



Gofal Cymdeithasol **Cymru**
Social Care **Wales**

Development of a workforce strategy for health and social care

Specification – Appendix 1

Section 1 – Background

Social Care Wales was established (under the Regulation and Inspection of Social Care (Wales) Act 2014) in April 2017 bringing together social care workforce regulation, workforce development and service improvement in one organisation. We have an influential role in shaping research priorities and building strong links with stakeholders to improve care and support. Social Care Wales also has a responsibility for the development of the workforce in the social care and early years sector. Our work aims to support the priorities for the well-being of future generations for the sector, the public and Welsh Government. Our three strategic aims define what we do: providing public confidence, leading and supporting improvement and developing the workforce.

Health Education and Improvement Wales was established 1 October 2018 as the eleventh NHS Wales organisation. As a Special Health Authority, Health Education and Improvement Wales (HEIW) 2019 sits alongside the Health Boards and Trusts in NHS Wales and has a leading role in the education, training, development and shaping of the healthcare workforce in Wales; supporting high quality care for the people of Wales.

In 2018 Welsh Government published *A Healthier Wales: our Plan for Health and Social Care* which sets out its long-term vision of a *'whole system approach to health and social care'*.

This plan also sets the intent for *'Health Education and Improvement Wales and Social Care Wales to develop a long-term workforce strategy in partnership with NHS and Local Government, the voluntary and independent sectors as well as regulators, professional bodies, and education providers.'*

A Healthier Wales was published as a response to the Welsh Government's Parliamentary Review of Health and Social Care in Wales. The final report of the Parliamentary Review contains a number of high level recommendations and was published following a period of extensive engagement with a wide range of stakeholders and as such, a large volume of information on issues facing the workforce is already available.

Discussions between SCW and HEIW have led to the development of an expectation for the development of a workforce strategy for health and social care in Wales and an approach that can start detailed engagement through conversations, debates and consultation and end with a robust workforce strategy.

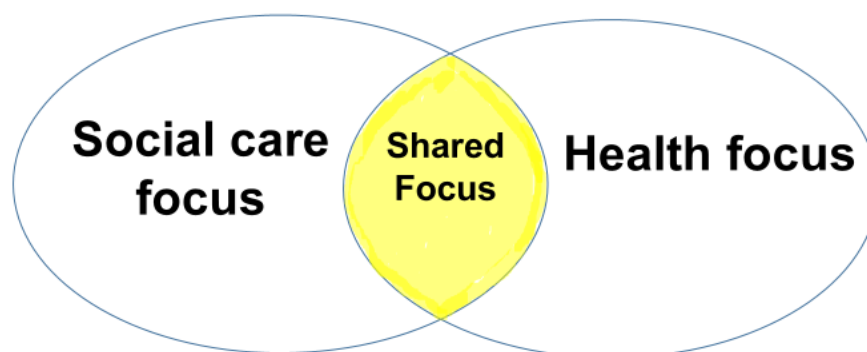
The expectation is that the workforce strategy takes into account the the ambition set out in *A Healthier Wales* to:

“Develop a new Workforce Strategy for Health and Social Care in Wales which includes planning for new workforce models, strengthening prevention, well-being, generalist and Welsh Language skills, developing strategic education and training partnerships, supporting career long development and diversification across the wider workforce”

The health and social care workforce is extremely complex, consisting of a diverse range of roles, working in an equally diverse range of settings both within the statutory sector and beyond. There are key differences between workforces in the two sectors – a large proportion of the social care workforce is employed and managed by the independent and private sectors, whilst the NHS has a greater range and variety of professional and occupational roles. There is also a distinct difference between the “paid” social care workforce and the contribution made by carers who may be family members or relatives and also volunteers. This distinction has to be clearly recognised with their contribution and needs taken into account.

This complexity reinforces the need for a workforce strategy that is flexible and acts as a platform that enables a whole system approach to developing workforce plans for professional groups, geographical areas, services and systems but equally allows for sectoral differences to be recognised and progressed accordingly. For example, in some parts of the system we want to plan a workforce model that is seamless between health and social care – a priority within *A Healthier Wales*, however, this is not the only workforce priority for either the NHS or Social Care and it is important that the workforce strategy recognises this.

A Healthier Wales – A shared focus



The aim is to produce a workforce strategy which will define a clear 10-year strategic intent and act as a framework for the development of the workforce across both health and social care and that can be applied universally to inform and align workforce strategies and plans for:

- Regional Partnership Boards
- Individual professional groups
- Services
- Care settings
- The whole workforce across statutory, voluntary and independent settings, including the paid and unpaid workforce
- Unions

The workforce strategy will also need to be built on the principles contained within *A Healthier Wales*:

The **workforce of the future** will be defined by new models of integrated health and social care, which are based upon evidence of good practice and sustainability, to deliver better health and well-being.

To be effective in planning the future workforce, a clear understanding of **the current workforce** is required including challenges of maintaining and sustaining current service supply with an understanding of the required changes in skills mix to support new models of delivery

Needs will be met based upon who is best placed to provide the care not solely directly employed or contracted staff. This will include workers who are employed outside of statutory health and social care organisations e.g. housing associations, independent and voluntary sector.

The role of **unpaid carers** will be better supported, to ensure they have the knowledge and skills to continue caring and that their own well-being needs are considered.

There will be **parity of esteem** between all health and care professionals, who have similar levels of responsibility and accountability.

The **health and well-being** of staff will be designed into workforce and service models, including support to better manage demand, through service re-design.

Education, training and development must **evolve and diversify** to support a multi professional approach, an increased focus on prevention, early intervention and the delivery of care across settings from home, primary and community through to hospital and specialist provision

Changing expectations of work and careers must drive **increased flexibility in** work patterns, education, training, career pathways and workforce models to improve recruitment and retention. This will maximise opportunities arising from part time learning and working, digital technology and new ways of delivering treatment, care and support.

Increased flexibility will require an understanding of how the workforce is **currently deployed** and measures that can be taken to strengthen deployment approaches which maximises the mobility and flexibility of the workforce in meeting shifting service demands

Prudent principles will be used to ensure that staff are supported to work at the top of their competence and to drive the expansion of generalist skills.

A whole system **collaborative** approach will be taken to aligning workforce planning, recruitment and career pathways across health and social care to avoid competition and de-stabilisation.

Section 2 – What is required?

The objective of this contract is to develop a workforce strategy for health and social care, in line with the principles set out in A Healthier Wales, which is an ambitious, permissive and practical framework that underpins integrated workforce planning and organisation development across both sectors. The workforce strategy will define a clear strategic intent for the next 10 years and will contain high level principles and expectations, underpinned by broad based actions for the short, medium and long term.

Indicative agreement has been reached on a number of key themes for the workforce strategy, but these will need to be tested through detailed engagement with key stakeholders, across the sectors. The key themes are identified below:



The importance of robust, comprehensive and detailed engagement cannot be too strongly emphasised, if the intent of the workforce strategy is creating a shared focus that recognises the complexities between the two sectors and ultimately creates total ownership by those who are best placed to affect change. However, there will need to be consideration of the large amount of information already collected as part of the

Parliamentary Review of Health and Social Care in Wales and a need for a review of existing information and views prior to any further engagement taking place.

In addition to the principles identified in *A Healthier Wales*, there are other principles that will need to underpin the development of the workforce strategy by the successful supplier. The workforce strategy will need to be:

- Concise on narrative and clearly articulated for both sectors
- A practical framework containing high level principles, supported by broad based actions
- A gap analysis between what is currently in place and what is needed to inform the future
- Clear about lines of responsibility i.e. who is doing what to support the strategy
- Clear in the links to other strategies, policies, including other sectors e.g. housing, early years, employment, education and skills etc.
- Focussed on the workforce; what is needed, improvement and how the workforce strategy can align with the quadruple aim (as set out within *A Healthier Wales*)

Section 3 – Expected Outputs

The supplier will deliver the following outputs in two phases:

Phase One

- A project plan that identifies the work required to deliver the outputs and that meets the expectations for sign off by the steering group
- Review existing information on the workforce e.g. gathered as part of the Parliamentary Review, published etc.
- Deliver a programme of engagement opportunities across the health and social care sectors, considering innovative ways to involve as many people and stakeholders as possible, with as little time commitment as possible and across all defined regions within Wales.
- A profile of the whole workforce across health and social care, including a numerical description of both the directly employed workforce, those employed in the private and independent sectors, independent contractors e.g. General Practice and the voluntary and carer workforce.
- A high-level description of the key drivers and issues/pressures facing the whole workforce e.g. age profiles, part time working, gender, skills demand etc.
- Horizon scanning to identify the key strategic impacts on the future workforce including an estimation of the potential impact on future workforce numbers
- A gap analysis of current activities being undertaken at national, regional and local level across the whole workforce and the foreseeable impacts on the whole workforce over the period of the workforce strategy that will help shape the high-level action plan.

Phase Two

- An initial draft workforce strategy, based on a number of key themes and high-level principles and associated broad based actions for the next 10 years which can be used for consultation
- A final draft workforce strategy, which is concise on narrative and clearly articulated for both sectors
- An equality impact assessment of the final draft workforce strategy

To deliver the outputs required, the supplier will be required to:

- Attend an initial project meeting to confirm the detail and arrangements for the work required
- Provide resources and engagement that is able to be delivered bi-lingual
- Review existing information to ascertain what further engagement is required to elicit views
- Engage with and capture the views from a wide range of key stakeholders including (though not exhaustively):
 - Welsh Government including social care, health, education and skills
 - People who use services and their carers
 - Regional Partnership Boards

- Association of Directors of Social Services (ADSS)
 - NHS Chief Executive Officers
 - NHS Confederation
 - NHS Director of Workforce and Organisational Development
 - Human Resource Directors within Local Authorities
 - Other NHS peer groups
 - Employers across the health and social care sector including statutory, private and voluntary and across children and adult services
 - Regional skills partnerships
 - Regional Planning Boards
 - National Provider forums
 - Welsh Local Government Association
 - Wales Partnership Forum
 - Wales Partnership Council
 - Wales Council for Voluntary Action (WCVA)
 - Local County Voluntary Councils (CVCs)
 - Further Education
 - Higher Education
 - Work Based Learning and other training providers
 - Care inspectorate Wales
 - Trade Unions
 - Department of Work and Pensions (DWP)
 - Job Centre Plus (including Care Champions)
 - Careers Wales and NHS Wales Careers
- Meet with the project lead as required and provide regular updates on progress against the agreed project plan
 - There may also be a need to attend a series of meetings with the steering group as part of governance processes. This may extend beyond the steering group who will steer this commission to various scrutiny mechanisms of both Social Care Wales and Health Education and Improvement Wales including consultation and launch events.

Section 4 – Timescales for delivery of the work

Phase of work	Date required
Meet with project lead	5 December 2018
Develop a project plan for sign off by the steering group	Mid-December 2018
Review of existing literature/information	Mid-January 2019
Complete programme of engagement with key stakeholders	February 2019 to March 2019
Draft workforce strategy	End of April 2019
Consultation and engagement	End of July 2019
Final draft workforce strategy including EQIA	End of Aug 2019
Workforce Strategy launched	Autumn launch date to be confirmed

Section 5 – How we work

Monitoring

The work will be commissioned through Social Care Wales Procurement processes and the lead contact for this will be Jon Day, Assistant Director – Workforce. However, this is a joint commission between Social Care Wales and Health Education and Improvement Wales

The Supplier's performance under the terms of the contract will be reviewed by a project/steering group on behalf of both Social Care Wales and Health Education and Improvement Wales. Performance will be measured against the specification and delivery timescales, with quality control measures agreed as part of the contract. The Supplier will be expected to meet and consult with the contract lead and the project's working group (as outlined in section 3).

Welsh Language

Social Care Wales is a bilingual organisation and aims to be compliant under its current Welsh language scheme and the forthcoming Welsh Language Measure (Wales) 2011 Standards. In responding to the Tender, Suppliers should consider how their services would support the bilingual ethos of the organisation and compliance with Scheme and Standards.

The Supplier is required to carry out any engagement activity bilingually. It is crucial that you must not treat Welsh language materials any less favourably than you treat the English language versions.

Social Care Wales will manage arrangements and associated costs related to Welsh language requirements such as evaluation tools; engagement activity including consultation templates, etc.

Tone of voice

Social Care Wales has a defined tone of voice for all its written work – one that is clear, easy to understand and easy to engage with. This ensures we use a consistent tone in all our written materials. If you are producing any written work for us, you will be expected to write it in our tone of voice and we will provide you with guidelines of how to do this. We reserve the right to ask you to re-write/amend the work to make sure it adheres to our tone of voice. A booklet explaining our tone of voice can be found as Appendix 3.

Whilst Health Education and Improvement Wales is a newly established organisation and, as such, does not yet have a defined tone of voice, the basic premise will be the same as that stated for Social Care Wales above.

Branding

Social Care Wales has a strong brand identity and this should apply to all materials produced within the project. We expect all materials produced to have a consistent look and feel developed within our brand guidelines. It is important that anyone using them recognise that they are part of a suite of materials. Brand guidelines and logo suite will be provided. A PDF of the guidelines can be found as Appendix 4.

Health Education and Improvement Wales also has their own brand identity. Both organisations brands will be considered in the development of any materials and/or events.

Data protection

Social Care Wales (data controller) requires you as the contractor (data processor) to:

- only act on the written instructions of the controller;
- ensure that people processing the data are subject to a duty of confidence;
- take appropriate measures to ensure the security of processing;
- only engage sub-processors with the prior consent of the controller and under a written contract;
- assist the controller in providing subject access and allowing data subjects to exercise their rights under the GDPR;
- assist the controller in meeting its GDPR obligations in relation to the security of processing, the notification of personal data breaches and data protection impact assessments;
- delete or return all personal data to the controller as requested at the end of the contract; and
- submit to audits and inspections, provide the controller with whatever information it needs to ensure that they are both meeting their Article 28 obligations, and tell the controller immediately if it is asked to do something infringing the GDPR or other data protection law of the EU or a member state.

In addition to its contractual obligations to the controller, under the GDPR a processor also has the following direct responsibilities:

- not to use a sub-processor without the prior written authorisation of the data controller;
- to co-operate with supervisory authorities (such as the ICO);
- to ensure the security of its processing;
- to keep records of processing activities;
- to notify any personal data breaches to the data controller (within 24 hours);
- to employ a data protection officer; and

to appoint (in writing) a representative within the European Union if needed.