

Internal Audit



NHS Lothian

Workforce development focused on the Midlothian Health and Social Care Partnership arrangements to support the Midlothian Integration Joint Board workforce direction

March 2020

Internal Audit Assurance Assessment:

Objective One	Objective Two	Objective Three
Moderate Assurance	Moderate Assurance	Moderate Assurance

Timetable

Date closing meeting held: N/A

Date draft report issued: 30 March 2020

Date management comments received: 29 May 2020

Date Final report issued: 29 May 2020

Date presented to NHS Lothian Audit and Risk Committee: 22 June 2020

This report has been prepared for NHS Lothian in our capacity as NHS Lothian Internal Auditors and will be shared with Midlothian IJB's Internal Audit team and the IJB's Audit & Risk Committee. It has been supported by officers from the IJB, NHS Lothian, and the Midlothian Council.

Contents

1. Introduction.....	3
2. Executive Summary	4
3. Management Action Plan	6
Appendix 1 – Staff Involved and documents reviewed.....	11
Appendix 2 - Definition of Ratings.....	12

1. Introduction

- 1.1 The Midlothian Integration Joint Board (MIJB), established in April 2016, under the Public Bodies Joint Working Act 2014 (the Act) is responsible for commissioning, directing, and governing the activities of the Midlothian Health and Social Care Partnership (the Partnership). The Partnership comprises NHS Lothian (NHSL), and Midlothian Council (the Council) who work together to deliver health and social care services for adults across the City. The IJB is responsible for the strategic planning of the functions delegated to it and for ensuring the delivery of those functions through the directions issued by it under the Act. The role of the Partnership is in effect the operational delivery of the Directions set by the IJB. The focus of the audit will be the operational delivery of workforce planning by the Partnership in particular how NHS Lothian support workforce planning at a partnership level.
- 1.2 Workforce planning is concerned with ensuring that an organisation has the right people, with the right skills, in the right place, at the right time to support the delivery of objectives. This is particularly important for the effective provision of services within the partnership across Midlothian.
- 1.3 Workforce including recruitment and retention is recognised within the MIJB strategic risk register as a medium level risk with there being a potential lack of ability to recruit sufficient staff in sufficient numbers to deliver required services. In order to mitigate this a Health and Social Care workforce framework which considers the development of new roles and changing skills mix is in place.
- 1.4 MIJB agreed a framework for Workforce Planning in October 2017. The framework provides a foundation for each delegated service area to be clear on the shape of their current workforce, and determine their needs for the future, taking account of transformational change and development requiring new models of care and the increasing need to demonstrate the effective use of resources. Each delegated service is then required to develop a Workforce Action plan.

Scope

- 1.5 Our review assessed the Midlothian Health and Social Care Partnership's approach to workforce development, in particular ensuring that operationally people resources are in place to deliver redesigned services commissioned by the MIJB which fit with strategic priorities for health and social care integration set out in the Strategic Plan to meet the needs of service users. In addition, we looked at the alignment of the partnership arrangements to the specific workforce direction given by MIJB.

Acknowledgements

- 1.6 We would like to thank all staff consulted during this review for their assistance and cooperation.

2. Executive Summary

Summary of Findings

2.1 The table below summarises our assessment of the risks and the adequacy and effectiveness of the controls in place to meet each of the risk areas agreed for this audit. Definitions of the ratings applied to each action are set out in Appendix 2.

No.	Control Objective	Control objective assessment	Number of actions by action rating			
			Critical	High	Medium	Low
1	The workforce planning framework is in place and provides a basis for the production of workforce plans that facilitate the achievement of the MIJB's current strategic objectives	Moderate Assurance			1	
2	Workforce plans are in place within the partnership which identifies existing workforce requirements and includes prioritised actions to address gaps in skills and numbers, to ensure the MIJB's objectives are achieved	Moderate Assurance			2	
3	There is appropriate governance arrangements in place to monitor and report progress against workforce plans	Moderate Assurance			1	
TOTAL			-	-	4	-

2.2 Three findings have been identified and detailed in the management action plan, however, finding two related to control objectives two and three hence the table above detailing the number of actions as four.

Conclusion

2.3 The review comprised of three objectives, of which each received a Moderate Assurance rating. A lot of discussion has taken place at Midlothian HSCP in relation to workforce planning based on minimal guidance from the Scottish Government to date. Now that the guidance has been published, the HSCP should be able to move forward and develop the full Workforce Plan which is due for publication by 31 March 2021.

Main findings

- 2.4 The Midlothian Health and Social Care Partnership Workforce Planning Framework should be reviewed to ensure it aligns with the current Strategic Plan.
- 2.5 At the time of the audit the full Workforce Plan was yet to be developed, but Midlothian HSCP were awaiting the revised workforce planning guidance from the Scottish Government to move forward. In addition, only four out of fifteen detailed workforce plans for individual areas of the HSCP have been created.
- 2.6 The Operational Organisational Development Midlothian H&SC Partnership worked alongside services to do the workforce service plans; it was very collaborative which took a long time to do but people were guided through it. However, staff have yet to receive any formal training and given the complexity of the workforce planning process and its implications for the future operations of the HSCP both mean that additional, more intensive training would have been beneficial.
- 2.7 Midlothian HSCP were tasked with taking forward 'Recruitment & Retention' workstream following the Lothian HSCP Workforce Planning Collaboration event which took place in May 2019; however, it was confirmed that nothing has happened in this space since the event took place.
- 2.8 Regular progress updates should be provided to the MIJB regarding workforce planning. In addition, a timetable should be established which outlines key dates for draft plans and final plans to be reviewed and approved in order for the publication date of 31 March 2021 to be met.

3. Management Action Plan

<p>Control objective 1: The workforce planning framework is in place and provides a basis for the production of workforce plans that facilitate the achievement of the MIJB's current strategic objectives.</p>	
<p>1.1: The Midlothian HSCP Workforce Planning Framework does not reflect the MIJB's current strategic objectives.</p>	<p>Medium</p>
<p>Background:</p> <p>Central to the achievement of the goals of the 2019-2022 Strategic Plan in terms of service redesign and new ways of working, is a skilled and committed workforce. The Midlothian Health and Social Care Workforce Framework and detailed Workforce Plan are essential to the successful implementation of the Health & Social Care Strategic Plan. The framework will provide a bedrock for the full Workforce Plan, made up of individual Service Plans. Under the Workforce section of the Strategic Plan, the organisation states that the workforce is their most valuable asset and as a result of transformational change and new models of integrated working, Midlothian HSCP recognise that there is a need to invest in the following: building strong values; strong effective working relationships; a shared culture; the right skills and knowledge; and providing clear career pathways. These are all key elements of workforce planning.</p> <p>Observation and Risk:</p> <p>The Midlothian Health and Social Care Partnership Workforce Planning Framework 2017-2022 refers to the Midlothian Strategic Plan for 2016-19, which has since been replaced with the MIJB Strategic Plan 2019-22 which has similar strategic objectives; however, these have been further developed.</p> <p>In addition, because the framework is not aligned to the current Strategic Plan and there are limited workforce plans in place (noted at Finding 2.1), Midlothian are risk at of not achieving the delivery of the Strategic Plan.</p> <p>Risk: There is a risk that the workforce planning framework is no longer aligned to the strategic objectives of the MIJB.</p>	
<p>Recommendation:</p> <p>A review of the Midlothian Health and Social Care Partnership Workforce Planning Framework should be conducted to ensure it is aligned to the current Strategic Plan. In addition, management should seek to develop the detailed workforce plan (noted in Finding 2.1) for the organisation in order to support the delivery of the Strategic Plan.</p>	
<p>Management Response: Recommendation accepted</p> <p>Management Action: The HSCP were in the process of updating the Framework to encompass Strategic Plan updates when COVID 19 required prioritisation and meant this work had to postponed. It should be noted that the impact of COVID 19 will result in further future</p>	

changes to the current plan. Both NHS Lothian Workforce Planning and Midlothian Council Corporate Workforce Planning are on hold due to COVID 19.

Responsibility: Alison White Head of Adult Services
and Chief Social Work Officer

Grace Cowan Head of Primary Care and Older
People

Target date: 1 September 2020

Control objective 2: Workforce plans are in place within the partnership which identifies existing workforce requirements and includes prioritised actions to address gaps in skills and numbers, to ensure the MIJB’s objectives are achieved.

Control Objective 3: There is appropriate governance arrangements in place to monitor and report progress against workforce plans

2.1/3.1: The Midlothian Health and Social Care Partnership have yet to begin the development of their 3-year Workforce Plan.

Medium

Background:

The Revised Workforce Planning Guidance 2011 (CEL 32 2011) has been replaced with the Scottish Government’s new Integrated Health and Social Care Workforce Planning for Scotland: Guidance which was published in December 2019. This documents the new approach to workforce planning as the National Workforce Planning Group have recognised considerable value in a move to a longer-term workforce planning cycle which allows for more effective alignment with other organisational strategic planning timescales. The new guidance sets out a new three-year workforce planning cycle with NHS Boards and Integration Authorities (through HSCPs) publishing their first three-year Workforce Plan by 31 March 2021.

NHS Lothian is aware that support and oversight must be provided for the HSCPs increase in healthcare staffing requirement. This is currently estimated at an increase of 444 WTE staff by 2021-22. Following discussion with Chief Officers (CO’s), strategic and operational teams within each HSCP it was decided to host a Lothian HSCP Workforce Planning Collaboration event. The purpose of the event was to allow COs and those that had been closely involved in the creation of a HSCP Workforce Plan to come together, share learning (both positive and developmental) with colleagues across other partnerships looking for common themes and potential areas for collaboration. It was also intended to identify the support required from NHS Lothian.

Governance over workforce planning is provided by the Joint Management Team, who should monitor and report progress against workforce plans.

Observation and Risk:

The Midlothian Health and Social Care Partnership Workforce Planning framework provides a bedrock for the full Workforce Plan, which is to be made up of individual Service Plans with each service Workforce Action Plan aiming to determine the shape of what is required in terms of skill and knowledge and profession and how these resources are best used to achieve good outcomes for the people of Midlothian. At the time of this audit, only four of the fifteen individual Service Plans were complete at that time (Merret, Dementia Team, Care at Home and Learning Disability). Midlothian HSCP were holding off for the revised guidance to come from Scottish Government in order to move forward with their workforce plans. The Scottish Government had been expected to issue guidance by the end of December 2018 which would set out the format for workforce plans and the required contents. However, the guidance was only released in December 2019.

The Lothian HSCP Workforce Planning Collaboration event took place in May 2019, which highlighted several ways that NHS Lothian and HSCPs could work together collaboratively. It was proposed and supported that a CO from each HSCP lead on one of the 4 collaboration streams (GMS, Digital Enablement, Recruitment & Retention and Learning & Development) with input from colleagues across the HSCPs for each and support from NHS Lothian and other stakeholders as appropriate. Midlothian HSCP were tasked with taking forward 'Recruitment & Retention', however, it was confirmed that no work has been carried out in this space since May 2019.

Following the departures of Organisational Development, the Chief Officer and the Integration Manager in 2019, there has been a transition period which has resulted in the development of workforce actions plans to slow down. Additionally, the last update provided to the MIJB regarding workforce planning was in February. A progress update was due in August 2019, but no such update was provided.

Risk: The Midlothian HSCP has not put in place detailed workforce plans to support the achievement of the MIJB's strategic objectives.

Risk: There is a risk that the HSCPs are not sharing ideas and collaborating effectively

Risk: Partnership does not report progress against workforce plans in line with the set objectives, resulting in limited assurance being provided to the MIJB that workforce planning is operating as intended.

Recommendation:

Management should review the completed service plans to ensure they comply with the revised workforce planning guidance. Management should then make any necessary changes to their templates and after which, detailed workforce plans for all individual areas of the HSCP should be created. Consideration should also be given to whether 15 individual service plans is too ambitious to sit underneath the full Workforce Plan.

Following the publication of the revised workforce planning guidance in December 2019, the Midlothian HSCP should proceed with the development of their three-year Workforce Plan to ensure publication by 31 March 2021 with attention given to the guidance when creating the plan. Management should ensure the plan is approved by the MIJB prior to the publication.

A responsible officer should also be nominated to ensure the development and publication of the workforce plan and the Annual Workforce Planning Reporting Template. In addition, management should determine if any additional resource is required to input into workforce planning to move it forward at the pace required.

Quarterly or bi-annual workforce planning collaborative network meeting events should be established and supported by attendance from each HSCP to report back on progress, share ideas and ongoing development in best practice across Lothian HSCPs.

Management should determine a timetable for providing updates on workforce planning to the MIJB. This will include dates for submitting drafts of the full three-year Workforce Plan in order to have a final version ready for publication by the deadline of 31 March 2021.

Management Response: Recommendation accepted

Management Action: As highlighted the HSCP were awaiting the Scottish Government guidance to ensure that any revision of the existing Framework and refresh of service plans reflected such guidance. The delayed publication impacted on progression.

Updates continued to be provided to the former SMT group. Following publication of the guidance meetings commenced with service representatives to plan the approach for service-based plans. Meetings were arranged for Service Managers, Operational Managers and Strategic Officers in Mental Health Services, Substance Misuse and Justice services all based at No 11 Recovery Hub to develop service based plans and enable examination of possible joint plans and initiatives that reflect the ethos and service delivery based upon the Recovery Hub. Meetings had to be cancelled due to COVID 19. A group had been identified to address the service plan for Physical Disability to complete the suite of plans for Disability but again the meeting was put on hold.

The Lothian wide collaborative were planning an event in May for all four HSCP's focussing upon the Digital Workstream. This also has been postponed.

It should be noted that although COVID 19 has impacted on the ability to take forward our desired plan there have been achievements that have arisen linked to service plan aims such as recruitment of additional locum staff for care homes and care at home which we hope will continue beyond the current pandemic and provide a reliable staff pool. We have also successfully redeployed staff from other council services to support the immediate need for care services and again hope that staff can assist in future locum work or decide to make care their future career. Recruitment has included younger care workers, male carers and BAME workers.

The redesign of Senior Management Team meetings has brought about a dedicated Governance workstream. Workforce Planning is now linked directly to this group which will enable wider collaborative approaches once meetings can be rescheduled this will assist in strategic alignment within the HSCP. In turn this will be included in MIJB updates on progress when Workforce Planning can be included as one of the priorities.

A further opportunity has arisen through capacity in the Learning and Development Team which will allow the opportunity to buy in some hours of a workforce planner to assist in developing plans when it is possible to engage in collaborative activity with operational services. Some services are now beginning to consider planning for the new normal this will in turn begin to include workforce planning.

Responsibility: Alison White - Head of Adults and Chief Social Work Officer
 Grace Cowan - Head of Primary Care and Older People

Target date: Completion of first drafts by 31 December 2020

Control objective 2: Workforce plans are in place within the partnership which identifies existing workforce requirements and includes prioritised actions to address gaps in skills and numbers, to ensure the MIJB’s objectives are achieved.

2.2: Staff tasked with completing the plan have not all received full training.

Medium

Background:

Effective workforce planning involves determining the staff size, type, experience, knowledge, and skills an organisation requires to achieve its objectives, both in the present and in the future. It is vital for the HSCP to have a comprehensive understanding of its future staffing needs particularly due to changing demographics and the move from acute to primary care and community treatment.

Observation and Risk:

Organisational Development Midlothian H & SC Partnership worked alongside services to create the workforce service plans in a collaborative manner. However, staff have not received any formal training on workforce planning. The complexity of the workforce planning process and its implications for the future operations of the HSCP both mean that additional, more intensive training would have been beneficial in order to ensure that the plan is comprehensive, sufficiently detailed, and fully reflective of the future needs of the organisation.

Risk: If the staff who are tasked with completing the workforce plan have not received sufficient training, then there is an increased risk that the plan does not include all necessary information and will not clearly state the organisation’s future staffing requirements.

Recommendation:

All staff charged with completing the overall HSCP workforce plan, and the individual lower-level plans, should receive comprehensive training to allow them to more effectively perform the work. The training should be based upon the Scottish Government guidance published in December 2019.

Management Response: Recommendation accepted

Management Action: The publication of “An Integrated Health and Social Care Workforce Plan”, Scottish Government (Dec 2019) refers to improving workforce planning across health and social care. We have been waiting on such guidance to inform our own training needs analysis for staff across the partnership. The guidance refers to the development of a workforce planning educational qualification in conjunction with COSLA and either a Higher or Further Education Institute. We would welcome the opportunity to have a representative of the HSCP included in this qualification. It was envisaged that this would be available within 12 months of the publication, but this may also be delayed due to the pandemic. The HSCP Management Team has regular development sessions as does the MIJB. Workforce planning can be included within the programme of events at an appropriate time. In the first instance a training needs analysis will be completed to establish what level of awareness/learning staff need in relation to Workforce Planning.

<p>Responsibility: Alison White - Head of Adults and Chief Social Work Officer</p> <p>Grace Cowan - Head of Officer Primary Care and Older People</p>	<p>Target date: 31 August 2020 for Training Needs Analysis and Qualification opportunity when available</p>
--	--

“

Appendix 1 – Staff Involved and documents reviewed

Audit Sponsors

- Chief Officer
- Chief Internal Auditor, MIJB

Staff interviewed

- Morag Barrow, (Chief Officer)
- Janis Butler, (Director of HR & OD)
- Linda Clark (Practice Learning and Development Manager)
- Jill Stacey (Midlothian Chief Internal Auditor)
- Chris Hurt (Internal Auditor)

Documents Reviewed

- Health and Social Care Workforce Planning 2017-22
- MIJB October 2017 Workforce Planning paper
- MIJB February 2019 Workforce Planning update
- MIJB Directions 2019-20
- MIJB Strategic Plan 2019-22
- NHS Lothian Workforce Plan 2017-19
- NHS Lothian Workforce Plan 2019-22 (Draft)
- Midlothian Council Workforce Strategy 2017-22
- Care at Home Services Workforce Action Plan final draft (June 2018)
- Dementia Service Workforce Action Plan final draft (June 2018)
- Older People (Merit Service) Workforce Action Plan draft (June 2018)
- Workforce Planning Learning and Disability Services in Midlothian (March 2019)
- SBAR Lothian HSCP Workforce Planning Collaborative (May 2019)
- Midlothian Council Workforce Internal Audit report
- Workforce Planning and Development Program Board (WPDPB) minutes
- Integrated Health and Social Care Workforce Planning for Scotland: Guidance (December 2019)

Appendix 2 – Definition of Ratings

Findings and management actions ratings

Finding Ratings	Definition
Critical	A fundamental failure or absence in the design or operating effectiveness of controls, which requires immediate attention
High	A key control failure has been identified which could be either due to a failure in the design or operating effectiveness. There are no compensating controls in place, and management should aim to implement controls within a calendar month of the review.
Medium	A control failure has been identified which could be either due to a failure in the design or operating effectiveness. Other controls in place partially mitigate the risk to the organisation, however management should look to implement controls to fully cover the risk identified.
Low	Minor non-compliance has been identified with the operating effectiveness of a control, however the design of the control is effective

Report ratings and overall assurance provided

Report Ratings	Definition	When Internal Audit will award this level
No assurance	The Board cannot take any assurance from the audit findings. There remains a significant amount of residual risk.	The controls are not adequately designed and / or operating effectively, and immediate management action is required as there remains a significant amount of residual risk (for instance one Critical finding or a number of High findings)
Limited assurance	The Board can take some assurance from the systems of control in place to achieve the control objective, but there remains a significant amount of residual risk which requires action to be taken.	This may be used when: <ul style="list-style-type: none"> There are known material weaknesses in key control areas. It is known that there will have to be changes that are relevant to the control objective (e.g. due to a change in the law) and the impact has not been assessed and planned for. The controls are deficient in some respects and require management action (for instance one 'high' finding and a number of other lower rated findings)
Moderate assurance	The Board can take reasonable assurance that controls upon which the organisation relies to achieve the control objective are in the main suitably designed and effectively applied. There remains a moderate amount of residual risk.	In most respects the "purpose" is being achieved. There are some areas where further action is required, and the residual risk is greater than "insignificant". The controls are largely effective and, in most respects, achieve their purpose with a limited number of findings which require management action (for instance a mix of 'medium' findings and 'low' findings)
Significant assurance	The Board can take reasonable assurance that the system(s) of control achieves or will achieve the control objective. There may be an insignificant amount of residual risk or none at all.	There is little evidence of system failure and the system appears to be robust and sustainable. The controls adequately mitigate the risk, or weaknesses are only minor (for instance a low number of findings which are all rated as 'low' or no findings)