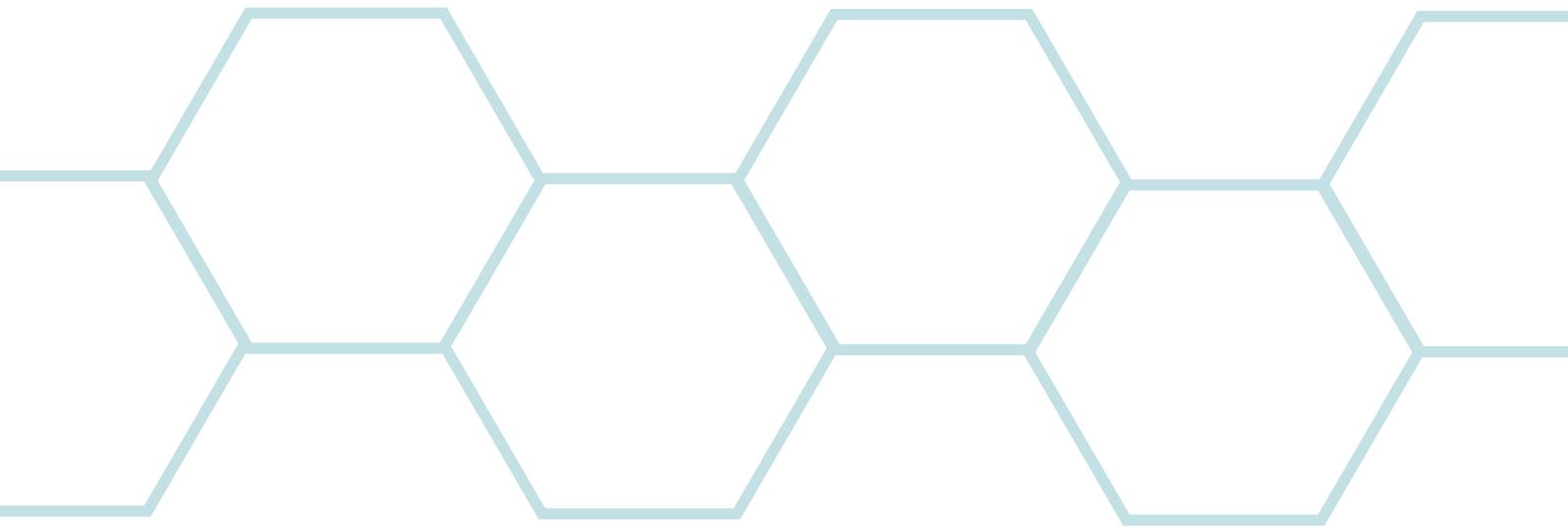


Workforce capacity planning model

September 2014



Developed in partnership with



Workforce capacity planning helps employers to work out whether or not they have the right mix and numbers of workers with the right skills and knowledge to implement care and support reform. The principles of workforce capacity planning are applicable across all services undergoing radical change.

The workforce capacity planning model has been developed to support workforce transformation and to ensure that resources are used in the best possible way to achieve better outcomes for people with care and support needs and their carers and families in the context of the care and support reforms.

What does it do?

The model enables you to analyse your workforce capacity and make informed decisions about how your workforce might need to change to meet the requirements of the Care Act.

An online version of the model can be accessed at www.skillsforcare.org.uk/careact > capacity planning model.

Who is it for?

It has been created to support senior managers, strategic workforce and HR leads working in adult social care commissioning, and/or services providing care and support with implementing workforce reform in the context of the Care Act.

Who developed the model?

It has been developed by Skills for Care and the National Skills Academy for Social Care in partnership with:

- Department of Health
- Association of Directors of Adult Social Services
- Centre for Workforce Intelligence
- The College of Social Work
- Local Government Association
- Social Care Institute for Excellence.

It has been tested extensively with local authorities and is designed to be used flexibly.

Between March and July 2014 the model has been tested in detail with 32 local authorities, and shared and discussed with a further 68. People involved in testing have included social workers, care providers, contracts officers, quality assurance managers, workforce development leads, Care Act leads, human resource managers, assistant directors and learning and development leads.

The model was tested in a variety of ways, including:

- reconfiguration of in-house assessment and care management
- testing out workforce development needs related to the Care Act and the Children and Family Act requirements
- understanding the impacts the Care Act would have on the whole of the existing workforce
- supporting the design and implementation of a multidisciplinary approach for care of older people focused on reducing or delaying hospital admissions
- exploring workforce development issues in the context of new Care Act responsibilities such as carers assessments.

What else is available?

Case study examples that show how the model has been used are available at www.skillsforcare.org.uk/careact > workforce capacity planning.

Here you will also find a workforce readiness tool that will help you reflect upon your current workforce, its skills and knowledge and how the Care Act may require a change of approach.

Answer the questions in the tool and you will receive an individual 'readiness report' via email. It includes an assessment of the level of preparedness indicated by your answers and provides links to specific resources that have been identified to support workforce development in areas where more work may be needed.

“ Workforce capacity planning requires you to make links between commissioners, programme leads, project managers and workforce leads so that there is an informed and cohesive approach. It is about leadership - who takes overall responsibility. ”

Context

“ It was very easy to explain and the diagram is very clear – the questions are helpful – everyone thought it was very straightforward and pragmatic. ”

The workforce capacity planning model is designed to be used flexibly. In its testing phase employers used the model to focus on specific issues rather than their whole workforce, and used the sections and questions that were most pertinent to them. They said it was helpful knowing they could go back to the model and apply it again in a different context.

The model puts the person with care and support needs and their carers at the centre of workforce capacity planning. It emphasises the role of workforce capacity planning in improving outcomes for people with care and support needs and their carers. Prevention, integration and wellbeing all need to be considered throughout the development of a workforce capacity plan.

Understanding the needs of the people that workers will be supporting is an important part of workforce capacity planning, as the different support needs of people and their carers and their journey through the care and support system will impact on workforce capacity planning decisions.

Employers highlighted that being clear about the organisations culture and values in the context of personalisation was important to clarify before putting any process of workforce capacity planning and workforce redesign into action.

Local authorities have a responsibility for workforce development across the whole social care workforce in their locality. It is important to engage with the wider local social care and health sector and consider how the Care Act will impact on their workforce.

In relation to the Act, the workforce needs to have the capacity and capability to work in the context of:

- 1. Wellbeing principle:** a new statutory principle designed to embed individual wellbeing as the driving force behind care and support.
- 2. Prevention:** the local authority's role in preventing, reducing or delaying the need for care and support. This is a general duty that applies in relation to all local people – including applying equally to carers and those with care needs.
- 3. Integration:** a duty on local authorities to carry out their care and support functions with the aim of integrating services with those provided by the NHS or other health-related services, such as housing to improve outcomes for people and communities.

4. **Information and advice:** broad, high-level requirements for what local authority information and advice services should include to enable people to understand how the care and support system works, what services are available locally, and how to access those services.
5. **Promote diversity and quality of services:** local authorities will be required to promote the diversity and quality of local services, so that there is a range of high quality providers in all areas. This includes local authorities fostering an effective care and support workforce.
6. **Co-operation:** local authority and other organisations, which have functions relevant to care and support, will be required to co-operate. There will be a specific duty to co-operate in relation to individual cases, where the local authority can request co-operation from one of the partners (or vice versa) to help with a specific issue to do with a carer or an adult who needs care and support. These provisions include a duty on the local authority to ensure cooperation between its officers responsible for adult care and support, housing, children's services and public health.

Workforce planners will need to consider the impact of this new legislative framework on new roles, tasks, responsibilities, skills and knowledge, and roles and tasks which will need to be altered or stopped altogether. Workforce planners will need to work closely with other colleagues such as those in HR teams and finance, in order to share the discussions about the impact of the framework from a range of perspectives.

The changes will necessitate considerable learning and development across the whole care and support workforce in terms of knowledge and information; skills and behaviour; culture and commitment and a shared language and understanding.

It is important that these issues are discussed early on through consultation and co-production with staff representatives, trade union representatives where appropriate, people with care and support needs and carers.

Commissioner and provider employers will need to start planning for new roles and/or differing roles, skills mixes and capacity based on the requirements of the Act.

Social care employers in the independent and voluntary sector also need to consider the impact of the reforms on their workforce.

The development of a workforce capacity plan and accompanying tools complements the national learning and development programme which is producing free learning and development materials to ensure that the adult social care workforce is ready and capable to deliver the changes required by the Act. The materials are being designed so that can be tailored to the needs of an organisation or local area, whilst maintaining consistency.

They will be available at www.skillsforcare.org.uk/careact > learning and development towards the end of October 2014 once the regulations and guidelines for the Act have been published.

Core principles

“ It gave us the opportunity to remodel the workforce and challenge perceptions of how it is already setup. ”

The workforce capacity planning model is informed by an understanding that:

- a caring, skilled and valued workforce delivers quality care and support in partnership with individuals, families and communities
- we need the right numbers of people, in the right places, with the right values and skills, doing the right things and being led by high quality leaders if we are going to achieve the right outcomes
- there are significant challenges arising out of the care and support reforms - the right workforce is key to meeting those challenges
- service integration and personalisation of services are also extremely relevant as policy drivers when thinking through capacity planning in the context of the Act, as is the duty to promote well-being.

In order to ensure success there must be:

- a clear understanding of local organisational and workforce culture in the context of personalisation
- commitment, support and participation of all parties involved in the application of the model
- an effective communication mechanism in place between all parties
- effective consultation from an early stage.

Using the model

“ Different projects and project owners are working on the various elements and this tool was helpful for pulling all the different workforce threads together to present a more holistic understanding of the workforce issues. ”

The workforce capacity planning model is set out as six inter-linked activities that use a set of prescribed questions to identify workforce capacity issues.

The activities can be undertaken in which ever order seems most effective to the user. It is important though to consider each activity as part of the workforce capacity planning process.

“ We didn't follow the cycle in a sequence, instead we focused on different key stage and worked with stakeholders and suggestions in an iterative process. ”

Some of the ways employers have used the model include:

- as a discussion tool with senior managers
- as part of a workshop programme to get people thinking differently
- as a tool to consider capacity in a more focused way
- to support integration discussions
- to engage with providers in Care Act implementation
- as a framework for local planning
- as a checklist against which to measure workforce activity.

Employers also saw the importance of being specific about how you use the model. You can use the model to look at your whole workforce. However, those employers who had a specific area of their workforce that they wanted to focus on found they could progress quicker and then go back and use the model again to look at a different workforce challenge.

Some employers didn't find all the questions under each part of the model easy to answer succinctly. However, this was seen as okay. Employers felt the questions help you to agree your direction of travel – not give you a perfect answer.

To start using the model you need to:

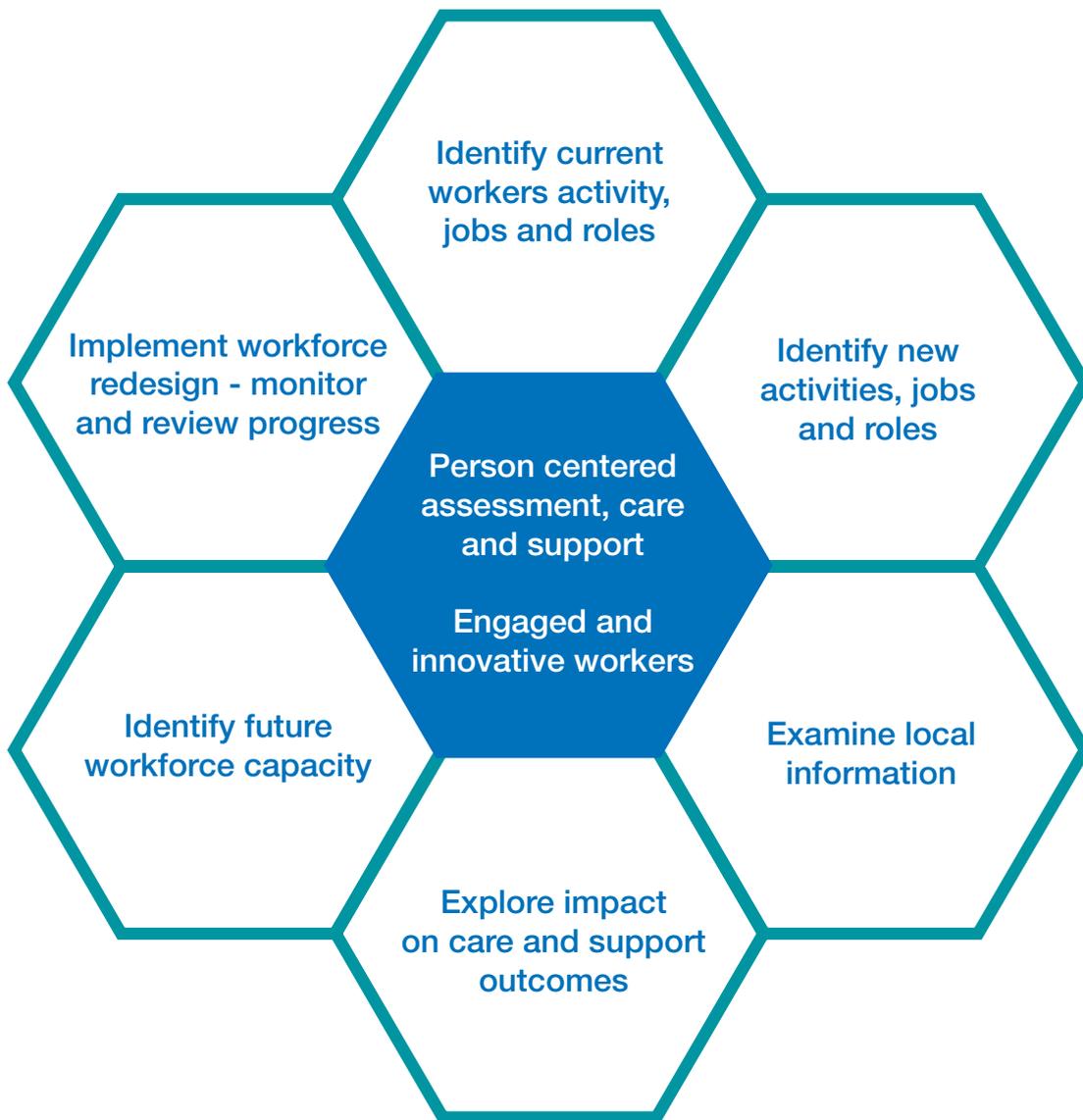
- have a clear picture of the organisations values and objectives for personalisation at the core of your thinking about workforce change
- acknowledge the existing culture of the organisation and how that will impact on workforce capacity
- define the boundaries of the workforce under examination - it is important that there is a clear starting point and a well-defined goal
- gain agreement and support from senior managers, ideally at director level.

As you begin using the model:

- have a broad view and actively challenge assumptions to ensure that the wider implications of changes to the tasks the workforce are undertaking are considered
- make sure that the redesign of workforce jobs/roles and responsibilities are jointly owned, identified, planned, delivered and reviewed by all parties
- note that workforce forecasting and workforce modeling based on changes required cannot be delivered in isolation
- remember that integration, wellbeing, personalisation and coproduction are important drivers to keep in mind
- link workforce capacity planning to market position statements, understanding local people, local demand and supply issues
- think about roles that go beyond social care and include (for example) capacity impacts on housing, health, policing, commissioning, contracting and leadership
- explore opportunities to work with other partners to meet workforce capacity issues
- be clear in your thinking and make sure you can keep track of what you are doing and update it regularly.

A number of existing resources can support workforce capacity planning and development, including: the National Minimum Data Set for Social Care (NMDS-SC), particularly the dashboards, workforce commissioning, workforce planning and the workforce outcome model, the principles of workforce redesign, the principles of workforce integration, think integration, think workforce and the social work demand and supply model.

An online version of the model and links to these and other resources can be found at www.skillsforcare.org.uk/careact > capacity planning model.



For each of the six stages there are a series of enabling questions, prompts and tips.

It can be a challenge to identify capacity issues. Workforce capacity planning needs to be **SMARTER**:

- **S**pecific and significant
- **M**easurable and meaningful
- **A**ttainable and achievable
- **R**ealistic, relevant, reasonable, results-orientated
- **T**ime based
- **E**valuated
- **R**eviewed

Identify current worker activity, jobs and roles

Be clear about your baseline. Define the workforce you are planning to analyse.

1. How many workers are currently working in what jobs and roles in the environment you are analysing?
2. What are the current activities, inputs and outputs that workers need to stop doing as a result of the care and support reforms?
3. What are the current activities, inputs and outputs that workers need to keep doing?
4. Is capacity solely a workforce issue? For example are there technology-based solutions that need to be developed or optimized?
5. Is a combined approach with other organisations required, especially if there is a parallel aim to integrate services
6. Is current leadership and management capacity right?

Prompts and tips

It is unlikely that worker capacity issues i.e. what needs to change will be isolated to one area of activity, environment or role and a combination of coordinated changes will be required to achieve the desired outcome.

The workforce culture of the organisation(s) you are analysing will have a big impact on people's capacity for change. Coproduction needs to be part of how workforce decisions are made.

Current workers may also include people in organisations not naturally considered to be part of the social care service.

“ You can dip into the model at any point
- it is a cycle. ”

In relation to information, advice and guidance, there may be a role for libraries and community centre workers. Housing services workers will have an important role and this may involve changes to housing workers roles and jobs. Changes to the role of volunteers will also need to be considered. Roles and activities in the independent and voluntary sector will also need to be explored.

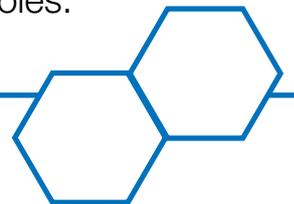
You may need to think about what steps need to be taken in order to ensure workers in primary care, GP surgeries, community nursing and occupational therapy are aware of the implications of the Care Act and their roles around prevention, information, advice and guidance.

It's important to also consider what can and cannot be achieved without workforce capacity change and what evidence is available to suggest that these changes to workforce capacity will achieve their desired outcome. Be realistic about what can be done with the available resources.

“ It's okay to adapt the questions.”

Key points

- Record who needs to do what and by when.
- Be clear about how, when and by who progress will be monitored.
- Use your NMDS-SC data to profile your existing workforce. Remember to keep your NMDS-SC data in your capacity plan up to date.
- Use existing role profiles to benchmark potential changes in roles.



Identify new activities, jobs and roles

1. How will the Care Act impact on the activities that workers currently do?
2. How will the Care Act impact on activities that workers need to do in the future?
3. What are the potential new activities, inputs and outputs that workers need to start doing?
4. In what environments, e.g. a person's home, hospital, care home, day support etc. are those activities likely to take place?
5. What roles are likely to undertake which activities?
6. Will leadership and management activity be different?
7. Which desired outcomes for the organisation and people with care and support needs and their families, are not being met?
8. Is the evidence base that you have for answering these questions adequate, or are there gaps in your understanding? If so can those gaps be filled through existing resources?

Prompts and tips

Identified activities may relate to either current or future anticipated needs of individuals, services, organisations or in the community.

It's important to consider the back office workforce that will need to be in place to support frontline workers in new roles. If back office support is outsourced or is likely to be, discussions will need to be had with suppliers about what new knowledge and skills people will need and how the quality of any learning and development will be assured.

For example, certain workers may need to be equipped to provide front line first point of contact information, advice and guidance as a part of the universal service offer. This may require new jobs and/or new responsibilities and lead to a potential for re-evaluation of roles.

In changing job roles, activities and functions, some workers are likely to be working with people they haven't worked with before. Groups of workers will need to know about the roles of other teams they will be working with in an integrated way in the future.

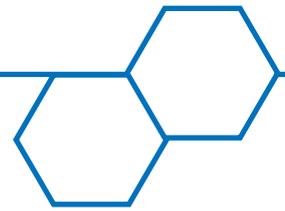
Scenario based planning can be useful to look at what services people will need and what skills, knowledge and competencies will be required by workers to provide that support.

To do this it's important to have clear information and data to identify the need for change. Base line data can include person-centred plans, assessment data, complaints, reviews, inspections, observations, financial monitoring and guidance on changes to legislation or policy.

“ We learned to look at things with fresh eye’s and challenge current perceptions of why we do things, and open up opportunities to look at a new type of workforce.”

Key points

- It does not need to be perfect.
- Focus on specifics.
- Be prepared to adapt your thinking.



Examine local information

1. What does the local population data tell you about how the community you are profiling will change over the next five years?
2. What effect might local population changes have on the activities your workforce need to complete?
3. What effect might local population changes have on the roles that you need to commission?
4. What is the role of the local community in meeting your capacity requirements?
5. How does this local information impact on the new activities, jobs and roles you have identified?
6. What do local strategic plans and documents tell you about potential demand?

Prompts and tips

Understanding local data and population trends is important in order to be able to accurately plan for the future.

There are various datasets available for people working in the sector, including the Office of National Statistics, PANSI (Projecting Adult Needs and Service Information), POPPI (Projecting Older People Population Information) and a background document from the Department of Health called Joint Strategic Needs Assessment and joint health and wellbeing strategies explained.

Local partnership, commissioning and infrastructure plans are important to consider. Make sure you can access health and housing data as part of your profiling. Public health information is important too. Health inequalities; prevention, demographics and disease prevalence can impact on the demand for care and support and the ability to recruit a local workforce.

Local economic data can help you to think through potential care and support demand.

When looking at local population information make sure that you explore it in the context of specific roles and activities.

Decisions you make about workers in social care may impact on the broader local labour market. Other national or local initiatives may also impact on your workforce.

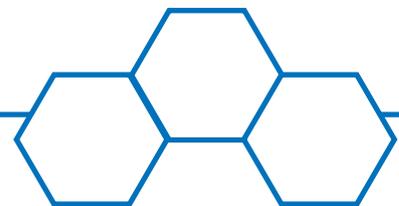
It's also important to consider longer-term horizon scanning.

“ We have widened our areas for consideration and highlighted the significance of the implications for the whole workforce. ”

“ We hold quite a lot of the underpinning data, but it is spread right across the authority. ”

Key points

- Don't be over ambitious in how you use local information.
- Think about what learning and development intervention might be needed in the community and what effect they might have on the capacity of your workforce to deliver.
- The local community can include:
 - people who use services, families and carers
 - workforce (paid and unpaid)
 - local businesses
 - local health and housing organisations.



Explore impact on care and support outcomes

1. How will role and worker activity changes affect the outcomes for people with care and support needs and their families?
2. Will the impact of worker activity changes be different for people with different care and support needs?
3. How will worker activity changes impact on carers?
4. Is the impact different for people who get support from other agencies such as health and housing?
5. Is the impact different for people who employ their own support?

Prompts and tips

Understand the capacity of people with care and support needs and their families to engage with change. The impact the care and support reforms may have on them needs to be thought through.

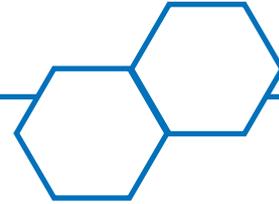
Learning requirements in relation to balancing risk and safeguarding when workers are making assessments needs to be understood.

Having a clear perspective on whether or not the learning needs of workers, the person with care and support needs and their families are different, and why, will guide how learning and development resources are spent.

Ensuring that the skills people with care and support needs and their families have developed before and during their care and support journey can be adapted to meet personal outcomes should also be considered.

As part of any work on demand management the impacts on care and support outcomes and the workforce capacity need to be explored.

“ Include people with care and support needs more. Ensure that co-production is part of every stage. ”



Key points

- Ensure that the learning and development requirements of people with care and support needs and their families are understood and met.
- Consider community skills assessment as one way of delivering personal outcomes.

Identify future workforce capacity

1. What workforce attitudes, knowledge, skills, behaviours, productivity, capacity and policies are required to achieve the desired outcomes?
2. Do you have an existing personal capacity framework you can modify to set out the knowledge, skills and behaviours for the new system, or any others you can tap into and modify such as those available in health and social work?
3. What workforce attitudes, knowledge, skills, behaviours, productivity, capacity or policies already exist?
4. What will the workforce do differently as a result of any intervention?
5. What is the gap?
6. Who needs the workforce intervention?
7. What are the workforce challenges/barriers?
8. What is the anticipated effect of this workforce change on the desired outcome?
9. How, when and by whom will planned changes be measured and monitored?

Prompts and tips

It is important to have a clear understanding of the workforce capacity issues that require change to be made before any interventions are designed.

A range of workforce interventions may be required to achieve the desired outcomes.

Take time to consider who needs development – the paid workforce such as senior managers, line managers, team leaders, front line care staff, support services and technical professional staff.

Consider who else may require development - people using the service, carers, families, circles of support, communities and partner agencies. Consider volunteers too. People may have common/different needs. The mix of skills needed in the workforce will also need to be thought through.

Development in other organisations may need to be supported and influenced.

There may be different issues in different geographical areas. The local labour market will influence your ability to recruit, as will local housing, transport and childcare.

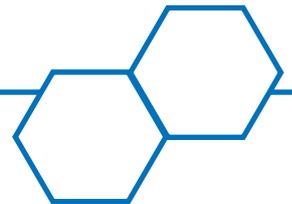
Ensure all parties have a clear understanding of how the identified workforce change will lead to the achievement of the desired outcome.

Know how changes will be coordinated, so that all parties can confidently work together to make change happen successfully.

“Its critical to involve operation leads at all stages of this process.”

Key points

- Be clear about what has to be learnt and what is desirable to be learnt.
- Set out skills and learning in a clear framework that relates to career pathways.
- Change without measureable improvement is meaningless.



Implement workforce redesign – monitor and review progress

Translate the workforce capacity plan into actions - explore and generate efficient cost effective solutions, agree your success measures and regularly monitor progress.

1. What workforce interventions are likely to achieve the desired change?
2. Are these interventions specific to certain people/structures that have a role in the person's or care group's lives, or are there more generic requirements?
3. What resources are available?
4. Do anticipated benefits justify the investment?
5. Who will deliver the intervention?
6. How will you measure success in terms of process, outputs and workforce outcomes?
7. Is there a workforce implementation plan which includes timescales and a mechanism for validating and monitoring interventions? Be clear about how you will monitor and review progress.

Prompts and tips

Workforce change programmes could involve:

- increase/decrease capacity
- workforce reassignment – change in rota patterns
- workforce redesign – job roles, new roles
- workforce learning – capability, knowledge, skills, attitudes, behaviours and proficiency levels culture.

“ If we do not change the way we work there will be a significant increase in demand that will be unsustainable. ”

Use the principles of workforce redesign to develop your workforce change programme.

- Take a whole systems view of organisational change.
- Recognise the different ways people, organisations and partnerships respond to change.
- Nurture champions, innovators and leaders; encourage and support organisational learning.
- Engage people in the process; acknowledge, value and utilise their experience.
- The different ways that people learn should influence how change is introduced and the workforce supported.
- Encourage and utilise people's thinking about values, behaviours and practice to shape innovation.
- Engage with your community to understand its cultures and strengths; work with the community to develop inclusive and creative workforce planning strategies.
- Be sure to carry out proper consultation on structural change and explain the implications to staff that may be affected.
- Refer to good practice in change management programmes.

When setting out how you will monitor and review progress, use the workforce outcome measure tool to set your measures.

- Be clear what your key success measures are.
- Set out regular reviews.
- Know how you will monitor progress and who is responsible for monitoring.

Key points

- Commissioning decisions impact on workforce decisions – they need to be made together
- Change is a constant. Our capacity to change is greater than people think.

Summary

This workforce capacity planning model has been developed with partners to support senior managers, strategic workforce and HR leads working in adult social care commissioning and providing with implementing workforce reform in the context of the Care Act.

The model puts the person at the centre of workforce capacity planning. It emphasises the role of workforce capacity planning in contributing to improving outcomes for people with care and support needs and their carers. Prevention, integration and wellbeing all need to be considered throughout the development of a workforce capacity plan.

On the Skills for Care website you will find:

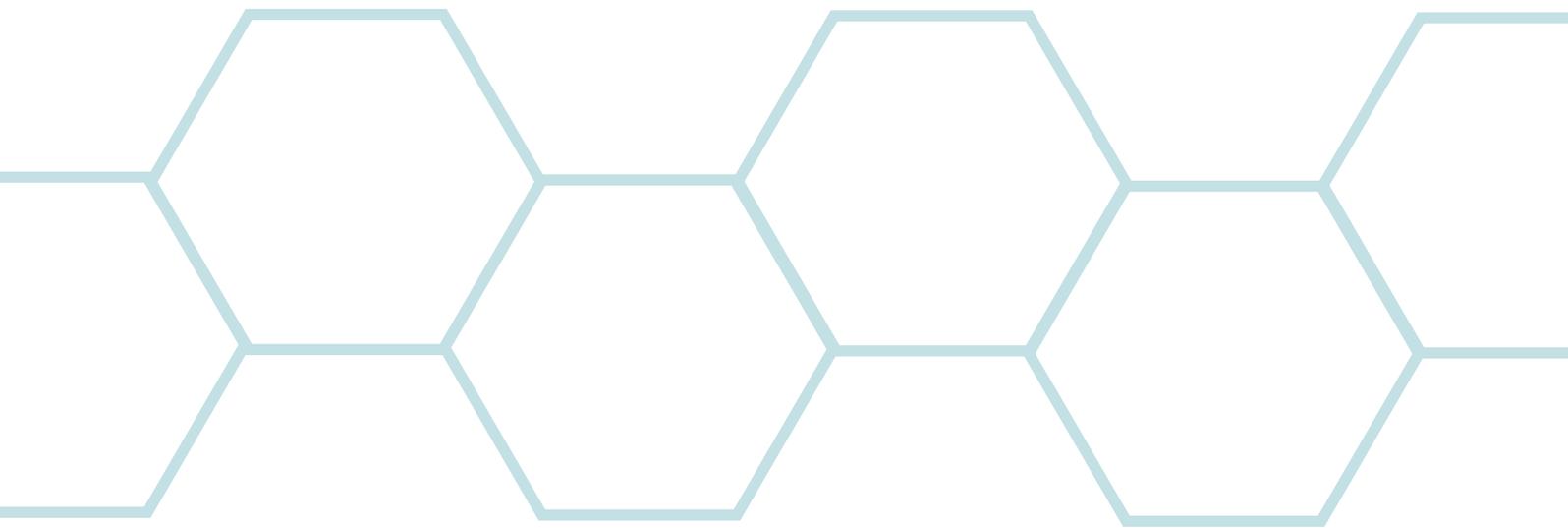
- an interactive version of the model with links to other tools and resources.
- case studies on how the model has been used to date
- a workforce readiness tool to help you assess your progress with workforce development in relation to Care Act implementation.

Visit www.skillsforcare.org.uk/careact > workforce capacity planning.

Skills for Care's area teams can provide local support and work with local networks to help you get the most out of the model.

To find out more contact jim.thomas@skillsforcare.org.uk.





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