

Agenda Item No:

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Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	9 October 2024
Subject:	Breakthrough programme assurance update
Director Sponsor:	Jayne Adamson
Author:	Rachel Baillie Smith

STATUS OF THE REPORT:

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

This report provides an update on workforce transformation both in our system and within the ICB organisation. The grid at Appendix 1 offers an at a glance overview of in-year objectives, progress and risks. Spotlights on areas of particular success and challenge follow in the body of this report.

RECOMMENDATIONS:

Members are asked to:

- i) Note the position set out in the Breakthrough HNY assurance overview (Appendix 1)
- ii) Confirm their support for the system talent management initiatives as outlined, recognising that these will require support and funding in future years to deliver the envisaged strategic benefit.
- iii) Note the programme outline and approach to be adopted for Breakthrough ICB
- iv) Note the nature and volume of work being managed in the internal HR and OD team.

ICB STRATEGIC OBJECTIVE (

Leading for Excellence	<input type="checkbox"/>
Leading for Prevention	<input type="checkbox"/>
Leading for Sustainability	<input checked="" type="checkbox"/>
Voice at the Heart	<input type="checkbox"/>

IMPLICATIONS

Finance	Both internal and external programmes are critical to maximising productivity from system investment in workforce. PAM activity has a particular focus on delivering in year cost avoidance.
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Quality	External programme significantly contributes to quality agenda via focus on retention, staff experience, culture and education and training, all of which underpin workforce capability and future readiness.
HR	All reported activity supports effective use of human resources system-wide. In addition, this report outlines HR activity delivered which is specific to the ICB organisation.
Legal / Regulatory	Delivering workforce transformation to enable improved system function is a mandated requirement for ICBs; this report provides assurance on how that obligation is being delivered.
Data Protection / IG	Data protection / IG is considered where appropriate throughout both programmes; no specific implications are highlighted here.
Health inequality / equality	Both internal and external programmes seek to enable an appropriately skilled and sufficient workforce which is equipped to have impact on health inequalities. In addition, Breakthrough HNY includes a workstream specifically focused on setting 'Good Work' standards, recognising that enabling access to sustainable, good quality jobs in health and care is one of the system's key levers of change in terms of health equity among our populations.
Conflict of Interest Aspects	None identified
Sustainability	Environmental sustainability is considered as appropriate across both programmes; particularly in the internal programme, agile working arrangements are being developed with an awareness of potential benefits in terms of carbon impact.

ASSESSED RISK:

Breakthrough HNY

The Workforce Board manages a live risk register capturing risks and mitigations across the system facing programme. Specific risks associated with each individual part of the programme are highlighted for Board awareness at Appendix 1.

Breakthrough ICB

Delivery risks for the internal programme will be mitigated through adoption of the dispersed leadership model described below. Resourcing risks apply across the piece, recognising that arrangements are being tailored at no/low cost levels.

There is a key risk across both programmes relating to the sustainability of People function capacity past April 2025, which if not resolved could undermine large parts of both programmes. Mitigations are currently in discussion via the ICB Executive Team.

MONITORING AND ASSURANCE:

Breakthrough HNY

Progress and risks associated with this system-facing programme are monitored and managed monthly by the Workforce Board, with matters escalated as appropriate to this Board.

Breakthrough ICB

Arrangements proposed for implementation in Q3 for internal management and monitoring are set out in this report. A delegated group of Executive Directors are responsible for ensuring the ongoing management and monitoring of this programme, reporting back to the Executive Team.

ENGAGEMENT:

Breakthrough HNY

Wide system engagement is a key principle of the Breakthrough methodology, including an annual System Workforce Summit to determine annual programme content and dispersed system leadership as standard across all elements. This is further supported by representative System Workforce Board membership.

Breakthrough ICB

Extended engagement via multiple channels has supported the definition of organisational values and behaviours; the current programme builds on and expressly seeks to implement these.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption.

BREAKTHROUGH PROGRAMME ASSURANCE UPDATE

1. INTRODUCTION

1.1. Our workforce transformation programme is in two complementary parts:

- **Breakthrough HNY is our system-facing workforce transformation programme.** In this programme we aim to bring partners from across our multi-sector system together to address shared workforce challenges, whilst at the same time growing mutual understanding to improve system function. Progress and risks associated with this system-facing programme are monitored and managed monthly by the Workforce Board, with matters escalated as appropriate to this Board.
- **Breakthrough ICB is our organisational development and transformation plan for the ICB organisation.** In this programme we aim to build an organisational culture in our ICB which enables each of our employees to make their best contribution to ensuring we collectively deliver on our organisation's core purpose.

2. PROGRAMME OVERVIEW

2.1. The status report at Appendix 1 provides an assurance overview of Breakthrough HNY, highlighting progress to date and key risks. Spotlights on selected programme elements follow below. This report also introduces the full structure of the Breakthrough ICB programme and provides assurance on how dispersed leadership of this programme will be delivered.

3. SPOTLIGHT: TALENT MANAGEMENT AND LEADERSHIP DEVELOPMENT

3.1. Building a coherent, shared approach to talent management across our system which ensures the strategic development of future leaders equipped with system insight is a critical need in both our system-facing and internal transformation programmes.

3.2. The Leadership, Talent and Succession task and finish group within Breakthrough HNY brings system partners together to address this challenge. The group seeks Board support for their plan to develop the following initiatives, all of which are designed to build peer-groups and cultures that focus on collaboration around talent rather than competition for it:

3.2.1. A whole-system high potential talent scheme

Aimed at middle management (band 7-8c), this scheme will cultivate system leadership capability across the partnership. By enabling talent from across the system to access the experience and development needed to transition to the next career step, with a particular focus on increasing diversity in the talent pipeline, capability for key roles across the system will be enhanced and the pipeline of talent progressing towards senior executive roles and talent programmes strengthened.

HNY High Potential Scheme anticipated launch: March 2025

3.2.2. A whole-system executive level leadership development scheme

The NHS Aspiring Executives leadership development programme curated by NHSE identifies regional NHS leaders to receive curated leadership development opportunities. 27 individuals from HNY organisations are currently participating in cohort 2 of this programme; as part of their development current HNY participants and alumni will be meeting with the Chair and Chief Executive for an HNY system briefing in December.

Following successful negotiation with NHSE, we are seeking to design and implement a system-wide complementary programme, which will enable leaders from across all sectors to develop as future executive leaders together. This new programme, on which development is currently unique to HNY, will particularly focus on growing and retaining diverse senior leaders who understand the interdependent nature of our multi-sector system and their role as leaders in protecting and enhancing overall system function. We envisage significant interconnection between the NHS programme and the wider system programme with opportunities to mirror and share resources, in a programme which gives participants cross-sector experience and enhanced visibility to expedite their journey into system leadership roles.

HNY System Leadership Scheme anticipated launch: Q1 2025

3.2.3. A development programme for internationally educated colleagues

Working closely with the HNY Inclusion Assembly, we propose to create a development programme targeted at colleagues educated overseas, designed to support them to progress in their professional careers and support other internationally educated colleagues through a better-connected peer group. This work will be led by one of our incoming system EDI leads (see Inclusion Assembly update in Appendix 1 for more details) and will also support the objectives of the Ethical International Recruitment Committee.

Internationally Educated Colleagues Programme anticipated launch: Feb 25

- 3.3. Board members will also be aware of the recent appointment of Associate NEDs via a programme sponsored by the Chair, which is an exciting addition to our suite of leadership development opportunities, again with a specific focus on increasing diversity at Board level.
- 3.4. Through partnership negotiation, initial set up of the three new initiatives outlined above can be achieved without any additional funding requirements. However, the investment of partnership time into set up will only be worthwhile if the Board and wider HNY organisations recognise these initiatives as core to our shared system leadership development agenda and commit to support them into the medium-term. Support means active sponsorship involving both promoting them and enabling release to participate in them among staff groups and also standing ready to support administrative costs that may arise from year 2 onwards.
- 3.5. **Board members are specifically asked to confirm their support for the above initiatives into the medium-term.**

4. SPOTLIGHT: PAYBILL AND AGENCY MANAGEMENT (PAM)

4.1. Collaborative work to manage agency costs, currently focused in NHS Trusts and CICs, has saved £10m in the year to date compared to 2023/24 spend. Work is continuing towards very ambitious agency cost avoidance targets set in the 2024/25 operating plan. The work of the Committee and individual partners is now supported by a PAM dashboard, enabled by an agreement to collaborate on data sharing, which has enabled access to near to live-time intelligence on progress towards plan. The dashboard is accessible directly from nhs.net email addresses; a solution to enable access for those with other email addresses is currently being developed.

4.2. The vastly improved whole-system insight enabled by the [dashboard](#) is enabling the PAM Committee to take a data-driven approach to defining its work priorities including:

4.2.1. Medical agency rate card

Data shows that whilst significant reductions in agency WTE use have been achieved across all staff groups, spend remains above plan in medical due to higher than plan payment rates. PAM is currently examining a proposal from the Workforce Alliance, part of Crown Commercial Services, which may support the development of a single system rate card for medical agency. A further update will be brought to the Board once current negotiations have concluded.

4.2.2. E-roster development

Alongside managing price, effective management of contracted medical workforce is essential in addressing the current gap to plan. A workshop exploring the potential to accelerate progress towards e-roster for medics took place on 24th September. Partners have committed to developing a framework that will enable maximum efficiency in deployment; this will require Board-level engagement across providers to enable progress at pace.

4.3. Work is actively underway to examine scaling opportunities across the system, bearing in mind cost of change, cashable benefits and the emerging system partnership geography.

4.4. Board members may be assured that the above opportunities already being actively examined by PAM mirror items identified by Grant Thornton in their rapid review and as discussed at the recent Summit event.

4.5. The risk highlighted above relating to People function capacity is particularly acute in this area, given the specialist nature of the required work.

5. SPOTLIGHT: BREAKTHROUGH ICB FULL PROGRAMME LAUNCH

5.1. Board members will be aware of the substantial work undertaken over recent months to co-produce and launch the ICB organisation's values and behaviours. This work has created the foundations for the launch of the full organisational development and transformation programme, which is designed to ensure that the organisation both lives its values and actively transforms in response to its mandate and purpose.

- 5.2. The full programme is outlined at Figure 1 below. Board members will note that dispersed leadership is adopted as a key principle in this programme, mirroring the approach that has been successful in the system-facing programme. Colleagues identified to lead the various parts of the whole programme will be brought together regularly in an internal organisational development and transformation 'engine room' led by Executive Directors, complementing the similar approach being taken to system plan management. This will ensure that significant interdependencies between the programme elements are managed and opportunities for collaboration exploited, contributing to our wider culture change objectives. There are a number of important areas of connection between our system-facing workforce transformation programme and our internal development work, particularly in relation to talent management where the ICB organisation will benefit from the system initiatives spotlighted at section 3.
- 5.3. Complementing these wider talent management initiatives and their focus on system leadership, the ICB is concerned to ensure appropriate development of core leadership skills among its existing staff. Work is underway to develop a leadership and management competency framework for the organisation, but Board are asked to note that this may be overtaken by NHSE's recent announcement they intend to publish standards and competencies for NHS leadership (March/April 25), a leadership curriculum (May 25) and an NHS Leadership Code of Practice (November 25). It is likely that NHS organisations will be measured on the extent to which they participate in these standards. Work on internal arrangements will continue pending further clarity from NHSE.
- 5.4. The ICB is also benefiting from our existing whole-system Coaching Network, which also reaches beyond our system into West Yorkshire. 198 individuals have registered as coachees in the ICB and are supported by 33 qualified coaches or coaches in training in the ICB, supported by 4 coach supervisors registered from 4 different system partner organisations. The network operates across HNY and West Yorkshire enabling coachees to access coaching from coaches in other organisations/ a different ICS from their own. The Coaching Network underpins the emerging talent programmes described earlier in this report and has oversight via a Coaching steering group.
- 5.5. Similarly, the ICB organisation will benefit from wider system work to define and develop a tailored staff health and wellbeing offer. A low-cost ICB organisation offer has been drawn together, pulling in elements delivered by partners where participation can be extended and making use of national opportunities. Ongoing investment is envisaged in Occupational Health and EAP services as a minimum. Following presentation to the Staff Engagement Group in late September, the offer will be presented to all ICB staff on the intranet shortly, supported by appropriate communications.

Figure 1: Breakthrough ICB programme outline

We Care	Strategy
Values and behaviours: embed in HR processes	ICB future structure, capacity bridge and investment plan
ICB inclusion action plan	Design and implementation of establishment and delivery methods** for priority functions: Population health management and BI System digital transformation Innovation Research and Improvement System (IRIS) System Workforce (Breakthrough HNY) Public engagement
Health and wellbeing offer	
Talent programme (whole system)	
Coaching network (whole system)	
Leadership development programme	
Staff survey and reporting	System outcomes framework: confirm and socialise
Pulse surveys and reporting	System outcomes-led, medium-term financial planning approach*
We Connect	Assurance
Recognition programme – ICB specific	System planning and reporting review
Reward package – ICB existing offer	ICB processes review: identify and simplify
Team HNY channel	Develop and socialise ICB accountability framework** supported by scheme of delegation, building on output of processes review
Agile working: principles and communications	Implement joint audit and assurance with local government partners
Agile working: personal and team plans	Governance and leadership
Agile working: IT infrastructure and standard kit	Inclusion Assembly action plan and profile-raising
Agile working: modern workspaces	New model for Place: design and enact
We Innovate	ICB governance review
ICB organisation digital and AI transformation	
Board development programme	
IRIS skills baseline and development programme	

6. INTERNAL HR SERVICE UPDATE

- 6.1. The organisation is currently experiencing significant change, with four consultations currently live.
- 6.2. The internal HR and OD team is actively managing a significantly increased volume of activity directly related to these change processes. During this current period of change the team has handled:

Format Job Evaluation (JE) panels held	24
Jobs evaluated	70
Job descriptions desk-topped	100
Group meetings held	32
Consultation emails received requiring action	800


- 6.3. Further workload will emerge over coming weeks as and when formal 1:1s begin to be scheduled following consultation close.
- 6.4. Alongside these additional requirements, the internal HR and OD team is also managing its standard workflow, for example:

Recruitment programmes requiring active management	55
Policies currently under active review	8
New policies currently in development	1
Emails into general inbox (one week)	212
% emails received requiring action	90%
Employment Tribunals	4
Long-Term sickness cases	6
Disciplinary investigations	3
Performance cases	7
Grievance investigations	4
Support for informal employee relations cases	9

- 6.5. Board members will also be aware that the internal HR and OD team launched the NHS Staff Survey for ICB staff during the first week of October.

7. RECOMMENDATIONS

- 7.1. Members are asked to:
- i) Note the position set out in the Breakthrough HNY assurance overview (Appendix 1)
 - ii) Confirm their support for the system talent management initiatives as outlined, recognising that these will require support and funding in future years to deliver the envisaged strategic benefit.
 - iii) Note the programme outline and approach to be adopted for Breakthrough ICB
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 Our Workforce Transformation Programme 2024/25	Chair/SRO	24/25 key objective	Status update	RAG	Risks
COMMITTEES OF THE WORKFORCE BOARD					
HNY Inclusion Assembly	Chair to be recruited System Sponsor Jayne Adamson, ICB	Design and deliver a system inclusion action plan driven by colleagues' lived experience and insight	Action plan agreed August 24. Associate NED appointments confirmed and engagement with Assembly commenced. 6-month System Inclusion Leads appointed, commencing over Q3. Good progress made to co-design and deliver allyship training. Work beginning on inclusive language videos and staff network development. Regional (4+1) work emerging around anti-racism supported by ANEDs. Strong development has resulted in effective engagement of Assembly members.		Scale of work required is not matched by available capacity; risk of loss of momentum when temporary System Inclusion Leads end.
Ethical International Recruitment Committee	Andrew Burnell, CHCP	Maintain an ethical pipeline to secure internationally educated workforce in HNY where skills are required	Strong links in place with training institutes in Kerala, India. Next recruitment opportunity at ANCIPS January 2025: MH focus. Other potential global opportunities currently being explored. Current recruitment demand is low; Navigo-hosted Business Unit seeking to sustain via wider UK commercial income, recognising that demand patterns change over time.		Reduced current demand could destabilise international relationships. Sustainable commercial funding for Unit could be affected by current NHS finance position.
Health and Wellbeing Committee	Polly McMeekin, YSFT	Drive cooperation in proactive and reactive workforce health and wellbeing interventions system-wide	Committee has overseen practical work to extend collaboration in Occupational Health including work to address shared issues with IT system. Currently exploring role in championing factors causing detriment to wellbeing at work including issues identified re: Resident Doctor rotation.		Reduction of budget for wellbeing enhancing initiatives is a significant concern, potentially leading to burnout, loss of key skills and productivity reduction
Education and Training Committee	David Barrett, York University; Debra Gray, Hull College	Design and deliver a roadmap for education and training alignment to system strategy	Committee approved co-produced Roadmap September 24; will be received at Workforce Board October 24. Focus areas include unlocking potential via higher profile career paths, widening access to education and training entry, enabling workforce and skills growth via digital training, placements expansion and support for learning environments and further developing structured progression routes.		System SIP close to establishment could lead to lack of opportunities for new qualifiers 25/26
Paybill and Agency Management Committee	Simon Morrirt, YSFT	Control super-establishment spend, drive scaling where there are benefits and influence planning and service transformation to ensure workforce considerations are central	Near-live data now routinely available in system dashboard , driving data-led interventions. Partners' activity in year to date has avoided £9.29m of agency costs compared to 23/24; work ongoing to deliver very ambitious targets in 24/25 operating plan. Current focus on activity to address high medical agency rates and progress towards medical e-rostering. For 25/26 impact, exploring redesign methodology focused on specialties with highest agency spend. Pilot implementations of the HNY Portability Agreement are currently live in Clinical endoscopists (NHS-NHS), Advance nurse practitioners (NHS-CIC). Further pilots currently being explored in VCSE-Social Care and Acute-Primary Care.		Agency and bank delivered to plan in WTE terms. Risks in relation to market rates at levels above plan assumptions, particularly medical.
People Story Committee	Simon Nearney, Humber Group	Develop a multi-year whole system workforce plan	Current workforce data captured in a draft People Story dashboard currently being refined. Stakeholder workshop held and discussions planned with Place and Collaborative Directors to agree priorities for 'to be' workforce modelling linked to emerging future system plans. Live VCSE workforce mapping project will contribute to mitigating identified risk.		Gaps in data risk skewed focus on parts of the system where data is more plentiful and underassessment of risks and/or opportunities in other sectors
TASK AND FINISH GROUPS					
Inclusive health and care careers	Chris Howell, HEY BGSH; Jacqui Laycock, CHCP	Engage HNY populations in health and care careers, particularly in areas of recruitment challenge and including those with barriers to work	HEY project: established a baseline of schools, colleges & locality demographics in each place. 26 schools engaged. 50 advisers and teachers attended teacher encounter. 3 virtual & 3 in person adult events. NL project: 19 local recruits started employment, 11 employers signed up to Disability Confident Employer scheme. Springpod virtual work experience launched. Pilot work experience model in North Lincs delivered. Continuing success in Ambassador programme.		Active work ongoing to protect and sustain impact when live projects end March 25.

Workforce health equity	Diane Lee, North Lincs Council	Deliver a set of Good Work standards for adoption among HNY anchor organisations	Overview document produced to enable system engagement: focus currently on standards and principles of good employers and aiming for a core offer across HNY. Baseline of key standards conducted, shows variation across HNY; this will be used to identify priority action areas. Opportunity to connect output with Anchor Institutions programme.		Ensuring wide system engagement will be challenging; mitigating by maximising breadth of participation at this early stage
Stay and thrive: retaining our staff	Zoe Norris, Humberside LMC	Upskill managers and organisations to retain staff, within and beyond NHS People Promise sites	System wide steering group will host second annual HNY retention conference on 2 nd October including showcasing work at our 7 HNY People Promise sites (5 acute, 2 primary care). Support ongoing for implementation of national preceptorship framework in primary care and social care including support to preceptorship community of practice. Currently exploring system-wide approach to providing effective career conversations and supporting Humber Group development of flexible working campaign.		Retention is significantly influenced by individual relationships, team and organisational culture and wider system context; programme interventions are one facet of a complex environment affecting retention rates.
Leadership, talent and succession	Erica Daly, ICB/Hull Place Partnership	Develop a system-owned talent management approach and associated system leadership development opportunities	System high potential talent scheme in active development and close to launch. Successful negotiations with NHSE will enable development of whole system executive level development programme to complement NHS-specific Aspiring Executives programme – design underway. HNY NHS Aspiring Executives participants to meet with ICB Chair and CX December; further opportunities for system exposure in development. Talent programme for internationally-educated colleagues in development in partnership with Inclusion Assembly.		Talent schemes require medium-term visible senior commitment and long-term funding to deliver the intended benefit; risk of reduced impact if this support is not forthcoming.
Volunteers at the heart of the system	Alison Semmence, York CVS	Create sustainable system capability to maximise benefits of volunteering in service and for citizens	HNY system selected as a national Volunteering for Health demonstrator site, securing £540k over two years. Panel fed back that they were impressed with how well-established volunteering is in HNY, including having a VCSE Collaborative and a system-wide group leading on volunteering in place and the work being aligned with a system-wide workforce transformation programme. Full plan for funded programme will be in place by end of calendar year.		Challenging system context presents a risk in terms of funding flow and time available for volunteering agenda
People digital	Ivan McConnell, Humber Group	Ensure workforce transformation leaders are equipped with understanding of digital transformation opportunities	System-wide workstream launch communication issued early September, inviting staff who are interested to get involved in a co-design group (all roles, all sectors). Request for 'productivity tools' will enable creation of a library of digital/AI tools available now to use. Baseline survey indicated good understanding of digital		Risk of lack of conversion of learning and momentum unless tangible digital/AI schemes emerge (eg: in contribution to 25/26 operating plan)
Whole system reward and recognition	Alex Seale, ICB/North Lincs Place Partnership	Level up non-pay staff reward across sectors. Promote everyday recognition as a core enabler of positive system culture.	System-wide workstream launch communication issued early September, inviting staff who are interested to get involved in a co-design group (all roles, all sectors). Stage 2 of industry research commenced relating specifically to provider recognition schemes: what is currently being used across the workforce/sectors to thank and reward staff for their endeavours and successes. Power of Thank You (Culture of Gratitude) research undertaken and NHS Employers engaged; findings will be presented to the next Task and Finish Group. Baseline survey indicated emerging trends which will be discussed to define workstreams.		This work is a key enabler of improved system culture driving attraction, retention and productivity. Risk that challenging system context overshadows recognition cultural change.
Care at Home workforce integration	Tracy Meyerhoff, Hull City Council	Develop a practical tool to enable conscious cultural design for effective joint working in integrated neighbourhood teams	Outline proposal for OD tool for INTs has been approved. North Lincs Place Partnership have agreed to pilot. The Task and Finish Group will work alongside NL's newly established SRO group for integration to refine the learning experience to be offered first to a pilot team and then more widely across the Place.		Limited project capacity presents risk.