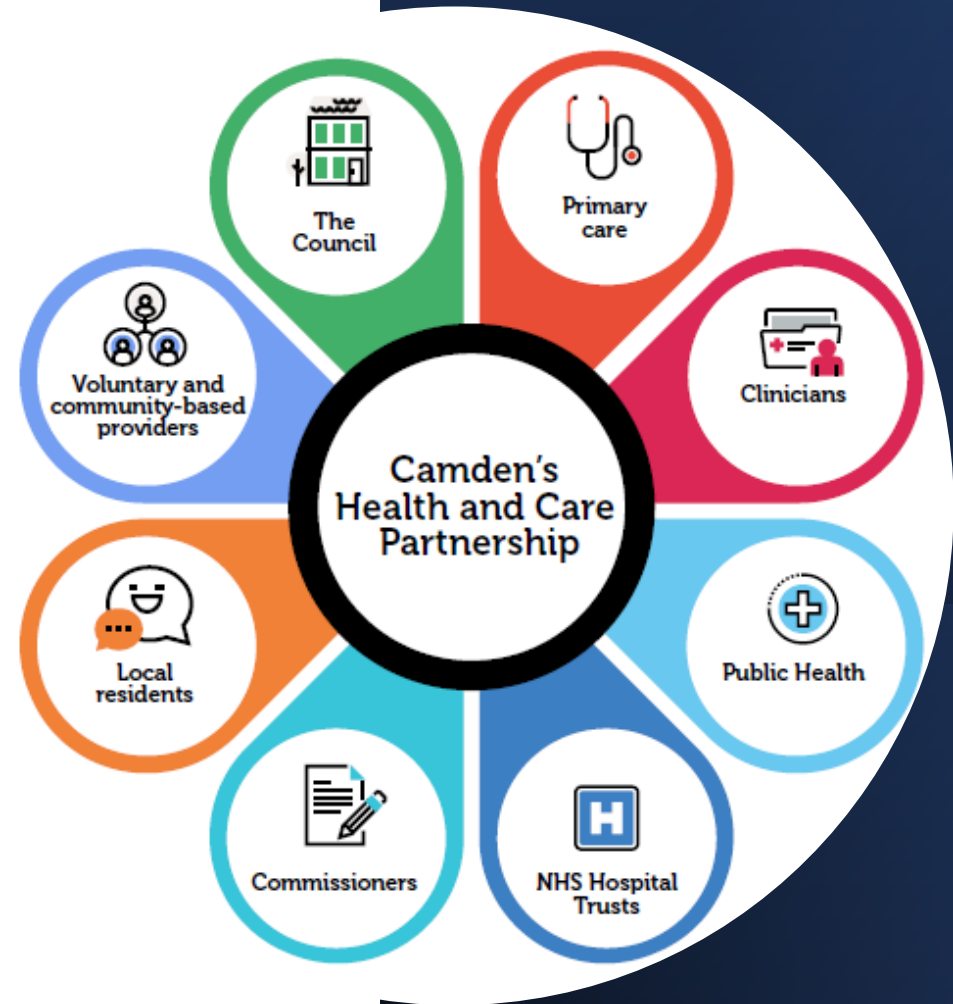


Good Work & Employment Successes and challenges of partnership working

Camden Health and Wellbeing Board
September 2023



Contents

- 1. Good work & employment...** is a key priority of our joint Health & Wellbeing strategy. Progress has been made on this priority but much of this has been via individual organisations rather than as a partnership, despite the energy and commitment that we all had to take a system approach when we discussed this at the Board in September 2022.
- 2. Public Health Needs Assessment...** serves as a reminder of the needs of our residents, specifically around the impact of unemployment.
- 3. NCL People Strategy...** is a great example of holistic thinking and what can be achieved when the partnership comes together as a system.
- 4. Discussion...** We now need to regroup and think about ways to build momentum and improve how we come together as a system to deliver on our commitments on this priority.

'Good work and employment' as a strategic priority

- 'Good work and employment' is one three key priorities set out in our joint Health and Wellbeing strategy. This is a Population Health strategy which aims to tackle the wider social determinants of health and address structural inequalities in health outcomes.
- Good work and secure livelihoods can dramatically cut poverty, tackle inequality and improve wellbeing. Conversely, income disparity and insecure jobs lead to poor health outcomes, with significant implications on demand for NHS services.
- Too many Camden residents experience long-term unemployment and low-wage employment, particularly as Camden has more jobs than there are residents and thus the potential for secure work for everyone. Meanwhile the health and care system struggles to recruit and retain employees and has a large number of vacancies.

Previous Board discussion and agreed actions

Discussion

- 'Good work and employment' priority was last discussed in depth by the Board in September 2022, with a focus on the workforce challenge facing the health and care system.
- Good Work Camden's work toward defining and providing 'good work' for residents was discussed, including examples of what works and what more can be done to make inroads on this priority.
- Also discussed was the establishment of the Workforce Taskforce as a result of conversations by CICE (Camden Integrated Care Executive) and the LCPB (Local Care Partnership Board). The taskforce has been supported by NCL ICB and the Camden Training Hub to coordinate a vision for the future of an integrated approach to recruit and retain Camden's health and care workforce.

Actions

- The Board was asked to identify and endorse actions through which organisations across the system could contribute to addressing the workforce challenge and the employment needs of Camden residents.
- On local recruitment, the Board agreed that efforts should be made to simplify application processes, and that discussions should continue via a meeting of partner representatives being set up to talk through the options available.
- The benefits of establishing peer support roles to assist the hiring of people with mental health lived experience was discussed in relation to the success of this model as piloted at the Tavistock and Portman NHS Trust.
- The benefits of Value Based Recruiting as adopted at Charlie Ratchford Court was also discussed.

Taking a population health approach

Camden's ambition is to become a population health driven organisation. This means taking a population health approach in everything we do, whether that is to improve the health and wellbeing of specific population groups, or addressing specific health issues.

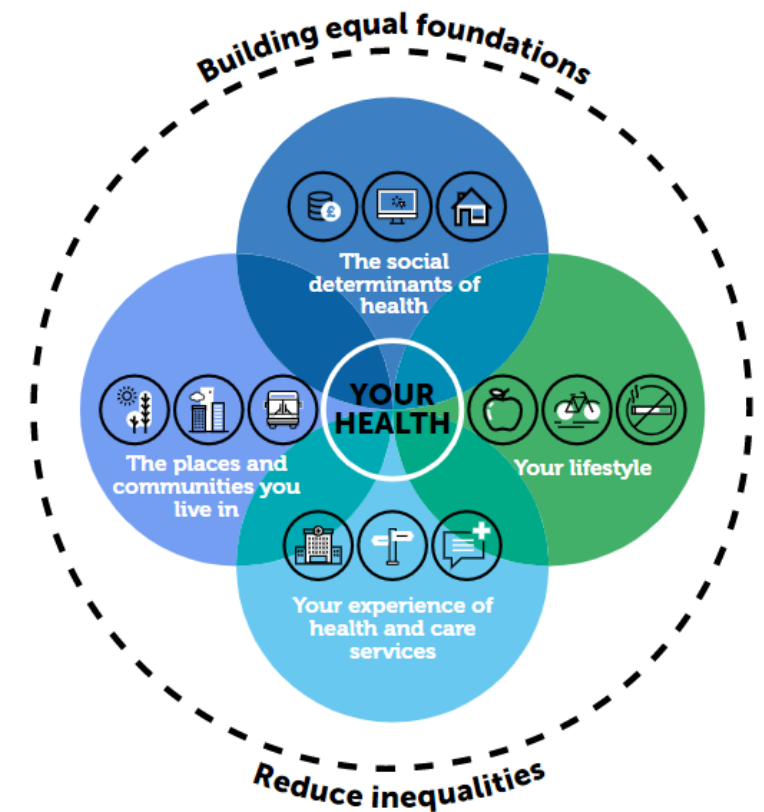
Population health is an approach aimed at improving the health of an entire population.

It is about improving the physical and mental health outcomes and wellbeing of people across a defined population, as well as the distribution of those outcomes within the population. Interventions focusing on both components will help to reduce health inequalities.

The four pillars of population health

Embedding a population health approach means understanding health in the round and taking collective action across all four pillars of population health.

- The approach recognises that there are a wide range of determinants of health and wellbeing, which are outside the domain of health and care services. For example, the risk factors for the main causes of illness and death such as cardiovascular disease, are related to our lifestyle and our environment, therefore improving diagnosis and treatment alone will only have limited impact.
- It is only by taking action on the full range of determinants across all 4 pillars, will we be able to improve population health and reduce the inequalities gap.
- This is not a new concept, however, activity is often imbalanced in that the current breadth of activity does not reflect the full breadth of challenges.
- The overlaps highlight key opportunities for collaboration and to add value (as well as the risk of duplication).



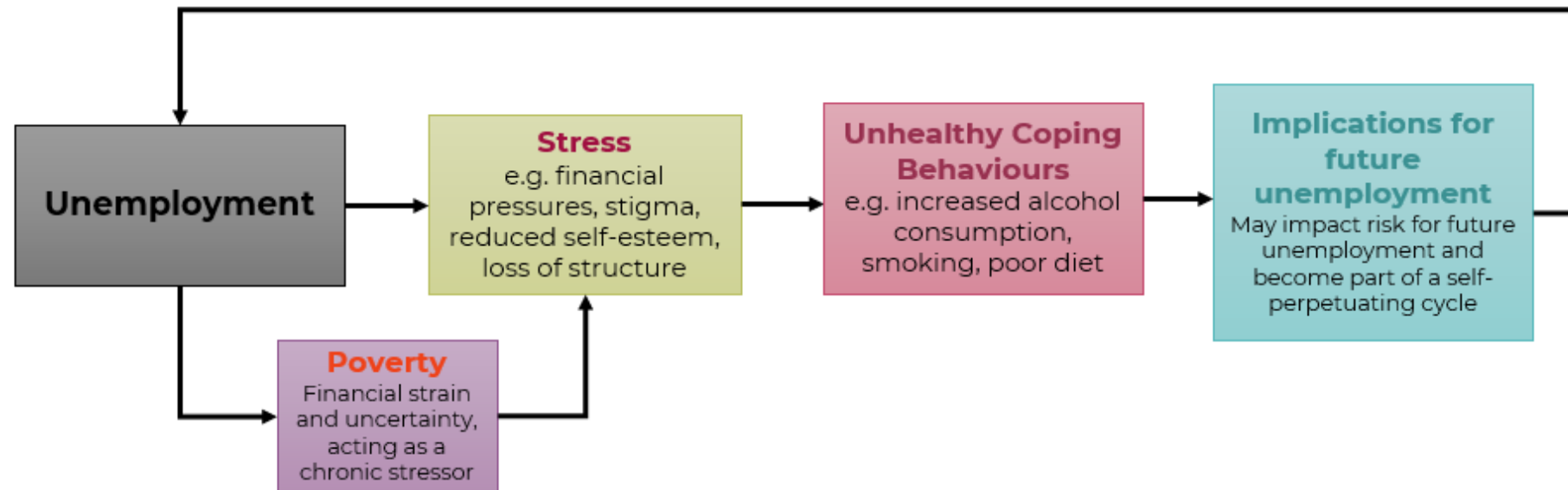
Applying a population health approach in practice – good work and employment

We have been testing these 5 sequential phases as a high-level guide to applying a population health approach in practice

- These phases can be applied to any population group, health issue or geographical footprint.
- So far, we have applied this method for the first two short term priorities in the Health and Wellbeing Strategy – community connectedness and friendships, and childhood immunisations – and we will now be focusing on good work and employment.
- The first step is undertaking a rapid needs assessment to understand the population health need around employment.



Relationship between unemployment and health



Rapid Needs Assessment: Impact of Unemployment

- Long-term unemployment describes people who have been out of work for twelve months or more. People in LTU have a notably higher burden of disease, particularly mental illness, when compared to people in employment or those who are short-term unemployed.

43%  of unemployed people have poor mental health, compared to 27% of those employed



Unemployment is associated with increased risk of heart attack and stroke



Complex relationship with poorer health behaviours such as smoking, inactivity and poor diet

Rapid Needs Assessment: Impact of Unemployment

What does the data tell us?

- Camden has a lower employment rate than London and Great Britain, though this may be partially explained by a large student population
- Roughly 58,000 residents are considered economically inactive, 8,200 of whom are considered long-term sick
- 59% of people with a long-term physical or mental health condition are employed, 13% less than the Camden general population
- This gap is greater for those in contact with secondary mental health services, with only 6% in employment
- Unemployment and economic inactivity do not affect Camden population equally, with women and people from ethnic minority backgrounds having higher rates than the general population

What do staff working in the sector say?

Challenging Employment Process

Residents with health conditions find the employment process very challenging, particularly those with MH issues

Impacts of Long Term Unemployment

Residents out of work for extended periods often need additional support around things like motivation, soft-skills and self-confidence

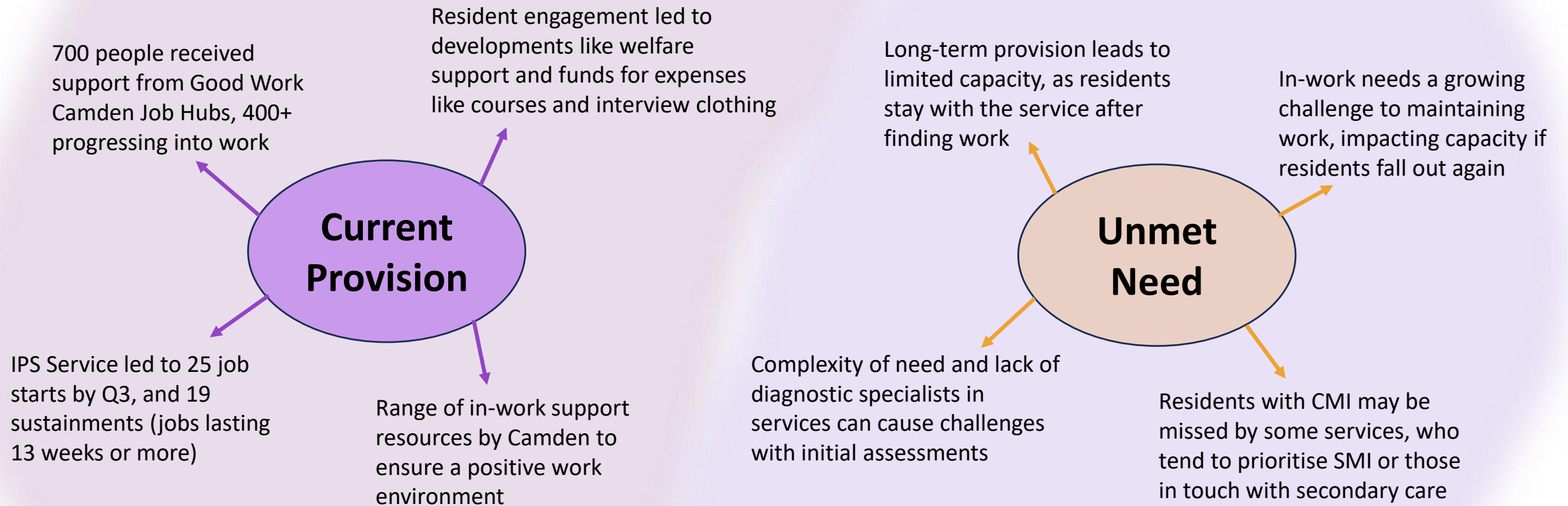
In Work Needs

Toxic or unsupportive work environments and difficult managers are an increasing challenge to maintaining employment

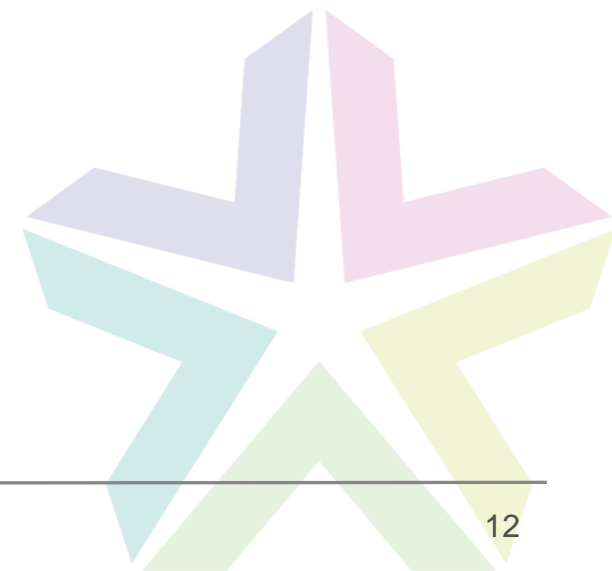
Access Barriers

Residents face varied and overlapping issues to access, such as language barriers, financial challenges and housing insecurity

Rapid Needs Assessment: Provision and Unmet Need



NCL ICS People Strategy 2023-28



People Strategy

Context setting: Challenges & Opportunities



What are our current **challenges**?

Bank and Agency usage

- 15% of Staff are Bank/Agency; a 3% increase in year
- 49% of the increase in Mental Health staff attributed to Bank

High Attrition

- Turnover at 19.3% and vacancy rates at 16% in some staff groups
- 1/3 of staff over 55 who could retire in the next 10 years
- The combination of these factors relates to a potential workforce gap of 17% in the next five years

Financial challenges

- Inflation raising cost of living by as much as 27% in low income households
- 5% pay difference between Inner and Outer London Weighting
- Reduction in system funding by 10%

What are our **opportunities**?

Creating 'One Workforce'

- Development of the ICS, ICPs, PCNs and neighbourhoods enabling **integrated and collaborative working** to allow us to scale up and share best practice
- Network of various employers across NCL to develop and **promote innovation**

Supporting the NCL Community

- **Bulge in school and care leavers aged 18-25** with unemployment in this age range for London 5% higher than the national average
- **Focus on workforce supply** and the opportunity to shape future workforce including Apprenticeships, T-levels, Internships, GLA Health and Social Care Academies

Driving Transformation

- **Maximising the assets** we have in NCL and leveraging capability across the system incl. leading institutes for Education and Research along with Nationally and Internationally renowned specialist healthcare providers
- Digital innovations enabling the workforce to operate with more **flexibility and autonomy**

Priorities and Alignment to Camden 2025



POPULATION HEALTH IMPROVEMENT

Residents have the best start in life, live more years in good health, be economically active, age within a connected community and have a dignified death

**SYSTEM
PRIORITIES**

**WORKFORCE
SUPPLY**

**WORKFORCE
DEVELOPMENT**

**WORKFORCE
TRANSFORMATION**

**RETENTION
ENABLERS**

Health & Wellbeing

Equality, Diversity & Inclusion

Leadership & Talent

**High
quality,
sustainable
care
delivery**

People Strategy Principles



INTEGRATION

Deliver on the 4 objectives of Integrated Care Systems



RETENTION

Provide an employee experience that means our staff want to stay with us and build the future NCL



POPULATION HEALTH

Build 'One Workforce' to meet our Population Health Improvement vision and objectives



SOCIOECONOMIC RECOVERY

Catalyse the role of health and social care as key driver for economic and social recovery



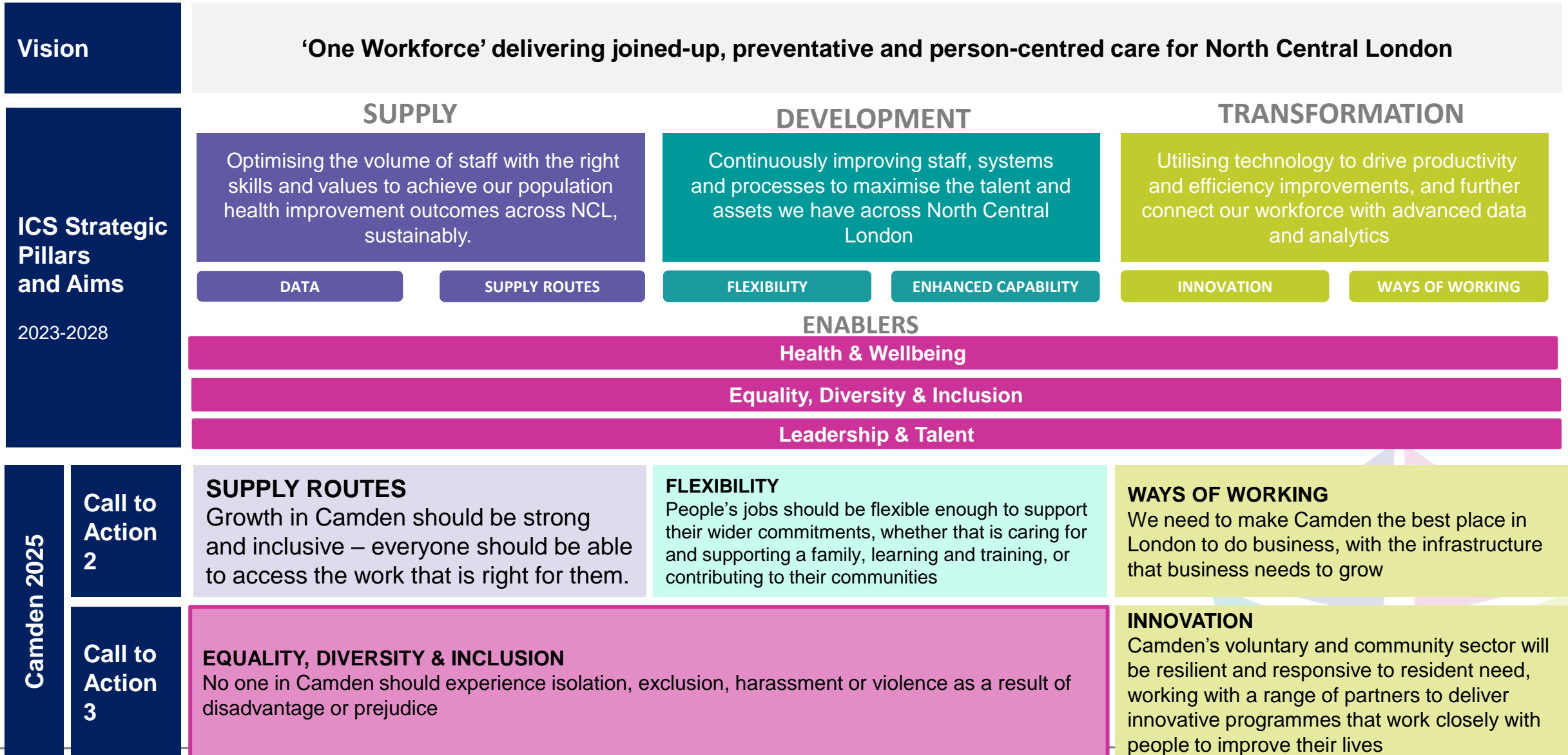
LEVERAGE OUR ASSETS

Maximise the people and assets we have in North Central London and leverage capability across the system



INNOVATION

Continuously improve and maximise the power of data and digital solutions



Questions for discussion

- **What can we do to improve how we come together as a system on good work and employment as a priority?**
 - Are there ways of working that we should adopt?
 - Who are the key teams and people?
 - Would a shared strategy help to focus our approach?
 - Can we build on the priorities the partnership shares with NCL?
- **What are the barriers and enablers to developing a joined-up approach to good work and employment that we can focus our efforts on?**
 - Is there a role for a partnership forum such as the Workforce Taskforce?
 - What can we learn from the work of Good Work Camden?
 - Who is providing strategic leadership and how?
 - How might we apply a population health approach to progress our partnership working on good work and employment?