



North Central London
Health and Care
Integrated Care System



NCL JHOSC Workforce Update

3 February 2025

Sarah Morgan, Chief People Officer
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Introduction



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This is our third update to the NCL JHOSC, with our last update being 29 January 2024. This paper will particularly focus on the care leavers programme and the WorkWell programme, including the development of the Work and Health Strategy.

To update the Committee on the progress against the People Strategy, we have included a link to a video that summarises key achievements, as well as the Annual Report that went to the NCL ICB Board meeting in May 2024. The next report is due to be published in May 2025 and is currently under development.

It continued to be a challenging year which started with the continued industrial action, which was not settled from a resident doctor perspective until September 2024, under the new Government. The GP collective action does continue, and we monitor the impact of this on a regular basis. The year ended with a high number of cases of flu, COVID-19 and RSV being seen in Emergency Departments and a huge pressure being felt both in the acute sector and the ambulance sector.

Introduction



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Again, as with last year, despite the challenging backdrop for colleagues across the health and care sector, we have managed to continue to make progress in the areas of our People Strategy, including being successful in our bid to become one of the 15 WorkWell Vanguards in England. This will enable us to support 3,000 residents with disabilities, long term conditions and mental health problems back into work.

We are working with local authority and charity colleagues across the sector and successfully launched on 1 October 2024. WorkWell is a joint initiative between DHSC and DWP and we hosted SofS Liz Kendall and SofS Wes Streeting on 6 November 2024, at Junction Medical Practice in Islington, joined by participants on the programme and their work and health coaches. This pack contains our latest performance report, which demonstrates we are 90% on track and one of the best performing Vanguards currently.

We are also co-creating a Work and Health Strategy across NCL which focuses on how we support more people into work and crucially how we work with employers to support them to thrive in work. We are partnering with the Institute of Employment Studies and this is due to be published in our May 2025 ICB Board meeting.

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We continue our Care Leavers programme. Last time we described the programme, and since then we have engaged with over 40 care leavers and offered employment to 10. The NCL Health and Social Care Hub is continuing the programme for us as they have recently had a pause to undertake some learning.

We have been funded by NHSE to support an additional 25 care leavers between now and March 2025. We are also offering free prescriptions to care leavers across most of and we recently had a focus on what else we could do in partnership to support people better.

Many of our Trusts have been focussing on moving away from agency and recruiting to substantive posts to reduce spend and increase quality. However as our People Strategy sets out, we now need a focus on improving our productivity through transforming how we deliver care and supporting the three shifts set out by the government towards care in the community, with greater deployment of digital and technology, and from treatment to prevention.

It has been a challenging year, but we continue to make progress in our ambitions set out in the People Strategy. It remains directionally correct and we will continue to ensure it aligns with any new policy directions that emerge throughout 2025.



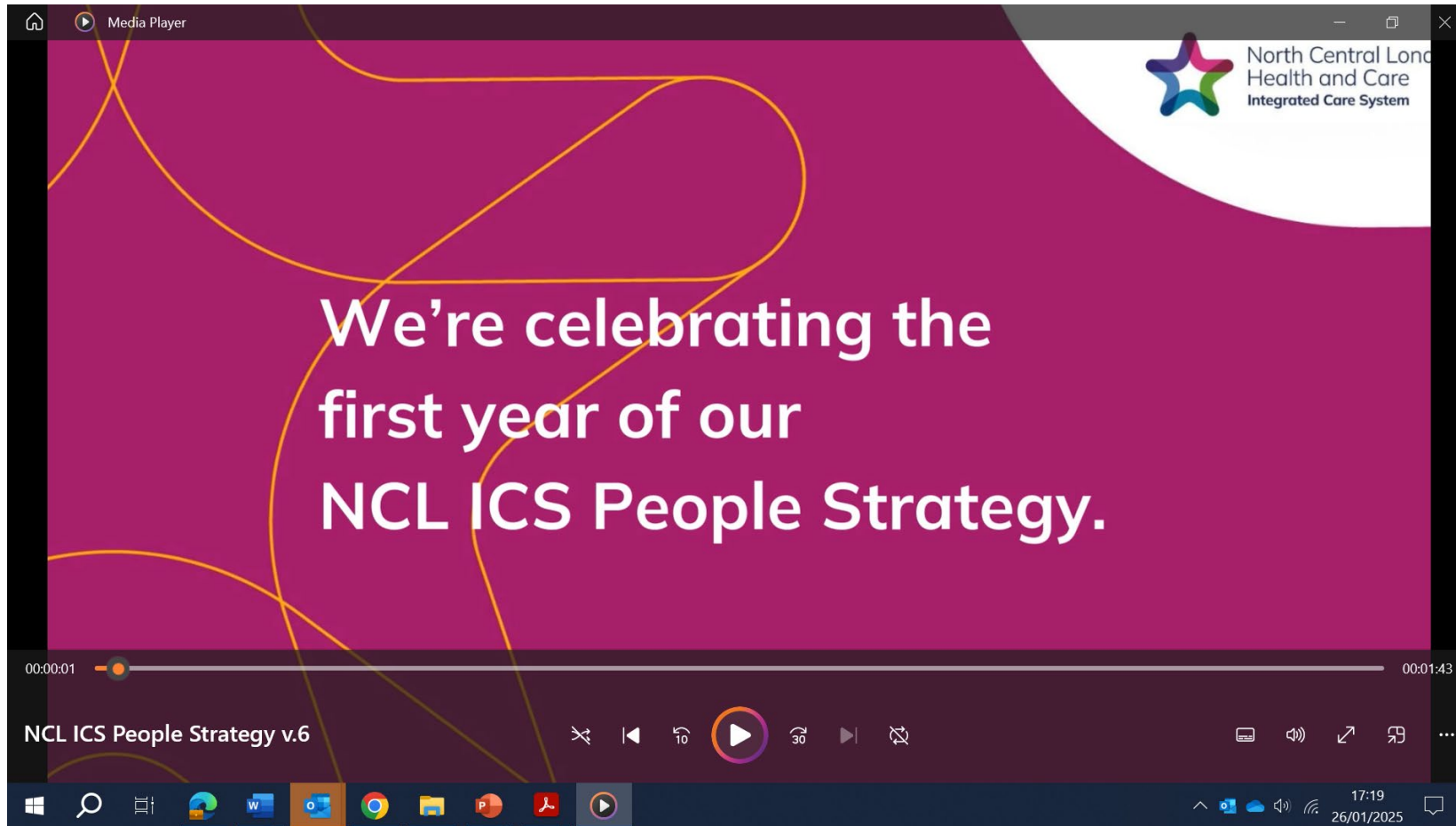
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Progress against Year 1 of Our People Strategy

Year 1 progress against our People Strategy



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[Click to watch our 2 minute video](#)



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People Priorities and associated Key Performance Indicators

Our approach to KPIs



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Purpose of year 2 / 3 priorities is to generate a focus and sense of direction for system-wide workforce interventions. Alongside these, the KPIs are designed to ensure we can measure the impact and progress of our collective interventions.

Existing NCL People Board Workforce data pack contains more than 84 data items, charts and graphs – the majority of which focus on NHS Trust workforce data. (1 slide on social care data with 4 data items)

When developing KPIs, key principles were:

- Measure impact across all ICS partners: NHS, Primary Care, Community, Social Care, VCSE
- Start by using data that is already available, can be easily collated and allows benchmarking across organisations and systems
- For some priority areas (e.g. Digital) explore approaches to measuring progress where impact is harder to measure.

The Workforce Team have identified a bespoke number of indicators – that will drive improvements across the whole system. (80/20 Pareto Principle). Operational teams will continue to collate more comprehensive data – although the KPI Dashboard will focus on 12 core indicators.

These will be approved at the February 2025 People Board

“What gets measured gets done.” *(Peter Drucker)*



When you measure something, the probability of acting on the information you gather increases.....

NCL People KPIs



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Recruitment, Retention and Turnover

- | | |
|---|--|
| 1 | We have systems in place to support better recruitment of hard to fill roles |
| 2 | Increased wellbeing at work is demonstrated through reduced sickness absence |
| 3 | We create supportive working environments that lead to improved retention |

Population metrics – live well

- | | |
|---|--|
| 4 | We see increased engagement of NEET 16/17-year-olds |
| 5 | More jobs for local people are created |
| 6 | We generate increased employment opportunities for local people with disabilities and LTCs |

Our People Promise

- | | |
|---|---|
| 7 | We see an increase in people who confirm that NCL system employers are compassionate and inclusive |
| 8 | Development and career progression opportunities are available to people who work in the NCL system |
| 9 | An increased number of people are able to work flexibly |

Workforce transformation and planning

- | | |
|----|--|
| 10 | We align workforce growth and productivity gains, and right size and right skill our workforce |
| 11 | We accelerate digital interventions to maximise the benefits of technological innovation |
| 12 | We work at place and neighbourhood level to maximise workforce integration opportunities |

NCL Key Performance Indicators – EXAMPLE DASHBOARD November 24 (1/3)



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Recruitment, Retention and Turnover (23/24)					
			Social Care	NHS Trusts	
1	We have systems in place to support better recruitment of hard to fill roles	Vacancy rates	9.8%	8.4%	Expectation: 24/25 data to show reduction of vacancies, sickness and turnover.
2	Increased wellbeing at work demonstrated through reduced sickness absence	Sickness data	4.3 (average sick days)	4.4% average	
3	We create supportive working environments that lead to improved retention	Turnover	14.3%	12%	
Population metrics – live well NCL (22/23 data)					
4	Increased engagement of NEET* 16/17-year-olds	Percentage of 16/17 yr olds not in employment, education or training		3.9%	Expectation: 23/24 data to show reduction of NEET and increase of people of working age in employment.
5	More jobs for local people	Percentage of working age population in employment 16 to 64yrs		75%	
6	Increased employment opportunities for local people with disabilities and LTCs	Percentage of population with a long-term condition in employment (16 to 64yrs)		65.1%	

NEET : Not in employment, education or training.

NCL Key Performance Indicators – EXAMPLE DASHBOAD November 2024 (2/3)

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Our People promise				
7	We see an increase in people who confirm that NCL system employers are compassionate and inclusive	Percentage of staff in senior roles compared with the percentage of staff in the overall workforce. Within WRES and WDES indicators	WRES Indicator 1 WDES Metric 1	Expectation: aggregated data for trusts in the system demonstrates workforce inequalities for BAME, Disabled staff are reduced.
		Relative likelihood of staff being appointed from shortlisting across all posts. Within WRES and WDES indicators.	WRES Indicator 7 WDES Metric 2	
		Percentage of staff experiencing harassment, bullying or abuse. Within WRES and WDES indicators	WRES Indicator 6 WDES Metric 4	
		NHS Staff survey compassionate leadership people promise element	NHS staff survey sub-score (workforce data pack)	
8	Development and career progression opportunities are available to people who work in the NCL system	Percentage of staff who agree that their organisation acts fairly with regard to career progression/ promotion regardless of ethnic background, gender, religion, sexual orientation or age.	NHS staff survey Question 15	Expectation: System-wide data demonstrated increased participation rates. .
		Apprenticeship Participation Rate: Assesses the number of NHS staff enrolled in apprenticeship programs, from entry-level to advanced roles.	TBC (data sharing agreement in progress with NHSE)	
		Increasing NCL staff representation across commissioned programmes in 25/26 academic year onwards.	METIP delivery figures	
9	An increased number of people are able to work flexibly	Percentage of staff who confirm they are satisfied with opportunities for Flexible Working Patterns	NHS staff Survey question 4	Expectation: Increase in flexible working opportunities
		Percentage of staff who can approach their manager to talk about flexible working	NHS Staff Survey Question 6	

NCL Key Performance Indicators – EXAMPLE DASHBOARD November 2024 (3/3)



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Workforce planning and transformation				
10	We align workforce growth and productivity gains, and right size and right skill our workforce	Variance against plan (red confirms we are above plan)	1.4%	Expectation: Monthly tracking to confirm that variance is below plan.
		Use of bank Variance against plan (red confirms we above plan)	6.5%	
		Use of agency (green confirms below plan)	1.6%	
11	We accelerate digital interventions to maximise the benefits of technological innovation	Currently no national metrics. Within NCL we will track the number of digital innovations and identify impact on workforce growth/ productivity.	TBC	
12	We work at place and neighbourhood level to maximise workforce integration opportunities	Currently no national metrics. Within NCL we will track the extent to which integrated approaches impact on vacancies, turnover and sickness and people promise data.	TBC	



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Vacancies and managing the system workforce

Summary



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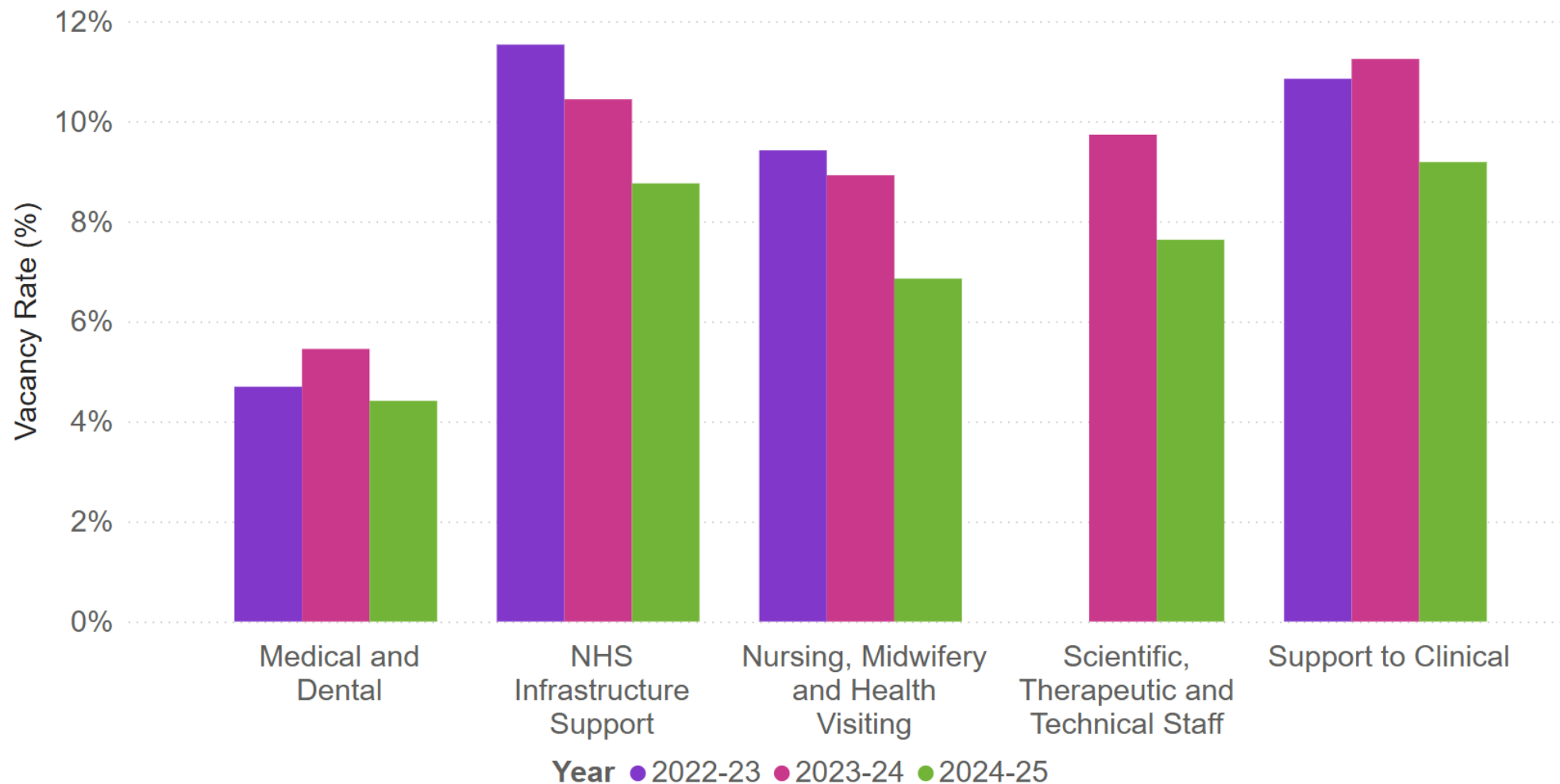
- Despite the challenging picture overall, there has been solid progress. The vacancy rates as a % are at their lowest levels, across all staff groups in the past three years
- There were encouraging falls in vacancies in the groups of Nursing, Midwifery and Health Visiting and Scientific, Therapeutic and Technical staff
- The final graph shows our continued growth of the workforce (establishment) overall, with the biggest staff group (Nursing, Midwifery and Health Visiting) now at 15,000 WTE

Vacancy rates %



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NCL Secondary Care - Vacancy Rate by Staff Group (Dec)

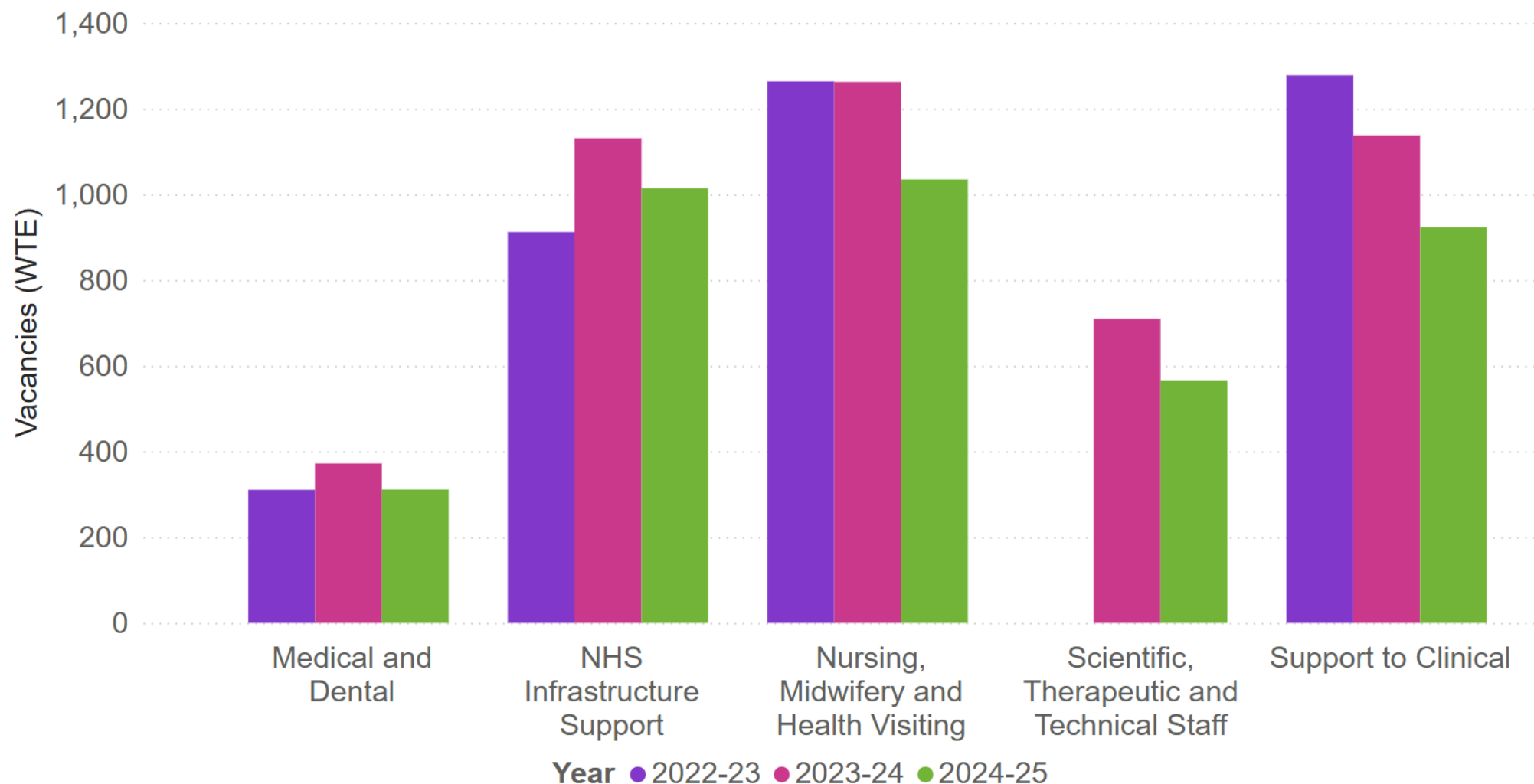


Vacancies as WTE



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NCL Secondary Care - Vacancy by Staff Group (Dec)

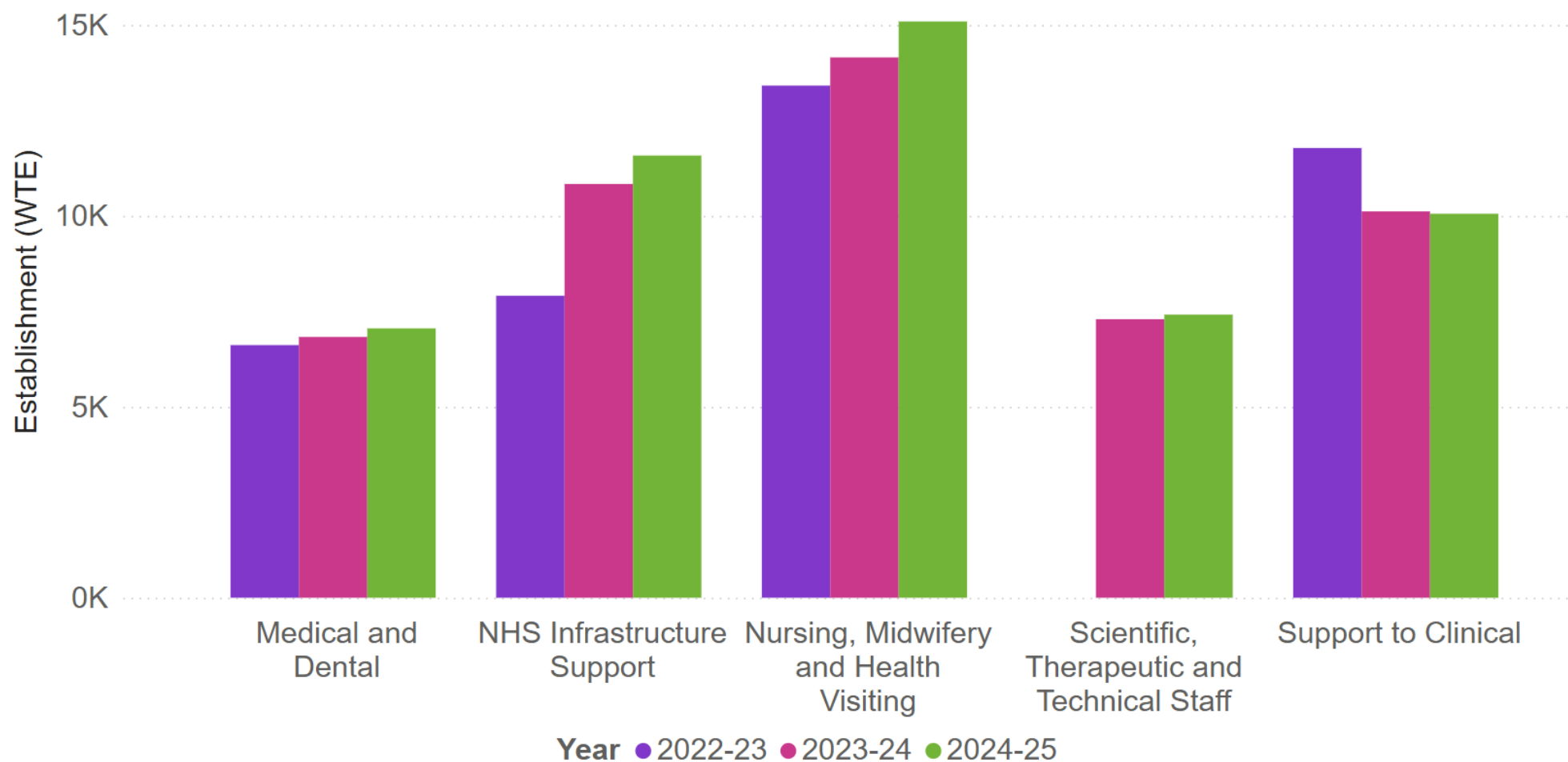


Overall workforce by group



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NCL Secondary Care - Establishment by Staff Group (Dec)





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Overall strategic approach to Work and Health and the WorkWell Programme

Why focus on work and health?



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- Good work has a positive effect on physical and mental health, while unemployment and long-term sickness often have a harmful impact
- Long-term sickness has become the most common reason for economic inactivity, in the region of **2.6 million people**
- The biggest factor in the rise of economic inactivity since the start of the pandemic – now around **490,000 higher**
- Reversing this trend cannot be achieved by services acting in siloes - it requires an **integrated whole-systems approach** at a local level
- The challenges in the **Get Britain Working** white paper for the wider economy are profound and need a cross-government approach to solving them
- Health, **working together with local government and local employers**, plays a pivotal part in supporting people being able to work and have a better quality of life and more opportunities.

Developing a Work and Health Strategy



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1. Foster a **proactive** approach to greater integration between health and care, employment and wider community place-based services
2. Ensure **engagement** of the Jobcentre network, NHS, local authorities, employers, VCS services, and residents
3. Understand the **demographics of cohorts** to ensure groups are not disadvantaged
4. Explore **other place-based initiatives** in the area
5. Ensure **continuous improvement** of integrated services
6. Develop an **Action Plan** to implement the strategy

What NCL wants from the joint strategy



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How will the Strategy contribute to ICS core purposes and wider Government aims?

1. How will the Strategy help health and care services to support broader social and economic development, and on tackling inequalities in outcomes, experience, and access in health and employment services?

What should be the scope of a Work & Health Strategy?

2. What are the views of partners on the aims, objectives and scope of a Work & Health strategy?
3. How will the Strategy fit with other local plans and strategies?
4. To what extent should employers (of all sizes) be a focus of the Strategy?

How can the Strategy improve integration, co-ordination and services?

5. What actions can improve co-ordination between health services and employment services?
6. What actions can partners deliver that will reduce economic inactivity due to ill health?
7. Should there be consistent messages on employment through all appropriate NHS channels?

Impact

8. How should we measure the impact of stronger co-operation and new actions taken by partners?

Approach and timeline



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1. A series of group and bi-lateral interviews (Nov 24 -Jan 25) with the full range of partners in health and employment services
2. Interviews and/or focus groups with residents and employers
3. Two Partner Workshops (March 2025) to develop and test ideas
4. A review of local existing and planned work, health and skills strategies
5. Some data and desk research to inform priorities for action
6. Submit draft strategy to Board in May 2025



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The WorkWell programme

What is the WorkWell programme?



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- Partners in NCL were successful in bidding to become one of 15 **WorkWell Vanguard** programmes in England. DWP and DHSC has funded NCL to:
 1. Provide a **WorkWell Service** – a path to Health and Work Support in North Central London. This is now live – see NCL [website](#)
 2. Take forward an **integrated work and health strategy** – a strategic approach to work and health services
 3. Be part of a **national learning programme** - provide a bank of delivery experience and expertise that ensures all areas can benefit
- The **Institute for Employment Studies** have been commissioned to lead the development of the work and health strategy
- In addition, **Connect to Work** will launch in London in 2025 – this is for people with health conditions and complex barriers to work who are further from work.

WorkWell Launch



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We were pleased to be chosen to support the launch with a visit from two Secretaries of State – Liz Kendall and Wes Streeting.

The Government release is [here](#). This led to a positive piece on BBC London featuring service users and our leaders.



There was further coverage in the [Evening Standard](#) alongside figures of increased numbers of benefit claimers, with pick up in [THIIS magazine](#) for mobility and access professionals. There was also a great video produced by the DWP on [Instagram](#).

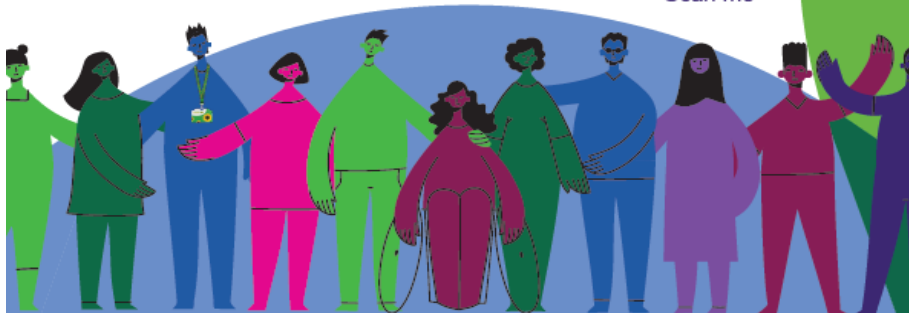


Do you have health needs that impact on your working life?

Whether you're looking to start a new job, need support in your current role, or are planning to return to work after an absence, WorkWell can offer:

- Tailored 1 to 1 support from a dedicated Work and Health coach for anyone with a disability or health condition who needs support to start, stay or thrive at work.
- If you are looking for work, the coach will support you with CV writing, access to job listings, recruitment events and interview support.

Take the first step towards a better work life



Register for WorkWell today
Tel: 0808 196 2386 Web: nclhealthandcare.org.uk/workwell

Designed to support people with a disability or health condition to:

- ✓ Start work if unemployed
- ✓ Stay at work if they have been/ or are at risk of being on sick leave
- ✓ Thrive at work

Participants receive 1 to 1 support from a work and health coach.

Co-designed key principles



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As a local partnership we are collectively signed up to and have a commitment to work to a common set of principles:

- ✓ The service will be place-based
- ✓ We will use a relational model to engage economically inactive residents.
- ✓ The service should scale up and build on what already exists.
- ✓ We will link to the NCL Population Health Outcomes Framework.
- ✓ We will utilise data to inform our model, including Fit Note data within Primary Care.
- ✓ We will seek to address Health Inequalities through the work, focussing on supporting those most disadvantaged
- ✓ The service will be person centred supporting people to address health, employment and wider needs in a co-ordinated way.
- ✓ The service will seek to share information between agencies by default.

Our WorkWell model has been designed in line with these principles and in full collaboration with our partners.

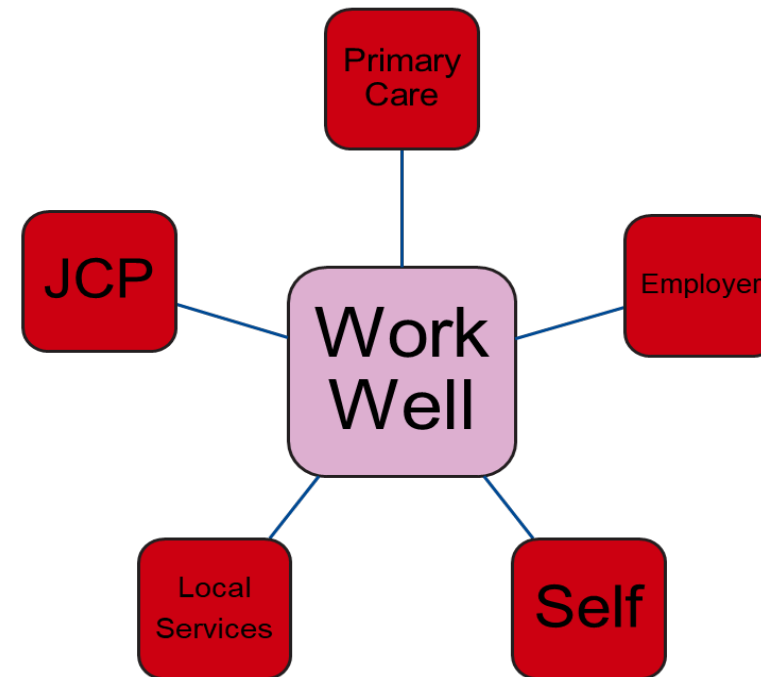
The WorkWell programme aligns with the NCL Population Health Strategy which sees access to meaningful employment as a population health intervention. A key population health outcome within the strategy is to increase the number of people with Long Term Conditions, Mental Health Learning disabilities and Health Conditions back into work.

How does it work?



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- Participants can either self-refer to the programme or be referred by their employer or a health professional.
- The Shaw Trust have a 'no wrong door' policy so if people are referred to WorkWell but would be better supported through an alternative programme, they will be signposted to the appropriate support offer.
- We have proactively engaged Job Centre Plus Partners in enabling referrals to WorkWell.



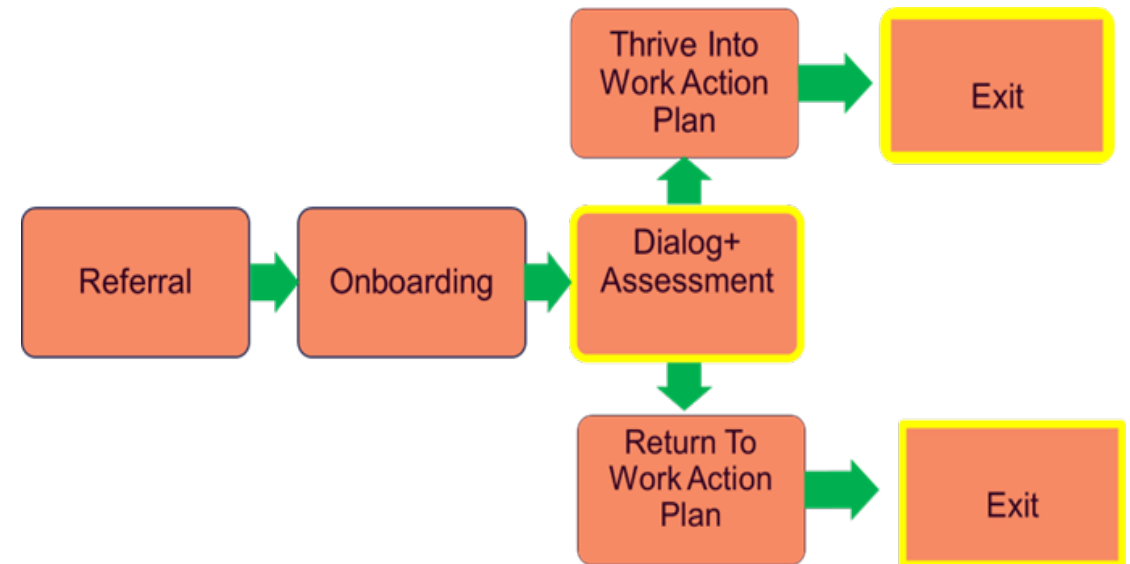
Wider support



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In addition to a team of 15 Work and Health Coaches, a Multi-disciplinary team is in place. The team employs an Occupational Health Practitioner, Mental Health Practitioner and Employment Retention Practitioner. This ensures that WorkWell coaches have an expert resource who they can turn to for advice.

Regular meetings between Coaches and specialist MDT members ensures that cases are regularly discussed so that the coaches are equipped with expert advice where it is needed. For very complex cases, members of the MDT may provide direct advice to a small number of participants.





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WorkWell programme progress December 2024

How are we doing?



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Contract to Date	Target	Actual	Percentage
<u>Referrals</u>	570	385	68%
<u>Programme Starts</u>	400	359	90%
<u>Conversion Rate</u>	70%	93%	-
<u>Programme Exits</u>	N/A	27	8%

In – Month (Dec-24)	Target	Actual	Percentage
<u>Referrals</u>	190	189	99%
<u>Programme Starts</u>	150	185	123%
<u>Conversion Rate</u>	70%	98%	-
<u>Programme Exits</u>	N/A	14	7%



Who are we helping?



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Population		
Borough	Value	%
Barnet	388,600	28%
Camden	210,400	15%
Enfield	329,600	23%
Haringey	264,100	19%
Islington	216,800	15%
Total	1,409,500	

Referrals		
Borough	Value	%
Barnet	70	18%
Camden	47	12%
Enfield	75	19%
Haringey	140	37%
Islington	53	14%
Total	385	

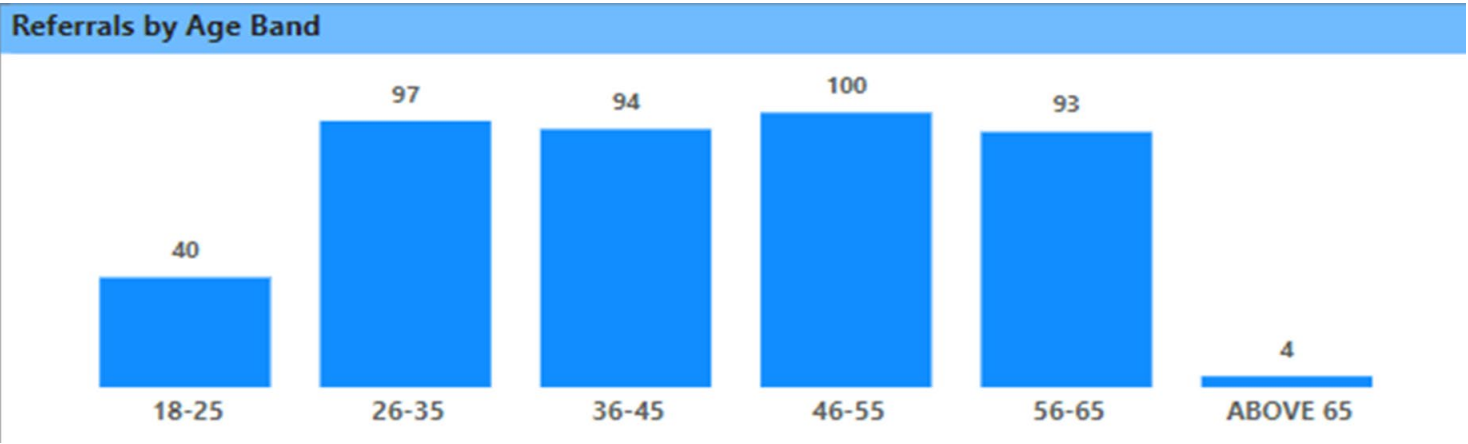
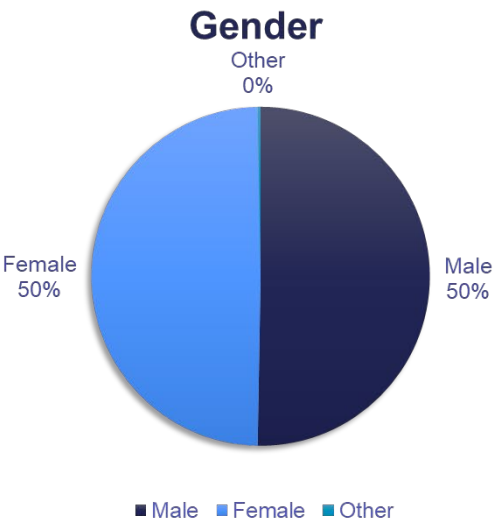
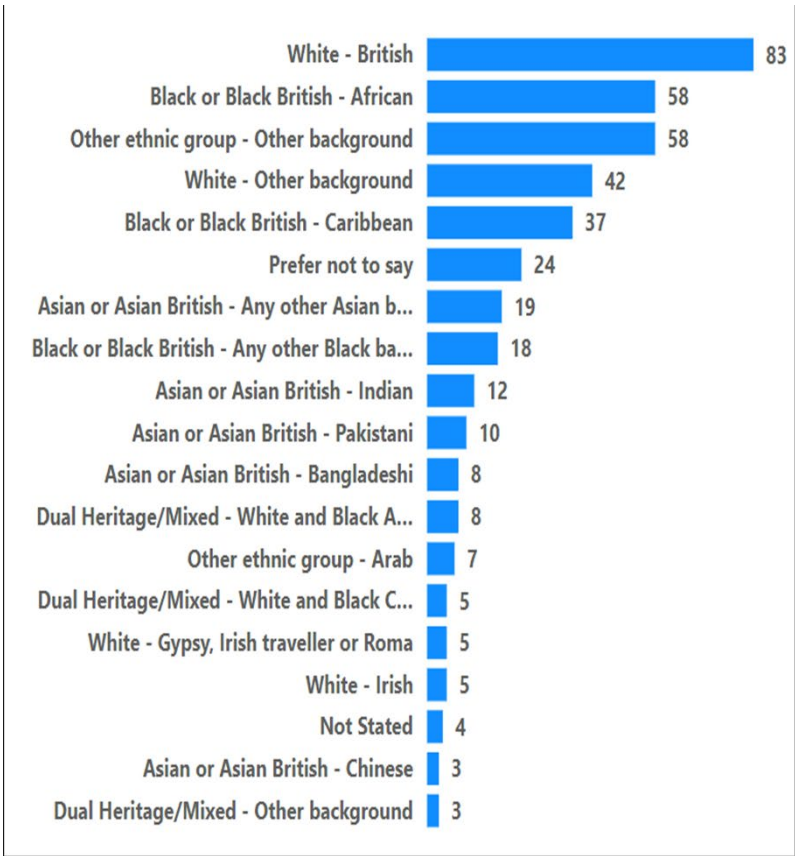
Starts		
Borough	Value	%
Barnet	66	18%
Camden	41	11%
Enfield	69	19%
Haringey	136	39%
Islington	47	13%
Total	359	

Conversion	
Borough	Percentage
Barnet	94%
Camden	87%
Enfield	92%
Haringey	96%
Islington	89%

What are their demographics?



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How do we find them?



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Referral Source				
Route	Number – In Month	%	Number-CTD	%
GP Including Social Prescriber	18	10%	39	10%
Local Authority	-	-	-	-
Voluntary / Community	-	-	-	-
Local Health Services	-	-	-	-
Employer	-	-	-	-
Job Centre Plus	32	17%	107	28%
Self-Referral	100	53%	152	40%
Other (IPS PC, Family, Job Fair, Social Media)	39	21%	87	22%

Outcome of Referral	
Outcome of Referral	Number of Participants
Issued Thrive in Work Plan	45
Issued Return to Work Plan	314
Did Not Start	26
Ineligible	0
Other	0
Total	385

What challenges do they face?



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Non-Health Related Barriers	
Barrier	Value
Transport	2
Childcare	2
Skills	15
Caring Responsibilities	3
Confidence, Motivation	24
Fatigue	0
Language	0
Suitable Jobs	57
Other	4
Not Applicable	70
Total	177

Health Conditions			
Health Condition	Value	Health Condition	Value
Problems with arms or hands	10	Autism	13
Problems with legs or feet	14	Severe / specific Learning Difficulties	13
Problems with back or neck	3	Mental illness, or suffers from phobias, panics or other nervous disorders	24
Difficulty hearing	2	Progressive illness not included elsewhere	4
Speech Impediment	-	Other	40
Severe Disfigurement, Skin Condition or Allergies	-	Heart, Blood Pressure, Blood Circulation	6
Chest / Breathing problems	8	Stomach, Liver, Kidney, Digestive problems	6
Diabetes	13	Epilepsy	3
Depression, Bad Nerves or Anxiety	156	<i>(Conditions based on MI template options)</i>	

What difference are we making?

Christine* is a single parent who has just come out of an abusive relationship. She has been receiving mental health/wellbeing support from her work and health coach, supporting her to re integrate into her community as she has been isolating herself.

Supported to gain specialised mental support (therapy from her GP). Supported to sharpen soft skills such as, time management, confidence and CV writing.

She has been referred to further support to upskill herself through various courses related to her industry of interest. So far, her work and health coach is seeing a significant improvement in her mental health and mood. She is developing a more open and optimistic mindset.



What difference are we making?

Fiona* was feeling very anxious and couldn't leave the house alone. She lost all her confidence when she got ill, suffering from Lymphoma in 2021 and since then has struggled with health anxiety

She joined WorkWell as she felt that finding a job would force her to leave the house and get into a routine. She said she doesn't like to talk about her illnesses, and it causes her a lot of anxiety. She advised she would rather not disclose to an employer. We completed a health disclosure form together to break down the pros and cons of disclosing.

Fiona is participating in support groups for her anxiety. She has made significant improvements building on her soft skills and social interactions recently managing to use public transport independently. She was really pleased with this and thanked WorkWell for all the support and is continuing the programme.





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Next phase in the care leavers programme



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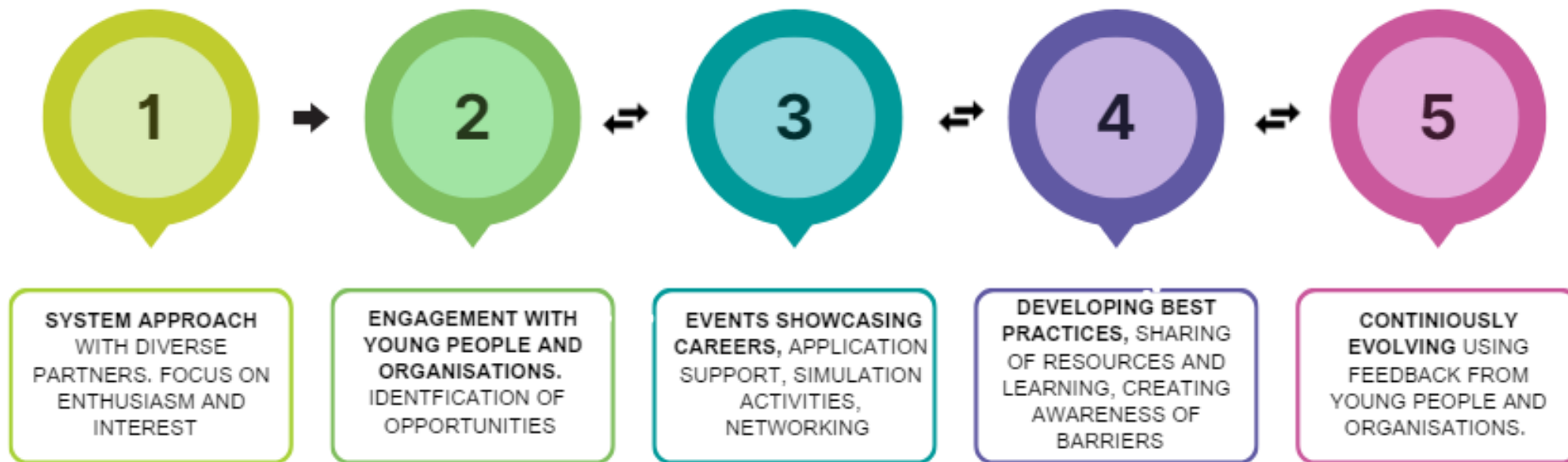
Our care leavers programme

- Launched as one of the 10 pilots for the NHS Care Covenant (NHS Universal Family) programme
- Aim to support up to 25 care leavers in year 1
- Engaged with over 40 care leavers with 10 being offered employment opportunities (25% success rate)
- Moved to being part of the Health and Social Care Academy
- Paused to learn from the year 1 experience
- Relaunching the mission in 2025 and aim to support 25 young care leavers between January and March 2025 in a new approach funded by NHS England
- Re-stated our mission to embed this as a partnership approach to supporting young care leavers into work on a more systematic basis

Our original approach



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Better Mental Health. Better Lives. Better Communities.



Our renewed mission



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A focus on providing each Care Leaver the support they need to remove barriers to work – addressing complex needs

Ensuring Care Leavers are job ready and have the skills and tools to sustain work and thrive

Appropriately matching Care Leavers to job roles sourced by employers committed to the CL programme

To continue to deliver events specifically for care experienced young people

Develop a collaborative, NCL system approach; utilise existing assets, tackle barriers in recruitment processes

Engage with care experienced young people; recognise how they add value in our organisations

Showcase the diverse range of opportunities in health and social care

Develop a community of best practice, connect with other pathfinders, utilise feedback, develop case studies



Better Mental Health. Better Lives. Better Communities.

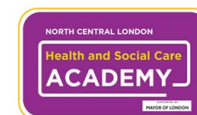
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TRAINING HUB



NHS
Royal Free London
NHS Foundation Trust



NHS
University College
London Hospitals
NHS Foundation Trust





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Summary and next steps

Summary and next steps



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As this pack, the annual report and the people priorities set out, there is a significant amount of work being undertaken across the system to ensure we continue to have a sustainable health and care workforce as well as offer opportunities to the residents of the five boroughs across NCL.

There will be a lot more requirement for health to support the work and health agenda over the next few years and we are keen to particularly work with employers to ensure our residents with long term conditions, disabilities and mental health challenges are able to access and stay in good work.

Currently the ONS data (March 2024) shows NCL in the bottom quartile for supporting people with only 6.6% of residents with multiple long term conditions in work. This continues to align with our WorkWell programme and our Care Leavers programme.

The elective recovery plan and the need to improve the flow through our hospitals for our patients who require urgent treatment will be a priority for the remainder of the winter and beyond.

Summary and next steps



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We are currently working with our community voices groups to continue to support the Change NHS programme and we look forward to the 10 year plan being published in the Spring/ early Summer of this year. There is a people workstream and we will ensure our priorities align with its requirements.

We will be supporting the development of Integrated Neighbourhood Teams and looking at how we support the transformation of ways of working; including the development of more digital interventions.

Our main challenge will be ensuring that we are delivering efficient and effective services and that our health and care workforce have the right skills and capabilities at all levels to continue to deliver the high quality health and care that our residents and our patients deserve.