**NHS North East and North Cumbria Integrated Care Board (ICB)**

**People and culture strategy**

This is a summary of the People and Culture Strategy developed by North East and North Cumbria ICB, designed for use with screen readers. All tables and graphics have been replaced by descriptions.

# **Foreword: Supporting the people who care for us all**

Every one of us – as patients or colleagues - has seen the incredible commitment and expertise of our health and care staff first-hand at some point in our lives.

We’re proud to have a highly skilled, dedicated and committed workforce. Around 170,000 people work in health and care in the North East and North Cumbria, in the NHS, local authorities and the independent, voluntary, community and social enterprise sectors. We also benefit from the selfless contribution of unpaid carers and volunteers.

People are our greatest strength. But despite the deeply impressive commitment that staff have shown over the last few difficult years, we still face significant challenges.

We have made progress in our recovery from the pandemic, but sadly, it’s had a huge effect on our people's health and wellbeing, and we are seeing its impact in a tired and over-stretched workforce.

Health and care are changing, and so are the needs of our population, as people live longer, with more complex needs and long-term conditions.

Our ten-year plan – [Better health and wellbeing for all](https://northeastnorthcumbria.nhs.uk/media/bhrbrkt2/icp-strategy-v14.pdf) – sets out how we will enable our communities to live longer and healthier lives and tackle longstanding issues like smoking, obesity and social isolation. Our people are key to making this vision a reality.

A greater emphasis on preventing ill health and making good use of new technology means we are constantly adapting the ways we work. More flexible employment approaches will be needed, so health and care can work more closely together, across organisational and sector boundaries.

People are also working longer, which means we must attract, develop and retain older employees. At the same time, 'baby boomers' are reaching retirement age, and will need to be replaced with the right skills.

We need to do more to ensure diversity in our workforce, so that it reflects the communities we serve. There is also a gap in pay and conditions between the NHS and care services.

While many people have long, rewarding careers in health and care, others say they need more support with their wellbeing.

This strategy sets out how we will work together across health and care to address these issues. One key commitment is to increase our staff vacancy fill rate across health and social care services by 50 per cent by 2030.

In short, our aim is for the North East and North Cumbria to be the best place to work.

We would like to thank everyone who has helped to develop the strategy, and the many people who will now help us deliver it.

Most importantly, our thanks go to everyone working in health and care for the vital work they do every day. We owe it to them, and the communities we serve, to deliver on these ambitions.

# **Our partnership**

Our system-wide people and culture strategy has been co-produced by a wide-ranging partnership from across the health and care system. Below we set out some of the partners who have come together through this initiative.

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* NHS
* Local authorities, and the North East Combined Authority
* Patient, staff and trade union representatives
* Skills for Care, Health Education England, and North East and Yorkshire Learning Academy
* Schools, universities and colleges
* Voluntary and Community Enterprise Sector
* North East Local Enterprise Partnership (NELEP)
* National bodies such as the Department for Work and Pensions

# **The six key pillars of our strategy**

We are committed to making the North East and North Cumbria's health and care sector a better place to work. To deliver on this ambition, we have organised our aims into six key areas, known as ‘pillars’, each with their own objectives and goals:

**Workforce supply – our aims are to:**

* Ensure safe staffing levels for health and care throughout the region.
* Boost recruitment through campaigns and projects.
* Create better career structures so people can join our workforce, gain skills and progress.
* Make sure that social care and health services are equal partners.

**Workforce retention – our aims are to:**

* Make sure our people can have satisfying careers and feel valued.
* Have better career structures, so people in all our communities can join our workforce.
* Go further with opportunities for our staff to work flexibly.
* Offer more support and training so more people want to work with us.

**Workforce health and wellbeing – our aims are to:**

* Support learning, improvement and wellbeing.
* Help health and care organisations come together and support staff health
* and wellbeing.
* Offer the best possible terms and conditions, so our people feel well rewarded.

**System leadership and talent – our aims are to:**

* Offer support for the next generation of health and care leaders.
* Develop caring leaders from our diverse communities.
* Create opportunities for future leaders to learn together.

**Health equity & inclusion – our aims are to:**

* Make sure all our people have opportunities for learning and new experiences.
* Go further than our legal equality duties – to be truly inclusive.
* Listen and work with our people so they can perform at their best.

**Reform – our aims are to:**

* Make better use of innovative digital solutions including artificial intelligence.
* Explore new roles, and new ways to use our mix of skills.
* Spread good practice so that different parts of our system can learn from each other.

These pillars link to our Better Health and Wellbeing for All strategy, with the overall aim of supporting our health and care workforce for the future.

# **Pillar 1: Increasing our workforce supply**

People are at the heart of our health and care services, and our biggest strength. We are fortunate to have a highly skilled, dedicated and committed workforce of 170,000 working in health and care in the North East and North Cumbria.

Since the Covid-19 pandemic, our workforce has been stretched, and in June 2023, the NHS in England was reporting vacancies of more than 112,000. With changes in our population, this could leave the NHS with a shortfall of between 260,000 and 360,000 staff by 2036/37.

In the North East and North Cumbria we are already experiencing severe challenges in recruiting and retaining staff, which means radical thinking is needed if we are to have skilled staff in the right numbers in the future.

That is why we have set ourselves a target to improve our vacancy fill rate by 50 per cent by 2030, by attracting local people to careers in health and care, and working to retain the people who are already with us.

## **These are our objectives - we want to:**

* Ensure safe staffing levels for health and care throughout the region.
* Boost recruitment through campaigns and projects.
* Create better career structures so people can join our workforce, gain skills and progress.
* Make sure that social care and health services are equal partners, working closely together.

## **These are our goals:**

1. We will increase the ‘fill rate’ for health and care jobs, reducing the number of vacancies by 50 per cent by 2030, by training more people and supporting our staff so they are more likely to stay with us.
2. We will have a mechanism to measure how people are successfully moving through our career structures and system.
3. We will remove barriers to enable people to work across health and social care with a focus on fair terms and conditions of employment where possible.
4. We will increase the diversity of our workforce year-on-year to become more reflective of the communities we serve.

## **Making it happen – some examples of our work under Pillar 1**

From school children to apprentices and doctors, we have a string of schemes helping to attract the workforce of the future.

Our award-winning Find Your Place campaign, which promotes the region as a great place to live and work, has already helped increase the number of medical trainees choosing our region.

Meanwhile, new flexi-job apprenticeships are offering a paid route to a career in health and care, so people can earn and learn while rotating through different health and care settings.

Another great example is in Tees Valley, where NHS and social care employers have come together to create Discover Care, a new campaign to promote career opportunities in health and social care.

And an exciting 'mini-scrubs' project led by Northumbria Healthcare has helped primary school children to think about working in health and social care when they are older.

# **Pillar 2: Retaining our workforce**

We are seeing more staff leaving the health and care system than before the pandemic and we are keen to support our workforce to enable them to continue and want to work with us for many years.

We will do this by addressing the reasons why people leave the health and care sector, such as fair pay and reward, work-life balance, health and wellbeing, and opportunities for progression and continuing professional development.

We want to support our workforce by offering people career pathways across health and social care that are accessible throughout their careers. We also need to build supportive cultures and structures that enable staff to work flexibly in ways that suit their needs.

A key part of this is to ensure our staff reach their full potential through a continuous approach to their development, skills, knowledge and expertise.

We will develop a system-wide culture and improvement plan to support staff retention, including system-wide opportunities for staff to raise concerns, for example through our vital Freedom to Speak Up Guardians.

We will continue to be guided by the NHS People Promise, which is a set of commitments made by the NHS to its staff, from being compassionate and inclusive to ensuring staff are recognised, rewarded and listened to. The People Promise is based on staff feedback, setting out aspirations and need as well as sharing good practice and learning right across the health and care system.

We will continue to build on the great work already happening across organisations in the region to listen to our workforce and review systems and processes so our staff have the best start to their careers with us, as well as positive experiences throughout their working lives.

We will develop our support offers for our workforce so their experiences of working with us are positive ones and that we deliver on our commitment to be the best place to work.

## **These are our objectives - we want to:**

* Make sure our people can have satisfying careers, feel valued and able to make their best contribution.
* Have better career structures, so people in all our communities can join our workforce.
* Go further with opportunities for our staff to work flexibly, making careers in health and care more attractive.
* Offer more support and training so that more people want to work with us.

## **These are our goals:**

1. We will establish career progression pathways and training opportunities across the health and care system and encourage collaboration.
2. We aim to establish system-wide mechanisms to facilitate and encourage peer support (provide knowledge, experience, emotional, social or practical help to each other), while also supporting small providers to work in an inclusive way.
3. We will increase the availability of preceptorship models to support new entrants to the workforce, drawing on experienced staff mentors. A preceptorship is a period to guide, develop and support all newly registered practitioners to build confidence and competence as they transition from student to autonomous professional.
4. We will increase the availability of attractive opportunities to proactively encourage people to stay in the system as they reach the end of their career.
5. We will work to understand recognition programmes in place across the system including staff employed through independent organisations and those employed by personal health budgets and direct payment arrangements.
6. We want to ensure staff across the health and care system are aware of options for flexible working that could be available at specific times in their lives.
7. We aim to ensure support offers are available to staff across the system regardless of employer, including staff employed through independent organisations, personal health budgets or direct payment arrangements.

## **Making it happen – some examples of our work under Pillar 2**

77% of the NHS workforce is female – but many women still struggle to get the support they need for symptoms of the menopause. As many as 44% of women going through the menopause say their ability to work has been affected, and one in ten has left a job due to their symptoms.

A new menopause clinic at South Tees NHS Foundation Trust is helping staff with their symptoms and wellbeing. The project, which could be extended to other areas if successful, aims to provide flexible, listening and practical support to help women, as well as improving staff retention for the NHS.

Another key initiative is the [Career Pathways website](https://view.genial.ly/6397394201435c0019b94937), which will help people match their skills to a range of careers in health and care and find clear entry points to suitable roles.

# **Pillar 3: Improving health and wellbeing**

Our staff’s health and wellbeing is paramount. There is well-established evidence showing a correlation between staff wellbeing and patient and service user experiences and outcomes.

Workforce shortages and rising demand are increasingly stretching our staff. There are many examples of excellent health and wellbeing support across the region, but there is also variation in staff experience.

Presenteeism (working while sick) is rising, and our sickness absence rate is higher than the national average. We have made some progress in growing occupational health and wellbeing through our role in the trailblazer programme.

We will work with our people towards an evidence-informed and equitable approach to wellbeing across our workforce. This integrated approach can increase employee engagement, which plays an important role in patient and service user experience, and mortality rates. We will continue to support organisational culture initiatives, such as ensuring our teams have ‘freedom to speak up’.

We were proud to be the first region to sign up for the NHS sexual safety charter, committing to a zero-tolerance approach to inappropriate sexual behaviours in the workplace, and to ten core principles and actions.

## **These are our objectives - we want to:**

* Support learning, improvement and wellbeing.
* Support different health and care organisations to come together and support staff health and wellbeing together.
* Offer the best possible terms and conditions, so our people feel well rewarded for their hard work.

## **These are our goals:**

1. To use a learning and improvement approach to our work, and ensure that we measure and monitor staff wellbeing.
2. To create a North East and North Cumbria data set that provides evidence and assurance around the wellbeing of our people.
3. To deliver an agreed plan for an integrated approach to supporting occupational health and wellbeing across our system.
4. To scope the current position among employers around the aspiration for a real living wage.
5. To report the key themes from staff surveys and audits across the system.
6. To develop a wellbeing network to address issues including suicidality in the workforce, presenteeism and women's health.

## **Making it happen – some examples of our work under Pillar 3**

All the evidence shows that staff health and wellbeing impacts on the standard of care our teams are able to provide to patients and service users.

That’s why we have supported a special project designed to help managers across the region to have more effective and meaningful conversations about wellbeing with their staff.

The project, which is supported by the Health Innovation Network, is the first step towards creating a regional standard, which will help managers have wellbeing conversations with their teams, and follow them up with appropriate support.

One manager taking part in the trial commented: “I want people in my team to feel valued as a person and not just defined by the clinics they provide.”

# **Pillar 4: Developing system leadership and talent**

Good leadership and talent development are vital to ensuring that we work beyond organisational and professional boundaries to achieve the ambitions we have set out in our integrated care strategy, [Better health and wellbeing for all](https://northeastnorthcumbria.nhs.uk/media/bhrbrkt2/icp-strategy-v14.pdf), which aims to ensure longer and healthier lives for all our communities.

Improving our system leadership capacity, as well as our culture, will help to ensure that we are resilient and enable us to develop talent and our leaders of the future.

Working together to develop a leadership identity will support our progress to develop a ‘one workforce’ model.

This means we can optimise available staff, widen career opportunities and development, and operate seamlessly across the health and care system, which in turn will improve care delivery. At the same time we will protect and promote professional identity and create opportunities for leadership and development that recognises our range of professions.

Progress within our region for system leadership has been remarkable and we aim to build on this in line with our aim of ‘being the best at getting better’.

To do this, we need a clear understanding of where variance exists and we will support our local delivery areas to undertake an organisation development diagnostic against a framework determined by the recommendations outlined in the [Kark](https://www.england.nhs.uk/long-read/appendix-1-recommendations-from-the-kark-review-2019/) and [Messenger](https://www.nhsconfed.org/publications/messenger-review-nhs-leadership) reviews, and the ‘well-led’ domain.

This work will inform both targeted work on system leadership at place, and as a wider system. As a region we are committed to learning and improvement, and will support our leaders and aspirant leaders to come together to share successes and learning through our learning and improvement community approach.

We will also ensure that our leaders have access to the latest thought leadership and research through our partnerships within academia, North East and Yorkshire Leadership Academy (NEYLA) and with the Health Innovation Network.

## **These are our objectives - we want to:**

* Offer support for the next generation of health and care leaders.
* Develop caring leaders from the diverse communities of our region.
* Create opportunities for future leaders to connect and learn together.

## **These are our goals:**

1. To gather leadership talent data from across the system to test the feasibility of a shared talent pipeline and development plan.
2. To develop a system leadership ‘community of practice’.
3. To develop a leadership development framework and associated offer.
4. To scope and develop job shadowing and rotation approaches that allow for leadership movement across the health and care systems.
5. To establish a network of future leaders.

## **Making it happen – some examples of our work under Pillar 4**

Sometimes it’s hard to focus on long-term change and improvement when you are under daily pressure to fix today’s problems. We want everyone in our health and care system to be able to play their part in improving the services we provide to patients and service users.

That’s why we have launched a learning and improvement community, [Boost](https://boost.org.uk/about/), which will play an integral part in supporting all of us to be ‘the best at getting better’ by sharing ideas, learning and good practice, helps us think about the future, try new things and make a difference.

Boost brings people together in a spirit of innovation, idea-sharing, networking, supporting our vision for a leadership and culture based on learning and sharing.

# **Pillar 5: Ensuring health equity and inclusion**

We are committed to creating workplaces across our health and care system where our people feel they belong, are listened to, invested in, and valued.

We want to ensure that our workforce reflects the communities we serve, with staff receiving equity of treatment and opportunity.

Evidence shows that more diverse teams lead to better patient outcomes and performance. Our ambition is to be the most equitable and inclusive place to work and create fairer outcomes for all.

A key part of this will be to develop a Health Equity and Inclusion (HEI) strategy, which will be co-created with our partners across the health and care system, including NHS organisations, charities, the VCSE sector and local authorities.

This strategy will be data-rich, evidence-led and driven by key performance indicators (KPIs), focusing on the views and the voice of our people.

## **These are our objectives - we want to:**

* Make sure all our people, at all levels of the health and care system, have opportunities for learning, new experiences and development.
* Not just meet our legal duties under the Equality Act, but go further, paying attention to things like social mobility, menopause, neurodiversity and long-term unemployment, to be truly inclusive of all our communities.
* Listen and work with our people to ensure they have a positive, safe workplace environment, with support and opportunities so they can perform at their best.

## **These are our goals:**

1. To increase awareness of health equity and inclusion for our workforce, paying attention to health inequalities.
2. To increase understanding of the statutory and legal responsibilities of the integrated care system (ICS), coupled with better data to improve understanding and evaluation.
3. To improve the overall declaration rates of staff around protected characteristics through our electronic staff record (ESR) and staff survey, while reducing 'prefer not to say' rates.

## **Making it happen – some examples of our work under Pillar 5**

A key part of our approach is a new regionwide equity, diversity and inclusion (EDI) group. This brings together EDI leads from across the region to work together in embedding equality, diversity and inclusion into policies, networks and staff communications.

The group is developing a shared approach to areas like cultural awareness, events, staff networks, and equality impact assessments. This has included supporting events around Black History Month, Disability History Month and International Women's Day with staff sharing their personal stories in support of the #InspireInclusion theme.

# **Pillar 6: Reform**

The national long term workforce plan and other system strategies recognise that growing the NHS workforce is not enough on its own to meet the changing needs of patients and service users. We need our staff to work in different ways, with each other, with patients and service users, and for clinicians to be able to spend more time with patients and service users providing high quality care.

## **These are our objectives - we want to:**

* Make better use of innovative digital solutions including artificial intelligence, particularly in areas of work that are hard to recruit to.
* Explore new ways to use our mix of skills, and new roles to support the transformation we need.
* Spread good practice so that different parts of our system can learn from each other, sharing the skills we need for an increasingly complex system.

## **These are our goals:**

1. To enhance access to workforce data, so we can ensure equality across different groups of employees. This will have a particular focus on primary and social care, while we will lobby for inclusivity across all parts of the system.
2. To upskill the system workforce, to streamline services, increase the number of individual contacts and enhance community capacity.
3. To enable more clinical supervision and reflective practice for clinical staff working in social care and community settings.
4. To embed personalised care culture and practice at every level and roll out personalised care training across the system.
5. To grow the number of NHS, social care and voluntary sector staff working in primary, community and mental health services. This includes personal assistants and other staff funded through personal health budgets, to enable us to provide care closer to home and support people to stay well for longer.
6. To provide universal access to digital systems, develop a culture that encourages their use, and have digital systems that are designed for the people who use them.
7. To reform staff education and training to enable them to effectively use new digital solutions and embrace new ways of working as members of multidisciplinary teams.

## **Making it happen – some examples of our work under Pillar 6**

We may not see them when we visit the GP or local hospital, but biomedical scientists are a vital part of our NHS.

Working with doctors, clinical scientists and support staff, around 600 biomedical scientists provide diagnostic services for the whole of our region.

These highly trained staff are in short supply, with vacancy rates running at more than 10%.

Now a new training academy, hosted by the Pathology Alliance, has recruited its first 20 trainee biomedical scientists to expand this vital workforce. Working across the whole region, this scheme can attract new staff, widen participation through paid training opportunities, and work more efficiently.