
- There was a reduction in the number of staff leaving the sector by 8.5%
The workforce plan illustrates the baseline position of the whole organisation at the 28th February 2017. The current headcount of staff (excluding bank staff) is 17,117 which equates to 14,748 full time equivalents (FTE). Nursing & Midwifery are the largest staff group at around 33% of BCU total. The Additional Clinical Services (Assistant and Support worker) staff group is the second largest in number and represents 19.63% of the workforce.

The workforce composition across all pay bands continues to be predominantly female at 13,789 (79%) headcount versus the male headcount at 3,328 (21%) This provides an 80/20 percentage split which has not deviated over recent years. 52% of females work part time compared with 16% of males, which again has been fairly typical over recent years.

The forecasted change in the workforce based on a three year trend analysis during 2017/18 is 14,909, (FTE) which is a 2% increase in our Workforce. For the next three years if there is no change in these trends we anticipate a 5% increase at the end of 2020 taking BCUHB workforce to 15,408(FTE) .Clearly there is work to do around new ways of working, skills mix and workforce transformation. These projections and assumptions will need be revised annually.

Staff turnover has decreased slightly over the last 2 years from March 2015 7.78% to Feb 2017 7.60% it is difficult to estimate at present whether this trend will continue. The turnover data above excludes medical and dental training grades.

Sickness absence rates have reduced since 2015/16 with the average rate to February 2017 being 4.85% which is 0.31% above the BCU target of 4.55%, but still represents a significant improvement.

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**CHILDRENS’ WORKFORCE**

The North Wales Workforce Board has agreed priorities for the children’s workforce which include:

- Identifying workforce implications of ‘outcome based’ service models
- Working with partners across the Region to support shared training opportunities
- Aligning and working with the Family Justice Board Training Sub Group to enhance the role of practitioners as experts within the court arena
- Developing the skills of Foster Carers to support older children with complex and challenging needs – linked to National Fostering Framework programme

In relation to Children’s services the North Wales Population Assessment identifies a wide range of needs delivered through a range of services from early intervention and prevention to looked after children. There has been an increase in the number of children’s needs in relation to areas such as Child sexual exploitation, self-harming and disabled children and increased concerns in areas such
as bullying, sexting and children’s mental and emotional well-being. There have been a number of training and event initiatives to raise awareness of emerging themes, however as service models are developed and further work is undertaken in establishing the workforce needs through quality data, it is envisaged there will be emerging workforce themes identified.

The table below shows the provision of Independent Residential Children’s and Young Peoples Care Providers in North Wales

<table>
<thead>
<tr>
<th>Date of count:</th>
<th>Number of independent providers:</th>
<th>Number of independent settings:</th>
<th>Number of registered beds:</th>
</tr>
</thead>
<tbody>
<tr>
<td>As @ May 2014</td>
<td>14</td>
<td>36</td>
<td>162</td>
</tr>
<tr>
<td>As @ 31st May 2017</td>
<td>14</td>
<td>40</td>
<td>174</td>
</tr>
<tr>
<td>Change</td>
<td>Nil</td>
<td>+4</td>
<td>+12</td>
</tr>
</tbody>
</table>

Source = CCSR

Although the number of providers is unchanged this does not reflect that 3 x providers included in the count for 2014 have since been taken over by other providers (one of which was already present in the region) and two new providers have entered the market place.

Social Care Wales will be developing a looked after children strategy building on the work undertaken in residential childcare. Looked after children are among the most vulnerable in our society and there is a pressing need to improve the supply and quality of service provision within North Wales ensuring that those supported have services and staff that can meet their needs.

The Welsh Government is developing an early years, childcare and play workforce in Wales 10 year workforce plan. The plan offers proposals under three key themes: up-skilling the existing workforce, attracting high-quality new entrants, and developing leaders and future leaders in the sector. With an aim to ensure all those caring for our young children are equipped with the necessary skills and competencies to support children to develop physically, socially, emotionally and cognitively. The childcare offer which is currently being piloted in Flintshire, Gwynedd and Anglesey is to provide 30 hours a week of combined early education and childcare for working parents of 3 and 4 year olds, up to 48 weeks a year.

The associated value of providing quality childcare includes:

- Economic benefit – access to free childcare will remove this as a barrier to returning to employment.
- Tackling Poverty – enabling parents to return to or increase their employment, improving families’ prospects.
- Benefits for the child – supporting existing child development pathways.

Consideration of the sustainability to meet the demand is being considered as part of the pilot projects, as well as meeting childcare demands in holiday periods.

In addition to this there is a Welsh Language project which aims to increase the use of the Welsh Language within early year settings.

**MENTAL HEALTH WORKFORCE**

The population needs assessment also identifies that an overarching strategy which includes better coordination across key partners, should consider the requirements of the workforce to meet the outcomes of the strategy including size, roles, skills and knowledge development.

The population needs assessment identifies that the prevalence of mental health is likely to rise from 93000 to 99000 people by 2035. It has identified the need to increase the workforce in order to meet demand, particularly in relation to increased capacity within the mental health teams, family involved models, services available outside of the normal 9-5 provision and the continued development of provision for early intervention and prevention particularly in relation to those whom experience low level depression and anxiety.

Betsi Cadwaladr University Health Board are leading on the development of an Integrated Mental Health Strategy for North Wales of which one aspect is workforce, the findings of which will be shared.

**WELSH LANGUAGE**

We will continue to embed the Welsh Language through local, regional and national programmes in line with More than Just Words and the Welsh Language Act, ensuring that those in receipt of services are able to do so in the language of their choice.
The Welsh Language at work survey shows variation of Welsh Speakers across the region including spoken and written Welsh, the use of the Welsh Language is more prominent on the West side of North Wales than the East.
PUSH & PULL FACTORS

We have already identified that the workforce is in an unprecedented time of change through legislative and policy direction, in addition to this there are also a number of other factors that are impacting on the social care and health workforce.

Resources
• There are continued resources (financial and people) challenges within the sector in delivering the services needed to individuals.
• Having sufficient resources to meet training and development needs across the health and social care workforce, embedding the principles of the Social Services & Wellbeing (Wales) Act 2014.
• There are opportunities to do things differently and further develop regional solutions that enhance resources and ensure that no matter where you receive services that there is a sufficient health and social care workforce that has the right skills, competencies and knowledge
• Achieving sustainability across the sector is challenging

Demands
• The ever increasing demands on health and social care is changing in both Adults and Children’s Services. There is an emphasis on the development of preventative services and the provision of care and support in a person’s own home and within their own communities.
• People are living longer with a range of needs including complexed health and social care needs, impacting on the skills, knowledge and competencies required within the health & social care workforce.
• Responding to legislative changes at a time when the sector is under significant pressures in all areas

Expectations
• The implementation of the Social Services & Wellbeing (Wales) Act means that we will need to change the way in which we work, challenging our current cultures and creating a new one in the spirit of the Social Services & Wellbeing (Wales) Act
• There is an expectation within the sector for individuals, carers, commissioners and providers to work together in the development of a range of services including new models of support, this will require the region to consider the types of workers needed within the sector e.g. health and social care support workers, integration & skills development within the Third Sector and the wider role of communities

Qualifications & Registration
• The Regulations and Inspections Social Services & Wellbeing (Wales) Act requires the registration of Domiciliary Care and Residential Care Workers impacting on the already fragile provider market and may change the demographics of the workforce.
• The development of a new suite of qualifications for Health and Social Care, Childcare and Playwork
• The Social Care Wales review of the Social Work Degree
• Developing skills, knowledge and competences to deliver services differently
• The quality assurance and quality improvement of practice in learning and assessment is a priority leading to the expansion of registration with Social Care Wales having greater responsibilities for regulation and Social Care Training
## WORKFORCE COMPETENCIES

The health and social care workforce is a large and complex sector covering a diverse range of vocations within different organisations. This strategy does not seek to cover the plethora of different roles, but to identify a range of competencies that will enable the successful implementation of the Social Services and Wellbeing (Wales) Act 2014. This includes embedding a cultural shift to deliver better services that meet the individual’s needs within the available resources in a cohesive and collaboratively, these are highlighted in the table below.

<table>
<thead>
<tr>
<th>GOLDEN THREADS</th>
<th>LEADERSHIP &amp; MANAGEMENT, SAFEGUARDING, WELSH LANGUAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>COPRODUCTION</td>
<td>&quot;WHAT MATTERS&quot; CONVERSATIONS</td>
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<tr>
<td>COMMISSIONING &amp; CONTRACTING SKILLS</td>
<td>INTEGRATED MULTIDISCIPLINARY WORKING, UPSKILLING &amp; WORKFORCE</td>
</tr>
<tr>
<td>DIFFICULT CONVERSATIONS</td>
<td>SPECIALIST SKILLS</td>
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<tr>
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<td>OUTCOMES</td>
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<td>VOLUNTARY SERVICE</td>
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<tr>
<td></td>
<td>HEALTH ORGANISATIONS</td>
</tr>
<tr>
<td></td>
<td>INDEPENDENT SECTOR</td>
</tr>
<tr>
<td></td>
<td>SOCIAL SERVICES</td>
</tr>
</tbody>
</table>
LEADERSHIP

We will develop Leadership skills, including the planning and development of future leaders.

Effective management and leadership skills are crucial in the transformation of services and cultures, working together across sectors to drive the changes required, engaging and supporting communities to develop services and activities to meet the needs of individuals within their communities.

SAFEGUARDING

The North Wales Safeguarding Board Workforce and Training group is developing a collaborative approach to safeguarding workforce and training to respond, review, promote and quality assure regional safeguarding learning and development the group are currently developing their Action Plan which will identify workforce and training needs.

Children’s Safeguarding Board

The following three areas have been identified as the strategic priorities for the North Wales Children’s Safeguarding Board:

1. CSE and missing from care
2. Children who display harmful sexual behaviour
3. Domestic Abuse

Adults Safeguarding Board

The North Wales Safeguarding Adults Board (NWSAB) strategic priorities for 2016/17:

1. Outcomes for adults who are the subject of adult protection plans are improved as a result of all agencies across North Wales consistently delivering high quality adult protection services according to agreed best practice.
2. The risk that vulnerable adults and ‘adults at risk’ suffer or become subject to abuse or neglect is reduced because staff and the public are fully aware of the need to safeguard and protect, and know what to do if there is a safeguarding issue.
3. The NWSAB operates effectively and meets its statutory responsibilities.

4. Development of a regional approach to assist adults who self-neglect

The North Wales Adults and Children’s Workforce Development and Training Group is key in identifying training needs and ensuring that training is provided on an inter-agency and individual organisational basis to assist in the protection and prevention of abuse and neglect of adults and children and will remain a priority

**The Violence against Women, Domestic Abuse & Sexual Violence (Wales) Act 2015**

The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Bill, places duties on Ministers, Councils and Health Boards to publish strategies aimed at ending domestic abuse, gender-based violence and sexual violence, there is a North Wales Regional Strategic Board, work is ongoing and the board will develop a regional strategy.

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**WELSH LANGUAGE**

*To deliver on the active offer we will continue to create a culture of change that removes the responsibility on service users to ask for a service through the medium of Welsh, ensuring that Welsh speaking individuals are treated with respect and dignity, asking them their preferred language and acting on it.*

The statutory responsibility of Local Health Boards and Local Authority Social Services Departments to ensure that peoples’ well-being outcomes are supported, and that their care and support needs, including their language need, are accurately assessed and met, will provide some significant challenges within certain local authorities, where the Welsh Language is not as widely spoken. Providers will also need to be able to recruit Welsh speakers in order to meet the needs of those accessing their services and providing the Active Offer as set out in More than Just Words and the Welsh Language Act.

A continued approach to actively promoting the use of the Welsh language and culture supporting staff to develop their Welsh language skills, creating the right environment where staff feel confident in using the Welsh language irrespective of their skills level and ensuring that language needs of individuals is an integral part of safe high-quality service provision.
INTEGRATION

We will support workforce requirements and demands in the redesign and delivery of services, taking a proactive approach in managing change across the sector, leading workforce redesign across the social care and community health sector

Integrated Working / Multi-Disciplinary / Upskilling & Workforce Flexibility – Whilst there are a number of approaches on delivering integrated services, this strategy focuses on those areas as detailed in Part 9 of the Social Services & Wellbeing (Wales) Act

The key aims of cooperation, partnership and integration are described as follows:

- To improve care and support, ensuring people have more say and control.
- To improve outcomes and health and wellbeing.
- Provide co-ordinated, person centred care and support.
- Make more effective use of resources, skills and expertise.

As The North Wales Regional Partnership Board we are required to prioritise the integration of services in relation to:

- Older people with complex needs and long term conditions, including dementia.
- People with learning disabilities.
- Carers, including young carers.
- Children with complex needs due to disability or illness.

The NWRPB has set out to deliver an ambitious programme that continues to build on the established partnerships and further develop integration opportunities.

INFORMATION, ADVICE & ASSISTANCE

We will support the development and training of Information, Advice and Assistance staff ensuring they are qualified, knowledgeable, competent and confident in undertaking the right conversations and providing advice and assistance
Information, Advice and Assistance Including the need for the Increased Knowledge Of Community Resources – The increased demand on the provision of community based services to support the preventative agenda is required in order to meet future demands on services, knowledge of these services will be paramount in signposting people to access services independently and meet their low level needs, in some local authorities Single Point Of Access provisions has embraced this by including a voluntary sector staff member within their teams.

COMMUNITY CONVERSATIONS AND STRENGTH BASED APPROACHES

We will work with National and Regional Programmes to develop a suite of training, information and tools that supports the embedding of this cultural shift across the sector

COMMUNITY CONVERSATIONS approaches aim to support and empower citizens to keep their independence, remain living in their homes for longer and achieve outcomes that are important to them. It is a preventative approach that strengthens a person’s resilience and seeks to avoid future crises. It reaches out to local people, encouraging them to be involved and ensures they are treated as equals.

STRENGTH BASED APPROACHES including outcomes focused, active listening, analysis of information and difficult conversations – The Strength Based Approach focuses on what the individual can do both in terms of their skills and resources. Changing the traditional approaches which has been based on a model of care management and the prescription of services with elements of strength based approaches which appears to have created an element of dependency on services as oppose to one where they will need to work in collaboration with service users, with the aim that practitioners establish and acknowledge the capacity, skills, knowledge, network and potential of both the individual and their local community. This is a major cultural shift across services whereby services will need:

- To have greater knowledge and awareness of community resources
- Time to prepare for assessments, skills in supporting self-assessment and third party assessments
• Changing expectations of those accessing services where the assessment is a collaborative process with the individuals.

• Broadening and embedding the skills required to have outcomes based conversations and support implementation of the National Outcomes Framework, requiring a significant cultural shift across the health and social care workforce.

• Integrated Assessment documents across health and social care have been developed to support a new assessment process based on collaborative conversations with individuals.

### COMMISSIONING & CONTRACTING SKILLS

**We will work with the sector to audit the training needs of commissioning and procurement practitioners and identify their training requirements.**

Outcomes based approaches will require skills development across health and social care staff, in particular for commissioners, procurement practitioners and legal advisers, reviewing & monitoring officers.

We will also require new models for securing services and changes to delivery across the independent and third sectors; co-productive commissioning will require different relationships and a commitment from both commissioners and providers to maximising the voice and control of ‘service users’ in planning and delivering how care and support will support them to achieve their wellbeing outcomes.

The financial and workforce crises within care home and the domiciliary care sectors are recognised both nationally and regionally and there are a number of programmes that are being implemented to address these difficulties.

### SOCIAL VALUE BASED PROVISION

**We will support the Regional Social Value Business Forum to support social value based (social enterprise, co-operative organisations & arrangements, user led and third sector) providers to develop a shared understanding of the common agenda, and to share and develop good practice, including where there is the opportunity to develop social enterprises and mutual cooperatives.**
Workforce development will need to ensure that the workforce supporting the development of such businesses have the relevant skills and access to support through the partnerships. Such as experience in the development of social value businesses, business acumen, accessing funding and understanding the human resources needs including skills, knowledge and competencies.

The Wales Cooperative Centre in their report “Getting Social Business in on the Act” says the benefits of working with social businesses are:

- Social businesses firmly place people using services at the heart of the service design and delivery….This often results in a better quality, well-targeted service.
- They are businesses anchored in their communities.
- Investment in a social business stays in the community and will be recycled for wider economic and social benefits;
- Employees of social businesses are more motivated by having a direct voice in the running of the business;
- As businesses they reduce costs and improve efficiencies, for example, through increased staff satisfaction and reduced absenteeism;
- As businesses sitting outside of the public sector, social businesses can access a wider range of resources, support and funding;
- Social businesses can release the entrepreneurialism that exists in the public sector and its workforce. They have freedom to be more flexible, innovative and responsive

**ADVOCACY**

**Advocacy (Assessing the Need)** – The Social Services and Well-being (Wales) Act, Part 10 Code of Practice (Advocacy) requires practitioners to have significant skills and responsibilities to be confident in assessing the individual’s needs for advocacy and in the provision of advocacy, as detailed in the code as follows:

- people’s choice to have someone to act as an advocate for them
- a clear framework to support and empower individuals to make positive informed choices
- a clear recognition of the benefits of advocacy
- the range of advocacy available to people
- the key points when people’s need for advocacy must be assessed
- when independent advocacy must be provided
- the circumstances that impact on peoples need for advocacy
- the circumstances when it is inappropriate for certain people to advocate
• the arrangements for publicising advocacy services and charging

SPECIALIST SKILLS

There are a number of service areas that will require specialist training, skills and competencies such as Dementia Care for Adults and enhanced skills in supporting Looked After Children with complex care needs; these are identified through local authority leads.

BETSI CADWALDR UNIVERSITY HEALTH BOARD WORKFORCE PRIORITIES

BCUHB have identified a number of key workforce themes through both their strategic and operational plans we will work together to align our approaches, in terms of the community health workforce and in particular where there is a social care and health interface.

The strategic priorities for Workforce and Organisational Development for Betsi Cadwaladr University Health Board are stated under four strategic themes of:

1. Achieving cultural change to that which better support staff and through them the patients we serve.
2. Planning for and attracting the staff we need to deliver services now and in the future.
3. Ensuring that the staff resource is deployed and used as effectively and efficiently as possible.
4. Ensuring that staff have the skills necessary to fulfil their roles.

Some of the key workforce themes identified by the Service Areas in their 2017/18 operational plans:

- Efficiencies in bank, agency, locum use
- Skill mix changes
- Shifting of the workforce from acute to community (development of Community Resource teams)
- Development of localities - new models of delivery and employment models being developed
- Development of Advanced Practitioners to support the Medical workforce shortages

The organisation’s Operational Plan is aligned to our Workforce Strategy which is being progressed with a focus on developing our staff to deliver healthcare closer to patients’ homes through integrated working across health, social care, Independent sector and the voluntary sectors. A corresponding shift in workforce skills is therefore required to meet this demand and support the changes to the way services are to be provided. This shift is also supportive of the agenda within the Social Services & Wellbeing (Wales) Act 2014.

Over the next 3 years we will develop a more flexible, sustainable and skilled workforce who will support the delivery of transformational change both within the area teams, independent sectors and wider unscheduled care divisions. We will develop rewarding and fulfilling career pathways for our workforce and the independent practitioner workforce with an aim to further improve recruitment, retention, training and engagement of our staff. There will be a move towards more generic, interchangeable professional roles which reflect the demand for more efficient and effective, patient-centred clinical care pathways, which are underpinned by the ‘Prudent Healthcare’ principles.

Organisational Recruitment Challenges and approaches

There are substantial areas of shortage within the registered nursing workforce which is a significant challenge for the Betsi Cadwaladr University Health Board (BCUHB) and across the National Health Service (NHS) both; the ability to attract potential nurse applicants is one of the biggest challenges for the organisation.

These supply and risk issues facing the workforce is providing opportunities for the Health Board to drive alternative approaches to recruitment across North Wales, the United Kingdom (U.K) and overseas, so that the health board can maintain services and ensure quality of patient care.

The recruitment of both registered and non-registered nursing staff is a vital component in the delivery of safe, effective, patient focussed care within North Wales. In order to achieve this, there are plans in place in taking a more streamlined, collaborative approach to nurse recruitment which includes encouraging student nurses to take up nursing positions as well as recruiting experienced nurses, within BCUHB.

This approach will also align to the proposed “student streamlining” approach as advocated nationally by the Workforce, Education and Development Services (WEDS) and the NHS Wales Shared Services Partnership (NWSSP) to align student nurses to nurse vacancies prior to qualifying,
in order that on successfully registering with the Nursing and Midwifery Council (NMC) they can immediately take up these posts.

Collaborative working between all agencies, including nursing, the Universities, shared services and workforce is proving successful and is essential so that the recruitment process is as effective and streamlined as possible.

It is a requirement, as part of the organisation’s Integrated Medium Term Plan (IMTP) annual submission to Welsh Government, that we identify the anticipated future training requirements for our health professionals and that we detail the education commissioning training places required by the Health Board, to ensure a sufficient future supply of healthcare professionals to deliver healthcare services for the population of North Wales. This covers Doctors, Nurses, Midwives, Allied Health Professionals (AHP), Healthcare Scientists (HCS), Psychologists and Pharmacists. This year submissions have increased substantially for Nursing and some AHPS thus supporting the recruitment gaps in the mid to long term.

**Changes in the way we deliver services**

We will work to reconfigure services and ensure effective commissioning, in the context of the Social Services and Wellbeing (Wales) Act 2014, the Future Generations Act 2015 with ongoing work being led by the North Wales Regional Collaboration Team. The programme is linked to the Pooling of Budgets arrangements and Effective Workforce Planning discussed above.

The programme of work is long term, requiring whole systems redesign, and will exceed the one year plan for 2017/18 and will lead into the development of a proposal for future commissioning of care outside hospital

We will work to develop more sustainable primary care services, ensuring management of risk and the development of primary care federalisation opportunities

In line with the Social Services and Well-being (Wales) Act 2014, we will develop in partnership with Local Authorities a plan for the pooling of budgets via the Regional Partnership Board – initially focused on requirement to have pooled budgets for Care Homes.
The NWRPB is committed to the delivery of sustainable and improved health and well-being for all people in North Wales through a set of Guiding Principles which the NWRPB has agreed which are:

- Whole system change and reinvestment of resources to a preventative model that promotes good health and well-being and draws effectively on evidence of what works best
- Care is delivered in joined up ways centred around the needs, preferences and social assets of people (service users, carers and communities)
- People are enabled to use their confidence and skills to live independently, supported by a range of high quality, community based options
- Embedding co-production in decision making so that citizens and their communities shape services
- We recognise the broad range of factors that influence health and well-being and the importance of the links to these areas (including education, housing, welfare, reduced homelessness, economic growth, regeneration, leisure and the environment)

The shared vision sets out the strategic intentions of the board to work collaboratively and supports the guiding principles of the NWRPB

We have a joined up approach that supports workforce training and workforce development across the sector
We are committed to joint approaches that support the retention and recruitment of the social care and integrated health workforce
We will bring together resources both funding and people to deliver the priorities set out in the North Wales Workforce Strategy, to ensure that resources are used in the most cost effective way to meet the needs of a sustainable and qualified workforce.
OPERATING PRINCIPLES

The strategy is owned by the Regional Partnership Board, which will hold partners to account for its delivery and ensure that workforce initiatives are developed to meet the priorities and operating principles.

The Partnership Board will review targets and performance measures (including relevant National and Regional Performance indicators) identified in the implementation plans to ensure the strategy is having its intended impact.

All partners will seek agreement from the Regional Partnership Board for any key changes related to the strategy.

DELIVERY & IMPLEMENTATION

- An implementation Plan for each strategic theme
- Approach to align and influence existing programmes where appropriate

The North Wales Workforce Board agreed that for each of the strategic themes task and finish groups are established to develop detailed business plans for each of the strategic themes.

The workforce board is keen to ensure that the implementation programme uses existing groups to undertake tasks where appropriate and where there is capacity, this includes the ability to influence and align with National and Regional Programmes such as the Social Care Wales Business Plan and does not create additional groups where this is not necessary.

NORTH WALES WORKFORCE STRATEGIC PRIORITIES

STRATEGIC PRIORITY 1 - STABILISING THE WORKFORCE

To respond to the challenges and deliver the services we need both now and in the future we have identified 3 strategic themes.
Recruitment and retention remains challenging for the sector and this will continue as the demand for a highly skilled, flexible workforce continues to grow. Recognising we are recruiting staff from the same pool and understanding how we can better work together to stabilise the workforce, will enable us to meet demand whilst also ensuring that staff are valued and that health and social care is a great place to work.

**Betsi Cadwaladr University Health Board**

The introduction of the BCU HB Recruitment Attraction Strategy in 2016 to promote North Wales and its lifestyle factor, location to mountains, lakes the seaside, towns and cities have proven to be successful in the following ways:

- Developing the North Wales NHS Brand and including the Welsh Government Campaign Train Work Live - North Wales (locally providing the work life balance and training culture of the Health Board)
- Provided guidance to hiring managers through advert templates, checklists and recruitment training
- Updated the ‘Working for Us’ page on the internet for external candidates a one stop shop for information on local information and direct link to TRAC
- Suite of associated marketing materials to support the North Wales brand.
- Development of a bespoke recruitment web site.
- Attendance at Job Fairs and actively promoting the organisation across UK and Ireland.
- Support careers events in order to promote BCUHB
- Development of video resources to promote the organisation.
- Developed the Step into Work programme to provide volunteer work placements for a range of the population who are furthest from the job market, including young people not in education or employment, people claiming job seekers allowance and people who have a learning disability.

**STRATEGIC PRIORITY 2 – LEARNING & DEVELOPMENT**

We will need to assist the workforce at all levels to understand and apply different approaches that put people at the centre, learning and development will need to focus on embedding the cultural changes required to meet the requirements of the act, it will also need to consider greater participation and drive in delivering co-produced services across partnerships and regionally achieving a cultural shift that should not be underestimated.
Within North Wales our aim is to develop a workforce across the sector that has the skills, knowledge and competencies to deliver high quality personalised services. There are a number of National activities including The Review of Qualifications in the Health and Social Care – Qualifications Wales July 2016 and the Social Work Review as well as potential changes in the way in which funding is administered for the Social Care Workforce Development Programme Grant, that we will need to work with going forwards.

Betsi Cadwaladr University Health Board

The organisation’s shift in focus requires appropriate training and education to develop new skills and competencies and underpin new ways of working. Aligning the workforce to service need, developing teams with the right skill mix of staff, and more effective team working, are fundamental workforce objectives underpinning the successful achievement of service requirements.

Development of additional skills for extended roles and investing in skills for primary care and community settings will provide further focus for the organisation, so that we can reduce the barriers between the health and social care workforce.

We will seek to ensure that staff have the skills necessary to fulfil their roles through:

- Clinical Manager Development – We will accelerate the roll out of the Generation 2015 Ward Manager programme to ensure that all ward managers have the management and leadership skills and competencies to be effective in their roles as clinical leaders.
- Cluster lead development programme.
- Step into Management Mandatory Training programme for Managers
- Mandatory and Statutory training.
- Bilingual skills strategy – We will implement and monitor compliance with our Bilingual Skills Strategy as an enabler to support the delivery of high quality care and compliance with the Welsh Language Standards.
- Performance Appraisal and Development Review (PADR) – We will work to ensure that all staff have a PADR to receive feedback on their work and to discuss how they might be further developed.
- In line with the Social Services and Wellbeing Act (Wales) 2014, embed a culture within the organisation which promotes independence and self-sufficiency and listens to what matters to individuals.
**STRATEGIC PRIORITY 3 – WORKFORCE INTELLIGENCE & PLANNING**

Consistency of data and information for workforce planning remains challenging both nationally and regionally with the different data sources across organisations, there is an opportunity to agree a basic data set which would inform future planning.

**BETSI CADWALDR UNIVERSITY HEALTH BOARD**

By 2018/19 further work is required around workforce planning in the care home sector and will need to align to regional workforce planning underway both within the Health Board and regionally with Partners as well as the implications of pooled budget arrangements from 2018/19 onwards.

We will build on the initial primary care workforce plan (November 2016) to address current workforce challenges and support new models of multi-disciplinary working at cluster level.

**THIRD SECTOR WORKFORCE INTELLIGENCE**

Through the development of this strategy we are aware that securing workforce data on the Third Sector is an area which we would want to improve in the future. The expectation on the Third Sector in delivering preventative and community based services, needs to be considered as part of our future workforce planning.
## STABALISING THE WORKFORCE

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
</tr>
</thead>
</table>
| Stabilising the Workforce | • Recruitment and Retention within the commissioned health and social care sector  
• Development of Career Pathways across Health and Social Care  
• Regulation & Registration of the commissioned care Workforce | • Development of Apprenticeship and vocational routes  
• Regulation & Registration of the commissioned care Workforce  
• Looked After Children | • A coordinated and regional approach to the retention and recruitment of staff across the regional partners.  
• Effective joint working established across Workforce Board Partners, & Commissioning Boards & North Wales Economic Ambitions Board to support volunteering, work placements, employment & training of NEET and economically inactive individuals.  
• A multi-agency recruitment and retention initiative linked to the Care and support at home strategy |

Recruitment and retention remains challenging for the sector and this will continue as the demand for a highly skilled, flexible workforce continues to grow.

Recognising we are recruiting staff from the same pool and understanding how we can better work together to stabilise the workforce, will enable us to meet demand whilst also ensuring that staff are valued and that health and social care is a great place to work.

The care and support at home strategy places an expectation on the Regional Partnership Board to:

- work as equal partners with their communities, voluntary and independent sectors
• look at how they can develop capacity within communities to better support carers and vulnerable people

• use the population needs assessments to decide what needs to happen.

The Regional Partnership Board have committed to a programme whereby we work as a region with the sector to “Maintain a sustainable Provider market across North Wales through a number of programmes including workforce”

• A multi-agency approach to the promotion and marketing of career opportunities across the social care and health sector. Provide

• The North Wales Region is prepared and informed for the registration of the wider workforce
LEARNING & DEVELOPMENT

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Learning &amp; Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEAR 1</td>
<td>We will need to assist the workforce at all levels to understand and apply different approaches that put people at the centre, learning and development will need to focus on embedding the cultural changes required to meet the requirements of the act, it will also need to consider greater participation and drive in delivering co-produced services across partnerships and regionally achieving a cultural shift that should not be underestimated. Within North Wales our aim is to develop a workforce across the sector that has the skills, knowledge and competencies to deliver high quality personalised services. There are a number of National activities including The Review of Qualifications in the Health and Social Care – Qualifications Wales July 2016 and the Social Work Review as well as potential changes in the way in which funding is administered for the Social Care Workforce Development Programme Grant, that we will need to work with going forwards.</td>
</tr>
<tr>
<td>YEAR 2</td>
<td>Social Care Workforce Development Programme (SCWDP) Develop a joint training framework for health and social care “What Matters” re-launch Provide a range of training materials and information sessions to develop their competencies including: Delivering Outcomes Commissioning for outcomes Community led conversations Strength based approaches Maximising sector and regional resources Leadership OT CPEL Develop Partnerships with FE and HE</td>
</tr>
<tr>
<td>YEAR 3</td>
<td>Co-Production / Social Value</td>
</tr>
<tr>
<td>OUTCOMES</td>
<td>Influence the future grant administration reflecting the needs of the North Wales Region Through a confident, engaged, motivated, knowledgeable and properly skilled workforce to support integration Social care and health workers understand and have the knowledge to confidently undertake their work based on the principles of the Act The social care and health workforce have a wide range of competencies to deliver outcomes and strength based approaches</td>
</tr>
</tbody>
</table>
## WORKFORCE INTELLIGENCE AND PLANNING

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Intelligence and Planning</td>
<td>Development of the collation of consistent and robust data for workforce planning</td>
<td>Use of consistent and robust data to predict long term workforce flow</td>
<td></td>
<td>There is consistent data across the North Wales Social Care &amp; Health Sector, providing informed workforce planning &amp; development.</td>
</tr>
</tbody>
</table>

Consistency of data and information for workforce planning remains challenging both nationally and regionally with the different data sources across organisations, there is an opportunity to agree a basic data set which would inform future planning.