**Adult Social Care and Inclusion**

**Workforce Development Team**

**Service Plan 2014/15**

***Growing a World-class Workforce***

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**Adult Social Care & Inclusion**

**Workforce Development Team**

**Service Plan 2014 /15**

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**1 Our Vision**

Our vision is for a world class workforce which is highly skilled, valued and accountable, drawn from all sections of the community. Our trained and trusted professionals including those in the Private, Voluntary, Independent Sectors and the emerging Personal Assistant workforce will provide support to individuals in an imaginative and creative way which maximises independence and safety and respects the autonomy, dignity and diversity of everyone.

Our vision links directly to the Council’s Corporate Plan priorities for 2013/14 – 2014/15 and specifically:

* Improving health and wellbeing, including independence for Older people and
* Creating safe, sustainable and inclusive communities

**2 Overview of our Service**

The aim of our Workforce Development Team is to provide a comprehensive high quality and responsive service to the adult social care workforce in Walsall, ensuring that they have the right skills, knowledge, attitudes and behaviours to deliver excellent standards of care and support to our citizens.

**What does the team do?**

* Supports the delivery of key learning and development activity across the Adult social care workforce including those in the Third Sector, carers, Personal Assistants and other statutory agencies
* Advises and supports managers in dealing with skills gaps and competence levels
* Works with training providers both internal and external to ensure that high quality learning interventions are delivered within budget and are effectively evaluated
* Organises and develops high quality practice learning opportunities for social work students

**What are our values?**

We will:

* Ensure our services are designed from the ‘outside in’ so that they are effective and meet your needs
* Maintain high accessibility and availability of the service including our IT systems
* Ensure that our people are professional, well trained and knowledgeable and that your request is handled promptly and owned by the first person you contact
* Be fair and courteous and fully protect your privacy, treating any information held about you as confidential
* Benchmark our performance regionally and nationally and strive to be in the top quartile nationally in terms of student social work placements

**3 Adult Social Care Outcomes Framework (ASCOF)**

Our work very much supports achievement of the 4 areas/domains contained within the ASCOF. These are:

* Enhancing the quality of life for people with care and support needs
* Delaying and reducing the need for care and support
* Ensuring that people have a positive experience of care
* Safeguarding people whose circumstances make them vulnerable, protecting them from avoidable harm

Our learning and development programme is designed to equip the workforce with the skills, knowledge and behaviours to make these outcomes a reality.

Our comprehensive programme of Adult Safeguarding Training available to a wide range of employers in the Borough should ensure that all who come into contact with adults/older people can identify the various forms of abuse and report it accordingly.

**4 Equality and Diversity**

We are committed to ensuring that all our learning and development events are accessible and will apply reasonable adjustments to enable full participation, engagement and enjoyment where these are appropriate and practicable.

We are committed to the provision of equality related learning events which support and enhance individuals’ practice and understanding.

We are committed to promoting positive action through prioritisation of training for certain groups i.e. women, black or disabled managers and staff where an under-representation is proven.

We will ensure Equalities Impact Assessments are completed as required where decisions are likely to impact on service delivery and or has staffing implications.

**5 Our Resources**

**The Team**

Led by the Service Manager (Workforce Development), the team comprises:

* 2 Learning and Development Consultants
* 2 Training Officer/Co-ordinators
* 1 Co-ordinator – website development/ E and distance learning
* 1 Project Officer (Falls Prevention) 12 month FTC

We also have access to a Health and Safety Training Officer (50% of the role)

**Our Budget**

The Workforce Development Team Budget consists of three component parts:

* Salaries budget
* The commissioned training budget and
* External funding from the Older Adults Workforce Integration Board

The total budget not including the external funding is in the region of £246,000 and opportunities to income generate will be explored throughout the year to enhance our training budget.

**6 Our Partnerships**

In order to meet the learning needs of the social care workforce in Walsall within the budget envelope available to us, which includes enhancing understanding of and capability to operate in new ways as demanded by new and emerging legislation and the Better Care Fund, it will be necessary to work collaboratively with others. This will include:

* Creating opportunities for staff to build a shared vision of integrated support
* Providing opportunities for staff from different organisations/professions/different parts of the ‘system’ to learn together
* Sharing resources/agreeing who will develop and/ or deliver what training to, where possible, mixed audiences
* Providing a range of learning methods which recognises that people learn in different ways and at different times (shift workers) including E and distance learning, action learning sets etc

**Our key partners include:**

* Corporate Learning and Development Team
* Children’s Services Workforce Development Team
* NHS/Health/CCG locally and regionally
* Health Education West Midlands – Older Adults Workforce Integration Programme
* Dudley Walsall Mental Health Trust
* Learning Pool
* Private, Voluntary and Independent Sector
* Skills for Care
* Local colleges and HEIs
* Our commissioned trainers
* Adult Safeguarding Team and Board
* Public Health
* Black Country Partnership NHS Trust

In addition our aim and approach is to use subject experts from within the business and also expert service users/carers to co-deliver training.

**7 Our Performance Measures**

|  |  |
| --- | --- |
| **Performance Measure** | **Target 14/15** |
| Hits on our Workforce Development website  | 10,000 |
| Attendance at formal training events  | 3,500 |
| Learning Pool courses accessed | 800 |
| Other learning exchange sessions facilitated  | 10 |
| Number of social work student placements provided | 30 |
| Compliments, complaints received  | Currently no target |
| Positive evaluation of our courses\*  | 75% |

\*Our courses have been rated as fully providing delegates with the skills and knowledge
that the event was designed to provide.

We can also demonstrate that we have made a difference, for example:

* Positive CQC inspections
* Our Operating Model delivers savings
* Service User outcomes are enhanced

**8 Our supporting plans/documents**

Adult Social Care and Inclusion 3 year Workforce Development Strategy – 2014-2017

Evaluation Strategy, 2014

Workforce Development – Care Act PID, 2014

Adult Social Care Workforce Learning and Development Programme, 2014

Falls Prevention Learning and Development Project PID and GANNT Chart, 2013

**9 Drivers behind this Service Plan**

In putting together this plan, the Service Manager, Workforce Development has considered the following:

**The role of the Director of Adult Social Care (DASS)**

The DASS has, amongst other things, responsibility for adequacy of supply of a well trained social care workforce within the Borough. This includes those within the Private, Voluntary and Independent Sector. The 800 directly employed workers represent just 20% of the workers in this sector within the Walsall Borough.

**What do we have to do?**

In order to achieve the budget envelope available for learning and development in 2014/15 it has been necessary to prioritise that which is truly mandatory training – on which establishments, services and individuals depend in order to be able to function and practice. The Department of Health commissioned Skills for Care and Skills for Health to produce **The National** **Minimum Training Standards** report which was published in 2013. The standards are applicable to healthcare support workers and adult social care workers in England and are aligned to the **Common Induction Standards and CQC (Care Quality Commission)** requirements. Workers should be able to demonstrate under-pinning knowledge in all the areas but they are not intended as a measurement of competence. The standards are summarised below:

**The role of Healthcare Worker and Adult Social Care Worker**

* **Induction –** should cover roles, responsibilities, professional boundaries, code of conduct and professional partnerships
* **Personal Development –** records and commitment to CPD (Continuing Professional Development) and functional skills (literacy, numeracy, communication) appropriate to the role
* **Effective Communication –** knowledge of the communication methods appropriate to the needs of people receiving support
* **Equality, Diversity and Inclusion –** an understanding of the principles, legal requirements and practice implications of Equality and Diversity
* **Duty of Care –** dealing with conflict, challenging behaviour, comments and complaints, recording and reporting incidents, accidents, errors and near misses
* **Safeguarding – Safeguarding of Adults –** through recognition of harm, abuse, risk and prevention, reporting
* **Person-Centred Care and Support –** understanding of the principles and values of Person Centred Support, applying it in the workplace, choice and active participation
* **Health and Safety –** roles, responsibilities and legal requirements – under-pinning knowledge of: Risk Assessment, Moving and Assisting, Accident Reporting, Medication handling and administration, Control of hazardous substances, Fire Safety, Personal Safety – of self and supported users, Stress, Food Safety, Nutrition and hydration, First Aid
* **Handling of Information** –recording and storing information in a secure environment whilst protecting confidential information
* **Infection prevention and control –** understanding hygiene and infection prevention and the application of preventative measures

Additionally CQC require evidence of ‘specialisms’ i.e., training relating to the needs of specific groups of individuals where appropriate. This may include for example knowledge of the support required by people with Mental Health needs, sensory loss, learning disabilities, autism and dementia.

**The Regulated Workforce** i.e. social workers who may also be Approved Mental Health Practitioners or Best Interests Assessors and Occupational Therapists require the following:

* A minimum of two opportunities for CPD over two years to enable a portfolio of learning to be compiled in order to maintain/regain their HCPC registration. This could be a mix of formal training/learning or opportunities for reflection
* In terms of AMHPs (Approved Mental Health Practitioners) – this group require 18 hours CPD per annum (around 5 or 6 opportunities) in order to practice (a statutory requirement). This responsibility is currently shared with Dudley MBC in order to maximise use of resources we will co-design learning opportunities and share venue and guest speaker costs
* In terms of BIAs (Best Interests Assessors) – this group are required to have had some learning within the previous 12 months – our local target is 18 hours. The budget for BIA learning/support rests with the DoLS (Deprivation of Liberty Safeguards) lead (within the Safeguarding structure). The Interim Head of Service for Adult Safeguarding is leading on a regional approach to BIAs.

Those who support and assess student social workers on placement are required to be appropriately qualified. This is currently paid for with income which is generated from the Universities under the Memorandum of Co-operation.

With regard to the Regulated Workforce it needs to be borne in mind that by only delivering the minimum requirements we will struggle to develop our workforce in line with the professional capability framework and the expectation that they will move up through the career structure

In addition the WD Team are required to provide support to the Safeguarding Adults Board Training sub group in the form of: attending the sub group, developing partnerships with other agencies who have a responsibility for training key staff, commissioning appropriate trainers to deliver specialist training, evaluating the training attended.

**More Recent Drivers**

**The Care Act/Children and Families Act**

The Care Act brings together care and support legislation into a single legal act with a new wellbeing principle at its heart.

It will have major implications for those working in social care including those involved in providing preventative services, information, advocacy, assessment and eligibility, care and support planning, personal budgets and direct payments, charging framework, quality and safety and transition for children to adult social care.

Our workforce development offer will need to include opportunities to acquire information and new skills concerning both the Care Act and Children and Families Act. Our partner Skills for Care is currently seeking a contractor to produce an integrated suite of learning and development materials to meet that need including:

* An introduction to the Care Act
* Values and principles of leadership
* Advice, information and advocacy
* The care and support system including customer journey
* Transition for children to Adult Social Care/support
* Rights for carers
* Care standards
* Safeguarding adults
* Care markets

The provisions within the Care Act link with the Children and Families Act 2014, specifically:

* In relation to special educational needs, the C&F Act introduces major changes to support children and young people with SEN (Special Educational Needs), creating educational, health and care (ECH) plans to replace SEN statements which will need to be reviewed regularly and which now cover people up to the age of 25. The basic goal is to give families greater involvement in decisions about their support and encourage social care, education and health to work together more closely in supporting those with special needs or disabilities. As part of the changes local authorities are required to publicise a local offer setting out what support is available to families with children who have disabilities or special educational needs. This local offer should also explain how families can request personal budgets, make complaints and access more specialist help
* In relation to young carers – the Act in conjunction with the adults focussed Care Act seeks to make sure young carers get the support they need. Under the Act local authorities are expected to try and identify young carers so that they can be offered support and both Adults and Children’s Services will need to work together to help young carers. Adult social care staff should be assessing the needs of young people in the house-hold when reviewing support for adults and children’s social workers should also assess in such situations. This may require new skills for some staff which will again have to be built into the Learning and Development Programme.

**Falls Prevention Learning and Development Project**

Early in 2014 the Workforce Development Team were successful in gaining funding via the LET (Local Education and Training) Board/Birmingham and Black Country LETC to develop an innovative falls prevention learning and development programme for the health and social care workforce, delivered across health and social care in clinical and community settings. Falls prevention has been identified as a key national strategic objective and this is reflected in the current priorities of LETCs in the West Midlands region. The successful delivery of this pilot project will lead to better management of falls and support the implementation of the falls strategy and falls pathway.

**10 Workforce of the future

What else – beyond statutory minimums – how do we grow the workforce of the future?**

The Directorate has refreshed its Operating Model, therefore learning and development opportunities for staff, to ensure they fully understand their role in deploying it and have the skills, attitudes and behaviours to realise it, will be necessary. Staff will need to be legally literate, understand their role in promoting health and wellbeing, conducting joint assessments for long term conditions and signposting to other agencies/services. They will need to be able to think innovatively, be able to negotiate with individuals, partners, carers, contractors. They will need IT skills to enable them to fully embrace new IT systems, work in a modern/agile way. They will need skills in writing outcome focussed reablement and support plans, knowledge of assistive technologies/self care, understanding in terms of their responsibilities to carers/young carers, actively working with them to achieve best possible outcomes for less money.

We would also need to consider the above in terms of enabling our local providers to move into new markets in line with our market position statement.

**Refreshing/re-inventing social work**

It is an objective of the Directorate to move back to a more psychodynamic/relationship based model of social work which has better outcomes at lower cost, rather than the current very process driven model, which effectively ‘sucks’ people into social care services, creating a dependency culture. The Workforce Development Team will ensure there are learning opportunities within the overall learning and development programme to support this.

**11 Summary**

Our priorities for 2014/15 and beyond, as approved by Social Care and Inclusion Management Team on 28th January, 2014 are therefore the following:

**The Must Do’s:**

* Provision of mandatory training as required by CQC and Common Induction Standards
* Provision of mandatory learning opportunities which enable those within the regulated workforce to safely practice, support Practice Education and retain/regain their HCPC registration, these being OTs, social workers including AMHPs, BIAs
* Provision/co-ordination of student social work placements
* Provision of learning opportunities to support Care Act & Children and Families Act
* Delivery of the outputs and outcomes as detailed within the Falls Prevention Project
* Provision of support to the Adult Safeguarding Board, training sub group

**The Really Should Do’s:**

* Provision of learning opportunities which enable fulfilment of our Operating Model, Reablement skills, Signposting, Knowledge of pathways and approaches in relation to prevention and well-being, Autism, Dementia skills (not an exhaustive list)
* Support of learning which sees a refresh of our approach to social work

**The Should Do’s:**

* Ensuring majority of learning provision is delivered by the WD Team with only specialist training being commissioned
* Building/supporting/sustaining a pool of ‘expert’ trainers
* Developing/maximising e and distance learning opportunities
* Seeking opportunities to income generate from selling places on our courses
* Ensuring that the corporate learning and development team’s offer in terms of Leadership and Management, e-learning and core skills is aligned to our business need
* Working with Children’s Services in respect of co-ordination of social work student placements to share the admin burden associated with this and also best practice and also in relation to Children and Families Act
* Securing where possible free training venues
* Working in partnership with others to share learning, expertise and costs, this includes our Health partners and those in the PVI sector

**De-prioritised:**

* Not financially supporting qualification or non essential short course/conference attendance during 2014/5
* Not supporting Management Forums and Open House
* Not purchasing books
* Not monitoring compliance with supervision and appraisal
* Not attending/supporting Dementia Cafes

**12 Conclusion**

To conclude, in order to grow a world class workforce, one capable of working in the new ways demanded by the care and support reforms, we must have a robust workforce development strategy accompanied by a comprehensive learning and development programme.

*Author: Lisa Koc, Service Manager, Workforce Development*