



County Councillor Jim Clark (Chairman)  
North Yorkshire Scrutiny of Health Committee  
c/o Overview and Scrutiny  
North Yorkshire County Council  
Room 39, Brierley Block  
County Hall, Northallerton  
North Yorkshire, DL7 8AD  
3 January 2018

Rt Hon Jeremy Hunt MP  
Secretary of State for Health  
Department of Health  
Richmond House  
79 Whitehall  
London, SW1A 2NS

Dear Secretary of State

**Re: Health and social care workforce planning in North Yorkshire**

On behalf of the North Yorkshire County Council Scrutiny of Health Committee and the Care and Independence Overview and Scrutiny Committee, following scrutiny of local, regional and national health and social care workforce planning I ask you to consider the findings and act upon the recommendations made in your position as Secretary of State for Health.

A joint scrutiny task and finish group was setup locally in response to staffing shortages across health and social care that were beginning to impact upon the operational sustainability of key services that serve the population of North Yorkshire. An example of this is the current and ongoing review of health services provided at the Friarage Hospital in Northallerton, which was prompted by a shortage of Consultant Anaesthetists at that hospital and across the South Tees Hospitals NHS Foundation Trust as a whole.

Over the past three months, the two committees have worked together to better understand the issues relating to workforce planning and what the short and long term impacts are of shortages in key staff and personnel. The joint scrutiny task and finish group received submissions from a range of expert witnesses from health and social care. The key issues that were identified included:

- A great deal of work is already underway to help address workforce shortages across health and social care. This work, however, is often undertaken in silos or unilaterally.
- Shortages in social care staff are largely due to increasing demand for social care for older people, the social care role being poorly perceived, an apparent lack of career progression, low pay rates, a rising cost of living, competition with other sectors (hospitality and retail), difficulties in retaining staff, shortages of affordable housing and falling levels of unemployment.

- In the North and in addition to general nursing, there is particularly low take up in General Practice, Psychiatry, Medicine, and growing difficulty in Paediatrics
- Shortages in permanent staff in health and social care mean that employers often fill gaps with agency, locum and other temporary staff. This creates additional expense and is inefficient
- Whilst the impact of the UK Exit from the EU and the end of student bursaries for nurse and midwifery training is uncertain at this stage, it is likely that both will create additional pressures upon health and social care workforce shortages.

The joint scrutiny task and finish group made a series of recommendations for changes to policy and practice at a national level, at a Sustainability and Transformation Partnership level and at a county level. They were keen to ensure that the following were brought directly to your attention:

- Measures are put in place as quickly as possible that help ensure that existing workers from the EU in health and social care roles are not disadvantaged in any way by the UK exit from the EU
- A review of the financial support that is offered to people seeking training in health and social care is undertaken. In particular, actively consider reinstating bursaries for nursing, midwifery and allied health professionals training.
- Additional funding is made available to the NHS and local authorities to enable increases in pay rates to be met, when and if the public sector pay cap is lifted, without the need to find money from within existing budgets
- To promote social care work as a career, support structured training and development and put in place measures that aid long term retention of staff.

Copies of this letter have been sent to the Parliamentary Under Secretary of State (Care and Mental Health), the Chair of the Commons Select Committee on Health, the Shadow Secretary of State for Health, and North Yorkshire's MPs.

We remain concerned that shortages in key staff across health and social care are now the single most significant factor in influencing changes in service delivery, particularly in the NHS. A key risk in this is the apparent difficulty that health commissioners and providers have in working together to find sustainable workforce solutions over areas larger than their operational footprint, despite the best efforts of the Local Workforce Action Boards and Health Education England.

Locally, both committees will be making every attempt to encourage health commissioners and providers and local authority social care to work together to develop new ways of providing services that improve patient outcomes and service efficiency and avoid falling into the trap of trying to recruit to traditional job roles that are unlikely ever to be filled. We will also be taking our recommendations to the North Yorkshire Health and Wellbeing Board, in their role as a local health and social care systems leader.

The full list of recommendations is attached in Appendix 1 and a full copy of the draft report can be accessed from the North Yorkshire County Council website here - <http://democracy.northyorks.gov.uk/committees.aspx?commid=23&meetid=3687>

The report details the challenges that we face in a large rural county like North Yorkshire that is a two-tier authority with seven district councils, five Clinical Commissioning Groups, three Sustainability and Transformation Partnerships and at present three evolving accountable care systems.

I look forward to hearing from you and hope that we can have further discussions on this crucially important issue.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Jim Clark', with a horizontal line underneath.

County Councillor Jim Clark  
Chairman of the North Yorkshire Scrutiny of Health Committee

cc.

County Councillor John Ennis, Chairman of the North Yorkshire County Council Care and Independence Overview and Scrutiny Committee

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**Health and social care workforce planning – joint scrutiny by the Scrutiny of Health Committee and the Care and Independence Overview and Scrutiny Committee**

**Recommendations**

In making these recommendations, it is recognised that there is already a great deal of work underway and that long term planning of the health and social care workforce is often impeded by the need to respond to immediate shortages in staff that threaten the sustainability of services. Without a move away from traditional roles and traditional workforce training, however, the problems that are currently being experienced will only worsen.

**National**

1. The committees write to the Secretary of State for Health, the Shadow Secretary of State for Health, the Chair of the Commons Select Committee on Health and North Yorkshire's MPs to request that measures are put in place as quickly as possible that help ensure that existing workers from the EU in health and social care roles are not disadvantaged in any way by the UK exit from the EU.
2. The committees write to the Secretary of State for Health, the Shadow Secretary of State for Health, the Chair of the Commons Select Committee on Health and North Yorkshire's MPs to request a review of the financial support that is offered to people seeking training in health and social care. In particular, consider reinstating bursaries for nursing, midwifery and allied health professionals training.
3. The committees write to the Secretary of State for Health, the Shadow Secretary of State for Health, the Chair of the Commons Select Committee on Health and North Yorkshire's MPs to request that additional funding is made available to the NHS and local authorities to enable increases in pay rates to be met, when and if the public sector pay cap is lifted, without the need to find money from within existing budgets.
4. The committees write to the Secretary of State for Health, the Shadow Secretary of State for Health, the Chair of the Commons Select Committee on Health and North Yorkshire's MPs to promote social care work as a career, support structured training and development and put in place measures that aid long term retention of staff.

**Sustainability and Transformation Partnerships (x3)**

1. The NHS and local authorities (through the Local Workforce Action Boards) to increase the number of integrated health, social care and public health professional roles in the community, attached to a GP practice or similar community hub, which enable a more efficient use of the existing workforce, avoid duplication of roles and release capacity in some of the more difficult to recruit to roles.

2. The NHS and local authorities (through the Local Workforce Action Boards) to look at new ways of working with frail elderly people that reduce hospital admissions and provide integrated support in the community.
3. NHS providers to work together through the Local Workforce Action Boards to: encourage workforce mobility; improve the quality of workforce data provided to Health Education England (NHS staff record), including the greater and consistent use of exit interviews; and to share best practice around recruitment, retention and the development of new roles.
4. Health Education England and the Local Workforce Action Boards to work with local authority public health services and Public Health England to promote public health interventions by a wider workforce of associated practitioners and workers.
5. Health Education England, the Local Workforce Action Boards and the County Council to support the ongoing development of local medical training, through educational institutions in Yorkshire and Humber, such as the Coventry University Scarborough Campus and the Hull York Medical School.
6. Health Education England and the Local Workforce Action Boards to explore whether more could be done to promote and develop the self-employed social and health care workforce that provides services to people in the community who receive Direct Payments for their health and social care.

## **County**

1. The County Council to continue to promote social care careers to a broad-base of non-traditional workers, such as: retirees; young people; students; men; ex-military; long term unemployed; and people on Job Seekers Allowance or Universal Credit.
2. The CCGs and the County Council to work together to promote a greater understanding and awareness of where people should go to get the health and social care interventions that they need. Also, to work with other community services, such as community pharmacies, to ensure that there is capacity to cope with any resulting increase in demand for their services.
3. The CCGs and the County Council to review the findings of local and regional Vanguard programmes to see what lessons can be learned and applied.
4. The CCGs and the County Council to work together to explore technological solutions that help reduce the demand upon health and social care services (diagnostic tools and remote prescribing and consultations), support flexible working (e-rostering) and increase automation.

## **Ongoing monitoring**

There are also a number of areas in which impact monitoring is suggested:

1. Monitor the impact of the emergent shortage in clinical, social care and public health placement capacity upon training and development
2. Monitor the local impact of the end of student bursaries for nursing, midwifery and allied health professionals
3. Monitor the local impact of the UK exit from the EU upon the health and social care workforce.