

Wolverhampton CCG Workforce Development - Task and Finish Group

Terms of Reference

1. Introduction

The aim of the Workforce and Development Task and Finish Group is to deliver the vision of the Primary Care Workforce Strategy. The purpose of the group is to ensure the strategy is reflective of national and local influencing factors and is duly implemented to assist in achieving a sustainable workforce for Primary Care in Wolverhampton.

Through implementation of the strategy, gaps in clinical / non clinical roles will be redefined and strengthened, training and development needs will be proactively managed and recruitment and retention of a range of new roles advocated in the General Practice Five Year Forward View will also be introduced at practice level.

This is one of the key work streams within the Primary Care Strategy to ensure Wolverhampton CCG have a comprehensive plan in place to retain, strengthen and develop a sustainable Primary Care Workforce for the future.

Its role is to achieve the transition from the present way of working to the one set out by the strategy and to ensure the new way of working becomes an approach that is pro-actively business as usual.

The achievements of the Task and Finish Group will be reviewed periodically to ensure progression is taking place and to determine the future of the group.

Task and Finish Group Structure:



2. Membership

Core -

(Chair)

Primary Care Clinical lead (Vice Chair)

Primary Care Development Manager

GP Lead (Locality Lead)

Attendance on-request -

Health Education West Midlands - Primary Care Workforce Lead

Local Education Training Board – Primary Care forum reps

Vocational Training Scheme(s) - Programme Director

Representative from:

- Clinical pharmacist
- Appraisal lead
- Clinical Education for Practice Nurses
- Primary Transformation Manager/Head of Service
- University of Wolverhampton
- Social care
- Third sector
- Acute
- MH Provider
- New Models of Care / Localities
- LMC

3. Meeting Administration

- 3.1 The Chair, with support of their administrative support, will be responsible for ensuring circulation of the agenda and papers of the Task and Finish Group at least three working days before the meeting.
- 3.2 Circulation of the minutes/action notes will be completed by the chair/admin support within five working days of the meeting to all members.
- 3.3 The action log will be maintained, monitored and chased by the Business and Performance Primary Care PMO Administrator and they will send reminders to all the TandF Group members prompting updates at least three working days before the meeting.
- 3.4 Following each meeting, the Chair will ensure the respective workbook for the programme of work is duly updated for assurance to the responsible committee. The workbook will be provided directly to the Business and Performance Primary Care PMO Administrator within 3 working days, for presentation at the next Primary Care Strategy Committee.

4. Quorum

- 4.1 Two of the following must be present from the core membership to enable meetings to take place:-

xx (Chair)
Primary Care Clinical Lead
Primary Care Team Representative
GP Lead (Locality Lead)

Decision making will be ratified by Primary Care Strategy Programme Board.

5. Voting

- 5.1 The Task and Finish Group is expected to take most decisions by consensus, where a decision cannot be reached this will be escalated to the responsible committee.

6. Frequency of Meetings

- 6.1 Monthly

7. Remit, duties and responsibilities

- 7.1 The overarching role of this group will be to:
 - In view of the changing landscape, review and update the Primary Care Workforce Strategy covering all staff groups spanning both clinical and non-clinical roles within Primary Care. All in accordance with the CCGs Primary Care Strategy (2016) and General Practice Five Year Forward View (2016).
 - Review and update the current implementation plan and continue to deliver the aims of the Strategy through the Plan.
 - Assume responsibility for implementation of the strategy at practice group/locality level whilst striving to achieve a more resilient workforce for the future.
 - Identify any risks likely to have an impact on the delivery of the strategy and ensure early mitigation plans are in place and reported to the responsible committee in a timely manner.
 - Ensure that the programme of work for the task and finish group is reflective of all corresponding expectations for the primary care workforce as advocated in the General Practice Five Year Forward View and Primary Care Strategy.

- Pro-actively undertake workforce analysis at regular intervals to inform the workforce plan achieving a multi professional workforce. The plan should be owned at practice group/locality level and due consideration given to the recruitment, retention and development of personnel across all staff groups.
- Regularly review training and development needs spanning all staff groups to ensure identified needs and skill mix are reflected in workforce plan(s), overseen by the task and finish group.
- Ensure a strong correlation between skill mix and health care need through focussing on population health, prevention and innovative ways of delivering care to patients through multi-disciplinary team working with health and social care partners i.e. community teams, also including mental health therapists.
- Develop a recruitment programme to attract and recruit personnel to work in Wolverhampton offering the necessary training and development to train them locally in the city, this also includes trainees and development of existing employees.
- Encourage and support those living in the area with suitable qualifications to work in primary care, maximising their employment potential i.e. hours, working at scale and seven day working.
- Establish and maintain strong links with stakeholder educational establishments to aid implementation of the strategy and achievement of a sustainable primary care workforce.
- In response to the General Practice Forward View work closely with the Black Country STP to respond to a range of projects and approaches on an STP footprint to secure value for money and greater quality through at scale development and delivery
- Develop a portfolio of educational events and oversee delivery of educational events for both medical, nursing and non-clinical staff groups, linked to the Workforce Strategy. Draw upon the expertise of the Comms Department to support the planning of engagement and events.
- Through work with practice groups/localities create a working environment that encourages trainees to remain in Wolverhampton
- Develop a primary care workforce dashboard based on the principles of the Primary Care Workforce Strategy and General Practice Five Year Forward View to routinely monitor the progress and identify early warnings where shortfalls/risks affecting the workforce can be identified and mitigated at the earliest opportunity.
- Provide assurance in the form of highlight reports or workbook updates to the Primary Care Strategy Committee following each Task and Finish Group Meeting.
- Identifying and securing resources internal and external to WCCG to support the implementation of the strategy through strong partnership working.
- To ensure sound information sharing among other task and finish group leads to aid effective implementation of the Workforce Strategy and strong allegiance with wider implementation of the Primary Care Strategy.

7 Reporting

- 7.1 The Task and Finish Group will report to the Primary Care Strategy Committee/ Board following each meeting providing a formal update on all respective areas of the work programme.
- 7.2 Workstream leads will need to ensure they alert each other if implications for another workstream are identified (which will be reflected in the highlight report/workbook updates).

8. Review of Terms of Reference

- 9.1 These terms of reference will be reviewed by the T and F group and Primary Care Strategy Committee annually to ensure the group is achieving its objectives and to ensure that key changes are being incorporated as required.

9. Terms of Reference Approval

The Terms of Reference will be agreed within the Task and Finish Group as well as the Primary Care Strategy Committee/Board.

LR/SLS/TOR/V9/June17/FINAL