
To: Renfrewshire Integration Joint Board

On: 25 November 2022

Report by: Head of Strategic Planning and Health Improvement

Heading: Final Draft of the Workforce Plan 2022-25

Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

1. Summary

- 1.1. In June 2022, the IJB approved a draft of the HSCP's Workforce Plan for 2022 to 2025, which was developed with partners across the Health and Social Care system. Following this approval, the draft was submitted to the Scottish Government in early July 2022 for review and comment.
- 1.2. The Scottish Government provided very positive feedback in early October 2022, which is summarised within this paper. The Workforce Plan has subsequently been reviewed and updated, and the HSCP has engaged with NHS Greater Glasgow and Clyde and Renfrewshire Council for any additional feedback on this version. This paper includes the final draft of the Workforce Plan 2022-25 for the IJB's review and approval.
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2. Recommendations

It is recommended that the IJB:

- Note the further updates made to the Workforce Plan;
 - Note that a more detailed delivery Plan with owners and key deliverables will be developed to support delivery of the Plan, once approved; and
 - Approve the attached draft of the Workforce Plan as the final version.
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3. Background

- 3.1. Workforce planning is a key priority for Renfrewshire HSCP and for organisations across the public sector. This recognises the existing challenges exacerbated by the pandemic and essential importance of prioritising staff health and wellbeing. Both locally and nationally,

organisations across the health and social care system continue to have challenges in recruiting and retaining staff and face a shortage of key skills and expertise. The workforce is also ageing, resulting in increased risk of capacity constraints and loss of knowledge and experience.

- 3.2. The Scottish Government previously set out its desired approach and timelines for the development of Workforce Plans within Health Boards and HSCPs. This included the development of interim Workforce Plans for 2021-22, which had an immediate focus on supporting the health and wellbeing of the workforce during the COVID pandemic.
- 3.3. Following this, it was expected that Workforce Plans for the period 2022-25 would need to be developed and in place for April 2022. However, these timelines were subsequently extended so that Workforce Plans should be completed and published by health boards and HSCPs by the end of November 2022.
- 3.4. The HSCP provided an update to the IJB in June 2022 which set out the additional guidance which had been published by the Scottish Government for the development of Workforce Plans, and in particular the reflection of the national ambition to deliver the recovery, growth and transformation of our workforce in coming years. In addition, it set out five pillars to guide workforce development actions: (i) Plan; (ii) Attract; (iii) Employ; (iv) Train; and (v) Nurture. These pillars provided the underpinning structure for the HSCP's draft Plan which was approved by the IJB in June 2022.
- 3.5. The draft Plan was submitted to the Scottish Government for feedback in July 2022, with this expected by the end of August. However, the last update provided to the IJB in September noted that this had been delayed, with feedback subsequently received in October. The following sections sets out a summary of this feedback and further updates which have been made to the Draft Plan as part of its finalisation.

4. Work undertaken to develop a final draft of the Workforce Plan

- 4.1. The feedback received from the Scottish Government was very positive and recognised the considerable work that the HSCP and partners undertook in developing the draft during a period of continued challenge and service pressures. The Plan was reviewed against the guidance previously issued by the Scottish Government, with a summary of the comments provided as follows:
 - The draft Plan is very well structured, with clear linkages to other local Strategic Plans and in the provision of the wider context in which the Plan will be delivered.
 - The narrative provided, and the assessment of the interim Workforce Plan which included the progress achieved and further actions required was felt to be valuable.
 - It was felt that the analysis of local population drivers was reasonably comprehensive, with the visualisation of workforce demographics felt to be clear and informative. The additional data provided in Appendix 1

was also seen as helpful, with a suggestion that more of this detail could be included in the main body of the Plan with further consideration of the projected replacement need across the three years of the Plan.

- The consideration in the plan of the implications for wider partnership workforce including primary care, independent and third sector workforces and unpaid carers was welcomed.
- The analysis of workforce projections provided in the Plan, indicating the roles and skills which will be required in the future workforce was felt to be detailed and providing an excellent base for further development. It was felt this section could have been enhanced by further quantification of the number of posts that will be required, however the feedback also recognised the commentary provided by the HSCP that this specific level of detail is not yet known.

4.2. Overall, whilst providing helpful guidance for further development of the HSCP's approach to workforce planning in future, this feedback did not necessitate any significant change to the draft Workforce Plan approved by the IJB. It was also recognised by the Scottish Government that the delay in providing feedback limited the opportunity for health boards and HSCPs to make changes to draft Plans prior to their publication by the November deadline previously set out.

4.3. Nevertheless, the HSCP has taken the opportunity to review the actions set out within the draft Plan to ensure that they are robust and deliverable. In doing so, a small number of actions have been refined to (i) remove overlap and duplication; (ii) merge actions where appropriate; and (iii) remove actions which appeared as statements rather than specific activity.

4.4. The final draft of the Workforce Plan, reflecting these minor changes has been discussed with Renfrewshire Council's Corporate Management Team (CMT) as required by existing governance arrangements, and presented to Renfrewshire's Staff Partnership Forum in advance of consideration by the IJB. The Plan has been well received. NHSGGC also confirmed that no further review of the Plan was required by the Staff Governance Committee further to previous discussions, with confirmation of the Plan though local governance arrangements appropriate.

5. Next Steps

5.1. Subject to the IJB's approval, an annual action Plan for the Workforce Plan will be developed setting out action owners, refined timescales and specific deliverables. This annualised approach is in line with that adopted for the IJB's Strategic Plan and reflects the continued uncertainty and challenges within the IJB and HSCP's operating context.

5.2. Regular updates on progress made in delivering the commitments within the Workforce Plan will be brought to future IJB meetings.

Implications of the Report

1. **Financial** – No implications from this report.

2. **HR & Organisational Development** – The Workforce Plan has been developed with input from HR and Organisational Development officers within NHSGGC and Renfrewshire Council. It sets out the related objectives and supporting actions that the HSCP and partners will seek to deliver between 2022-25. These will form the basis of annual action plans with agreed owners and deliverables.
3. **Community Planning** – The Workforce Plan considers the wider health and social care system rather than solely the HSCP workforce. The actions set out within should support the joint response to workforce challenges and support the development of health and social care services in Renfrewshire.
4. **Legal** – This paper supports delivery of the Public Bodies (Joint Working) (Scotland) Act 2014.
5. **Property/Assets** – No implications from this report.
6. **Information Technology** – No implications from this report.
7. **Equality and Human Rights** – No implications from this report.
8. **Health & Safety** – No implications from this report.
9. **Procurement** – No implications from this report.
10. **Risk** – Ongoing risks with regards workforce and recruitment and retention are regularly discussed within the IJB's Audit, Risk and Scrutiny Committee. The Plan will support the delivery of mitigating actions to manage these risks.
11. **Privacy Impact** – No implications from this report.

List of Background Papers: N/A

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Renfrewshire
Health & Social Care
Partnership



Shaping our workforce

Workforce Plan 2022 - 2025



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Foreword

An introduction from our Chief Officer and the Chair of Renfrewshire IJB

This is the second integrated Workforce Plan since the inception of Renfrewshire Health and Social Care Partnership (HSCP) in 2015. The HSCP workforce is employed by our two parent organisations, NHS Greater Glasgow and Clyde (NHSGGC) and Renfrewshire Council. However, the HSCP has delegated responsibility for recruitment, deployment, learning, educational development and attainment of professional qualifications.

Renfrewshire HSCP is committed to delivering positive outcomes for the wellbeing of the people of Renfrewshire. Our commitment to do this is set out in '[Shaping our Future](#)' - [Strategic Plan 2022-25](#) and is underpinned by our vision: "Renfrewshire is a caring place where people are treated as individuals and supported to live well". This Workforce Plan should be read in conjunction with the Strategic Plan, which sets out further detail on how our services will develop by 2025.



John Matthews OBE
Chair, Renfrewshire
Integration Joint Board



Christine Laverty
Chief Officer,
Renfrewshire HSCP

Our employees bring together a wide range of knowledge, experience, skills and talents. We are committed to supporting and developing them as they apply their strengths and talents within the Partnership.

In this Workforce Plan we have set out how we aim to make sure we have a workforce which is fit for purpose and is enabled to deliver to meet the current and future needs of those who rely upon our services. We have also sought to broaden this Plan to reflect the importance of the wider health and social care system in Renfrewshire in supporting local citizens. This sets the foundations for future closer working on workforce planning and development.

The Plan also sets out steps we and partners will take to anticipate future workforce needs, based on legislative requirements, changes in demographics, the impact of ongoing change implementation and in particular a shift towards the provision of more community-based health and care services.

We would like to thank everyone involved in developing this Plan. All of the organisations delivering care in Renfrewshire are people organisations, providing support for people, by people. We are immensely lucky to have such dedicated staff who, more than ever, have shown their commitment to the people of Renfrewshire they care for and support.

Introduction

Overview of our Services

Overview of Health & Social Care Services delivered by the HSCP and our partners

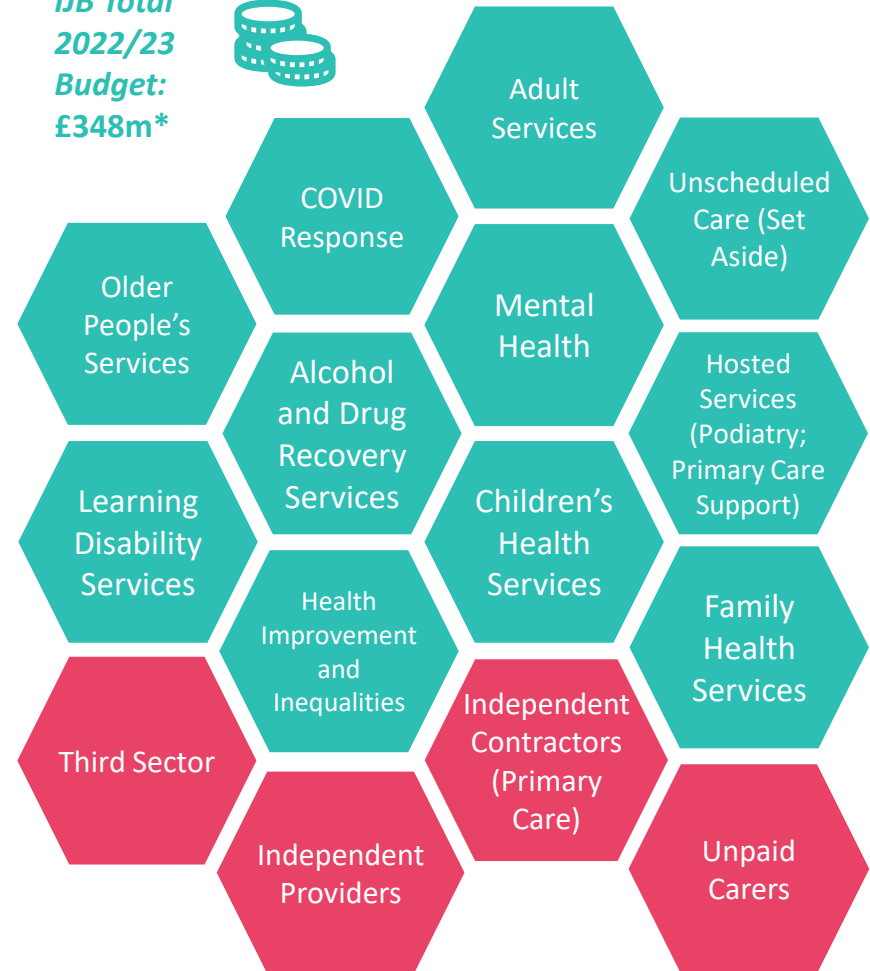
This Workforce Plan covers the breadth of integrated health and social care services delivered in Renfrewshire by the HSCP, independent contractors (such as GPs and Pharmacists), the third sector and independent providers. Together, we deliver adult social care services and all community health services for adults and children, with a core objective of shifting the balance of care from hospital settings to supporting people in their communities and closer to home wherever possible. Unpaid carers within Renfrewshire also provide crucial additional support to their loved ones which forms the bedrock of our local health and social care system.

The HSCP and partners work closely together to ensure that services are planned and delivered collaboratively and on a 'whole system' basis. This helps to ensure that people can access support that is joined up and shaped around them rather than by organisational structures.

The HSCP segments services into two geographical localities (Paisley and West Renfrewshire). Each has a Locality Manager co-ordinating a range of multi-disciplinary teams and services. In addition, our 28 GP practices in Renfrewshire operate within six clusters. Each contributes to overseeing the local healthcare system within their geographies.

We seek to reflect the different needs of our communities in how services are delivered. In doing so, we recognise the importance and value of working closely with staff-side (trade union) colleagues to ensure that our workforce is suitably shaped, trained and developed to meet these diverse needs.

**IJB Total
2022/23
Budget:
£348m***



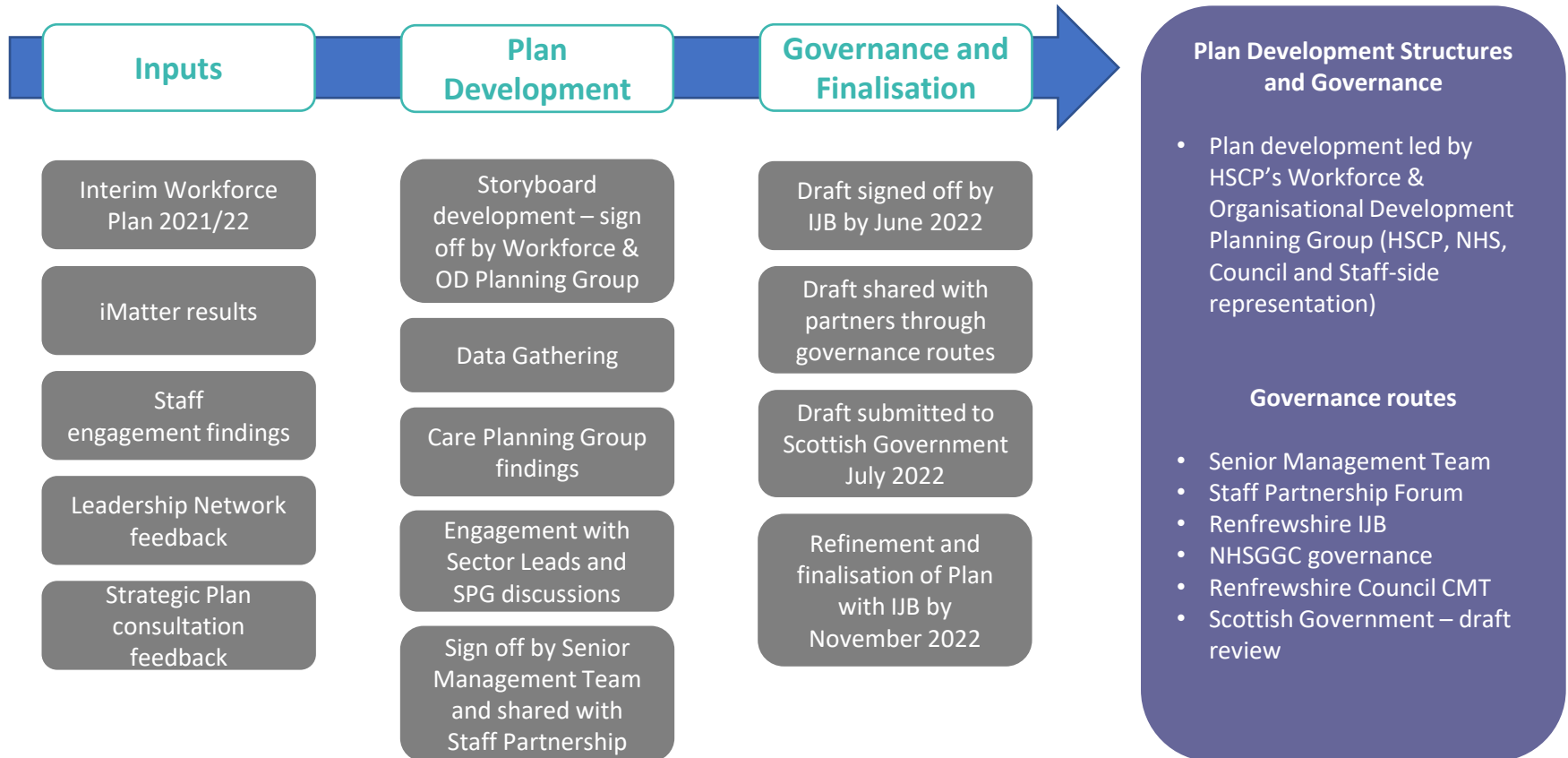
**rounded figure - projected at time of writing*

About this Plan

Our approach to developing the Workforce Plan

Developing this Plan

The priorities within this Workforce Plan have been developed through engagement with staff and partner organisations over a significant period of time. This includes activity to determine the impact of the pandemic on our workforce, the development of the HSCP's Interim Workforce Plan for 2021-22, and the subsequent development of the IJB's Strategic Plan for 2022-25. Our local Primary Care, Third Sector, Unpaid Carers and Independent Provider representatives have contributed to our identified actions. Each of these strands of activity have provided the foundations for the greater level of detail on our workforce and future objectives included in this Plan for the next three years. A summary of our approach is provided in the diagram below.



About this Plan

Developing a Workforce Plan amid uncertainty

Reflecting uncertainty in our Workforce Plan

This Workforce Plan, similarly to our new Strategic Plan for 2022-25, has been developed within a highly uncertain environment. This creates a range of challenges that we must address but also opportunities that we can seek to capitalise on to support the growth and development of our workforce.

As a health and social care system there are a range of factors which impact on what services we provide, and how we provide them, which are outwith the control of any single organisation. We aim to identify these influences at an early stage and plan our response to them as far as possible through our workforce, financial and strategic planning. At the same time, there are other factors which we can proactively shape and manage our approach to, and we are determined to use these to attract and retain the best staff within Renfrewshire.

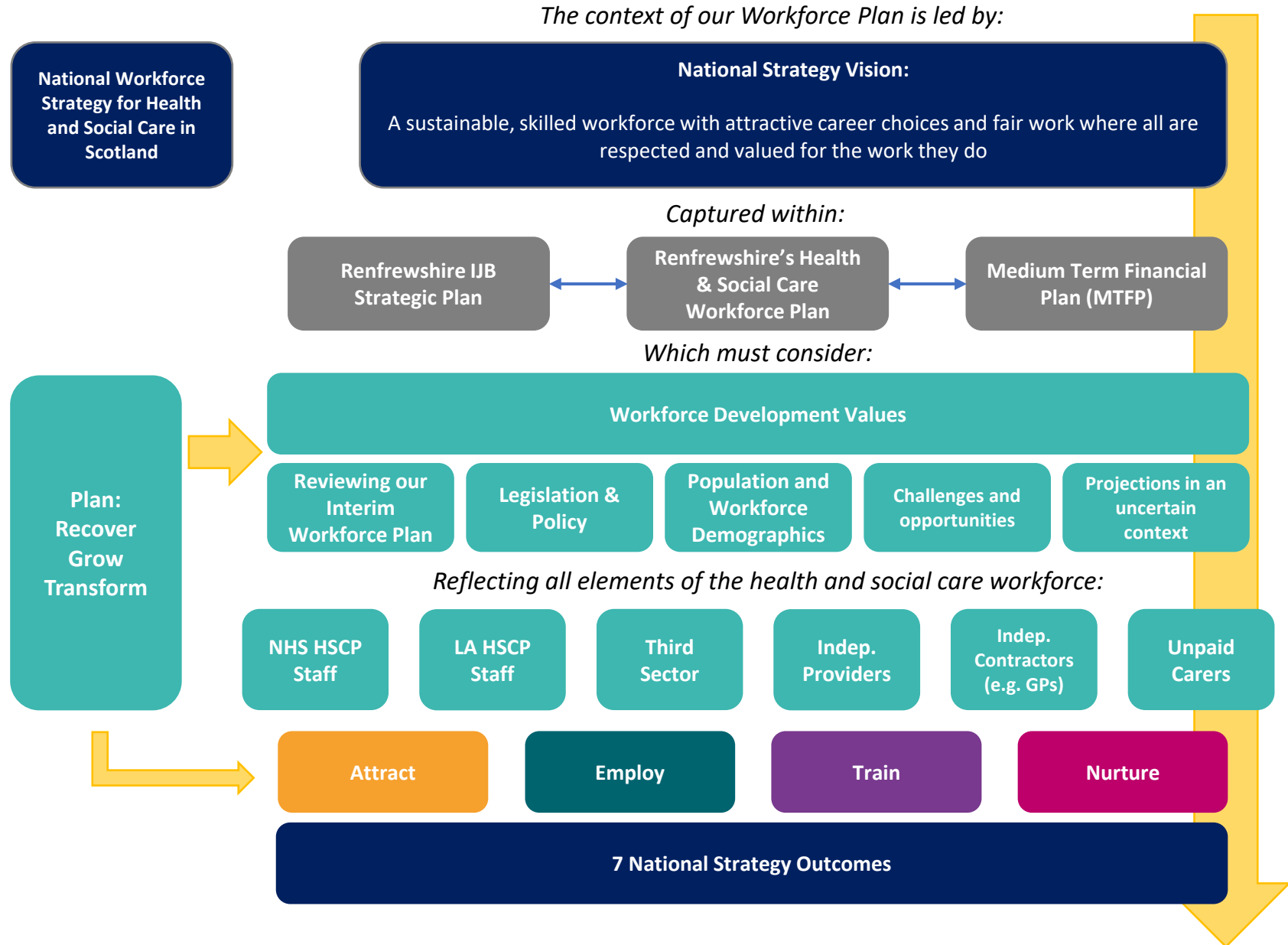
This Workforce Plan sets out how the HSCP, working with our partner organisations and staff-side colleagues, will seek to address these challenges in the next three years, individually, and working together. Our approach is aligned the new National Workforce Strategy for Health and Social Care and is summarised in our plan on a page.

Factors outwith our control that we must reflect



Our Plan on a Page

How the elements of our Workforce Plan fit together



The Strategic Context

Linking this Plan to the National Workforce Strategy for Health and Social Care

The Key Elements of the National Workforce Strategy

The Scottish Government published the National Workforce Strategy for Health and Social Care in March 2022, which can be found [here](#). The Strategy sets out the progress on developing the health and care workforce nationally which has been made to date, and a range of commitments to help achieve the Government's vision for the workforce. This vision is supported by an ambition to deliver the **recovery**, **growth** and **transformation** of our workforce. The diagram below sets out the key elements of the strategy which are reflected throughout our Plan.



The Strategic Context

Alignment with the IJB's Strategic and Medium Term Financial Plans for 2022-25

Alignment with the IJB's Strategic Plan 2022-25

Renfrewshire IJB approved its [Strategic Plan](#) for 2022-25 in March 2022. This Plan sets out the current context for our services, reflecting on the impact of COVID-19 and our recovery and identifying significant future changes which will arise from a National Care Service. Our Workforce Plan aligns with the life of the Strategic Plan and is informed by its objectives.

The Strategic Plan sets out five strategic themes that will guide our services in the next three years. Our delivery of these themes will impact on the shape of our services and how our workforce needs to develop. We have provided examples of some of the service changes proposed on this and the next page. These will impact on our workforce by:

- Focusing on prevention and early intervention and working differently with our communities.
- Shifting the balance of care to provide care in people's homes and local communities.
- Changing how we work with partners – recognising the importance of all parts of the health and care system working together.
- Giving choice and control to people and empowering staff to work differently to meet needs.
- Re-defining traditional services and staff roles within these to provide flexibility for people in where and how they are supported.

Examples of transformation and service development to be delivered through our Strategic Themes



- We will aim to shift support 'upstream' to prevent more serious needs. This will require a focus for staff working jointly with community-based organisations and supporting people with their health, wellbeing and lifestyle and tackling child poverty.
- We will tackle stigma through training and work increasingly closely with people with lived and living experience.
- We will develop frailty pathways between acute and the community – enhancing joined-up working.



- We will shift the balance of our spending by investing in the third and independent sectors and community-based provision close to people's homes.
- We will embed partnership models for collaborative commissioning to support a sustainable workforce.
- We will also support our unpaid-carers through an awareness campaign with partners to ensure they are aware of and able to access the support they need.
- We will strengthen links between community resources and Primary Care.

The Strategic Context

Alignment with the IJB's Strategic and Medium Term Financial Plans for 2022-25



- We will continue investing in additional roles within CAMHS and further modernise the nursing, midwifery and Allied Health Professions.
- We will embed multi-disciplinary working through the Primary Care Improvement Plan, Care Home Hub model, changes agreed under 'winter funding' and enhancing CAMHS pathways.



- We will recover and develop day services beyond existing provision to include flexible community-based models and enhance our approach to Self-Directed Support, and in doing so we will consider how roles will adapt to enable this.
- We will improve mechanisms and opportunities for people with lived and living experience to contribute to service improvement.
- We will improve links between Palliative Care support and provide training and information for staff across services.



- We will prioritise COVID recovery and develop detailed transformation plans, supporting our staff throughout.
- We will embed coproduction in service design and build on the success of partnership working during the pandemic – many of our roles will become increasingly collaboration focused.
- We will support the delivery of Moving Forward Together and the Social Renewal Plans.

Alignment with the Medium Term Financial Plan (MTFP)

Alongside the Strategic Plan, the IJB also approved its [Medium Term Financial Plan](#) for 2022-25. This supports our objective of aligning our core strategies to manage the linkages and dependencies between them as effectively as possible.

The MTFP outlines, in broad terms, the specific service and funding challenges and opportunities envisaged over the next three years. It also recognises the scale of the impact of COVID-19 and the extent of structural and workforce change that will be required to create and embed a National Care Service in future years.

Taking the identified challenges and opportunities into consideration, the Plan sets out how the IJB will work towards achieving financial sustainability and resilience through a rolling review of targeted savings opportunities and larger scale transformational activity. This will include reviewing and changing our service delivery models to meet changing demands and priorities and will have subsequent impacts on the nature of roles we require within the HSCP and the training and development that staff will require.

Some examples of the current challenges which impact on our workforce, and the changes that we are funding are set out on the following page.

The Strategic Context

Alignment with the IJB's Strategic and Medium Term Financial Plans for 2022-25

Financial Challenges

The Medium Term Financial Plan also identifies a range of challenges which can be financial, with impacts on the workforce, or vice versa. Our Workforce Plan will seek to address these although we recognise that many challenges are long-standing and will not be fully addressed in the lifetime of this Plan:

- Demographic and demand changes reshaping services.
- Recruitment and retention issues, alongside temporary funding requiring less attractive fixed term posts.
- Higher levels of staff absence and the impact of the pandemic on health and wellbeing.
- Fewer applicants for roles at all grades and a shortage of skilled staff for key posts.
- Varying rates of pay and conditions between HSCPs across NHS GGC.
- The impact of single year budgeting on the HSCP's ability to plan for the medium term.
- An uncertain financial outlook and a financial gap of up to £48m between 2022 and 2025, requiring additional savings.

Investing in Renfrewshire's Health and Social Care workforce – the impact of our MTFP for 2022-25



Committing to collaborative commissioning



Investing in CAMHS waiting list coordinators to address pressures



Creating an HSCP in-house training academy



Delivering the Adult Social Care pay uplift



Investing in Health Improvement posts to address inequality



Developing additional Change and Policy roles to support transformation



Investing in Nursing and AHP as part of Transforming Roles



Funding community initiatives to improve health and wellbeing



Forecasting increased % spend with the third and independent sector



Plan

Plan: Our Values for Workforce Planning

Setting out the key values for how we will develop our workforce

Plan

SG National Strategy Values

On page 8 of this Workforce Plan, we identified the **five values** the Scottish Government have defined to underpin the national strategy's vision for the health and social care workforce. These are described further below.

Continual Improvement

Keep learning, adapting what we find, and improving.

Engagement

Work across organisational boundaries to better understand workforce needs, resourcing and solutions.

Honesty

Be clear and honest about what we are able to co-design, our constraints and our priorities.

Co-design

Create an environment which allows and supports people to take part in co-designing services and the workforce to deliver those services.

Accountability

Be transparent and report on how we involve others in workforce decisions.

Renfrewshire's Additional Values

The Scottish Government's values echo Renfrewshire's approach and will be embedded throughout the implementation of this Workforce Plan and beyond. We have also identified further values which are representative of the way in which we work. These are set out below. Together with the national strategy values, they provide the foundation for how we will work together as a sector to develop a sustainable workforce.

Evidence-based

We seek to continuously develop and enhance our available workforce data to inform robust decision-making and support the monitoring of our progress.

Flexibility

We support our workforce to develop the core skills which support flexibility in delivery – meeting the needs of individuals through person-centred care which may be less structured than traditional models.

Growing our own

We create the capacity and support mechanisms to enable us to invest in our people, support career development and developing the skills we need for the future.

Plan: Embedding Equality and Diversity

Continuing our focus on equality and diversity

Plan

The IJB and HSCP maintain a strong focus on delivering our legal obligation to meet the requirements of the Equality Act 2010 and The Public Sector Equality Duty (PSED). Equality legislation protects people from discrimination on the basis of the protected characteristics of:

Protected characteristics



The General Duty is to:

- Eliminate unlawful discrimination, harassment and victimisation and other prohibited conduct;
- Advance equality of opportunity between people who share a relevant protected characteristic and those who do not; and
- Foster good relations between people who share a protected characteristic and those who do not.

The Specific Duties relating to employment in Scotland are to:

- Publish equality outcomes and report on progress;
- Publish gender pay gap information; (only if organisations have more than 20 employees)
- Gather and use employee information;
- Publish statements on equal pay including occupational segregation; (as above) and
- Report progress on mainstreaming the equality duty.

The HSCP and IJB have published an Equality Outcomes and Mainstreaming progress report and set Equality Outcomes for 2020-2024.

Plan: Embedding Equality and Diversity

Continuing our focus on equality and diversity

Plan

In addition to the duties and commitment set out on the previous page, the HSCP will deliver the following actions to further equality and diversity in Renfrewshire. These actions are captured throughout our Plan.

Work with employing bodies to ensure the collection of workforce protected characteristic data in line with Scottish Government and Public Health Scotland guidance

Ensure all staff have access to equality training courses available through Renfrewshire Council Corporate Services and NHSGGC and continue bespoke training across the sector

Enable staff from equality groups to have the opportunity to be fully engaged in contributing to the workforce equality groups of the partner organisations

Undertake the LGBT Charter award to equip our staff to improve health and wellbeing outcomes experienced by LGBT people in Renfrewshire

Fund the In-Ren network post hosted by Engage, to change the long-known inequalities and racism that exists in our systems and to make life fairer for our minority ethnic communities

Update our Participation, Engagement and Communication strategy, and create a toolkit for staff to ensure services are inclusive and provide equality of access

Continue to work with Renfrewshire Council and NHSGGC to commission contracts which support employment in the local health and care sector

Implement our updated Carers Strategy following Renfrewshire IJB approval in June 2022

Invest in digital technology to support the development of the workforce to enhance their work, life and learning

Plan: Reviewing our interim workforce plan

Informing next steps for this Plan

Plan

Our interim workforce plan 2021/22

Renfrewshire HSCP worked with partners to develop a short, interim, workforce plan for 2021/22 which was finalised in April 2021. This Interim Plan was developed in the context of the ongoing COVID pandemic and had a clear focus on supporting our services and workforce through the challenges faced, prioritising health and wellbeing. The Plan also recognised the importance of looking towards service transformation where realistic and possible within the wider context.

A brief summary of progress made against the commitments in the Interim Plan is provide on this and following pages. This does not go into the full detail of the actions identified in that Plan but our assessment has informed the objectives and actions described in this new Plan for 2022-25. We have also considered where actions are no longer necessary or appropriate and identify those which will continue into the lifetime of this Plan.

Living with COVID

The Interim Plan set out our short-term plans for living with COVID and in particular the continued delivery of new COVID-related services. We noted particular aspects including the COVID Assessment Centre, staff testing and use of Personal Protective Equipment (PPE), support to Care Homes and delivery of the vaccination programme.

The HSCP and partners have continued to support all of these elements, delivering in line with emerging national policy and guidance. All COVID Assessment Centres across NHS GGC closed in March 2022. The use of PPE, staff testing arrangements, support to Care Homes and the vaccination programme all continue and reflect the changing environment as the country transitions to a 'Living with COVID' approach.

Actions extending into this Plan

- Continued review of risk assessments, provision of PPE and staff testing in line with national guidance.
- Continued delivery of the "Huddle" model and care home reporting.
- Support for staff to access vaccinations in line with national guidance.

Resourcing, Delivering and Supporting Essential Services

The HSCP committed to the continued delivery of essential services, and where possible recovery from the pandemic. This included enabling staff to return to substantive posts and ensuring services are adequately resourced and support to support vulnerable individuals.

The HSCP's actions under this theme have continued to flex in response to the pandemic. Focus has remained on

Plan: Reviewing our interim workforce plan

Informing next steps for this Plan

Plan

the response to the pandemic and service development and recovery has been undertaken within this frequently changing context. In particular, in early 2022 the HSCP's emergency response was escalated once again to respond to the impact of the Omicron variant. Mitigating plans were put in place to support the deployment of staff to core services where necessary to meet the needs of local citizens.

Staff have returned to their substantive positions from the Community Assessment Centre while the HSCP has supported the Winter Flu and COVID booster vaccination programmes within Care Homes and for the housebound. This work is ongoing.

In addition to the above, rolling recruitment programmes have continued, alongside innovative approaches to attracting talent. However, skills gaps remain and recruitment and retention remains a significant challenge which this Plan will continue to address.

Actions extending into this Plan

- Continue delivery of the HSCP's interim workforce actions with recruitment action plans in Care at Home; Mental Health; Children and Adolescent Mental Health Services (CAMHS); Alcohol and Drug Recovery Services; District Nursing; School Nursing.
- Prioritise recovery and transformation activity to reflect continued workforce pressures.

Developing the Organisation and Workforce

In the Interim Plan we set out objectives to review the HSCP's vision and align forthcoming work with our guiding principles. We also committed to continuing to assess the impact of COVID on our workforce. These actions have been replaced by the work undertaken with staff and partners to develop our Strategic Plan for 2022-25 and work which is currently ongoing to consider how we use our accommodation and technology as part of hybrid working arrangements. The timing of this activity also reflects the impact of the pandemic in the last year.

More broadly, our Interim Plan set out to develop the scope and timelines for the HSCP's transformation programme, which will need to incorporate support for staff to develop change management skills and an approach to measuring the benefits of change effectively. The direction of travel for our transformation programme has now been set out by our new Strategic Plan with further work planned over 2022 to determine a prioritised scope for the programme.

Actions extending into this Plan

- Develop training programmes to support staff to develop new skills as service delivery models.
- Confirm transformational activity to be progressed by HSCP by 2025 with associated service and role redesign impact and define change management and organisational development (OD) plans.

Plan: Supporting Health and Wellbeing

Continuing our focus on supporting our staff

Plan

Supporting Staff Wellbeing

In the interim workforce plan, we described how we would support our staff's health and wellbeing through a series of commitments. These included promoting health and wellbeing activities which were available at a national and local level, developing a communications strategy which ensures that staff feel engaged and receive regular updates, providing additional assistance for line managers to support them and their teams in remote working to reduce isolation. We also stated that we will improve our processes for collating and reporting on staff demographics, in particular ethnicity and other protected characteristics to ensure we are being inclusive.

Whilst delivering this Workforce Plan, we will continue to maintain and develop these commitments and ensure the health and wellbeing of staff remains a priority. We recognise that the physical and psychological wellbeing of staff is critical to the ongoing recovery of services but also the longer-term sustainability of the HSCP and the wider health and social care sector.

In previous plans we have developed, the correlation between lower mental health and wellbeing and staff absence and turnover has been clear. This in turn places significant pressure on remaining staff to maintain service provision and is often compounded by vacancy levels and retirement associated with an ageing workforce.

COVID-related absences have also placed a significant strain on the health and social care workforce, with particular peaks of absence observed in Winter 2021/22 and Spring 2022. In addition, the extent of Long COVID within our workforce is still emerging and it can be expected that there will be an increase in mental health-related absence as a result of post-traumatic stress.

Consequently, many of the actions identified in our Interim Workforce Plan will continue during this new Plan. A range of examples of the support provided and planned is provided on the following page.

Actions extending into this Plan

- Continue provision of local, regional and national health and wellbeing support.
- Prioritise recovery and transformation activity to reflect continued workforce pressures.
- Continued review of risk assessments and provision of PPE and staff testing in line with guidance.
- Update the HSCP's draft Participation, Engagement and Communication strategy and implementation plan to reflect current position.
- Work with partners to improve the availability of data and demographics on protected characteristics.
- Work with NHS GGC and Renfrewshire Council HR to implement processes on treatment of Long COVID.
- Implement absence management plans to help staff into work with additional support as required.

Plan: Supporting Health and Wellbeing

Continuing our focus on supporting our staff

Plan



Supporting health and wellbeing to date

- Ensuring access to PPE, testing and encouraging vaccination
- Maintaining the Healthy Working Lives Gold Award (note: scheme currently paused)
- Linking with partners and other HSCPs through our Wellbeing Champion
- Communicating opportunities to support mental health and wellbeing
- Linking staff to local and national wellbeing resources through Chief Officer updates
- Provision of Rest & Relaxation facilities in hospital and Care at Home sites
- Training and coaching for managers to develop their leadership style
- Providing resources to managers such as SAMH Mental Health in the Workplace
- Renfrewshire Bereavement Network – access to bereavement counselling
- ‘Hear for You’ helpline providing access to support for stress and anxiety



Additional Ways in which we will support Health & Wellbeing

- **Promoting techniques to increase resilience and supporting staff:** ensuring awareness, identification of need and sharing tools and techniques for strengthening personal and team resilience.
- **Leadership:** Developing our compassionate leadership approach to ensure staff feel valued, respected, listened to and understood. This will be supported by training sessions through our Leadership Network.
- **Succession Planning:** Developing structured successions plans working with NHS and Council partners, aligning skills needs with career development opportunities and training.

Plan: Legislation and Policy

Plan

Relevant legislation and policy to inform our workforce planning

The national and local strategy and policy context for health and social care is increasingly complex and continues to evolve, not least as a result of COVID-19 and the impact that this has had on the way in which services are accessed and delivered. National legislation and policy, aligned with local frameworks and strategies, exist to provide guidance to Partnerships and necessarily have wide-ranging impacts on our local workforce. We provide an indicative, but not exhaustive, view of related plans and strategies below.

National Context

Legislation and Policy

- Social Work (Scotland) Act 1968
- Adults with Incapacity (Scotland) Act 2000
- Adult Support & Prot'n Act 2007
- Community Care and Health (Scotland) Act 2002
- Social Care (Self-directed Support) (Scotland) Act 2013
- Public Bodies (Joint Working) (Scotland) Act 2014
- Community Empowerment (Scotland) Act 2015
- Carers (Scotland) Act 2016
- The 2018 General Medical Services Contract in Scotland
- Health and Care (Staffing) (Scotland) Act 2019
- Whistleblowing Standards, 2020
- 'Anne's Law', 2022

Strategies and Guidance

- National Clinical Strategy, 2016
- Realising Realistic Medicine
- Health and Social Care Standards
- Public Health Scotland's Strategic Plan 2020 to 2023
- Digital Health and Social Care
- SDS Framework of Standards
- IRASC and National Care Service Consultation analysis, 2021-22
- NHS Recovery Plan, August 2021
- COVID Recovery Strategy, 2021
- Digital Health & Care Strategy, 2021
- SG Strategic Framework, 2022
- National Workforce Strategy for Health and Social Care in Scotland, 2022
- Transforming NMaHP Roles

Local Context

Strategies and Plans

- Renfrewshire IJB Strategic Plan 2022-25
- Medium Term Financial Plan 2022-25

NHS Greater Glasgow and Clyde

- NHSGGC Remobilisation Plan(s)
- Turning the Tide through Prevention
- Unscheduled Care Commissioning Plan
- Moving Forward Together
- Adult Mental Health Strategy
- NHS GGC Workforce Plan

Renfrewshire Council

- Social Renewal Plan
- Renfrewshire Council Plan
- Our People Our Future 2021-26

Joint Plans

- Integrated Children's Services Plan
- Local Outcome Improvement Plan
- Primary Care Improvement Plan

Plan: Legislation and Policy

National health and wellbeing outcomes

Plan

Scotland's national health and wellbeing outcomes aim to ensure that IJBs (and HSCPs), Local Authorities and Health Boards are clear about their shared priorities by bringing together responsibility and accountability for their delivery. They provide a framework for planning and delivering health and social care services and for ensuring Renfrewshire's health and social care workforce is effectively structured, developed and supported in doing so. The nine outcomes are:

Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer.

Outcome 2: People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

Outcome 3: People who use health and social care services have positive experiences of those services, and have their dignity respected.

Outcome 4: Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

Outcome 5: Health and social care services contribute to reducing health inequalities.

Outcome 6: People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.

Outcome 7: People who use health and social care services are safe from harm.

Outcome 8: People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

Outcome 9: Resources are used effectively and efficiently in the provision of health and social care services.

Plan: Legislation and Policy

Key legislation, plans and policies influencing our Plan

Plan

Alignment with legislation, plans and policies

Integrated health and social care services are delivered within a complex legislative and planning landscape. Core strategies and plans include, but are not limited to:

NHS Recovery Plan

The Recovery Plan sets out the Scottish Government's ambitions to address care backlogs and meet ongoing healthcare needs over the next five years, supported by over £1bn funding. It set out plans to build on previous national workforce plans and recruit 800 additional mental health workers, 320 staff for CAMHS, 500 advanced nurse practitioners and increase the GP workforce by 800 by 2026/27. £8m will also be invested in the health and wellbeing of the workforce.

National Workforce Strategy

The key elements of the National Workforce Strategy are set out on page 8 of this Plan. It sets out progress made in supporting the workforce nationally and identifies a range of actions aligned with five key pillars and a focus on recovery, growth and transformation. Our Plan is structured around the five pillars with actions aligned with those in the strategy.

Digital Health and Care Strategy

The updated Digital Health and Care Strategy sets out ambitious aims for digital transformation and embedding digital tools in the provision of health and care. It recognises the progress made during the pandemic and that further progress will require our leaders and staff to

have the necessary digital skills. Our Plan seeks to capture this, ensuring our staff have the training to get the 'digital basics' right alongside more complex digital transformation.

The National Care Service

The Scottish Government's flagship policy is to create a National Care Service during this Parliament. An analysis of consultation responses was published in February 2022, with a draft Bill published in June 2022. This outlined proposed changes and further consultation on services, such as Children's Social Care, not currently integrated in Renfrewshire. This is expected to create uncertainty for our workforce and it will create significant pressures on services whilst delivering required changes.

National Clinical Strategy 2016 and GMS Contract 2018

These strategies and contracts embed the national priority to prevent illness, shift the balance of care and support people within community settings through multidisciplinary teams, whilst ensuring that people access the right care in the right place at the right time. Supported by our Primary Care Improvement Plan, Renfrewshire continues to deliver the commitments of the Contract and support the development of multi-disciplinary teams.

Health and Care (Staffing) (Scotland) Act 2019

The Act sets out legal duties to ensure appropriate staffing in health and care whilst reducing high cost agency staffing. Implementation has been delayed due to the pandemic but will progress in forthcoming years. Implementation will support more effective staffing projections.

Plan: Population Demographics

Renfrewshire's current population demographics

Plan

Renfrewshire Population

179,390

↑ 0.2% from 2019



48.4% **51.6%**



30,182 (16.8%)

children aged 0-15

115,055 (64.1%)

adults aged 16-64

34,153 (19.0%)

adults aged 65 and over

Ethnicity

National Records of Scotland data in 2020 shows that in Renfrewshire:



The **Black, Asian and Minority Ethnic (BAME)** population accounts for **2.8%** of the overall local population

This equates to **4,781 people**. Of these, **65%** are **Asian**, **17%** are **African**, **9%** are from **multiple ethnic backgrounds**, **2%** **Caribbean** and **7%** from **other ethnic groups**

The population will increase to **181,091** by 2025



0.9% increase on 2020 population

The **75 and over** population will increase to **17,247**



11.6% increase on 2020 75+ population

Plan: Population Demographics

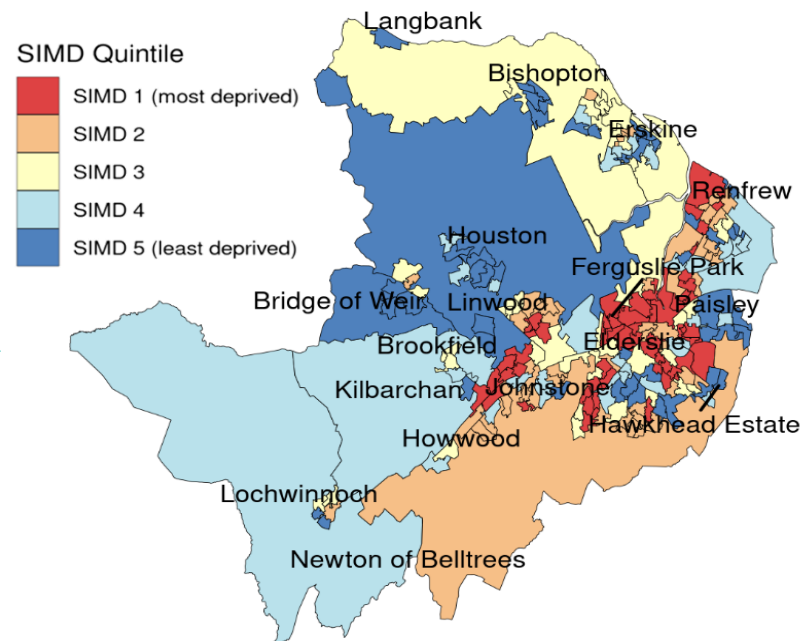
Renfrewshire's current population demographics

Plan

Deprivation and Inequalities

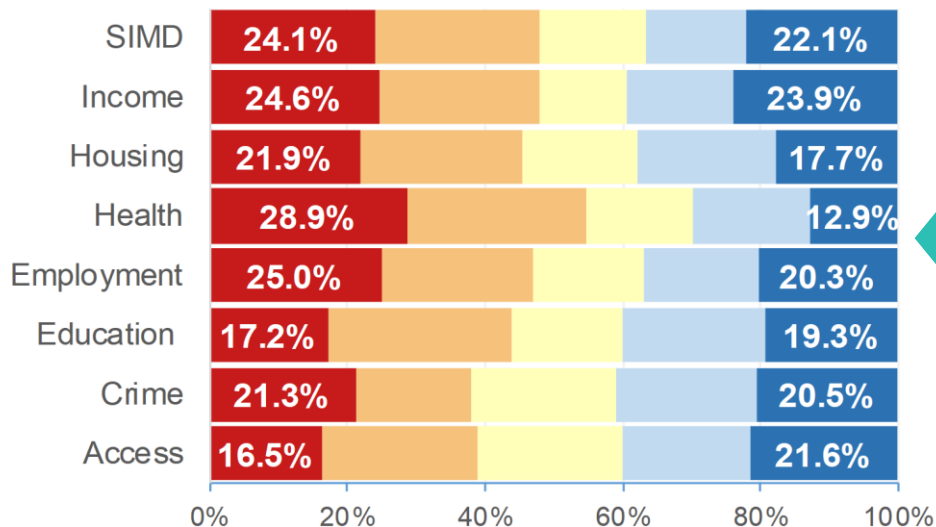
The Scottish Index of Multiple Deprivation (SIMD) assesses 6,976 small areas known as 'data zones'. 2020 figures show:

- There are **2 'data zones'** in Renfrewshire **within the 10 most deprived** zones nationally
- Almost **25% of all data zones** in Renfrewshire are in the **20% most deprived nationally** (24.1% of 2020 population)
- Renfrewshire has the **9th highest share of deprived data zones** nationally (of 32 areas)



Renfrewshire HSCP

Proportion of 2020 population living in each SIMD domain



Individual SIMD Domains show that

Renfrewshire is more deprived compared to the Scotland average for **Employment, Crime, Housing and Income**.

These social and economic inequalities can **impact on self-esteem, happiness and participation in local communities and lead to poorer physical and mental health**. In Renfrewshire, **28.9%** of residents are in the **20% most-deprived areas nationally** within health indicators.

Plan: Population Demographics

Renfrewshire's current population demographics

Plan

The demographics sets out on previous pages and below evidence an ageing population in Renfrewshire and levels of deprivation and inequalities that will shape the nature of demand for our services in coming years. Our Workforce Plan objectives and actions recognise that we will be required to work differently as an organisation and with others to address the socio-economic and health inequalities outlined, including mitigating the negative impacts of the pandemic on our most vulnerable and disadvantaged communities.



People with a disability are **twice as likely to face isolation** and **71% have difficulty taking part in things locally** (Glasgow Disability Alliance Action Research 2018)



It is estimated that in 2019/20, **6,997 (23.1%) children in Renfrewshire were living in poverty** after housing costs. This is **almost 1 in every 4 children**.



Compared with the least deprived areas, in the most deprived communities across Scotland*:

- people are **9 times more likely** to have an alcohol-related admission to hospital.
- people are **18 times more likely** to have a drug-related death
- the rate of **premature deaths (age 15-44)** is almost **five times higher**.
- the rate of probable deaths by suicide is **three times the rate** of least deprived areas.
 - **men** are likely to live **19 fewer years** and the gap has increased by 1.3 years since 2008.
 - **women** are likely to live **13.9 fewer years** and the gap has increased by 1.6 years since 2008.



**National Records of Scotland, 2021 and ScotPHO indicators*

Plan: Demand and Demographics

Current demand, inequalities and demographic change

Plan

The impact of local demographics

The demographics described on previous pages outline the complexity of demand within Renfrewshire, as socio-economic issues such as poverty, deprivation and inequalities can vary significantly across our authority area. These therefore impact on our services and workforce in a range of ways.

An ageing population

A projected increase of 11.6% of the population aged over 75 on 2020 levels will result in increasing prevalence of people with multiple long-term conditions. This requires care to be person-centred with our workforce increasingly shaped around multi-disciplinary teams across Primary Care, District Nursing, Care at Home and Rehabilitation and Reablement services. Preventative interventions will also be key in helping people to maintain their independence, supported by community organisations where possible, and through greater use of technology such as telecare.

In addition, it is expected that the numbers of people living with dementia – and supporting those who support people with the condition – will also increase by up to 47% by 2035 from 2,994 people in 2017 to 4,400. This will require care home provision to become increasingly specialist, requiring increased staff to resident ratios and specialist nursing skills. It can also be anticipated that Care at Home and Extra Care staff will require training in dementia care, coupled with an expected increase in those identifying as unpaid carers.

The impact of an ageing population will also be seen across wider specialist services, including learning disabilities, mental health and alcohol and drug recovery services.

Inequalities and the Pandemic and Cost of Living Crisis

As the statistics provided highlight, Renfrewshire is more deprived compared to the Scottish average for employment, crime, housing and income. These inequalities can lead to increased levels of addiction, drug or alcohol-related deaths and suicide. These challenges have also been exacerbated by the pandemic, which has disproportionately impacted on the most vulnerable, and the current cost of living crisis.

This requires local services to be targeted towards supporting people and communities as early as possible through the commitments in our Strategic Plan to continue to strengthen Community Link Worker support and the role of Welfare Rights Workers. We will also continue to develop peer support roles to draw on the insight of people with lived and living experience. We will also work with our partners to address child poverty through our Health Improvement Team.

More widely, as the nature of needs have changed over the pandemic, demand for Care at Home, CAMHS and adult mental health services is now increasing. The impact of Long COVID, both for our communities and staff is also still emerging.

Plan: HSCP Workforce Demographics

Key Workforce Statistics

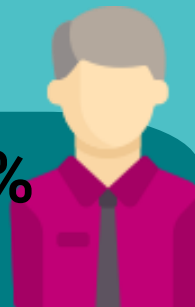
Plan

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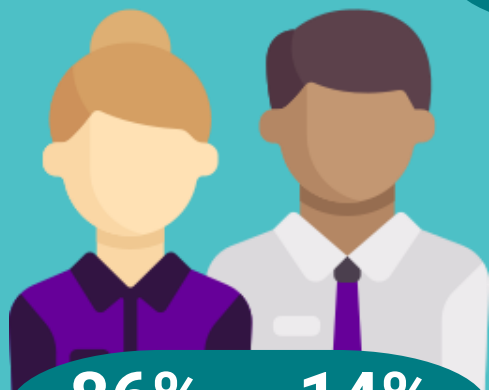
1049
1235
HEAD COUNT



57% **41%**
AGED 50
AND OVER

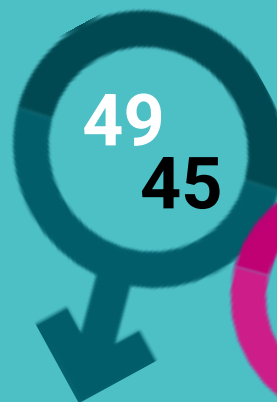


2% **2%**
AGED 25
AND UNDER

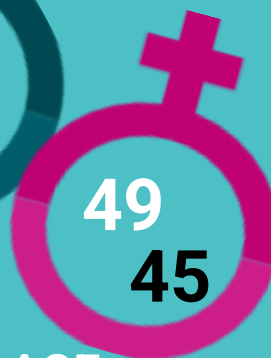


86%
83%
FEMALE

14%
17%
MALE



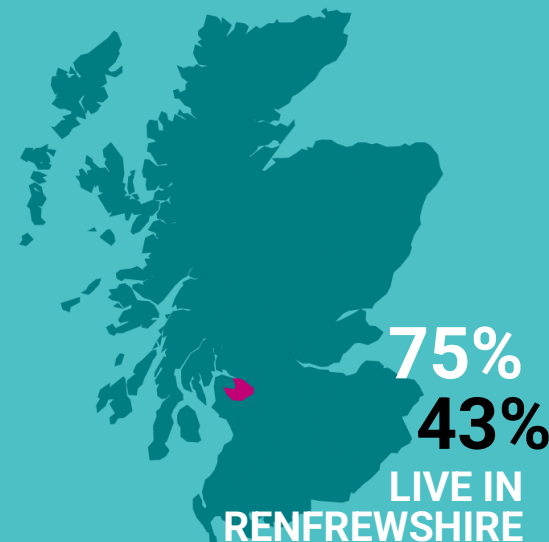
AVERAGE AGE



HSCP staff are employed on NHS and Council contracts:

- Staff on council contracts: 31 March 2022
- Staff on health contracts: 31 March 2022

Grade 2 **Band 3**
46% **24%**
GRADE ACCOUNTING FOR
THE LARGEST NUMBER
OF EMPLOYEES



Plan: HSCP Workforce Demographics

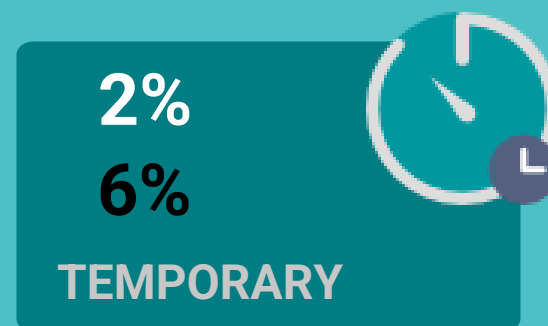
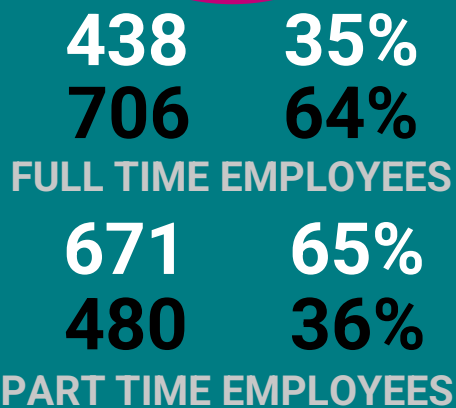
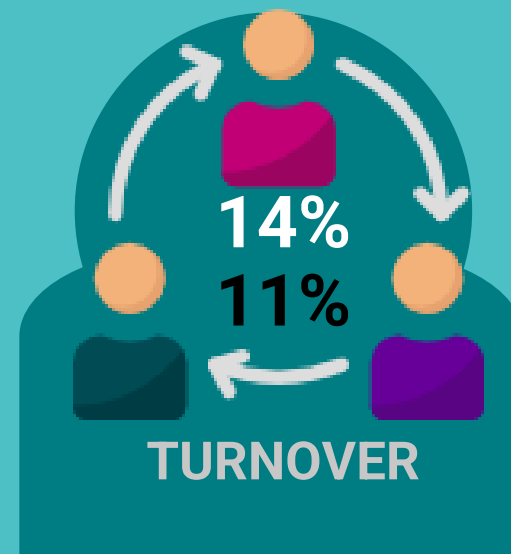
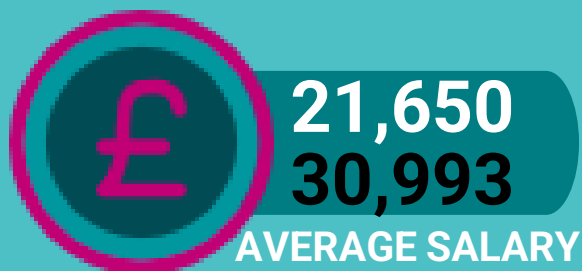
Key Workforce Statistics

Plan

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HSCP staff are employed on NHS and Council contracts:

- Staff on council contracts: 31 March 2022
- Staff on health contracts: 31 March 2022



Summarising HSCP Workforce Challenges

Key considerations for our ongoing workforce planning

Plan

The Health and Social Care workforce in Renfrewshire reflects many of the national trends and challenges observed across Scotland. Some of the issues facing the HSCP are described further below. On the following pages we also identify the challenges facing different parts of the sector in Renfrewshire. While there is a significant degree of overlap and commonality it is important to ensure these are specifically captured.

Attractiveness of health and social care

There is clear evidence that roles within the health and social care sector are viewed as challenging and unattractive to those outwith the sector. This is across all roles and is evidenced through recent experience.

Recent recruitment and retention experiences

- A recruitment event for Care at Home attracted only 19 attendees over the course of two sessions.
- Continued challenges in recruiting and retaining District Nurses, with 7.7 WTE in post against a funded establishment of 18.91 WTE.

This reflects a national shortage of staff in key roles but also highlights the challenge of attracting new staff to frontline roles where similar rates of pay are available for retail and hospitality roles – these can be perceived as not involving the same level of difficulty, particularly following the pandemic.

Recruitment and retention

In addition to markedly fewer applicants for advertised positions, the suitability of applicants for our roles has also decreased, resulting in challenging decisions for services on whether to recruit or not when services remain under significant pressure.

These challenges are reflected in the degree of current vacant posts on the HSCP's establishment. The most recent update to Renfrewshire IJB in March 2022 highlighted a total of 265.97 Whole Time Equivalent (WTE) (approx. 14% of WTE establishment) vacant posts across NHSGGC and Council staff.

Current roles with high levels of vacancy (March 22)

Home Care Workers	56.6 WTE
Trained Nursing	48 WTE
Admin and Clerical	18.5 WTE
Social Care Workers and Assts	15.4 WTE
Social Workers	15 WTE
Podiatrists (hosted service)	12.6 WTE
Community responders	12.2 WTE
Untrained Nursing	6 WTE
Occupational Therapists	4.1 WTE
Psychology	4.2 WTE

The HSCP continues to take proactive action to fill these identified gaps, which will continue to inform the actions undertaken through this Workforce Plan.

Summarising HSCP Workforce Challenges

Key considerations for our ongoing workforce planning

Plan

A shortage of key skills and limited diversity

The recruitment and retention challenges the HSCP faces as an organisation has resulted in a shortage of the skills needed for key roles. This echoes challenges faced nationally and presents a situation where there are no short-term fixes, with a national focus on supporting people through training and qualifications essential to delivering sustainability in the medium to long term.

Roles with
current
shortages

- CAMHS
- Care Home Carers
- Care Home Nurses
- School Nursing
- Mental Health Nursing
- District Nursing, partic. Band 6
- Rehabilitation and Reablement
- Adult Support and Protection
 - Podiatry
- Mental Health Officers
- Care at Home carers
- Social Workers

The HSCP also recognises there is limited diversity in the workforce in terms of ethnicity, gender and experience. This includes those with caring experience and from other sectors. The HSCP is committed to creating a diverse and inclusive workforce and this Workforce Plan aims to help further this objective alongside our Strategic Plan.

An ageing workforce

The HSCP's workforce is also ageing, with a small proportion of staff aged 25 and under. There is also a large disparity between our Council workforce (57% over 50) and NHSGGC workforce (41% over 50). These figures show the risk of a loss of deep experience as individuals choose to retire. It is difficult to project the impact of retirement as our staff now have greater flexibility in when they choose to retire, and may also choose to 'retire and return'. There are also staff who may delay retirement due to financial reasons.

Differing Terms and Conditions between organisations

HSCPs across NHSGGC, and organisations across the sector all offer differing terms and conditions for roles of a similar nature whether this is through remuneration or other benefits. This has the consequence of attracting staff to move 'within' the wider system and shifts rather than solves recruitment issues – a challenge observed in Care at Home and District Nursing particularly.

Accommodation

The pandemic has had significant impacts on how we use our property, supported by our use of digital tools. Over the last two years, some of our teams have shifted to remote and hybrid working, and operated from different locations whilst maintaining distancing requirements. As we recover from the pandemic we need to ensure we support staff to work effectively from our buildings, whilst maximising the opportunities of hybrid working.



The breadth of the workforce

The Breadth of the Workforce

Health and social care in Renfrewshire: Independent Sector

Plan

The Independent Sector in Renfrewshire

The independent care sector encompasses individuals, employers and organisations who contribute to needs assessment, service planning and design, commissioning and delivery across a broad range of social care services, which are wholly or partially independent of the public sector. Across Scotland, the sector includes care homes, care at home, housing support and day care services.

The sector encompasses those traditionally referred to as the 'private' sector and the 'third' sectors of care provision. It includes organisations of varying types and sizes, amongst them single providers, small and medium sized groups, national providers and not-for-profit voluntary organisations, associations, social enterprises and charities.

This section is focused primarily on Care Home and Housing Support / Care at Home services. The wider third sector is covered in further details on following pages of this plan.

The role of the frontline care worker has changed significantly as a result of the pandemic, with additional clinical duties for staff around infection control and greater contact with medical colleagues. This has required greater flexibility, new ways of working and new skills to be developed – providing a range of considerations for future workforce planning.

Key Local and National Statistics (not exhaustive)



There are **2,770 staff registered with Scottish Social Services Council (SSSC)** and working in the independent sector in Renfrewshire (Report of 2020 Workforce Data (2021))



85% of Care Home and **77%** of Home Care staff are **female**.



Almost **88% of providers** report difficulties with recruitment and retention (Scottish Care survey, 2021)



24% of staff leave their post within the first three months, **rising to 31%** within a year (Scottish Care)



50% of providers report staff having to work **more than 35 hours** to maintain service levels (Scottish Care)



In Care at Home Services, **42.4% of providers** said they could **fully reimburse travel costs** while **48.2% said they cannot** (Scottish Care)

The Breadth of the Workforce

Health and social care in Renfrewshire: Independent Sector

Plan

Key Challenges for the Independent Sector

Many of the workforce challenges faced by the Independent Sector are common across health and social care. Key challenges of note include, but are not limited to:

- There are issues with digital literacy that need to be overcome.
- There is a cluttered learning and development landscape with a lack of clarity as to what is on offer, where, and the ability of staff to find time to access learning opportunities.
- Pay in the Independent Sector lags behind public sector pay.
- Increased fuel costs are problematic for staff, with 'cash flow' being particularly problematic. The reimbursement of travel costs also varies across the sector.
- Zero-hour contracts undermine workforce stability however are a symptom of long-standing time and task commissioning.
- The available data on the local workforce is based on national datasets, with more granular, local, data being required.

Agreed actions for progression

Considering the range of challenges identified, actions to positively support the development and sustainability of the workforce include:

- Work with local providers to promote training and development and offer work 'tasters' with independent sector providers.
- Ensure that staff are supported to build digital skills and are not digitally excluded, through work with DigiRen and the Digital Citizen workstream.
- Run joint training, open to staff across the sector, to maximise the impact of Learning & Development spend.
- Ensure a framework is in place to direct staff in Renfrewshire to local and national wellbeing resources.
- Consider service commissioning approaches to ensure measures are in place to support service and workforce sustainability.
- Work collaboratively to determine available data on the independent sector workforce and to gather this on an agreed basis.
- Maximise opportunities for joined up and collaborative recruitment, overseas recruitment and joint recruitment campaigns for nursing staff.

The Breadth of the Workforce

Health and social care in Renfrewshire: Third Sector

Plan

Third Sector Providers

Third Sector is a term which describes a range of organisations that are neither public sector nor private sector. It includes voluntary and community organisations (such as registered charities and other organisations such as self-help groups, associations and community groups), social enterprises, mutuals and cooperatives.

Each Local Authority area also has a Third Sector Interface (TSI) and Engage Renfrewshire are the local TSI. Along with the HSCP, Engage co-chair the Strategic Planning Group in Renfrewshire, which is also attended by a range of third sector organisations. Engagement between the HSCP and key representative organisations from the sector also takes place through the Voluntary Sector Group.

The Third Sector in Renfrewshire encompasses a vibrant range of organisation of all sizes providing care and support to children, adults and families. These organisations can be commissioned by the HSCP to deliver specific contracts, or grant-funded on a one-off or regular basis to provide community-based, preventative organisations. There is also a wide range of organisations who do not receive funding from the HSCP but also make a crucial contribution to improving the health and wellbeing of the people of Renfrewshire. These organisations may receive local donations or funding from other organisations.

Key Local and National Statistics (not exhaustive)



There are **7,820 registered staff (by headcount) registered with SSSC** working in Health and Social Care in Renfrewshire (note this does not include *unregistered* staff) (Source SSSC)



81.8% of staff across the social care sector are **female**



Engage Renfrewshire's **membership grew to 402 members** by 2022, with members involved in a range of initiatives



159 organisations on Engage's network list have an interest in **'health' services** with **92** interested in **supporting older people** (these figures may not be mutually exclusive)



Over 50 organisations have been awarded a share of over **£550k funding** to deliver Community Mental Health and Wellbeing Support



314 organisations in the local network declare an interest in supporting volunteering, with Renfrewshire's Volunteer Manager Forum encompassing **37 members**

The Breadth of the Workforce

Health and social care in Renfrewshire: Third Sector

Plan

Key Challenges for the Third Sector

Key challenges of note for the Third Sector include, but are not limited to:

- Sector organisations have observed that there are fewer people applying for each job, a challenge that is exacerbated by similar roles being advertised by many.
- The skill set and experience of those that are applying for roles is less suitable compared to previous trends, and over time this is leading to the gradual erosion of organisational experience and competency.
- Recruitment and retention challenges place additional pressures on existing staff to maintain service provision and service quality. This leads to increased use and reliance on agency workers.
- Sector organisations are typically faced with the choice of selecting 'someone' from recruitment processes rather than the 'right one'.
- All of the above aspects raise the risk of organisations 'defaulting' on contracts due to the inability to deliver contractual agreed service levels.
- Volunteering is highly valuable but it can be viewed as 'free' resource rather than cost effective resource which must be mutually beneficial.
- Short-term funding for sector organisations also inhibits the use of permanent posts and impacts on sector sustainability.

Agreed actions for progression

Considering the range of challenges identified, actions to positively support the development and sustainability of the workforce include:

- Make the sector's values and potential job satisfaction a much clearer selling point to attract people to the sector and ensure these are explained to interested applicants and society as a whole more clearly.
- Target recruitment at a range of groups who may be less represented in the workforce but can bring significant benefits and value to the sector, including the under 25s, those seeking second careers, local residents and those with lived and living experience.
- Focus on shaping and selling the sector as a career destination, with opportunities for development and progression. This would emphasise the sector as a profession rather than a stop gap.
- Offer flexibility in working arrangements to attract those with other commitments (family, study, caring responsibilities) so that everyone has an opportunity to seek employment if they wish. Within this, considering opportunities for improving pay arrangements within available funding will continue to be crucial.

The Breadth of the Workforce

Health and social care in Renfrewshire: Primary Care

Plan

Primary Care in Renfrewshire

Primary Care services provide the first point of contact for people within the healthcare system. It can be viewed as the 'front door' to a range of services. Primary Care seeks to provide community healthcare, by a range of medical professionals including GPs, Community Pharmacists, Dentists and Optometrists.

Renfrewshire HSCP hosts primary care support on behalf of NHS Greater Glasgow and Clyde for all HSCPs, and the primary care support team works closely with partners across the Board and with independent contractors to implement the range of policy and strategy guiding Primary Care.

This includes the implementation of the General Medical Services (GP) Contract and the local development and delivery of the Renfrewshire's supporting Primary Care Improvement Plan. A recently refreshed Strategic Pharmacy Framework also guides work to deliver an empowered pharmacy workforce across NHSGGC and to support the ongoing development of community pharmacy.

Primary Care has played, and continues to play, a critical role in supporting our communities through and beyond the pandemic. This has been hugely challenging and resulted in significant demand and staffing pressures. Throughout the lifetime of this Plan, Primary Care contractors will continue to be supported to aid sustainability within the sector.

Key Local and National Statistics (not exhaustive)



In Renfrewshire, there are **28 GP practices**, with **158 GPs**, supporting an overall list size of **186,239 people**.



Through the Renfrewshire PCIP, approx. **124 WTE posts** are funded to support **multi-disciplinary delivery** of primary care



There are also **43 Community Pharmacies**, **37 Dental practices** and **23 Ophthalmology practices** in the area.



Community Link Workers are aligned to all GP practices in Renfrewshire, offering **6,936 appointments** in 21/22.



86% of GPs in Scotland experienced **anxiety, stress or depression** in their roles in the last year (Source: BMA Survey, March 2022).



More than **four in five** GP practices say **demand is exceeding capacity** (Source: BMA Scotland, 2021).

The Breadth of the Workforce

Health and social care in Renfrewshire: Primary Care

Plan

Key Challenges for Primary Care

Key challenges of note for Primary Care include, but are not limited to:

- Primary Care services are facing unprecedented levels of demand with a significant increase in mental health problems and people suffering deterioration in chronic diseases because of the impact of COVID-19. It is expected that more people will require more intensive support, leading to further increases in pressure on Primary Care.
- The demands of the pandemic have impacted on the health and wellbeing of those who work in Primary Care, increasing the risk that experience and skills will be lost from the sector.
- Specialist skills within Primary Care are in short supply nationally. Coupled with increasing demands, this is leading to some GP practices seeking to close lists for a period of time.
- Ensuring all parts of the health and care system, (e.g. HSCP services, primary care and the third sector) are fully aware of community support available and are able to direct people towards the right support at the right time.
- Expectations of what specialist services provide can differ from clinical opinion and the aim of preventing over-medicalisation.

Agreed actions for progression

Considering the range of challenges identified, actions to positively support the development and sustainability of the workforce include:

- Ongoing support to practices with Transforming Nursing Roles and General Practice Nurse and Advanced Nurse Practitioner development.
- Support GP Clusters and Quality Improvement.
- Support board-wide development of shared care and interface approaches between Community Optometry and Ophthalmology.
- Delivery and learning from Renfrewshire GPST3's job fair in May 2022 to inform further recruitment events (for General Practitioner Speciality Trainees at stage 3 of training).
- Support the introduction of new roles into Primary Care in line with current and emerging policy.
- Support practices to obtain Skilled Worker Visa sponsor status.
- Progress a survey with the local GP Workforce to further understand the current situation and identify actions for progression.
- Work with partners to deliver the Strategic Pharmacy Framework with an objective of empowering the workforce to work at the highest level of practice.

The Breadth of the Workforce

Health and social care in Renfrewshire: Unpaid Carers

Plan

Unpaid Carers

Most people are likely to be an unpaid carer at some point in their lives. An unpaid carer is anyone, including children and adults, who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot manage without their support.

The Independent Review of Adult Social Care in Scotland noted that the value of unpaid care in Scotland is estimated at over £36 billion a year. For comparison, the Scottish Government's budget for health and social care in 2022-23, is £18 billion.

By identifying unpaid carers early, we can provide preventative support to ensure they remain engaged with their family, friends and communities to help maintain their own health and wellbeing and to support them in their caring role. The HSCP's Adult Unpaid Carers' Strategy's priority is the identification of unpaid carers, with supporting work led by the Unpaid Carers Planning Group.

Renfrewshire Carers Centre is a key partner in identifying and supporting unpaid carers, and is commissioned by the HSCP to deliver a range of community-based, preventative support. There is also a wide range of organisations who do not provide carer-specific support but make a crucial contribution to identifying and supporting unpaid carers, helping to ensure that Renfrewshire continues to be a carer-friendly community.

Key Local Statistics (not exhaustive)



There were **17,760 unpaid carers** in Renfrewshire in the 2011 Census (more up-to-date figures will be available after the 2022 Census)



59% of unpaid carers in Renfrewshire are **female**



19% of unpaid carers are **aged 65 and over**



27% of unpaid carers provide **50+ hours of care** while **15%** of those providing this level of care said their **health was bad or very bad**



73 Council staff are registered with the Council as an unpaid carer.



963 new unpaid carers were supported in 2021/22



80% of Carers stated in a recent survey that feel anxious or stressed about their finances

The Breadth of the Workforce

Health and social care in Renfrewshire: Unpaid Carers

Plan

Key Challenges for Unpaid Carers

The key challenges of note for unpaid carers include, but are not limited to:

- The pandemic has exacerbated the challenges already faced by unpaid carers. Local and national surveys found that unpaid carers are caring for longer and are doing more complex caring tasks, resulting in 36% feeling unable to manage their caring role.
- Research prior to the pandemic highlighted that only 18% of unpaid carers said they had a break in the last 12 months. The suspension of services due to pandemic magnified these challenges.
- The continued impact on service capacity due to the pandemic means that cared for people may still not be able to access day care.
- Cost of living pressures are being acutely felt by carers. Balancing the caring role and employment has become a greater challenge due to increasing caring pressures.
- Unpaid carer households may need to use more electricity and heating than other households, due to the condition of the cared-for person.
- The ongoing impact of the pandemic has impacted on the mental health and wellbeing of unpaid carers with 95% saying this was affected.

Agreed actions for progression

Considering the range of challenges identified, actions to positively support unpaid carers include:

- Set out in the Adult Carer Strategy how we will continue to identify and support unpaid carers. The Renfrewshire Short Breaks Statement will describe how unpaid carers will access planned, regular and innovative breaks.
- Work with NHSGGC to improve the experience of unpaid carers during hospital admissions, stays and discharges, and to identify and support unpaid carers early on in the caring journey – before the cared-for person enters hospital.
- Renfrewshire Council and NHS Greater Glasgow and Clyde are Carer Positive employers, which recognises them as having a working environment where unpaid carers are valued and supported. The Carers Partnership will encourage employers across Renfrewshire to be Carer Positive employers.
- Further development of blended (online and face to face) support to give unpaid carers a range of access choices.
- Explore supporting unpaid carers to gain a recognised qualification for the skills and experience their caring role has given them, with potential to join the care workforce.
- Progress initiatives such as the Carers Passport piloted in OneRen facilities, to provide discounted opportunities for unpaid carers, and coordinate cross sector work to further develop Renfrewshire as a carer friendly community.

Projections in an uncertain context

How our workforce will change during this Plan

Plan

A changing health and social care workforce

This Workforce Plan has been developed in the midst of significant uncertainty for the health and social care sector. The impact of COVID on staff health and wellbeing continues to emerge and exacerbates recruitment and retention challenges which pre-date the pandemic. The implementation of a National Care Service is intended to help address many of the challenges faced however the extent of change required is unclear at the time of writing. It is clear however, that there will be significant demands on our workforce to deliver this change alongside frontline services and wider policy commitments.

We also recognise that quantifying the workforce that will be required to deliver health and social care in Renfrewshire in future needs further work to be done on our transformational priorities. It also requires deep workforce planning expertise combined with complex modelling skills so that the impacts of proposed changes can be fully understood and applied against projected demand increases.

Known workforce developments

Our workforce is currently undergoing a significant degree of change. Some examples of these changes are shown below and are in response to:

- **Winter funding:** Reducing delayed discharges by investing in interim care solutions and multi-disciplinary team working in our communities, alongside the strengthening of our Care at Home and rehabilitation and reablement services.
- **Mental Health and Wellbeing in Primary Care:** Embedding mental health and wellbeing support in our communities, and recruiting Renfrewshire's share of 1000 posts planned nationally.
- **Action 15:** Continuing to increase the mental health workforce to give access to specialist support.
- **Primary Care Improvement Plans:** Continuing to embed multi-disciplinary working shaped around General Practice and investing in Community Link Workers.

Projecting how our workforce will develop in future

262.6

Current WTE vacancies on HSCP establishment (March 2022)

11.2% | 13.6%

NHS / Council staff turnover per annum to fill

76.8

WTE through Winter Funding recruitment

33

Renfrewshire's approximate WTE share of MHWPCS posts

247* (10.8%)

HSCP Staff aged 60+ with potential to retire by 2030 (based on national retirement age for state pension)

*Approximate as age bandings differ slightly between NHS and Council.

Projections in an uncertain context

How our workforce will change during this Plan

Plan

Assessing roles we will require in future

Within this Workforce Plan we set out current challenges arising as a result of the pandemic, and ongoing complexity and uncertainty within the policy context in which health and social care is delivered. We also recognise that the depth and quality of data across the sector could be improved, while the complex modelling skills required are currently not available within the Partnership. We therefore set out below an indicative view of the types of roles that will be required in future but we do not seek to provide figures on WTE projections – the degree to which these roles will be needed will be determined by transformational requirements.

Mental Health and Wellbeing Services in Primary Care

We will develop and enhance the provision of commissioned, HSCP and Primary Care-led services to support people to manage their mental health and wellbeing in their communities. A phased approach will be taken, with roles required including:

- Band 8b Service Manager
- Community Link Workers
- Community Wellbeing Nurses
- Occupational Therapists
- Enhanced commissioned services

District Nursing

We will work with partners across NHS GGC to address recruitment gaps and variances, utilising Scottish Government funding to develop the role of District Nurses in line with Transforming Nursing, Midwifery and Allied Health Professional (NMaHP) roles. Roles required include:

- DN Advanced Nurse Practitioners (Band 7)
- Band 6 District Nurses
- Band 5 Nurses and Newly Qualified Nurses

Learning Disabilities and Autism

We will continue to develop the care and support provided to people with Learning Disabilities or Autism, recognising the unique needs and aims of every individual.

Autism:

- Peer Support Worker
- Autism Resource Worker
- Transition Resource Worker

Learning Disabilities:

- Social Work Assistants
- Day Support Workers moving across buildings, virtual and community

Projections in an uncertain context

How our workforce will change during this Plan

Plan

Assessing roles we will require in future (continued)

Service Transformation

We will design and deliver a transformation programme, aligned with our Strategic, Financial and Workforce Plans to meet local needs. We will also align this with the necessary changes required to deliver NCS:

- Senior Change and Improvement Officer(s)
- Change and Improvement Officers (NCS focus)
- Business Analyst(s)
- Workforce Planning Lead
- Digital Lead
- Administration and Business Support (linked to Admin & Business Support Review)
- Service Planners

Adult Services

We will continue to shape our services for adults to meet changing demands from the pandemic and demographic change, with a focus on flexible, community-based support.

- Frontline home carers (HSCP and independent provider staff)
- Frontline carers with enhanced training to support higher complexity needs
- Care staff trained to work across Care Homes, Day Support and Residential Services
- Care Home Nurses
- Specialist Dementia Nurses
- Day Support Workers moving across buildings, virtual and community
- Mental Health Officers
- Social Workers
- Adult Services Coordinators
- Social Work Practice Teachers

CAMHS and Children's Health

We will ensure children receive support in the right place and right time and will seek to recruit to 'hard to fill' posts'.

- Advanced Nurse Practitioners
- Pharmacists
- Art and Play Therapists
- Support Workers
- Psychology Assistants
- Practice Development roles
- Waiting List Coordinators

Recruiting to hard to fill posts:

- Consultant Psychiatrist
- SAS doctor
- Band 8a Principal Clinical Psychologist (note: currently advertising preceptorship post)
- Band 7 Clinical Psychologist
- Band 6 Nurses
- Band 6 Speech and Language Therapists
- Band 6 Occupational Therapists

Projections in an uncertain context

How our workforce will change during this Plan

Plan

Assessing roles we will require in future (continued)

Children's Health (continued)

In addition to the posts outlined on the previous page within CAMHS and Children's Health, roles will be required in Health for All and School Nursing which focus on:

- School Nursing
- Mental Health and Wellbeing (e.g. Trauma informed practice, ADHD, self-harming, eating disorders, loss and bereavement)
- Child Protection and Vulnerability (e.g. Children affected by Alcohol and Drug Use, domestic abuse, emotional and physical neglect, SCRA processes)
- Transition coordination between Health Visiting and Education
- Multi-disciplinary roles to deliver the Bairns' Hoose Framework and roles to support delivery of The Promise

Mental Health

We will continue developing community and inpatient mental health services to meet increasing demands and mitigate against recruitment and retention challenges. Roles required include:

- Band 7 Advanced Nurse Practitioners
- Band 8a Lead ANPs
- Social Worker Discharge Support
- Band 5 PDS for Older Adults
- Physical and psychological support staff (in ward and out of ward) as agreed across NHS GGC
- Expansion of the range of professional roles within current multi-disciplinary model, which would include Physician Associates (PA), Pharmacy Prescribers, and GP with Special Interest

Alcohol and Drug Recovery Services (ADRS)

We will continue to progress the development of ADRS, working in partnership with others and those with lived and living experience to support recovery.

- Senior Recovery Worker
- GBV Worker
- Alcohol Specific Death Lead Officer
- Throughcare Worker
- Pharmacy Independent Prescriber
- Practice Development Worker

Roles that will also support the Alcohol and Drug Partnership (ADP) to meet future needs include:

- ADP Planning and Development Officer
- ADP Communications Officer
- Peer Worker – Naloxone

Projections within an uncertain context

How our workforce will change during this Plan

Plan

The skills required in our future workforce

In addition to specific roles – either new or additional to the existing establishment – transforming the way in which services are delivered will require our workforce to work in new ways and develop a range of skills and knowledge. These include:

- The ability to lead and deliver change as part of everyone's role, through project and/or change management.
- Digital skills, using existing and new technology to provide choice in the way in which people access and receive services.
- Data interpretation and analysis skills.
- Embedding lived and living experience in service provision through peer support.
- Coproduction skills – working with communities and partners to understand problems and design solutions together.
- Partnership working across team and organisational boundaries.
- Enhanced understanding of prevention and early intervention, centred around empowered decision-making to put in place innovative or different support which prevents needs escalating.

Indicative Case Study: Frontline Internal Care at Home and TECS workforce projections*

Current total establishment (WTE): **304.3**

Current vacancies (WTE): **76.5**

Approx. WTE expected to retire by 2030 (60+): **47.6**

Projected workforce by 2030

Total establishment WTE required**: **342.4**

Projected WTE gap***: **162.2**

Additional WTE turnover (total to 2030): **185.0**

Total additional WTE required 2022-2030: **347.1**

Assuming efficiencies from Totalmobile scheduling addressed through existing vacancies

Net WTE required: 304.1 (reduction in WTE greater due to reduced increases and turnover impact)

Over the life of this Workforce Plan the HSCP will aim to undertake comprehensive analysis of workforce projections across all service areas

*excludes Extra Care

**based on SG projections of 1.7% increase in staff required per annum

***includes increased workforce required, vacant posts and retirements

Summarising Workforce Objectives

Aligning Objectives with Recover, Grow and Transform

Plan

The 'Plan' section of this Workforce Plan, combined with the strategic context outlined, provides an overview of the current position of the health and social care workforce in Renfrewshire. It provides the baseline information on current activity, challenges and opportunities which guides the strategic objectives and actions set out in the following pages. These actions include those applicable to the HSCP and its partners, and those which apply across the wider health and social care sector in Renfrewshire. The diagram below also summarises how the Scottish Government's three key objectives of recovery, growth and transformation are met by this Plan.



Recovery (Year 1+)

- Prioritise health and wellbeing of sector staff
- Develop our Market Facilitation Plan to inform future commissioning approach
- Improve our collection and use of workforce data, including equalities data
- Develop our communications strategy / plan
- Focus on the recovery of services (e.g. day services) and reductions in waiting lists and waiting times for care and support
- Confirm transformation prioritisation
- Continue review of property usage



Growth and Transformation (Years 2 to 3+)

- Target recruitment at under-represented groups and new entrants to the sector, including wider routes through education, apprenticeships and employability
- Develop innovative, joint, recruitment campaigns
- Seek to embed skills required as priorities (see pp.41-43) in job descriptions and support staff in their development e.g. digital, partnership working, prevention
- Deliver transformation priorities in line with Strategic Plan
- Develop our approach to 'Growing our Own'
- Develop our compassionate and inclusive culture
- Development of a training matrix and career pathways for roles across health and social care

The actions that will deliver the above priorities in line with the National Strategy's objectives of **Recovery, Growth and Transformation** are set out under each of the five pillars.

The timescales for delivery are also identified however it should be noted that some actions may be delivered across annual boundaries and that recovery activity may continue significantly beyond the first year of this Plan. Transformational activity may therefore be delivered later than scheduled in this Plan and/or beyond.

Reference	Strategic Objective	Actions	Delivery by
Plan.1	Improve the availability of workforce data and future projections.	<ol style="list-style-type: none"> 1. Identify gaps in current sector-wide workforce reporting and work with partners to identify solutions. 2. Review, with statutory partners, the gathering of feedback from leavers to determine trends and issues resulting in loss of staff, including onboarding and leavers' interview processes. 3. Develop workforce modelling capability to enable effective scenario-based projections to be developed based on robust data. 	<p>Year 1+</p> <p>Year 1+</p> <p>Year 3</p>
Plan.2	Invest in workforce planning capacity to support future planning.	<ol style="list-style-type: none"> 1. Recruitment of a Workforce Planning Lead role based within the HSCP and aligned with Change and Improvement. 2. Develop workplan for Training and OD aligned the priorities set out with this Workforce Plan. 	<p>Year 1</p> <p>Year 1+</p>
Plan.3	Improve and embed processes that enable the collection of good quality data on ethnicity as well as all other protected characteristics and enable the further promotion of diversity and equality within the partnership.	<ol style="list-style-type: none"> 1. Utilise additional information provided by breakdown of survey results across protected characteristics in iMatter. 2. Work with Renfrewshire Council to support development of proposals to further the inclusive agenda, considering gender balance and protected characteristics. 	<p>Year 2</p> <p>Year 2</p>

Strategic Objectives and Actions

Plan

Reference	Strategic Objective	Actions	Delivery by
Plan.4	Update our approach to communications and engagement to ensure that staff feel engaged and can access and receive updates at the right time.	<ol style="list-style-type: none"> 1. Update the HSCP's draft Participation, Engagement and Communication strategy and implementation plan to reflect current position. 2. Define and implement approach to sharing key workforce messages with partners across the sector. 3. Develop a communication toolkit for staff to ensure our services are inclusive and provide equality of access. 	<p>Year 1</p> <p>Year 1</p> <p>Year 1</p>
Plan.5	Reflect workforce capacity and pressures in recovery planning and future transformation as part of prioritisation activities.	<ol style="list-style-type: none"> 1. Prioritise recovery and transformation activity to reflect continued workforce pressures, incorporating frontline and change support capacity as key criteria. 	Year 1+



Attract

Attract

Creating opportunities to attract new and diverse talent

Attract

Attracting people to health and social care in Renfrewshire

Public, third and independent sector providers of health and social care have vacant posts across a range of services, with some posts particularly challenging to fill. These challenges pre-date the pandemic but have been exacerbated by the increased pressures of the last two years. For many, roles in the sector appear less attractive than jobs available elsewhere.

We know that health and social care jobs are highly challenging however we believe that working in Renfrewshire and supporting our most vulnerable citizens is highly rewarding and can offer opportunities for career development. Working with our partners, our Workforce Plan is focused on both enhancing the attractiveness of local caring roles and attracting new entrants to the sector.

This includes working with education providers to create clear routes into health and social care, and also enhancing alternative routes through apprenticeships, employability and those seeking to begin a 'second career'. Developing a more diverse workforce and promoting fair work through our recruitment can attract new talent and ensure that we reflect and meet the needs of the people of Renfrewshire.

"Continuing to improve equality, diversity and inclusion in our workforce, ensures we benefit from different lived experiences, perspectives, ideas and skills, and are better able to serve the people of Scotland"

National Workforce Strategy for Health and Social Care



The outcome we want to achieve

People are attracted to health and social care in Renfrewshire. We are inclusive employers who offer career opportunities for people of all backgrounds. Applicants have a positive experience and feel valued throughout the recruitment process.

Key Challenges

- Pay and terms and conditions vary between employers and between HSCPs within the board area and beyond.
- Health and social care roles are highly challenging which can be seen as less attractive to younger people and in comparison to employment in other sectors.
- Frontline service areas often do not have clear career pathways for those who wish to develop a career within the sector.
- The diversity of our workforce could be enhanced, as it is currently heavily older female-oriented, and we struggle to collate data to support actions which address this in our recruitment approach.
- Our existing contracts can be inflexible and do not reflect current demands and expectations for variation in working patterns or, where appropriate, the flexibility of working at home.

Reference	Strategic Objective	Actions	Delivery by
Attract.1	Our recruitment practices will be fair for all, and we will remove any barriers to ensure that Renfrewshire HSCP and partners in the sector are inclusive employers.	<ol style="list-style-type: none"> 1. Work with sector partners to launch targeted recruitment for under-represented groups: <ul style="list-style-type: none"> • Young people (apprenticeships / employability) • Unpaid carers • Male carers • Those starting 'second careers' • Under-represented ethnic groups 2. Widen recruitment methods including online events; recruitment days and alternative advertising. 3. Deliver and identify lessons learned from Renfrewshire GPST3's job fair in May 2022. 4. Clarify processes for internal consultation on recruitment plans. 5. Engage Renfrewshire to deliver racial equalities training between 2022 and 2025. 	<p>Year 2</p> <p>Year 2</p> <p>Year 1</p> <p>Year 1</p> <p>Year 1+</p>
Attract.2	We work collaboratively with third sector and independent providers to promote careers in health and social care in Renfrewshire.	<ol style="list-style-type: none"> 1. Develop joint recruitment communications strategy and plan with external partners. 	<p>Year 1</p>
Attract.3	Work with partners to refine commissioning processes in line with the commitment to ethical commissioning in the Independent Review of Adult Social Care, supporting sustainability of employment.	<ol style="list-style-type: none"> 1. Embed collaboration and partnership working in Market Facilitation Plan and commissioning processes (e.g. Public Social Partnership approach). 2. Assess contracts and existing grant funding to identify opportunities for longer term contracts and funding. 	<p>Year 1+</p> <p>Year 1+</p>

Reference	Strategic Objective	Actions	Delivery by
Attract.4	Enhance the attractiveness of health and social care roles.	<ol style="list-style-type: none"> 1. Reflect the commitment to fair work through increases to hourly rates for Council-employed social care staff and staff in commissioned services. 2. Embed flexibility in ways of working in terms of roles, working hours and location and update job descriptions and terms and conditions to reflect. 3. Progress a survey with local GP workforce. 	<p>Year 1</p> <p>Year 3</p> <p>Year 1</p>
Attract.5	Attract international staff to come and work in Renfrewshire.	<ol style="list-style-type: none"> 1. Working with specialist agencies and partners, develop a programme to attract international staff to Renfrewshire, considering supporting family friendly policies. 2. Support GP practices to obtain Skilled Worker Visa status 	<p>Year 1+</p> <p>Year 1</p>
Attract.6	Support people considering second careers or with caring responsibilities to work in health and social care. When creating new posts or recruiting to vacancies attract new applicants by embedding flexibility and innovation in our ways of working.	<ol style="list-style-type: none"> 1. Promote roles across health and social care with information on how a breadth of experience and skills can support people to be successful. 2. Support unpaid carers to gain recognised qualifications and ensure they are aware of potential opportunities within health and social care. 3. Develop a range of recruitment strands: (i) employability; (ii) apprenticeships; (iii) graduate rotations; (iv) career change; and (v) sector 'tasters' 	<p>Years 1+</p> <p>Years 2 to 3</p> <p>Years 2 to 3</p>
Attract.7	Deliver rolling and targeted recruitment campaigns to attract staff to key roles in Renfrewshire.	<ol style="list-style-type: none"> 1. Continue delivery of HSCP's interim workforce actions with recruitment action plans in Care at Home; Mental Health; CAMHS; ADRS; District Nursing and School Nursing 	<p>Year 1</p>

A 'values based' approach to recruitment

By looking wider than the 'usual' pool of recruits, where possible, our recruitment approach aims to find people who may not have any previous experience in care, but who have exactly the sorts of values that align with our own.

We actively seek to remove barriers which may prevent good people from applying for our roles - and get to know them first, their motivations, passions, interests and whether they'll be a good fit for our organisation and for the roles we're recruiting to. In this way, we can make the best possible recruitment choices for those we provide care and support for.



Collaborating to tackle a national recruitment challenge

For a wide range of Health and Social Care roles across the UK, recruitment has become a significant challenge. Within Renfrewshire HSCP, we have aimed to tackle this in two main ways. Firstly, we have implemented a targeted communications campaign to promote the benefits of working for the HSCP, highlighting through clear examples, that a role here provides strong career opportunities and career progression.

We are also working with our partners and independent service providers from across Renfrewshire to develop a collaborative approach to attracting new staff for our services. This will involve a joined-up approach to local recruitment, including recruitment events and promotional activities.





Employ

Employ

Aiming to be employers of choice in Renfrewshire

Employ

Valuing and rewarding staff for the work they do

It is essential that staff within our services and across the sector feel valued for the critical work they do, both financially and professionally, and that their health and wellbeing continues to be prioritised into the future. A workforce which feels valued, empowered and is invested in will help us achieve a sustainable and stable workforce which can deliver continuity of care and improve outcomes.

This investment is not only about how our staff are rewarded by also about how we help to manage and alleviate the pressure of each role, support the personal and professional development of each person in a way which meets their expectations and ambitions, and empower our people to make decisions. Combined with a focus on how we attract staff to the sector, this will support us to retain the best talent too.

Doing so is not without its challenges and will require closely collaboration between Renfrewshire HSCP, NHSGSC and Renfrewshire Council, and must involve our providers and partners in the third and independent sectors. This joint working will not only enhance the sustainability of individual organisations but the sector as a whole.

Feeling valued at work is linked to better physical and mental health, as well as higher levels of engagement, satisfaction and motivation.

Findings from an American Psychological Association [survey](#)



The outcome we want to achieve:

Our recruitment and retention of staff is enhanced and we are seen as employers of choice, where staff feel valued and supported. This will enable sustainable health and social care services across Renfrewshire.

Key Challenges

- Recruitment and retention challenges with significant levels of vacancies and hard to fill posts across health and social care.
- Staff are exhausted as a result of the pandemic, with significant service pressures continuing. Maintaining the health and wellbeing of our staff remains a key priority.
- There remains a significant degree of uncertainty over the nature of changes in the short to medium term, including the impact of the implementation of a National Care Service on staff employment and service provision.
- There is current inflexibility in registration requirements, which can prevent skilled staff moving between different parts of the sector.
- Funding pressures remain, resulting in the use of fixed term posts which are less appealing and less competitive compared to permanent positions.

Reference	Strategic Objective	Actions	Delivery by
Employ.1	Increase the number of applicants by promoting Health and Social Care as an appealing career to people displaced from their own employment either during or following the pandemic.	1. Utilise winter funding to enhance recruitment.	Year 1+
Employ.2	Sustain and grow our workforce to reflect national policy commitments and funding streams.	1. Assess opportunities for 'stay interviews' for critical roles. 2. Continue to progress service development and related recruitment in relation but not limited to: (i) Winter funding (Home Care, Interim Care, MDT); (ii) PCIP; (iii) Mental Health and Wellbeing in Primary Care; (iv) CAMHS; and (v) Action 15	Year 1 Year 1+
Employ.3	Maximise the impact of health and social care roles through innovative recruitment where organisations are advertising similar roles but are struggling to recruit.	1. Review hard to fill posts in the health and social care sector within Renfrewshire. 2. Identify opportunities for jointly-funded posts between organisations e.g. third sector and public/third sector and consider possible 'hosting' arrangements.	Year 1+ Years 2 to 3
Employ.4	Develop and shape the workforce to meet changes required by emerging policy	1. Confirm transformational activity to be progressed by HSCP by 2025 with associated service and role redesign impact, including requirements arising from the NCS, and define change management and OD plan e.g. collaboration skills; supporting prevention; empowering staff. 2. Define support requirements (e.g. Admin, Change & Improvement) and formulate recruitment plan	Year 2 Year 2

Inspiring our Leaders to build a positive working culture

Our Leadership Network is a well-established group of line managers, team leaders and supervisors from across the HSCP. This group, which is led by the Chief Officer with the full support and participation of the Senior Management Team, consists of around 150 leaders, are in a strong position to influence the wellbeing of our people, the performance of our teams and the culture of our organisation.

This is why, during the pandemic, we have reinvigorated the network, to make sure we provide our leaders with a strong, collective message they can take back to their teams and communicate consistently across all our services.

With recent topics including 'communicating consistently' and 'compassionate leadership' on the agenda, these sessions are making a meaningful impact on our teams, generating a strong identity as an organisation and providing reassurance to our staff that we have a collective purpose and vision for the future.

As Managers, how can we improve how we share / cascade information with our teams?



Supporting Primary Care – Community Link Workers

Through our partnership with 'We are with you', Community Link workers will continue to support each of the 28 GP Practices across Renfrewshire. Community Link workers offer one-to-one appointments for patients who have non-medical concerns affecting their physical and mental health. Patients may be referred to local sources of support such as housing and benefit advice. 100% of people who responded to a satisfaction survey felt they had 'been connected with the right sources of support'.

This resource reduces the demands on GPs and enables them to focus on medical related issues. The success of the service has resulted in further investment in 2022 / 23.



A woman with long red hair and bangs is sitting at a dark wooden table, focused on her laptop. She is wearing a green cardigan over a dark blue polka-dot top. The background shows a modern kitchen with grey cabinets, a wooden countertop, and a brick wall. Three warm-toned pendant lights hang above the counter. A purple rectangular overlay is positioned in the lower-left corner of the image.

Train

Supporting staff to develop their skills and expertise

Providing our staff with the right expertise is critical to the development of a sustainable workforce and will help us to attract a wider range of people to the sector, retain our staff and ensure that we have robust succession plans in place for our senior leadership positions.

This means providing designated time for the opportunity to develop skills and knowledge to meet the needs of our population today and in the short term, examples of which include the new ways of working during the pandemic, but also ensuring that training and learning routes help our people to develop the skills needed for the future. This can be around use of new digital tools and technology but also how the HSCP, our partner organisations, communities and those in the wider sector work in more collaborative and preventative ways.

We recognise that a significant proportion of learning requirements and associated delivery is set nationally and that as employees of NHSGGC and Renfrewshire Council, HSCP staff will access training provided by our partners. However, the HSCP will focus on working jointly to inform the development of learning opportunities across Renfrewshire.

“One of the factors that has been identified as important for retention is that career pathways...are perceived to be limited in both Health and Social Care and we must address this”

National Workforce Strategy for Health and Social Care



The outcome we want to achieve:

Health and social care staff are appropriately trained for their role and have access to wider opportunities for personal and career development within their own organisation and through collaboration with partners.

Key Challenges

- Service pressures, which have increased during the pandemic, lessen the ability of staff to access training opportunities.
- Linked to the above point, existing vacancies and staff absence necessitate the focus of staff on service provision and reduce the opportunity to set protected time for individuals' development.
- In frontline services, particularly within social care, training programmes are often not linked to career pathways.
- Organisations across the health and social care sector focus on training of their own staff, often for skills and expertise which are common across organisations, resulting in lost opportunities for collaboration.
- Addressing skills gaps (for example specialist posts such as Mental Health Officers, District Nurses and Social Workers) will take a number of years, and action is required immediately to meet changing service user and patient demands.

Reference	Strategic Objective	Actions	Delivery by
Train.1	Develop an updated view of the training landscape and ensure resources are in place to support staff to access training to support their development.	<ol style="list-style-type: none"> 1. Develop a Renfrewshire-wide training matrix and career pathways for all Health and Social Care staff. 2. Review current training provision and develop plans for future internal and external provision, including delivery building on COVID training experiences. 3. Create a Renfrewshire HSCP Training Academy through ringfenced funding within IJB reserves. 4. Update induction pathways for new starts and staff taking on new roles to support longer term retention and include (i) an introduction to the HSCP; (ii) team introductions and networking; and (iii) core training requirements. 5. Support access to related NHS Academy learning sources and national induction framework for Adult Social Care as well as wider training opportunities for all HSCP staff. 6. Implement national commitments for a mandatory supported year for newly qualified social workers and pilot social care graduate apprenticeships. 	<p>Year 3</p> <p>Year 3</p> <p>Year 1</p> <p>Year 2</p> <p>Year 3</p> <p>Year 3</p>
Train.2	Reflecting progress since 2020, enhance workforce digital skills in line with changing ways of working and Digital Health and Care Strategy.	<ol style="list-style-type: none"> 1. Develop longer-term digital strategy and plans through HSCP Digital Oversight Group and invest in technology to support workforce development. 2. Identify core digital skills required in service roles and build into induction and essential training. 	<p>Years 2 to 3</p> <p>Years 2 to 3</p>

Reference	Strategic Objective	Actions	Delivery by
Train.3	Embed a policy of 'Grow our Own' within Health and Social Care in Renfrewshire	<ol style="list-style-type: none"> 1. Determine core skills required and support on-the-job training programmes. 2. Build capacity into transformation plans and performance management to ensure managers have time to support individual development in line with new delivery models. 3. Undertake assessment of external organisations that could support apprenticeship opportunities and the development of Renfrewshire's 'Grow our Own' policy. 	Year 3 Year 3 Year 3
Train.4	Strengthen relationships with Further and Higher Education institutions to develop training opportunities.	<ol style="list-style-type: none"> 1. Build upon opportunities for work experience and placements at all levels and in all parts of the sector – school, college, university. 2. Identify mentoring opportunities for people studying for health and social care qualifications. 	Years 2 to 3 Years 2 to 3
Train.5	Support our managers and leaders to develop their competence and skills to lead teams in a remote working setting, promoting strong team working.	<ol style="list-style-type: none"> 1. Provide check-ins and support to team leaders and managers within the HSCP. 2. Cross-section engagement with staff to understand experience and requirements and use to inform provision of local support. 3. Support managers to manage absence effectively and enable team members to contribute to the best of their ability. 	Year 1+ Year 1+ Year 1+

Reference	Strategic Objective	Actions	Delivery by
Train.6	Develop skills and knowledge within our workforce to meet changing demands and approaches to service delivery.	<ol style="list-style-type: none"> 1. Introduce protected time for mandatory training. 2. Identify and implement opportunities for joint delivery access to training sessions to promote shared learning and understanding within the partnership and with third sector partners. 3. Support the NHSGGC modernisation of the AHP workforce through the development of Advanced Practice roles across (but not limited to) Mental Health, Addictions, Children's Health Services and Nursing. 4. Support GP practices with Transforming Nursing Roles and General Practice Nurse and Advanced Nurse Practitioner development. 5. Support the delivery of the Strategic Pharmacy Framework, enabling staff to work at the highest level of practice. 	<p>Year 3</p> <p>Year 3</p> <p>Year 3</p> <p>Year 3</p> <p>Year 3</p>

Train

Some Case Study Examples

Supporting our people to develop their careers

When she was 17, Amy Duffin had a choice between continuing in full time education or joining our Finance Team as a Modern Apprentice. Thankfully, she chose us. Now, as a Senior Accountant, Amy can look back at her decision with pride and talk about why this was a great career pathway for her, and could be for many people in her position.

She said: “The HSCP have been very supportive of me developing my career and helping me gain the qualifications I needed to progress. My team have all been in my position and knew what I was going through. Time to study or for exams was never an issue and everyone was very supportive.

“This was the right choice for me. I now have the same qualifications I would have achieved at University, but have also had a chance to build up my career and earn full time wages at the same time.

The HSCP has given me the opportunity and support to get a point in my career where I’m satisfied with what I’m doing and where I’m going. I really enjoy working here”.



Cross Organisational Mentoring

The Cross Organisational Mentoring Programme is one of a number of mentoring schemes that HSCP staff have access to. Laura Glennon was new to a leadership role within our RES team and wanted support to develop as a leader.

As Laura explains, mentoring has been a positive experience for her: “My mentor has been easy to talk to and our meetings are a ‘safe space’ where I can talk freely. I feel it has helped me make service improvements, ensure staff are engaged, involved and we can build on the areas we are working on.

“My team has fed back that they are happy we are working through improvement areas and can see we are making progress as a team. I now have more confidence in myself and will take this forward when the mentoring comes to an end.





Nurture

Nurture

Taking action to support the wellbeing of staff

Nurture

Prioritising the wellbeing of those working in the sector

Our people are our most precious resource and their wellbeing is a priority for the HSCP, our partners within NHS GGC and Renfrewshire Council, the wider health and social care sector, and the Scottish Government. This includes not only our staff but also unpaid carers providing essential support to their family and friends in Renfrewshire.

The significant impact of the pandemic on the physical and mental wellbeing of staff has been recognised both nationally and locally. The wellbeing initiatives and support implemented will continue to be prioritised and built on to ensure that staff feel supported to deliver high quality care and support.

Beyond this, we will also focus on the continued development of our organisational culture and compassionate leadership, recognising that this plays a key role in supporting staff wellbeing. Through this we will seek to enhance the diversity and inclusiveness of our workforce, ensure the safety of our staff at work every day and through our communications and engagement strategy support staff to feel heard and involved in decision making.

“Promoting wellbeing can help prevent stress and create positive working environments where individuals and organisations can thrive.”

Wellbeing at Work, [CIPD](#)



The outcome we want to achieve:

Our organisational culture(s) prioritise the health and wellbeing of our staff so that they feel supported with their physical, emotional and professional needs

Key Challenges

- Staff are exhausted following the pandemic and need the opportunity to reflect and recover from the pressures faced.
- Traditional ways of working have not offered the flexibility required by many colleagues within the workforce.
- Our workforce is not as diverse as it could be at all levels, including senior management.
- Many roles are female-dominated, in particular nursing and caring roles, with ongoing challenges in attracting more male workers into caring roles.
- Workforce pressures and service demands have necessitated a focus on meeting needs in the here and now and recruiting fully skilled staff, with limited capacity for managers to further develop staff and help us to ‘grow our own’.
- The recording of long COVID sickness will require further review to address inconsistencies and ensure fair treatment for all staff.

Reference	Strategic Objective	Actions	Delivery by
Nurture.1	Promote equality, diversity and inclusivity across the sector.	<ol style="list-style-type: none"> 1. Continue to deliver online and face to face training for staff and partners to raise awareness of Equality and Diversity and Unconscious Bias. 2. Support the delivery of, and staff access to, (i) networking opportunities for staff from minority ethnic backgrounds; (ii) parent organisation workforce equality groups; and (iii) staff equality training to be developed by Scottish Government and partners. 3. Work with partners to improve the availability of data and demographics on protected characteristics in line with Scottish Government and PHS guidance. 4. Fund the In-Ren network post hosted by Engage. 5. Undertake the LGBT Charter award to equip our staff to improve health and wellbeing outcomes experienced by LGBT people in Renfrewshire. 	Year 2
Nurture.2	Continue to prioritise the health and wellbeing of staff through the provision of local, regional and national support.	<ol style="list-style-type: none"> 1. Continue to promote the availability of national resources to support health and wellbeing through the recovery process. 2. Promote Healthy Working Lives. 3. Support access to Mental Health First Aider training. 4. Work with third and independent sector partners to develop a framework to support sector staff to access wellbeing resources. 5. Include consideration of health and wellbeing as part of every change process. 6. Implement absence management plans to help staff into work with additional support as required. 7. Work with partners to deliver Wellbeing initiatives, e.g. including Mental Health and menopause policies 	Year 1+

Reference	Strategic Objective	Actions	Delivery by
Nurture.3	Promote a positive workforce culture that endorses staff wellbeing where leaders listen and nurtures a compassionate, diverse, and inclusive workplace.	<ol style="list-style-type: none"> 1. Develop a structured succession planning approach, linking with work set out in National Strategy and working with partners (e.g. contributing to NHSGGC proposals for a refreshed development programme). 2. Support training to enhance leaders' 'soft' skills. 3. Remove any barriers and promote diversity in senior leaders to reflect the community in Renfrewshire. 4. Develop mentoring support for emerging leaders. 5. Support staff to feel confident in raising concerns, and to access their employer's whistleblowing processes where appropriate. 6. Work with partners to deliver trauma-informed training for a trauma responsive workforce. 	Year 3
Nurture.4	Continue to protect the health and wellbeing of staff and residents in HSCP and independent Care Homes.	<ol style="list-style-type: none"> 1. Continued delivery of the "Huddle" model and care home reporting. 	Year 1
Nurture.5	Ensure that existing and new staff have access to the right guidance, equipment and accommodation to support them to do their jobs safely.	<ol style="list-style-type: none"> 1. Review induction processes and information provided to ensure inclusion of key elements. 2. Continued review of risk assessments and provision of PPE for frontline staff. 3. Support for staff to access vaccinations in line with national guidance. 4. Continue the HSCP's review of property use to ensure it meets current and future needs. 5. Undertake Display Screen Equipment (DSE) assessments for all staff working at home and utilise Occupational Health to define reasonable adjustments for staff where required. 	Year 1+

Reference	Strategic Objective	Actions	Delivery by
Nurture.6	Implementation of the Health and Care (Staffing) (Scotland) Act 2019.	1. Implement the provisions of the Act in line with updated implementation and transition timetable.	Year 2 (indicative)
Nurture.7	Consider how Long COVID is managed moving forward to address any inconsistencies in absence management and ensure fairness of treatment.	1. Work with NHSGGC and Renfrewshire Council HR to implement processes as they are developed and reflect any future national guidance on treatment of Long COVID.	Year 1 to 2
Nurture.8	Continue to assist unpaid carers to provide support for family and friends.	<ol style="list-style-type: none"> 1. Implementation of updated Carers Strategy following Renfrewshire IJB approval in June 2022. 2. Work with NHSGGC to improve the experience of unpaid carers before and during hospital admissions, stays and discharges. 3. Through the Carers Partnership, encourage employers across Renfrewshire to be Carer positive employers. 4. Develop blended (online and face to face) support to give a range of access choices. 5. Progress initiatives such as the Carers Passport to provide discounted opportunities for unpaid carers. 6. Coordinate cross sector activity to develop Renfrewshire as a carer-friendly community. 	Year 1+

Recognising the efforts of our people

Each year, our staff awards programme shines a light on all the great work that takes place across our services. We ask all HSCP staff to nominate the colleagues they feel have made a difference or special contribution, gone the extra mile, or had a significant impact. The aim of the awards is not only to celebrate the achievements of those nominated by their peers, but also to help raise awareness and recognise the efforts of individuals, right across the Partnership.

The categories include Team of the Year, Employee of the Year, Leader of the Year and Innovation of the Year.

The pride, motivation and confidence generated from our annual staff awards makes a big difference to the wellbeing of our people.



Volunteering for career and experience development

Elaine Penman has been volunteering with NHS Greater Glasgow & Clyde for over five years. Elaine explains why she got involved: "Over the five years, I have moved between different roles and locations, which has been an excellent opportunity to experience diverse areas of the NHS and play a part in helping staff and patients."

"Building confidence in interacting with patients and feeling comfortable in the ward environment has been great. As a dietetic student, I am gearing up towards placements and working with the public in a healthcare role. Every shift is a learning experience!"

In April 2022, Elaine was offered a paid role as a Dietician in her local health board. We are delighted that she has progressed onto her chosen career path, in an area of work she is passionate about.





Appendices: Further workforce data and Glossary

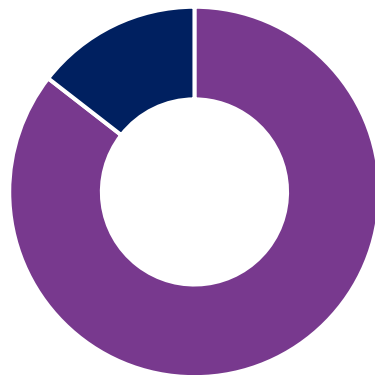
Appendix 1

Further workforce demographic data: Gender

Renfrewshire Council Employees within the HSCP by Gender

Gender	Head Count	%
Female	897	86%
Male	152	14%
Total	1049	100%

Renfrewshire Council HSCP Employees

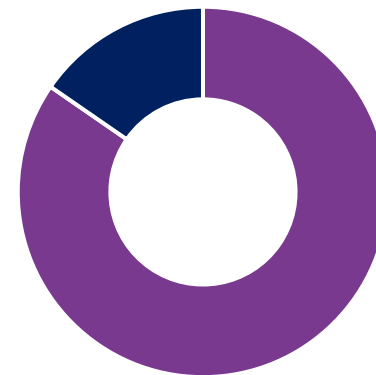


■ Female ■ Male

NHSGGC Employees within the HSCP by Gender

Gender	Head Count	%
Female	1045	85%
Male	190	15%
Total	1235	100%

NHSGGC HSCP Employees



■ Female ■ Male

Appendix 1

Further workforce demographic data: Pay Band / Grade

Renfrewshire Council Employees by Grade

Grade	Head Count	%
Grade 1	17	1.6%
Grade 2	463	44.1%
Grade 3	98	9.3%
Grade 4	39	3.7%
Grade 5	90	8.6%
Grade 6	72	6.9%
Grade 7	65	6.2%
Grade 8	33	3.1%
Grade 9	103	9.8%
Grade 10	34	3.2%
Grade 11	13	1.2%
Grade 12	5	0.5%
Grade 13	4	0.4%
Grade 14	6	0.6%
Grade 15	2	0.2%
Grade 16	1	0.1%
CO20	4	0.4%
Total	1049	100.0%

NHSGGC Employees by Grade

Band	Head Count	%
Band 2	45	3.6%
Band 3	293	23.7%
Band 4	76	6.2%
Band 5	265	21.5%
Band 6	226	18.3%
Band 7	190	15.4%
Band 8A	27	2.2%
Band 8B	4	0.3%
Band 8C	9	0.7%
Medical and Dental	89	7.2%
Non AFC*	11	0.9%
Total	1235	100.0%

*Non Agenda for Change banding

Appendix 1

Further workforce demographic data: Age Bands

Renfrewshire Council Employees by Age

Age	Head Count	%
16-20	3	0.3%
21-25	18	1.7%
26-30	51	4.9%
31-35	103	9.8%
36-40	83	7.9%
41-45	105	10.0%
46-50	125	11.9%
51-55	192	18.3%
56-60	229	21.8%
61-65	117	11.2%
66-70	21	2.0%
71-75	1	0.1%
75-80	1	0.1%
Total	1049	100.0%

NHSGGC Employees by Age

Age	Head Count	%
21-24	27	2.2%
25-29	126	10.2%
30-34	135	10.9%
35-39	127	10.3%
40-44	167	13.5%
45-49	148	12.0%
50-54	212	17.2%
55-59	186	15.1%
60-64	90	7.3%
65-69	15	1.2%
70-74	2	0.2%
Total	1235	100.0%

Appendix 1

Further workforce demographic data: Comparison with 2017 figures

Renfrewshire Council Employee Headcount

2017	2022	% change
1192	1049	12% -

NHSGGC Employee Headcount

2017	2022	% change
1243	1235	0.6% -

% Council Staff Aged 50+

2017	2022	% change in split
50%	57%	7% +

% NHSGGC Staff Aged 50+

2017	2022	% change
43%	41%	2% -

% Council Staff Gender Split

Gender	2017	2022	% change
Female	86%	86%	-
Male	14%	14%	-

% NHSGGC Staff Gender Split

Gender	2017	2022	% change
Female	84%	83%	1% -
Male	16%	17%	1% +

Appendix 2

Glossary of Acronyms

- **ADRS** – Alcohol and Drug Recovery Services
- **AHP** – Allied Health Professionals
- **CAMHS** – Children and Adolescent Mental Health Services
- **DSE** – Display Screen Equipment
- **GMS** – General Medical Services
- **GPST3** – General Practitioner Speciality Trainee (at stage 3 of training)
- **HR** – Human Resources
- **IJB** – Integration Joint Board
- **LA** – Local Authority
- **L&D** – Learning and Development
- **NCS** – National Care Service
- **NHSGGC FP&P** – NHSGGC Financial Planning & Performance Committee
- **NMaHP** – Nursing, Midwifery and Health Professionals
- **OD** – Organisational Development
- **PCIP** – Primary Care Improvement Plan
- **PCS** – Primary Care Service
- **PPE** – Personal Protective Equipment
- **R&R** – Rest and Relaxation
- **RES** – Rehabilitation and Enablement Service
- **SAMH** – Scottish Association for Mental Health
- **SDS** – Self-Directed Support
- **SG** – Scottish Government
- **SMT** – Senior Management Team
- **SPF** – Staff Partnership Forum
- **SPG** – Strategic Planning Group
- **SSSC** – Scottish Social Services Council
- **TECS** – Technology Enabled Care Services
- **WTE** – Whole Time Equivalent

Publications in Alternative Formats

We are happy to consider requests for this publication in other languages or formats such as large print

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