

Workshop 5: Public Health Workforce Development

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What will we cover today?

- Review of the WM PH Workforce recommendations and next steps
- Development of a Midlands Public health Workforce Strategy where are we now / what next?
- Public Health Careers Infographic developments so far, what are your thoughts?
- The challenge of creating the cadre of UKPHR Practitioner assessors and appraisers the problem and the 'ask'
- Launch of our Midlands Public Health Workforce Development website 'what's in it for you' and 'how can you get involved in making it a success'?
- Early thoughts on our MECC / Health Literacy Healthy Communities Work how do we get more engagement from partners?

And if we have time.....a discussion about 'How we can reach and collaborate over organisational boundaries to knit system together – LAs, NHSE, OHID, UKHSA, other partners and Other **Government Departments (OGDs)?**



Review of West Midlands Public Health Workforce – December 2022

Allison Duggal

DPH Coventry City Council, West Midlands DPH Workforce Lead

Aims

The West Midlands Association of Directors of Public Health(ADsPH), in partnership with West Midlands Office for Health Improvement and Disparities (OHID), UK Health Security Agency (UKHSA), NHS England and Improvement (NHSE/I) and the Faculty of Public Health (FPH), commissioned Solutions for Public Health (SPH) to undertake a rapid review of the West Midlands public health system to inform future workforce and relationships.

The three key aims of the review were to:

- Inform the workforce strategy for the public health specialist function across the West Midlands region, particularlyspecialist public health training and post-CCT1workforce recruitment and retention
- 2. Inform the cross-organisational working relationships between local government, regional NHSIntegrated Care Systems, Regional UKHSA, OHID, Health Education England and NHSE/Ipublic health teams and work-programmes in the West Midlands
- 3. Set out opportunities for action to support improvement and maximise the potential of the West Midlands Public Health Specialist function

Methods

The review was carried out using a mixed methods approach comprising:

- Semi-structuredinterviews with training programme directors (TPDs) and specialist registrars (SpRs) from the West Midlands and two other England regions
- Review of relevant documents related to specialist public health training highlighted by stakeholders during the project
- Focus groups with West Midlands SpRs
- A data collection exercise covering overall workforce data for each local authority (LA) public health team
- A survey of members of the West Midlands public health workforce

Recommendations from PH Family Review - Review of specialist public health training

Key challenges include

- Lack of over-arching training support, coordination and guidance
- Variability in placements
- Lack of guidance on educational supervisor (ES) support and time

Recommendations around:

- Programme organisation
- Registrars' experiences of placements and educational supervision
- Educational supervision
- Non placement-based training
- Competency sign-off and progression to CCT

3.1.1 Programme organisation

- Appoint a dedicated programme manager for public health specialty training
- Consider appointing a dedicated individual to oversee a registrar's entire training
- Discuss, clarify and agree the roles of TPDs, zone coordinators (ZCs) and educational supervisors and communicate these to registrars

3.1.2 Registrars' experiences of placements and educational supervision

- Each LA should have a workforce and training lead
- Each LA should offer an induction programme for new registrars
- •The training programme should request feedback at the end of placements
- •2 ST4 is the equivalent of the 4th year of five years of training
- •Ensure that registrars have information about each placement from the placement and from other registrars (including what would be expected in terms of in-person working) prior to placement allocation

3.1.3 Educational supervision

- •Provide (non-didactic) guidance around access to ESs and expected ES input to training including ring-fenced time for activities such as sign-off of competencies, ARCP reports and project discussions
- •ES meetings should be more frequent if working remotely and include ad hoc availability
- •Provide guidance around whether any LA work is expected during the Masters in Public Health year

3.1.4 Non placement-based training

- •Include feedback from ESs and TPDs on registrar training needs in the annual training needs analysis, and consider whether knowledge-based training is needed
- •Consider making some training sessions mandatory for registrars
- •Consider allowing the registrar training committee chairs to hold the budget for the training sessions they organise

3.1.5 Competency sign-off and progression to CCT

- •Consider providing (non-didactic) guidance for the earlier years of training on competencies that might be expected to be covered each year and how 'partial' and 'full' sign-off might be achieved, including examples of logs
- •The ARCP outcome should not be a surprise to registrars
- •Consider providing more feedback to registrars directly from the ARCP panel
- Develop a programme to support preparation for CCT and applications for consultant posts

Recommendations from PH Family Review - Review of West Midlands local authority public health workforce

Key challenges include

- Increasing numbers of vacancies, particularly for senior posts, exacerbated by staff leaving after the Covid-19 pandemic or leaving to work in the NHS or elsewhere, junior staff not having enough opportunities to develop skills required for senior roles and issues relating to the 'portfolio route' to registration
- Need to optimise the structure of teams so that there is more congruence between team structures in LAs and regional organisations such as OHID, as well as the ability to respond rapidly to changing priorities

Recommendations around:

- Training and development
- Develop staff locally (a "locally grown workforce")
- Workforce development enablers
- National level work
- Optimising team structures
- Improving job satisfaction and increasing applications for senior posts



4.1.1 Training and development

- •Provide more support for, and recognition of the value of, the 'portfolio route' of training •Provide a range of support for achieving the competencies required for senior roles, such as mentoring, shadowing, secondments and opportunities for working with elected members, depending on individual need
- Encourage use of the accelerated specialist registrar training pathway
- Consider making a basic level of public health training available to all staff

4.1.2 Develop staff locally (a "locally grown | 4.1.3 Workforce development enablers workforce")

- •Encourage a culture of promotion within the lteam
- •Agree that a member of the team acts as its workforce development lead
- Encourage staff to develop their own local networks in order to increase their local ties and their confidence to carry out senior roles

- Encourage all staff to have both strategic and operational roles
- •Foster a culture of continuing professional education for all staff, supported by funding
- Consider using the Public Health Skills and Knowledge Framework to assess gaps, shape personal development plans and develop recruitment strategies
- Strengthen consultant networks and nominate individuals other than the line manager to provide pastoral support
- Acknowledge hard work and avoid a culture of working longer hours than contracted becoming the norm

4. National level work

 Raise issues regionally and nationally and learn how other LAs nationally are addressing workforce issues and filling vacancies •Identify ways in which working in the West Midlands can be enhanced to attract staff who might apply elsewhere

4.1.5 Optimising team structures

- Encourage alignment of regional teams such as OHID with the LA priority areas of focus
- Consider creating a 'public health' observatory'6 or 'public health resource unit' that covers several LAs for specialist skills such as analysts
- Encourage staff to be generalists so as to have greater flexibility when required
- 6 See for example Hemmings J, Wilkinson J. What is a public health observatory? J Epidemiol Community Health 2003;57:324–326 324.full.pdf (bmj.com)

4.1.6 Improving job satisfaction and increasing applications for senior posts

- Consider employment terms such as flexible working, job security, simpler recruitment processes, and ensuring equivalent pay for equivalent roles
- •Develop a supportive culture, including team identify and morale, team diversity, recognition of achievements, and recognition of the value of experience (as opposed to formal training)
- Encourage development of leaders by providing opportunities for leadership and for engagement with leaders, training in people management and coaching, and debrief sessions

Recommendations from PH Family Review - Review of crossorganisational working

Key challenges include

- New regional teams, for example in OHID, are still forming and the process needs to take account of and be aligned to LA public health priorities
- Different DsPH have different portfolios and priorities
- Some key regional organisations, such as the combined authority, do not employ a consultant in public health
- Regional workforce leads and committees are reorganising after the dissolution of Public Health England
- Staff vacancies and the potential loss of staff to NHS organisations makes cross organisational work more challenging
- The roles of public health specialists and LA public health teams in the new NHS structures and duties (for example the "triple aim" duty7) are still developing

Recommendations around cross-organisational working:

- Joint working across the region
- Workforce planning
- Staff recruitment and retention
- Changes to NHS organisation and duties

5.1.1 Joint working across the region

- Continue to build relationships and cross-organisational groups such as the
- •ADsPH, Alliance and Workforce Board, and encourage participation
- Encourage work between LA and regional public health teams to improve
- mutual understanding and alignment of work

5.1.2 Workforce planning

- •Ensure that workforce leads at regional level understand LA workforce and training needs
- Continue to develop the regional workforce board and steering group and conduct the annual training needs analysis
- Consider whether the combined authority needs public health consultant input

5.1.3 Staff recruitment and retention

 Consider forming a 'public health' observatory' or 'public health resource unit' for analysts to work together across the region, for example supporting ioint analysis work across several LA public health teams

5.1.4 Changes to NHS organisation and duties

•Use the new 'triple aim' duty of NHS organisations including ICBs and health service providers and their focus on population health management to encourage drive local improvements in health

partnership working with the NHS and

Next steps

- Solutions for Public Health (SPH) presenting to West Midlands Public Health Alliance on Friday 20th January
- It is recommended that the next steps would be for the ADsPH to reflect on, discuss and decide about accepting and prioritising the suggestions/recommendations before developing an action plan with named leads and timescales for implementation of prioritised suggestions/recommendations. This would be best done locally through crossorganisational groups to encourage buy-in and ownership.

Development of a Midlands Public Health Workforce Strategy – where are we now / what next / what are your thoughts?

How did the Midlands PH Workforce Development Strategy evolve?

- Conversations with system partners
- System Training Needs Analysis summer 2021 & January 2022
- DPH survey January 2022
- Midlands PH Workforce Board
- West & East Midlands PH Alliances



& Disparities











The strategy format

The strategy will set out:

- Vision
- **Principles**
- Midland's footprint
- Workstreams (whether these are Short / Medium / Long Term)
- Risks and issues
- Measures and Evaluation
- Roles and Responsibilities for different organisations (where these are clear)
- Governance and Escalation processes

And will articulate why, how and when we will:

- Support and advocate for Public Health Career Pathways / build capacity in the system
- 2. Bolster capability across the core and wider public health workforce
- a. Design a process for identifying and prioritising Midlands health and care system workforce development needs
 - b. Design a Funding Pipeline process to capture WFD Needs and secure funding

Workforce Strategy Workshop held on 5th January 2023

What words/phrases should be included in a vision statement?

professional community
succession planning
health pipeline wider
Valuing Skills
Health for our Population
diversity of skills
Improved Health

Wider
Skills

health - programme professional accountability
professional development

future career
Delivery

health - programme professional accountability
professional development

system public health
health workforce

61 responses

How do we want to work together?

Programme Management use of our resource clear benefits roles and responsibilities public involvement avoid duplication clear online space resource solution focussed clear roles shared resources $\mathbf{shared}_{\,\mathrm{system}}$ Clear governance **Definitely need** shared vision protecting time dedicated resource research capacity

system partnership professional development standards and accountability

Jointly resourcedsolution focussed partnership - collaboration
equality and diversity action focussed values

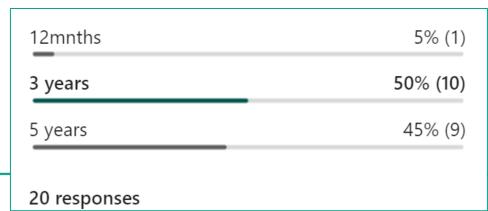
focus on delivery partners professional solution

evidence based Respect

professional accountability
working with the public professional community

57 responses

What time period should the strategy cover?



Key areas of the strategy: 1. Build PH capacity in the system

- Advocate for Public Health Career Pathways
- Movement around the system
- Identify opportunities, communicate and engage with broader stakeholders OGD, NHS, VSC
- Collect and analyse Workforce Data to provide a baseline position and inform more effective Workforce Planning and priorities
- Identify and develop effective and accountable leaders
- Attract and retain high quality people
 - Understand career destinations for SpRs from Training programme plus the backgrounds of those on the TP and their motivations for going into PH.
 - Building an awareness of PH career into other faculties / academia schools, colleges, PHE quals, PH activities in other disciplines
 - Influencing curricular to raise awareness of PH careers, skills and knowledge
 - Embedding PH skills and knowledge into other careers and recognising the impact on PH
 - Talent for care team engaging with schools
- Improve recruitment and retention in the Midlands PH system
- Supporting PH Apprenticeships
- EDI to be a cross cutting theme

- What else do you think needs to be considered to build Public Health capacity in the system?
- Do you have specific ideas on what we can do / collaborate on across the system?

Key areas of the strategy: 2. Bolster capability across the core and wider public health workforce

- Define who is included in the wider PH workforce
- Extend networks and broaden people's knowledge and skills by sharing knowledge and expertise
- Support PH Specialist and Practitioner registration
 - Deliver Midlands SRbPA Support Programme
 - Deliver Midlands PH Practitioner Programme
 - Complete Advanced Practitioner Scoping and act on recommendations
- Design a Pipeline process to capture WFD Needs
- Secure ongoing funding for Public Health CPD
- Encourage and facilitate innovation through equipping the wider PH workforce to maximise the impact of population health
 - What else do you think needs to be considered to bolster Public Health capability in the system?
 - Do you have any ideas on 'what' we should do and 'how'?

Public Health Careers Infographic – developments so far, what

are your thoughts?

Examples of Roles in Public Health



Resource Hub

Click on the links below to find out more on each topic area.

What is Public Health?

History of Public Health

ore public health roles in which public health is the main part of the role.

1. academic roles involving public health research and teaching

Click to read more

Public Health wider workforce

UKPHR Registration -Practitioner and Specialist

Example career routes and entry points for Public Health

Training and Development

Links to key **Public Health** organisations and resources

Links to key Public Health organisations and resources

Any other useful functionalities?

What more could we do to make it speak to young people, college and Uni graduates, older people looking for the next step in their PH career?

Any relevant resources we should link to?

Who are the partners that need to know about it?

0-5 Infancy & Early Years

considerable change in brain anatomical ture and connectivity where the brain absorbs a significant amount of information

Early childhood life stages therefore offer a unique window of opportunity to provide individuals with the best start in life, mitigate risk factors and shape individuals'

that positive child experiences had in the range of social outcomes including bette rformance at school, better social and notional development, improved work

to improve the health of babies and infants to enable a happy healthy childhood and

provide the foundations of good health in

This is achieved through screening programmes to detect disorders at birth and early years services, including health visitors. vho support families to help children's physical and emotional development





The Midlands UKPHR PH Practitioner scheme: Sally James

The challenge of creating the cadre of UKPHR Practitioner assessors and appraisers – the problem and the 'ask'

Regional Public Health Practitioner Schemes are currently recruiting for new Assessors to be trained by UKPHR to support the process of portfolio development by practitioners.

Assessors are appointed by the Board of the UK Public Health Register (UKPHR) (following satisfactory completion of training) and will carry out the role with the support of the regional scheme coordinator.

New UKPHR Assessors required!

Join our growing network of senior public health professionals, developing the regional workforce to independently assess portfolios against the UKPHR's public health standards for practitioner registration.

This role is suitable for senior public health professionals who are interested in opportunities for professional development – and supporting the development of others.



To apply for the role, in the East of England, The Midlands or North West or for more information please complete the application here https://forms.office.com/r/qp0QpZkS5E

NHS Health Education England

Benefits of the Role

- Contribute to the development of public health careers for individuals- and your own
- Support the professionalisation of public health practitioners
- UKPHR certificated training and appraisal that can contribute to your own CPD – 'trained to assess'
- Enhances your understanding of how the full range and scope of public health knowledge and skills are applied to the implementation of public health interventions by practitioners
- Broadens your appreciation of public health agendas, policies, roles, services and interventions in other areas
- Develops a sound grasp of retrospective portfolio building which could help with own future portfolio development

Launch of our Midlands Public Health Workforce Development website – 'What's in it for you' and 'How can you get involved in making it a success'?

This is a collaborative space for anyone with an interest in the Midlands Public and Population Health Workforce



Early thoughts on our MECC / Health Literacy Healthy Communities Work – how do we get more engagement from partners?

AIM: Provision of a scoping and feasibility exercise to identify how Health Literacy can underpin a MECC approach, with non-public health staff working / volunteering within underserved communities

To understand the current focus on MECC/Health Literacy across the Midlands we have developed a short questionnaire:

- The extent to which health literacy principles and techniques could be aligned with a MECC approach
- Who should be/currently is the focus for any MECC and Health Literacy initiatives (e.g. service users, patients, members of the public, community groups, voluntary & community sector organisations, volunteers commissioned service providers)?
- How can MECC and Health Literacy support a Healthy Community Whole System Approach?

We appreciate how busy you are but would be grateful if you could complete this short survey. If you have any relevant links or documents, then please do forward to us at: OHID_Midlands_Workforce_Development@dhsc.gov.uk

Products from the pilot

- A report to include methodology, recommendations, existing infrastructure/activity, sustainability and evidence of good practice from across the Midlands
- A conference to launch the report, the findings and to highlight the strategic links to other pieces of work aiming to reach under-served communities at the highest risk of experiencing health inequalities. **Date:** 28th March 2023 **Time**: 13.00 15.30 **Delivered via:** Teams/Eventbrite invitation Interested in attending? Please email OHID Midlands Workforce Development@dhsc.gov.uk

And if we have time.....a discussion about 'How we can reach and collaborate over organisational boundaries to support PH workforce development across the system, to best effect?

Thankyou!

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