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**REPORT TO: MORAY INTEGRATION JOINT BOARD ON 26 JANUARY 2023**

**SUBJECT: RECRUITMENT CHALLENGES AND OPPORTUNITIES IN MORAY**

**BY: INTERIM STRATEGY AND PLANNING LEAD**

**1. REASON FOR REPORT**

- 1.1. To inform the Board of challenges and opportunities for the recruitment and retention of staff in Moray.

**2. RECOMMENDATION**

- 2.1. **It is recommended that the Moray Integration Joint Board (MIJB) consider and agree the priorities contained in section 4.21 of this report.**

**3. BACKGROUND**

- 3.1. Scottish Government (SG) has set out a National Workforce Strategy for Health and Social Care in Scotland, co-produced with COSLA. This identifies five key areas which will support the creation of a sustainable, skilled workforce as the sector rebuilds from the pandemic, along with significant commitments including:
- Investing £11million to establish a Centre for Workforce Supply and fund recruitment campaigns to grow the health and social care workforce.
  - Increase the number of undergraduate medical school places by 500.
  - Supporting up to 1800 training places in adult social care.
  - Recruiting 800 additional GPs by 2028.
  - Further improve staff wellbeing measures.
  - Increase investment to front line health and social care.
- 3.2. The national framework has been adopted and translated into the delivery of a Moray Health and Social Care Workforce Plan which was approved by MIJB on 29 Sep 2022 (section 12 minute refers to). Over the next three years, the local health and social care workforce plan will focus on the five key areas known as 'pillars'; they include, Plan, Attract, Train, Employ and Nurture staff. These five pillars are designed to support a sustained and skilled workforce, futureproofing the needs for our delivery of care and support throughout Moray and Grampian as a wider networked approach to service delivery.

- 3.3. Nationally, growth has occurred in the NHS and Social Care workforce over the past decade, however, we need more than sheer numbers alone as we continue to care for patients and plan for the future. As the change in demand for services increases, our intent and focus in Moray is to continue to recover, grow and transform our health and care services, with a focus on achieving a more sustainable, skilled workforce which also makes careers in health and social care desirable at all levels.
- 3.4. Staff in Moray are our biggest asset, and they are at the heart of wrapping care and support around individuals. We want to ensure that staff feel confident, motivated and valued in their roles and that they can work together in the persons interests regardless of who they are employed by. Staff have encountered the most challenging times in recent years as a result of the pandemic and our staff continue to work in extremely challenging environments, facing unprecedented pressures and continue to make individual sacrifices.
- 3.5. As a Health and Social Care Partnership we aim to adopt a strategic approach to the growth and transformation of the workforce that not only supports the wellbeing of our workforce, but also continues the shift towards prevention and for the provision of high quality support and care for our citizens. In turn creating a more balanced system to 'enabling wellness' whilst 'responding to illness'.

#### **4. KEY MATTERS RELEVANT TO RECOMMENDATION**

##### **Health**

- 4.1. In pursuit of delivering the vision for Moray Portfolio, *'we come together as equal and valued partners in care to achieve the best Health and Wellbeing as possible for everyone in Moray throughout their lives'*, will require healthcare that is more personalised and patient centred, more focused on prevention and to be delivered in the community through Multi-Disciplinary Teams, out of the hospital setting, supporting our 'Hospital without Walls' agenda. It will be enabled by technology and delivered by professionals from different organisations collaborating and coordinating their care for each other. As we continue to embed Discharge to Assess, work as multidisciplinary teams and keep abreast of technological advancements, with collaborations through Digital Health Institute and the opportunities from the Moray Growth Deal, our leaders also play a key role in shaping the culture to one which is positive, inclusive and supportive. One which engages and inspires all our workforce with a clear focus on improvement and advancing equality of opportunity.
- 4.2. There is compelling evidence that that the more engaged our workforce, the more effective and productive they are, and most importantly the higher the quality of care they deliver to our patients. Our patients tell us they want the staff who look after them to be well cared for themselves.
- 4.3. Through our ongoing engagement with our people they report pressures, frustration with not having enough time with patients/clients, and workplace experiences that could be improved. A comprehensive engagement study has been undertaken to support the development of the Dr Gray's Hospital (DGH) Plan for the Future. To serve our patients and citizens in the best possible way we must act on the engagement information to support the immediate issues

and at every level we need to pay greater attention to retaining the Moray Health and Social Care workforce.

- 4.4. There are workforce shortages across a wide range of NHS staff groups that we are committed to addressing. The various disciplines are all interconnected, and recruiting to one discipline successfully does not solve the overall challenge. In the next section two disciplines are set out in more detail as examples of how we are addressing recruitment and retention.

### **Nursing**

- 4.5. We recognise we need to continue to support and retain our existing nurses, encourage nursing as a profession, bring in nurses from abroad and make sure we make the most of the nurses we already have. Nursing within DGH (Dr Gray's Hospital) presently has vacancies of approximately 26 whole time equivalents (WTE) nursing staff which equates to approximately 20% nursing vacancies (registered nurses and non-registered nurses) this is largely due to retirement and staff leaving the profession or moving to another location. In order to manage the correct skill mix and reduce risk, this means that often nurses are moved to other wards within the hospital to equalise the risk. There is a high proportion of newly qualified staff across the site.
- 4.6. To offset these vacancies, DGH successfully recruited 18 new graduates who will be part of the new graduate process in the coming months. The Practice Education Team will work closely with new graduates with a view to making sure they have the correct skill mix to increase their impact within the hospital.
- 4.7. DGH was part of the NHS Grampian International recruitment drive but many of this staff cohort tend to take up positions in Aberdeen Royal Infirmary. It also recruits from other areas of the UK. The risk here is that if nurses are offered another position with substantially larger pay they are more likely to move back to nearer to where they originate from, to take advantage of the higher financial reward and avoid relocation costs.
- 4.8. Given the difficulties in recruitment and retention, DGH relies on agency nursing staff to supplement the workforce especially in Theatres.
- 4.9. Data relating to retirements in HSCM shows that there is a significant number of potential retirements in 2023 with 20 across all services. 10 of these are within Nursing and Midwifery service, and figures suggest that, although lower in years to come, those retiring are within this Service. A full breakdown of potential workforce figures for retiring in the future can be found in **Appendix 2**.

### **Social Care**

- 4.10. Social care support is as essential as Health Care and must be recognised for its unique and vital role. The Independent Review of Adult Social Care (aka Feeley Report) heard about the dedication and commitment of Social Care workers but also learned about the workforce that has been in part undervalued and poorly paid for vital and skilled work.
- 4.11. Recognition of the need to increase and upskill the workforce and support retention has been seen through a number of initiatives taken forward in partnership with SG;
- Since 2022 Moray HSCP have funded the real living wage for social care workers with pay increased from at least £9.50 per hour to at

least £10.50 per hour. This is inclusive of the Third and independent sector.

- Recruitment campaigns continue to have a key role in attracting people into Social Care. Local social media campaigns utilising the people working in Moray are active and in line with the national 'there's more to caring than caring' campaign.

- 4.12. There is an increasing need to support the 'pipeline' of workers coming into the profession, for example through highlighting the sector in schools, which takes place through career events across Moray's high schools, not only attracting school leavers but also showcasing the wider employability routes to parents and guardians who may be seeking a career change. This is coupled with the well-established Developing the Young Workforce (DYW) support workers, promoting health and social care opportunities and the availability of a range of career pathways.
- 4.13. Integrated approaches to recruitment are also being used to break down any perceived barriers across Health and Social Care and integrating training and leadership approaches are in place. Successful local examples are through University of Highlands and Islands (UHI) Moray continued delivery of modern apprenticeships in Social Services and Health Care along with Scottish Vocational Qualifications (SVQ) in Health and Social Care, all of which support work based awards for support workers and practitioners/key workers in a care setting. In addition to academic courses, the Moray Life Science Centre facility is located within the campus which acts as a focal point for health care education, research and life science, all offering an attractive local pathway into the health and care sector. This supports the attraction from local, national and international students to work and live in Moray.
- 4.14. Moray Council in partnership with Moray HSCP continue to develop new ways of working and modernising social care roles. The Care at Home team have implemented a temporary Recruitment Cell to manage all aspects of recruitment for improved information, marketing, selection, recruitment and induction training. HSCM have also worked with Human Resources (HR) and the Information Officer to use all media outlets, including social media to provide information to the public but also advertise all available posts. The team are also targeting geographical areas, addressing supply and demand. This temporary test for change was put in place in February 2022 to support recruitment across all of the service but primarily with Social Care Assistants (SCA). This "test" has proved successful in terms of numbers of SCA entering the service and raising the profile of Care at Home and the role of Care Assistants.
- 4.15. Since the recruitment cell was introduced 31 new members of staff have been successfully recruited to the SCA post. This is compared to 12 over the same period in 2021. The recruitment cell is also working with Department for Work and Pensions (DWP) and Moray College to take forward work to engage with students and those looking for employment.
- 4.16. Moray is a small county, therefore in all our actions to grow the workforce we must always carefully consider the implications of recruitment in one part of the health and social care system, recognising people are a finite resource. An area of specific growth has been through the 'Personal Assistant' (PA) route, which offers person centred care for the 'cared for' but also person centred

outcomes for the PA (employee). This is achieved through both parties negotiating the needs and wants to maximise a mutually beneficial partnership. Moray has over 300 PAs working on packages through a Direct Payment (Option 1 Self-Directed Support). To bolster the recruitment, a temporary post was created to rapidly match and support the need for care with the recruitment of a PA coordinator with HSCM. This has proven to be highly efficient and successful in sourcing PAs to reduce the time taken for matching to take place, in turn reducing the care needs within communities across Moray and maximising outcomes for all. The post has also successfully supported PA's in Moray, exploring the benefits and challenges to being a PA in Moray.

- 4.17. As Moray Council develops their Housing Demand Needs Assessment (HDNA) a study is underway to evidence base the accommodation needs for those working in the Health and Care sector. The full HDNA will be completed by Mid-2023. This will lay the groundwork to grow the workforce and make Moray the best place to live and work.

### **Anchor Institution**

- 4.18. As an 'Anchor Institution' we contribute to community wealth building, by choosing how and where we spend our budget, how we approach employment and how we manage our land and buildings within our communities. This all contributes to addressing some of the causes of health inequalities within those communities. In addition, as a socially responsible employer, we will continue to actively consider different ways of providing support and opportunities to employment through positive messaging, flexibility in job roles, support easier access to employment and reaching out to groups currently less represented in the workforce.

### **National Care Service (NCS)**

- 4.19. The proposal of a NCS is under debate with Scottish Parliament, with a view to establish the NCS by the end of 2026. However, with current and recent pressures in Social Care, recovery of Adult Social Care must be taken forward now and over the coming years to 2026, and not to delay or procrastinate over the creation of the NCS, ultimately to help meet the needs of our citizens, build resilience, increase the workforce and further develop the delivery of Fair Work across the sector.

### **Next Step**

- 4.20. To achieve our strategic outcomes, underpinned by the tripartite ambition of Recovery, Growth and Transformation, we must do this through the five pillars of the workforce journey delivery plan. These pillars are designed to have maximum impact in their aims of recovery, growth and transformation in our services and workforce. Although we know we need to grow our workforce, we must also recognise the vacancies in the system and ensure that we consider these in understanding our workforce need into the future, this analysis of data is underway, but requires further analysis to truly understand the reasons contributing to the vacancies.
- 4.21. In summary, to improve the quality and effectiveness of strategic workforce planning, over the next 3 years of the delivery plan we will continue to focus on the 5 pillars with a direct focus on capacity for recovery by:

- I. Take steps to improve the quality of data, including demographic data we collect, and to progressively improve the quality of analysis we undertake from data collected, through different sources.
- II. Improve workforce planning capability across partners, providers, specifically focusing on shared learnings and better alignment to national and local planning, modelling the need/growth projections and improve understanding of workforce planning skills and methodologies and approaches, and a greater understanding of the barriers and solutions that reflect diversity of employers across Moray.
- III. Improve the accuracy of capacity planning and use workforce planning to more readily spot emerging gaps and pressure points.
- IV. To ensure optimal career progression and retention planning of local and national or international recruitment should remain focused on workforce demographics, aiming to have a workforce that is representative of communities we serve in Moray.

## **5 SUMMARY OF IMPLICATIONS**

### **(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Partners in Care 2022 – 2032”**

The workforce plan is a key enabler to achieving the outcomes in the strategic plans for Moray Council, NHS Grampian and Health and Social care Moray.

### **(b) Policy and Legal**

The development of the workforce plan and immediate next steps will support the implementation of the Health and Care (Staffing) (Scotland) Act 2019. The implementation of the above Act was delayed due to Covid-19 and will commence consultation with Partnerships mid to late March 2023.

### **(c) Financial implications**

Staffing costs are projected through the forecasted annual budget. If additional funding is required, this will need to be through transformation to deliver within a finite financial resource.

### **(d) Risk Implications and Mitigation**

As the population gets older, the shift towards long-term, complex and multi layered conditions will continue as will demand on our Health and Social Care services and workforce. National approaches to supporting Health and Social Care needs must continue to be complemented by place-based action at local and community levels. We must ensure that our workforce has the skills to support and care for a rights-based approach to mental health and we recognise our workforce itself requires support and care.

All this has also led to sustained additional pressure on unpaid carers, many of whom also work in Health and Social Care, with significant impacts on their own health and wellbeing. The Carer Positive Kitemark is awarded to employers in Scotland who have a working environment where unpaid carers are valued and supported. Moray Council has achieved level 1 (engaged).

### **(e) Staffing Implications**

Work is undertaken through existing funding resources.

### **(f) Property**

Not applicable

**(g) Equalities/Socio Economic Impact**

An Equality Impact Assessment is not needed as there is no change to policy or procedure.

**(h) Climate Change and Biodiversity Impacts**

Through optimising the recruitment and matching 'need' at a community level, this will reduce the need for greater vehicle use and a reduction in transportation usage.

**(i) Directions**

None

**(j) Consultations**

Members of Moray Portfolio Senior Management Team. Jackie Andrews, University of Highlands and Islands. Michelle Fleming, Self Directed Support & Carers Officer.

**6. CONCLUSION**

- 6.1. We acknowledge that strategic action is needed both now and into the future to improve the sustainability of the Health and Social Care System**
- 6.2. By following the next steps in the creation of the strategic workforce delivery plan, we lay effective foundations for realising more robust whole system planning in the future and create an active culture of continuous improvement.**

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Background Papers: with author

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