

Richmond adult services

Workforce Strategy

Final draft for comments

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Foreword

The vision of Richmond Adult and Community Services is to deliver quality services for our citizens and community through leadership, innovation and partnerships.

I am pleased to introduce the Richmond Adult Social Care Workforce strategy which has been informed by extensive consultation. It sets out our high level strategy which we wish to take forward with our partners. Detailed action plans with timescales will be developed to underpin our commitments.

We want people to live independent lives with choice and control over the services they receive. To meet these changes it is crucial that we have the right people with the right skills in the right place at the right time. This strategy and its action points will form the basis of decisions on where to direct effort and funding for the future development of the social care workforce in Richmond.

I am confident that the implementation of the workforce strategy will help achieve better outcomes for all our adult social care service users and carers in Richmond.

Cathy Kerr

Director of Adult and Community Services
London Borough of Richmond upon Thames

Background

In July 2005 the Government announced a review of the social care workforce led jointly by the Department of Education and Skills and the Department of Health. This led to the publication of many government documents that would begin the transformation of social care, with the focus on having ‘the right people in the right jobs with the right skills’ by 2020.

To meet this challenge, emphasis has been given to the role of workforce planning as a tool to strategically develop and plan the new social care environment. However, one of the greatest challenges is integrating workforce development with organisational objectives. Consequently effective workforce planning also requires that learning and development be closely aligned to performance management.

This document forms the basis of the Adult Social Care Workforce Strategy for Richmond. It has been produced to address the future social care workforce requirements across those services providing support for adults requiring social care in Richmond.

The Strategy is a key document that draws together all that Richmond aims to do to attract, retain, support and develop everyone working with adults requiring social care in Richmond. It is informed by the principles of Putting People First:

- ▶ *Universal Services*: ensuring that anyone who requires care and support can find the services they need in their community-services such as transport, leisure, health, education, housing and access to information and advice.
- ▶ *Preventive services*: supporting people who need a small amount of help, or help for a short period of time, to prevent more problems arising.
- ▶ *Choice and control*: shaping services to meet people’s needs, rather than shaping people to fit the services on offer.
- ▶ *Building social capital*: developing relationships and networks of care and support between individuals, their carers and the local community (friends, family, neighbours or community groups).

The strategy utilises the methodology of the integrated local area workforce strategy (INLAWS) framework, which is a long-term process based on self assessment. Richmond recognises the importance of a strategic overview of workforce planning, learning and development across adult care services. Workforce considerations are integral to service developments and the reconfiguration of services.

Responsibilities

All employers have legal responsibilities to provide a safe and healthy environment for their staff, subcontractors and visiting members of the public. Employers are required to provide a range of training to ensure that their workforce has the correct level of knowledge and skill to operate safely and that a safe and healthy working environment is maintained. Statutory and Mandatory training includes skills and knowledge training for all staff (some specific to certain staff groups

and disciplines) and is determined by the organisation's policies, government guidelines and sector specifications. Mandatory core skills training establishes competence (safety), capability (ability to manage change) and capacity (ability to deal with large and complex workloads) throughout the workforce.

Learning and development is a *shared* responsibility requiring clear strategic and operational leadership, ownership and the engagement of all staff across organisations linking individual performance to organisational priorities and performance. At the centre it is a shared responsibility between the individual worker and their line manager. And it is in the relationship between the worker and their line manager that informed assessments and agreement of professional development are made, as part of a review of their performance. Their development needs can then be met through a range of formal and informal learning opportunities. Blended learning – use and valuing a range of techniques – will be a key way forward; with some strong initial emphasis on basic knowledge and awareness needs being met through an e learning route.

Across the Borough we are committed to promoting and supporting agreed relevant learning and development in many ways; including online learning, DVDs, shadowing, mentoring, action learning sets and sharing knowledge within teams and with peers and managers. Recording this learning is the responsibility of each individual.

Drivers for change

The principal drivers for change over the next 5–10 years will be:

- ▶ **the economic climate** and need for substantial cost savings in the public sector;
- ▶ **changes in the demographic profile of Richmond** which will increase demands on services and decrease the available pool of labour to deliver them;
- ▶ **opportunities provided by technology** to deliver better, more efficient services;
- ▶ **ongoing skills shortages** in specific areas;
- ▶ **the need for the statutory, private and voluntary sectors to work together** for the benefit of people who use services;
- ▶ **the need to involve service users and carers** in planning the workforce;
- ▶ **a philosophical shift in public sector management** from 'command and control' models to 'whole systems' approaches.

The social workforce of the future

The nature and scale of these factors means that the social workforce of the future will be significantly different from that of today. However, some clear outlines of what it will be like are already apparent. Looking at each of the different groups that makes up the workforce, it is possible to see that:

- ▶ **Professionally qualified staff** (*social workers, occupational therapists etc.*) will consist of a smaller number of higher qualified professionals. By 2020 we would expect all of these to be working, on a reasonably fast track, towards post qualifying level and into one of the three post-qualifying specialisations: leadership and management, practice education and mentoring or advanced practice. We also

expect to see a much greater degree of practitioner leadership exhibited by individuals exercising a 'consultant social worker' role.

- ▶ **Vocationally qualified staff** (*care coordinators, supervisors and front line workers*) will undertake the majority of care management functions. Statutory functions will likely remain within local authorities whilst most of the other functions of this group (including the new roles of brokerage, support planning and advocacy) will be provided by the private and voluntary sectors.
- ▶ **Care and support staff** (*personal assistants, etc.*) will undertake most of the paid day-to-day functions of adult social care. The shrinking demographics of the UK workforce, combined with the policies of successive governments to bring a majority into tertiary education, means that most of these staff will continue to be women over 40 and immigrants.
- ▶ **Unpaid carers** (*volunteers and care-givers*) will continue to make up a vital part of the adult social workforce, and under the impact of government policies such as the 'big society' we can expect greater emphasis to be placed on this sector.
- ▶ **Support functions** (*commissioners, workforce development and finance*) will also play an increasingly important role in the design and delivery of services. We expect to see tighter integration of these functions.
- ▶ **Service users** will become increasingly influential in the design and delivery of services as employers.

National policy and initiatives

Guiding strategies

The development of the social care workforce needs reflect the priorities set out in Government policy:

- 1 | *promoting health and emotional wellbeing*
- 2 | *improving quality of life for service users and carers*
- 3 | *making a positive contribution*
- 4 | *increasing choice and control*
- 5 | *freedom from discrimination and harassment*
- 6 | *economic wellbeing*
- 7 | *maintaining personal dignity and respect*
- 8 | *leadership*
- 9 | *commissioning and use of resources*

The Richmond Adult Social Care Workforce strategy has been informed by national strategies for adult social care, as set out within three main documents:

Our Health, Our Care, Our Say – a White Paper which will change the way services are provided, placing greater choice and control in the hands of the people who use them.

Putting People First – a ministerial concordat outlining the aims and values which will guide the transformation of adult social care, putting customers at the centre of services, promoting their own individual needs for independence, well-being and dignity.

Working to Put People First: The Strategy for the Adult Social Care Workforce in England is the Department of Health's Adult Social Care Workforce Strategy. It outlines the workforce implications of Putting People First and provides a high level framework to support the transformation of adult social care through a programme of action to recruit, retain, manage and lead the workforce needed in the future.

Other initiatives

Other documents and initiatives that the strategy has taken into account include:

Equity and Excellence: Liberating the NHS – The recently published White Paper states that power will be devolved from Whitehall to patients and professionals.

Patients will get more choice and control with services being more responsive to patients and designed around them, rather than patients having to fit around services. Local authorities will be given statutory responsibility for bringing health and social care together. It is planned that primary care trusts and strategic health authorities will be abolished by 2013.

Total Place – the concept of services public sector partners building services around the customer rather than around public services as efficiently as possible.

The Seven Common Core Principles to support self care – this document produced by Skills for Care sets out the values that should underpin any adult social care workforce strategy.

Care Quality Commission Essential Standards of Quality and Safety – the Standards of Quality and Safety highlight the importance and value of strong and comprehensive induction and ongoing learning and development.

Qualifications and Credit Framework – the current National Qualifications Framework (NQF) will be replaced by the Qualification and Credit Framework (QCF). There will be many different units (or parts of qualifications) that reflect what workers should ‘know’ and ‘do’ which make up a number of different qualifications.

Refresh of Common Induction Standards – Skills for Care have refreshed the Common Induction Standards to make sure they reflect current policy and practice across the adult social care sector. There are now eight new standards which map to the mandatory units of the new Health and Social Care Diploma.

Social Work Reform Board – the Task Force recommendations are intended to be treated as a whole programme of reform. The health check activity (which each local authority was asked to undertake from early April) has been an important driver in promoting debate within and across organisations.

National Minimum Data Set for Social Care – The NMDS-SC is a fundamental tool for use when developing integrated local area workforce strategies. The workforce strategy has to be based on sound data about the current and future workforce. All existing Richmond data needs to be brought together to build a coherent picture of the current supply of, and demand for, adult social care staff.

Personalisation – the development of Self Directed Support (SDS) and Individual Budgets (IB) is potentially leading to a less regulated and unqualified workforce. Strategies need to be developed to ensure that this workforce has access to appropriate training and development. This will require the social care sector to work harder and in more innovative ways to ensure that the management of risk is incorporated into training and development for the future workforce.

What we need to do

There are three recurring, interlocking themes that run through the whole of the workforce strategy, informing what needs to be done at every level.

The need for integrated working

Over the next few years realising the ‘Big Society’ ideal will not only be a key part of government policy but will also be a practical necessity if national priorities for adult social care are to be met. Service users and carers have a vital role in the design, delivery, monitoring and performance management of services. And much greater emphasis needs to be put on the role of the private and voluntary sectors in the day-to-day provision of care. Furthermore, new commissioning arrangements set out in the Government White Paper will require far greater integration between health and social care.

It is therefore critical that different parts of the workforce are better able to work together. But integrated working is not only about structures and processes, however important these will be. It will also require individuals to think, and be able to co-operate, outside of their departmental or disciplinary ‘silos’. They will need a much better understanding of each others’ roles and responsibilities, a more flexible interpretation of their own job description and a shift in focus from service led to *service user led* approaches.

The need for knowledge management

There is a vast amount of knowledge, experience, skills and resources within the adult social care workforce in Richmond. However most of this is currently inaccessible to most of the workforce.

One of the key planks of the workforce strategy must therefore be the effective management of knowledge so that it is available to all. This needs to include a knowledge management system that:

- ▶ provides a central repository and point of contact for all relevant documents;
- ▶ allows individuals to maintain records of their own training and development (which can then be available to others);
- ▶ facilitates the sharing of knowledge and experience through social media.

Continuous professional development must, in the first instance, leverage the resources already available within the Borough (as well as many excellent freely available materials on the Internet). The use of technologies such as webinars would mean that the requirement for CPD will be reduced to one or two hours per week, whilst simultaneously providing an opportunity for staff to be familiarised with key issues by knowledgeable colleagues elsewhere in the workforce.

The need to instill a culture of continuous improvement

The challenges facing the adult social care workforce in Richmond will require everyone to work smarter, looking for ways in which improvements to the quality,

cost and efficiency of services can be improved. Resources will be put under more and more pressure. Significant efficiencies can be gained through major top down reorganisations. However the greatest scope for long term and sustainable efficiencies will come from the combination of numerous small, incremental, local improvements.

To achieve this, individuals will need to feel empowered and encouraged to look for ways in which they can improve services by making cleverer use of existing resources, spotting and eliminating waste and inefficiencies, and finding ways to achieve the same, or better results, with less cost. They will need the knowledge and tools to do this. They will need support and training to be able to approach their work more creatively. And they will also need a managerial culture that facilitates, recognises and rewards continuous improvement at a micro-level.

Properly achieved, the development of a culture of continuous improvement will help to improve morale in a time of great uncertainty and fear, making staff feel that they can tangibly contribute towards maintaining high service standards and making necessary efficiencies, and that these objectives are not necessarily exclusive.

The vital role of communication

These three overarching themes are tied together by the need for effective communication: sharing knowledge and information will be critical to the success of the workforce strategy. At a time of considerable change, it is going to be increasingly important to communicate developments across the whole of the workforce and ensure that stakeholders are continually updated and able to contribute. However, the kind of communication that is most needed is not the conventional kind of top down mass communication (i.e. email, intranet, publications) but more effective informal communication. Individuals need to be better connected with colleagues elsewhere in the workforce, and to have open and active lines of communication with them.

Within the workforce as a whole, there also needs to be a better appreciation that the style of communication, and the choice of media, is as important as the message itself. A spoken communication is frequently more effective than a written one, and can better convey the values and priorities of the speaker. Long documents that have not been simplified and summarised for the reader impose an unnecessary and time-wasting burden and are frequently skimmed or put aside. And a properly person-centred communication – one that fulfills the criteria of authenticity, congruence and unconditional positive regard – is far more likely to generate engagement, agreement and action than one which adopts a high-handed or impersonal tone. Less is more here: provided that less means more focused, more clearly targeted communications which demonstrate greater awareness of what the readership actually needs to know.

To achieve this, there needs to be explicit commitment from senior management to promoting better communication and training and support for staff to develop their communication skills. The role of communication in furthering all aspects of workforce and service development needs to be understood by all staff.

What the workforce needs to address to achieve better outcomes

workforce group	what do they need to start doing?	what do they need to stop doing?	what do they need to continue doing?
<p>PROFESSIONALLY QUALIFIED (social workers, occupational therapists, etc.)</p> <p>prepare for consultant role</p>	<p>provide practice leadership</p> <p>managing performance</p> <p>brief intervention</p> <p>have clarity about advocacy role</p>	<p>outputs rather than outcomes</p> <p>lacking confidence in professional judgment</p>	<p>safeguarding and risk assessment</p> <p>manage complexity</p> <p>maintaining competence in legislation</p>
<p>VOCATIONALLY QUALIFIED (care coordinators, front-line staff etc.)</p> <p>greater management capability</p>	<p>career development</p> <p>be clearer about skills and knowledge required</p> <p>accurate and up-to-date reporting</p>	<p>high turnover of staff – lack of continuity</p>	<p>deliver regulated services</p> <p>understand requirements</p> <p>provide support to other groups</p> <p>ensuring training and development</p>
<p>CARE AND SUPPORT STAFF (personal assistants etc.)</p> <p>better interpersonal skills</p>	<p>take more responsibility for learning and development</p>	<p>lacking confidence to speak up</p> <p>being isolated – need to be part of a team and community</p> <p>miscommunication (especially where language skills are involved)</p>	<p>deliver services less likely to be regulated (e.g. p.a.)</p> <p>sharing information with others</p> <p>take a service user focused perspective</p>
<p>UNPAID (carers and volunteers)</p> <p>more objectivity about their role</p>	<p>become more actively involved in the care process</p> <p>see themselves as part of a team</p> <p>thinking about handover</p>	<p>being the gatekeepers for the service user</p>	<p>provide a significant part of social care: ‘big society’</p>
<p>SUPPORT ROLES (including commissioning, workforce development and finance)</p> <p>greater responsiveness</p>	<p>more joined-up approach</p> <p>responding to rather than determining service needs</p> <p>integrate with performance management</p>	<p>thinking in terms of silos</p>	<p>maintaining and developing needs led assessment</p>
<p>SERVICE USERS who become employers</p> <p>assume more responsibility</p>	<p>understanding the responsibility of being an employer</p>	<p>seeing themselves as passive recipients of care</p>	<p>taking an active role in their own care</p>

How we will get there

1 | Leadership and management

Good leadership transforms people and organisations, effective leaders engage, enthuse, motivate and inspire people and help maintain focus. It is important for leaders to be passionate and restless for improvement; to recognise other's achievements and engage with their values to encourage all staff to manage and not just avoid risk.

We recognise the importance of leadership and management in enabling and facilitating access to learning and development opportunities.

WHAT WE WILL DO

1.1 | Map out the needs of leaders and managers and develop a programme to meet these needs (including use of national programmes where appropriate). This will be flexible and modular and dedicated to the specific needs of adult social care, offering both whole cohort events and individual mentoring.

1.2 | Help elected members understand the implications of personalisation.

1.3 | Assess the competency requirements for commissioning, contracting and procurement managers building on national competencies and the work being carried out by the National Skills Academy for Social Care.

1.4 | Fully integrate workforce development into organisational planning and strategic developments.

2 | Human Resources

The close integration of Human Resources and workforce development is critical to the success of the strategy. We require comprehensive data about the workforce and its competencies, and better ways of collecting information from managers (e.g. exit interviews, personal development plans, etc.) There also needs to be a greater emphasis on performance management, particularly in appraisals.

Recruitment and retention of staff across Richmond is an issue in certain parts of the workforce, and we will give consideration to policies (such as transport policy) that act as a disincentive to staff from outside the Borough.

Data Management

The Department of Health's Strategic Improving Information Programme (SIIP) Board for adult social care has agreed, in principle, to cease the annual return SSDS001 in favour of supporting the NMDS-SC as the source of data on staff directly employed by social services departments in England. However there is a gap in available data due to the NMDS-SC not being maintained and updated.

The workforce data NMDS-SC provides will enable an understanding of the workforce priorities for employer organisations as well as the priorities for the social care workforce across Richmond. Sharing workforce data and understanding future requirements will ensure the right workforce is in place.

WHAT WE WILL DO

2.1 | Achieve a compliance return of up to 90% on NMDS-SC by April 2011.

2.2 | Require the completion of NMDS-SC in all contracts with independent and voluntary sector providers.

Performance Management

Performance management must be integrated into all service delivery. It has a significant role to play in enhancing organisational performance and instilling a culture of continuous improvement.

Richmond will be using performance management to:

- ▶ ensure that everyone understands their contribution to organisational goals;
- ▶ ensure each individual understands what is expected of them and has the skills and support to achieve this;
- ▶ enhance the individual/line manager relationship, encouraging line managers to build positive relationships based on trust and empowerment.

The keys to the successful application of performance management are:

- ▶ being clear about what is meant by performance;
- ▶ understanding what the organisation is and needs to be;
- ▶ being focused on how individual employees will benefit and play their part;
- ▶ understanding that performance management is a tool for line managers.

WHAT WE WILL DO

2.3 | Ensure all staff have a personal development plan that is reviewed annually as part of the performance management and appraisal framework.

2.4 | Undertake the Social Work Reform Board 'workload health check' by March 2011.

Recruitment, retention and career pathways

The future of the social care sector will be dependent on the workforce, therefore it is important that a cohesive network of recruitment and retention strategies are identified to raise the image of social care for those seeking employment, and robust training packages are created to develop the social care workforce.

There are considerable benefits to developing an agreed career pathway within adult care services. These include:

- ▶ a clear pathway will encourage more people to consider a career in social care;
- ▶ a demonstrating a commitment to continuing professional development have been shown to improve recruitment and retention amongst staff;

- ▶ career pathways will highlight development opportunities for staff;
- ▶ examining current career pathways will highlight potential blocks and other areas for consideration;
- ▶ staff who have access to development and progression are more likely to remain within the service, and morale is more likely to be high. This has a direct benefit for people who use service.

There are some apparent inequalities of opportunity to access training between the different professions. Social Work, for example, has a clear post-qualifying framework with different pathways at different levels. Access to the training, however, is limited. Nurses are encouraged to study for Masters degrees and access to this training is more readily available. Occupational Therapists do not have a post-qualifying framework and have limited access to studying at Masters level.

Health and Social Care have developed in different ways, and as a result there are some inequalities in the opportunities available for members of different professions. For example there are an increasing number of Consultant Nurse posts but there is no equivalent for Occupational Therapists or Social Workers who are employed in adult care services.

WHAT WE WILL DO

2.5 | Develop career pathways which enable young people to gain worthwhile work experience and progress to apprenticeships in social care.

2.6 | Develop frameworks for career progression in social care and social work.

2.7 | Introduce a policy on secondment for staff wishing to progress to professional training and clarify the support available for social workers to undertake post qualifying studies.

2.8 | Set a target for providing practice placements for student social workers (this will require a minimum number of practice assessors).

3 | Continuing Professional Development

The constrained economic climate means that professional development can only be justified if it contributes to better (more effective, higher quality, less costly) outcomes. Since much professional development is now modular, Richmond will seek to support candidates in those modules which are identified as adding value to the service, but look to the candidates to fund and resource any other learning they may need to complete an award.

However Continuing professional development does not need to be linked to formal qualifications, competencies or assessment. The value of CPD for the Borough is in increasing the capacity of the workforce, and much of this can be achieved by leveraging resources available within Richmond, or freely available on the Internet. Formats such as webinars (web based seminars), podcasts, online learning modules and social media can greatly facilitate the sharing of knowledge whilst having a low resource footprint.

Workforce Learning and Development

Practice and training initiatives have been aimed at expanding awareness of the personalisation agenda and creating person-centred, outcome focused plans. Future learning and development will need to be influenced by targeting specific staff at each stage of the self directed support journey.

We believe that closer work between different organisations both within Richmond and jointly with neighbouring authorities that deliver training would potentially deliver economies of scale and help to level up standards. For training that needs a minimum number of delegates to be feasible, broadening the target audience across different employers may enable more regular delivery.

Online Learning

Online learning is a powerful tool and used appropriately it can greatly enhance skills and knowledge. One of the big issues is in evaluating the outcomes for the individual and the organisation in terms of sharing the learning, improved service delivery and confidence in decision making.

The biggest challenge is having the right people in the organisation understand what an e-learning strategy is and how e-learning in its various forms differs from traditional classroom-type training. Linked to this is ensuring that an appropriate mix of formal and informal web-based, traditional and blended learning/training mediums are in place that take account of individual learning styles, and being realistic about what these can deliver and what conditions may need to be in place for that learning to be maximised

WHAT WE WILL DO

- 3.1 | Identify and develop opportunities for joint training and development** programmes for those responsible for integrated working. We will have specific discussions with private and voluntary sector organisations to identify opportunities for developing shared programmes of work.
- 3.2 | Explore possible synergies for commissioning joint training** with neighbouring local authorities.
- 3.3 | Develop an e-learning strategy** with a basic suite of courses provided free by Richmond for all social care providers including personal assistants.
- 3.4 | Encourage wider use of SCILS** (the Social Care Information and Learning Services database) across the whole workforce.
- 3.5 | Promote the Richmond Care Providers Partnership** to enable independent providers to access sources of funding for learning and development.
- 3.6 | Encourage local providers to share information about their training** by producing a web based directory of all the current learning and development opportunities available across Richmond and pan-London.
- 3.7 | Maintain a robust consultation mechanism** which builds upon the Citizen Leadership programme.

4 | Knowledge management

Knowledge is increasingly being recognized as the new strategic imperative of organizations. It is the process through which organizations generate value from their intellectual and knowledge-based assets. Most often, generating value from such assets involves sharing them among employees, departments and even with other organisations in an effort to collect and disseminate best practices. Knowledge management requires the systematic process of finding, selecting, organizing, distilling and presenting information in a way that improves an employee's comprehension in a specific area.

Appropriate use of technology is critical to the management of knowledge across the workforce. At the very minimum, an IT infrastructure will be put in place to support:

- ▶ a central repository for documents that is easily accessible by the whole workforce;
- ▶ the ability for every member of the workforce to maintain a learning and development profile which details any training and qualifications they have completed. The currency of the information in the profile will be considered in employee's yearly appraisals;
- ▶ the opportunity for social media interaction, and to create communities of interest for sharing best practice and providing support across the workforce;
- ▶ a learning management system that integrates with online learning systems.

WHAT WE WILL DO

4.1 | Establish the Richmond online Learning Academy to provide a shared space for the workforce to share learning and development resources, improve information sharing and key documents, innovative practice and leadership.

4.2 | Develop a social media usage policy to ensure that staff are able to confidently and responsibly use social media. We will identify appropriate networks for staff to contribute to, such as the Local Government Improvement and Development communities of practice.

4.3 | Identify and share case studies, examples of good practice and factsheets.

4.4 | Give the whole workforce a copy of 'Personalisation: a rough guide' (SCIE: 2010).

5 | Communications plan

The communication plan will ensure that all stakeholders are kept up-to-date with the progress of projects and any new developments, through a variety of different media. Although the launch of the workforce strategy is important, it is the ongoing communication about and promotion of workforce development that will drive a shift from initial awareness to wide-scale support of the workforce strategy vision and actions.

Knowledge is built up in stages, and different key messages and information are appropriate for each stage. A good communication plan will distribute layers of information over time rather than bombarding audience groups with too much at once and risk alienating them.

The focus groups and surveys indicated that staff wish to be kept informed and updated about developments and be able to share and promote good practice.

WHAT WE WILL DO

- 5.1 | Make communications skills part of the training and development** of every member of the workforce.
- 5.2 | Embed key messages about personalisation** in induction and training programmes.
- 5.3 | Put mechanisms in place to answer questions** and respond to feedback and suggestions.
- 5.4 | Establish a monthly Information Exchange** to encourage the sharing of good practice.
- 5.5 | Broadcast a regular series of webinars** by senior managers and others with relevant expertise.