The principles of workforce integration
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Skills for Care, West Gate, 6 Grace Street, Leeds LS1 2RP
www.skillsforcare.org.uk

Think Local, Act Personal, Second Floor, 206 Marylebone Road, London NW1 6AQ
www.thinklocalactpersonal.org.uk

Skills for Health, 1st Floor, Goldsmiths House, Broad Plain, Bristol BS2 0JP
www.skillsforhealth.org.uk

Local Government Association, Local Government House, Smith Square, London SW1P 3HZ
www.local.gov.uk

NHS Employers, 2 Brewery Wharf, Kendell Street, Leeds LS10 1JR
www.nhsemployers.org

Association of Directors of Adult Social Services, Local Government House, Smith Square, London SW1P 3HZ
www.adass.org.uk

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The principles of workforce integration

Successful workforce integration focuses on better outcomes for people with care and support needs.

Workforce integration involves the whole system.

To achieve genuine workforce integration, people need to acknowledge and overcome resistance to change and transition. There needs to be an acknowledgement of how integration will affect people’s roles and professional identities.

A confident, engaged, motivated, knowledgeable and properly skilled workforce supporting active communities is at the heart of workforce integration.

Process matters - it gives messages, creates opportunities, and demonstrates the way in which the workforce is valued.

Successful workforce integration creates new relationships, networks and ways of working. Integrated workforce commissioning strategies pay attention to each of these, creating the circumstances in which all can thrive.
Introduction

1. The Principles

Principle 1: Successful workforce integration focuses on better outcomes for people with care and support needs

Principle 2: Workforce integration involves the whole system

Principle 3: To achieve genuine workforce integration, people need to acknowledge and overcome resistance to change and transition. There needs to be an acknowledgement of how integration will affect people’s roles and professional identities

Principle 4: A confident, engaged, motivated, knowledgeable and properly skilled workforce supporting active and engaged communities is at the heart of workforce integration

Principle 5: Process matters—it gives messages, creates opportunities, and demonstrates the way in which the workforce is valued

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Introduction

Better care and support

People with care and support needs want care provided in ways that make sense to them, that reflects their lives, their needs and their wishes. This is best achieved through integrated working, with practitioners working together to support individuals, their families and carers.

These principles have been developed to support practitioners, managers and organisations to think through what is meant by integration, and in particular, how workforce development can contribute to its introduction and implementation and sustainability.

The principles are the result of an exploration of the existing evidence, an ongoing dialogue between partners, and listening to people and organisations doing workforce integration now.

The principles are about working together in any context. For example:

■ between adult social care and health or housing or children’s services
■ between organisations, departments or practitioners and families or carers
■ between any of these and people with care and support needs.
■ The principles can also be used when thinking about large scale organisational change or looking at individual, or team, practices.

What is workforce integration?

Workforce integration is about working together to meet people’s needs and enabling people with care and support needs to live as independently as possible. Its purpose is to improve the quality of care and support by keeping the individual, not the organisation or particular profession, as the driving force behind care and support. Adopting an integrated approach enables workers to understand each other’s roles and contributions, and to build support networks around individuals. At a strategic level, integration creates a more seamless experience for individuals.

There is no single correct way to implement the principles. How they are adopted will depend upon circumstances: local needs, resources and priorities must drive the most effective model of workforce integration that best supports local people.

Who are the Principles of Workforce Integration for?

Like all effective workforce development, these principles assume that supporting, nurturing and valuing the workforce will give workers the confidence, knowledge capability, motivation and enthusiasm to deliver the best care and support. The role of workforce development is pivotal in achieving this, and these principles, each with a checklist to support implementation, and further practical guidance, have been designed to guide and support those with a workforce development element to their role.
The principles will be of use to anyone interested in promoting integration for better care and support. This might include those working in social care, health and wellbeing (including individually commissioned services such as counselling and complementary therapies), or housing in any role, for example managers, front line workers including PAs and individual employers of PAs. They may also be helpful to family members and carers, and can also be used more widely by others whose work interacts with care and support, for example leisure, transport, police, voluntary interest groups, or retail.

The principles describe the ways in which all workers, practitioners and managers can be enabled to contribute to creating and sustaining a confident and high quality workforce, able to deliver person-centred excellent integrated care and support.

How can the principles help to develop integrated care and support?

As well as helping in thinking about and discussing integration, these principles address some specific workforce related questions:

- How can workers who are being asked to work in a team with people from different professional backgrounds be supported to deliver real change?

- What is the role of workforce development in developing strategies to steer the path to workforce integration?

- How can workforce development opportunities be shaped to ensure that the goal of integrated care and support with people at its heart is paramount?

- What is the role of workforce development in ensuring that resources are identified, developed and used to their maximum benefit in achieving value for money alongside excellence in care and support?

- How can managers at all levels ensure that workers are involved, engaged and listened to, and create opportunities for learning and sharing across boundaries as well as within teams?

- How can individual workers best be supported to equip themselves to grow as practitioners so that they become confident, knowledgeable and capable of contributing to and delivering high quality integrated services and co-produced care?

Jim Thomas, Programme Head – Workforce Innovation, Skills for Care
Jim.thomas@skillsforcare.org.uk

Christina Pond, Executive Director – Core Contracts and Policy, Skills for Health
Christina.pond@skillsforhealth.org.uk
1. The principles

Principle 1  Successful workforce integration focuses on better outcomes for people with care and support needs.

Developing a common goal around better outcomes for people with care and support needs creates a single vision to underpin transformation.

It is easy to lose direction or get pulled by competing priorities, but continually refocusing on the purpose of the care and support being provided brings everyone back together.

Integrating the workforce, including the range of different practitioner skills, around the needs of each individual being supported will result in better use of resources, and support that is tailored to that person’s needs.

The views and experiences of people with care and support needs, and of family or friends carers, are an integral part of developing new ways of working.

Creating person-centred provision is not just about workforce reconfiguration. It is about how the team operates around the individual, working together to achieve best outcomes.

and further practical guidance, have been designed to guide and support those with a workforce development element to their role.

Workforce development checklist

- Does the workforce commissioning strategy reflect what people with care and support needs and their families and carers want? Does this inform all learning and development?

- Are people with care and support needs and families and carers involved in the conversations about workforce integration? Does this guide all decisions?

- Is there a shared vision of integrated care and support that places people with care and support needs at its heart? Have opportunities been created for all workers to build this shared understanding and agree a set of guiding principles?

- Are the people with care and support needs involved appropriately in all aspects of workforce development?

- Have equality and diversity issues been addressed?
Principle 2  Workforce integration involves the whole system.

Bringing together frontline workers without integrating all of the systems that support and enable those workers is not sustainable. It will create conflict and practical difficulties, and make the workers feel unsupported.

Integrating resources, responsibilities and control creates a clear message that each organisation is committed to the transformation.

Integrating resources will minimise duplication, and help ensure that every part of the system is working effectively.

Bringing in new service arrangements will disrupt some long established informal networks; building new ones should be viewed as a priority.

The system should be viewed in a non-hierarchical way, each person in the system carries some responsibilities, and all are mutually dependent upon each other for success.

Workforce development checklist

- Is there a clear picture that identifies all of the stakeholders?
- Has everyone who is affected by the changes been identified?
- Have all the impacts of the transformation been fully considered, including potential unintended consequences? Are shared services aware of the integration proposals?
- Have opportunities been created and time allowed for new relationships and networks to evolve?
- Have opportunities been created for people from different parts of the system to learn together?
- Are the different organisations in the partnership working together at every level? Are all stakeholder groups engaged at every level in making decisions and managing change? Have ways been found to help different stakeholder groups understand the culture, issues and concerns of other stakeholders?
- Is there an environment that encourages participation and constructive criticism? Is the role of workforce development clear in this?
- Have systems, policies and procedures been designed to support the goal of co-ordinated and integrated care and support that meet people’s needs? Are all stakeholders invited to contribute to their development?
- Does avoiding duplication make the best use of resources? How does workforce development contribute to identifying and sharing workers’ skills?
Principle 3  To achieve genuine workforce integration, people need to acknowledge and overcome resistance to change and transition. There needs to be an acknowledgement of how integration will affect people’s roles and professional identities.

Change and transition can be debilitating if it is perceived to be threatening. Workers need to feel safe, valued and supported. Their anxieties should be freely aired and responded to.

Where job roles change, workers can feel de-skilled. Identifying and meeting learning needs should be part of any strategy employed.

Safe environments enable people to innovate, take risks, build new models and ways of working, and share learning to enhance practice.

A balance needs to be struck so that workers can maintain their sense of professional identity at the same time as working across boundaries that are increasingly blurred. To achieve this, roles, responsibilities and accountability need to be clearly described.

Workers who feel their perspectives and skills are recognised and valued by their colleagues and across organisations are more likely to feel confident, motivated and engaged with the changes.

Professional supervision and the opportunity to manage continuing professional development need to be incorporated into any new arrangements.
Workforce development checklist

- As new roles, relationships and ways of working develop, have the learning and other needs of individual workers been considered? Is there a system in place to identify learning and development needs? Has the impact of change upon individuals been acknowledged and incorporated into plans?

- Have resources, including funding, been set aside to meet those needs?

- Are there built-in opportunities for workers with different professional backgrounds to share experiences and concerns, and learn from each other?

- Are there built-in opportunities for people from the different parts of the ‘system’ to come together and talk about the issues from their perspective, so that people can problem-solve together? Is there a no blame culture in which individuals can safely express concerns, anxieties and mistakes in a constructive and learning environment?

- Does supervision provide personal as well as practice support and guidance?

- Are arrangements in place to enable professional as well as team supervision?

- Don’t assume that senior managers and senior professionals have the knowledge and skills to deliver an integrated workforce—everyone has learning needs. Can you be certain the people are managing well?
Principle 4

A confident, engaged, motivated, knowledgeable and properly skilled workforce supporting active and engaged communities is at the heart of workforce integration.

The most valuable resource in any organisation is the workforce. Attending to workforce issues, identifying learning needs, addressing issues of professional identity and recognising infrastructure issues such as employment arrangements, gives a clear message about the value placed upon workers.

Successful implementation of integration depends upon workforce issues being addressed from the beginning. Workforce issues cannot be added at the end, they need to influence discussion and decision-making, and need to be included in the process of resource allocation.

An environment in which workers feel safe and confident to raise questions, express concerns, talk about their experiences and make suggestions for service improvement based on their experience and relationships with people they support will create trust and help them and colleagues to feel supported.

Acknowledging and valuing the expertise that workers bring to their changing workplace environment will make them feel valued and listened to.

Creating a learning environment that draws on the experiences of workers will maximise innovation and appropriate risk-taking, and support the development of new models and ways of working.

People learn in different ways and at different paces, and are affected by change to varying degrees. The design and implementation of integrated strategies needs to reflect this, so that things are paced appropriately, with individual workers’ needs identified and met in a range of ways.

‘Champions’ play an important role in the implementation of any transformation. Having champions at every level will help in implementation. Motivated and enthusiastic workers should be identified, nurtured and encouraged to take on this role.
Workforce development checklist

- What has been put in place to support workers’ new learning needs and their responses to change?
- How are workers given the time and space to raise questions and express concerns?
- Is everyone engaged at all levels and from a diverse range of backgrounds and cultures?
- How are champions being supported?
- Is co-production at the heart of workforce integration and how workforce integration is being delivered?
- Are different workforce cultures acknowledged and valued?
Principle 5  Process matters - it gives messages, creates opportunities, and demonstrates the way in which the workforce is valued.

Give attention to the process, it is by getting this right that ownership, commitment and trust will be developed and the likelihood of sustained success will be increased.

Good communication, keeping everyone informed and appropriately involved in decision-making, is the foundation of an effective strategy.

Begin by looking for the resources and experiences that are already there, as building on these demonstrates that individuals’ contributions are valued. Create opportunities for people to learn from each other.

The ways in which senior workers behave and act should mirror the co-operative, open and motivated approaches that will be expected of frontline workers

Workforce development checklist

- Is there a multi-organisational approach at every stage and level? Do workforce development specialists from all partner organisations work together to create and support the integration of care and support?

- Are workforce issues and strategies discussed and agreed across all partners?

- Is there a shared goal and shared approach to problem solving?

- Are people who need care and support and family and carer perspectives and experiences central to every stage and decision?

- Does everyone who is affected have a voice? Are they appropriately influential?

- Is care taken not to blame individual workers for issues that arise as part of the process of change?

- Are there accessible and open communication channels?

- Is language jargon-free and understandable by everyone?
Principle 6  Successful workforce integration creates new relationships, networks and ways of working. Integrated workforce commissioning strategies give each of these attention, creating the circumstances in which all can thrive.

Informal networks are critical to workers, providing them with information, support, ideas and quick responses. Reconfiguring services will interrupt existing networks.

Opportunities need to be created to ensure that new relationships can thrive.

The ways in which different professional groups and organisations relate to each other will change with integration. This can feel threatening and create insecurity.

The needs of each professional group need to be attended to, to enable a continued sense of professional identity and to ensure continuing professional development. At the same time, members of newly created teams and services should have the opportunity to share understandings, perspectives, priorities and limitations so that everyone feels comfortable in their role, and with the roles of others.

The new ways of working that emerge with integration may create specific learning needs to enable individuals to work effectively. These need to be identified and attended to.

There is richness in the diversity created within integrated teams and organisations; facilitated opportunities should be created to exploit this, so that people can learn together as new approaches evolve.

**Workforce development checklist**

- Is attention given to the development of new teams? Are there opportunities for members to learn from and about each other?

- Are there opportunities for people from different teams and with different experiences to come together to learn from and about each other?

- Is attention given to creating effective communication systems, including identifying jargon and creating a common language for everyone, including people with care and support needs?

- Has time been allowed for reconfigured systems to bed down? Is there regular feedback so that experiences can be used to review the changes and identify learning needs?

- Are workforce development issues and opportunities being looked at as a whole across all partners?
2. Practical guidance to support the Principles of Workforce Integration

Introduction

This section provides a selection of models and guidance to help organisations and individuals when thinking about how to ensure that the learning and development needs of workers are identified and met as care and support shifts to more integrated approaches. It looks at the different aspects of working together, from strategic and individual levels, and unpicks the ways in which workforce development can be influential.

2.1 What people with care and support needs want

Keeping what people receiving care and support want at the forefront of all planning about integration will help in achieving a successful outcome.

People receiving care and support have given very clear messages about how they want to work with service providers. Crucially, they want things to be well co-ordinated, and they want to relate to one set of people, not have lots of different people providing their care who do not work together.

Members of National Voices, the national coalition of health and social care charities in England, agreed the following statement about what well co-ordinated care and support mean to them:

“My care is planned with people who work together to understand me and my carer(s), put me in control, co-ordinate and deliver services to achieve my best outcomes.”

Their “I” statements, which can be read in detail at www.nationalvoices.org.uk, include:

- The professionals in with me talked to each other. I could see that they worked as a team.
- I always knew who was the main person in charge of my care.
- I had one first point of contact. They understood both me and my condition(s). I could go to them with questions anytime.
- That person helped me to get other services and help, to pull everything together.
I was involved in discussions and decisions about my care and treatment as I wanted to be.
When I used a new service, my care plan was known in advance and respected.
When something was planned and agreed to, it happened without me having to chase around for it.
When I moved between services or settings there was a plan in place for what happened next.
I was still allowed to see and work with, as appropriate, preferred professionals who I already knew and who knew me.

This is echoed in TLAP’s (Think Local Act Personal) Making it Real, marking progress – key themes and criteria, particularly in statement three on flexible integrated care and support:

- I am in control of planning my care and support
- I have care and support that is directed by me and responsive to my needs
- My support is co-ordinated, co-operative and works well together and I know who to contact to get things changed
- I have a clear line of communication, action and follow up.

See www.thinklocalactpersonal.org.uk/browse/mir/

2.2 Dialogue and co-production

Including everyone who is affected by change maximises the chances of individual commitment and, therefore, of success. By working together it is possible to draw on the strengths and experiences of all stakeholders to create effective and improved care and support that meets the expectations of the people who need it. Part of the role of workforce development is to encourage those conversations, to contribute to the creation of a learning organisation, where people feel valued and confident to participate in the changes.

Co-production\(^1\) is a way of working with people (workers and people receiving care and support) that sees them as experts in their own lives. Their expertise may come from professional knowledge, or personal experience. By talking to and including people their point of view becomes important and helps to shape decisions. In co-production, people’s strengths (assets) are utilised in solving problems or achieving goals.

SCIE (2013) identifies six key features of co-production approaches:

- The people using care and support are seen as assets with skills
- Barriers between the people using and providing service are broken down
- People’s existing capabilities are utilised and built upon
- People work together to achieve shared goals (mutuality) and everyone who contributes gets something in return (reciprocity)
- Utilise peer and personal support networks alongside professional networks
- Support organisations in becoming agents for change not just service providers.

Stages of co-production are:

1. Co-design (planning stage)
2. Co-decision (resource allocation)
3. Co-delivery (partners working together)
4. Co-evaluation (against jointly agreed goals).

\(^1\) Co-production is discussed in more detail in Skills for Care’s Principles of Workforce Redesign, accessible at www.skillsforcare.org.uk/workforceredesign
Understanding our new partners

What has to change, what works well?

Starting with what has already worked, how can the future look?

How can the ideas and experiences be shaped into possibilities?

Agreeing on the shape of an integrated service that meets the agreed outcomes

Designing the integrated service

Delivering integrated care and support

Reviewing and revision

Central Questions

What do we do well?

What do we all bring?

What are the constraints?

What is the flexibility?

How will the systems reflect changing work patterns?

What are the agreed outcomes? How are they monitored?

How do people receiving care and support experience the service?

Do my skills enable me to work in an integrated way?

What are the resources/strengths?

What has to be achieved?

Creating opportunities for shared learning & development & team building

What is the new skill set?

What does each team member bring?

What is my role?

How do I support my colleagues?

Knowing what has to change and why

Other examples of good practice

How will these benefit people with care and support needs?

Listening to each other: including everyone in the conversation

Good workforce development means learning from everyone’s experience and valuing what all stakeholders have to say.
Workforce specialists need to be influential in many areas. The boundaries between “workforce” “service” and “organisation” are blurred, and responsibility for workforce development spreads beyond the specialist area.

While some workforce issues clearly lie with the human resources or workforce or training arena, all practitioners, whatever their focus, should be mindful of nurturing a confident, competent and high quality workforce.

Creative learning organisations rely upon every worker to contribute to the evolution of how the organisation’s people are supported, and this means building a workplace environment in which everyone feels valued, listened to, well informed, confident and competent.
Viewing workforce transformation through the lens of a whole systems approach, makes it easy to see how whole organisations have to work together to achieve transformation.

Having workforce issues represented at the most senior strategic level also helps to create a unified, integrated approach to workforce issues, rather than a fragmented, single organisation-based approach that is reactive rather than proactive. It ensures that the needs of workers become integral to the development of integrated services.

2.4 Integrated workforce commissioning

Integrated workforce commissioning strategies describe the planning and actions needed to align workforces across different teams, specialisms or agencies. It is here that all of the strands of integrated provision come together. By placing a strong emphasis on workforce needs, creating opportunities for sharing, learning, building trust and working with the different organisational and professional cultures it shapes the environment to ensure that resources are used efficiently. The workforce is thus equipped to work confidently and well, and the care, and support they give takes on a more integrated focus.
An integrated workforce commissioning strategy identifies and meets the learning and human resource needs of all of the workers across the whole system, with each organisation working in partnership.

Successful integrated workforce strategies should:
- be part of wider organisational strategies and plans
- be integrated across partner agencies and across different internal sectors, and build systems that foster partnership working
- have an underpinning role in developing integrated service systems, focusing on the workforce
- have clear and tangible priorities that are linked to business plans
- address cultural issues
- address managerial issues
- have the resources to support change and development.

2.5 Supporting people in their roles

Good workforce development is about maximising the potential of workers. This is achieved by creating the circumstances in which each worker feels confident about learning and sharing concerns, valued by their organisation, competent to undertake their role, and comfortable about stepping outside of it when needed.

For all of these things to happen, it is essential that the whole organisation, not just those with a workforce development remit, recognise the need to create appropriate environments and opportunities. Recognising the unique contribution of workforce development specialists, and including them as core contributors to service transformation, is an important part of achieving this.

Organisations should not only consider the learning requirements of individual workers, they should also harness their existing experiences, knowledge and ideas to create better models of care and support.

By being fully engaged at a strategic level from the very beginning of the process of developing integrated care and support, the needs of workers as individuals can be recognised and met.

By creating the right opportunities and environment to support and enable individuals and groups, it is possible to:

- Build opportunities for newly forming teams to come together, to learn from and about each other and share concerns, ideas and experiences. Bringing people together across traditional boundaries affirms the new relationships and approach, helping to create a new sense of ‘team’ and belonging. As people work together a sense of trust, essential to success, can be built.

- Demonstrate the importance of a whole systems approach, showing the connections across both organisations and functions. The more people are brought together, the earlier and quicker new informal networks will develop.
Create a sense of shared goals and values, as people are able to explore each other’s professional value bases and priorities. Having shared goals and approaches enables teams to take control of how they progress, monitoring and reflecting on their successes, and learning from ‘mistakes’ so that they can continue to hone and improve their service.

Build in opportunities for workers to explore their anxieties and concerns about change, so that concerns can be dealt with and positives maximised. Creating a safe place to air worries, explore skill gaps and discuss practice issues means that teams will experience less defensiveness and show more learning and service improvement.

Identify the learning needs of individuals within the new team, at an individual level – through supervision models that incorporate a continuing professional development element – and through group activities. Having a proactive and enabling approach to ensuring workers feel appropriately skilled will increase confidence, make them feel more valued, and fostering a creative learning environment.

Provide learning opportunities in a variety of ways means that colleagues can support each other and learn in ways that suit them, and that learning can be provided cost effectively. Varieties include formal training, mentoring, action learning, e-learning, team development, shadowing, joint working, and exploring examples of best practice.

Ensure there are ongoing opportunities for workers to share their experiences, and learn from others across the integrated service, creating a learning environment.

Keep workers up to date with changes in the organisation, and with decisions and the reasons for them, and make sure that practitioners have feedback showing them how their contributions are used in reviewing and planning. If people feel listened to they will feel valued, motivated and enthusiastic.

2.6 Workforce integration and workforce development

Workforce integration is the process of bringing together workers from different settings to reshape care and support. A workforce can only be truly integrated if it is viewed as a whole entity, crossing traditional boundaries. This can happen only where workforce issues permeate all planning and development activity and are not seen as a separate issue.

Achieving this requires: a sense of collective responsibility for care and support, with clearly articulated and shared goals, underpinned by a shared value system that centres on people who need care and support and their families and carers

a good understanding of the different cultures and professional expertise of others

that people who need care and support, and their family and carers, experience of the team as a seamless whole, where their needs shape the pathway they follow

that knowledge, experience, expertise and understanding is shared so that there is a deeper understanding of how needs can be identified and met
that systems and structures are aligned to minimise duplication, and work well together

that strategies and plans are developed, owned and shared across all of the organisations in the partnership.

2.7 Integrated leadership

Leadership, and leadership style, is pivotal in ensuring success in developing new integrated organisations underpinned by integrated workforces. Reorganising alone will not create integrated working, and thus will not lead to the improvements being sought.

The creation and maintenance of a positive qualitative difference, requires a strong leadership style that is inclusive, that promotes the values of integration and that creates processes that support that difference. The NHS Leadership Qualities framework and the National Skills Academy for Social Care’s Leadership Qualities Framework are both useful ways of helping people think through leadership issues. The National College and Children’s Workforce Network (2009) found that effective leaders:

- promote a no blame culture
- foster an atmosphere of trust and belief
- use data well to pinpoint duplication and improve outcomes
- see the big picture and what the connections are
- encourage others to lead and innovate
- help develop new leaders.

CAIPE (2007) research on inter-professional practice found that effective leaders also:

- knew the big picture
- had a vision for the change, and used this to build a shared vision, fostering creativity and innovation
- valued and encouraged collaboration
- identified and developed enthusiasts
- valued people’s contributions and expertise
- created social mechanisms that achieve and sustain a collaborative culture
- made sure there was a connection between education commissioning and service development, and that all changes were undertaken in partnership.

“True integration is not simply a structural or location issue. It is a visible, practical and results-producing model of effective collaboration - the new way of working. An integrated team will achieve improvements in performance by developing the right culture and adopting the behaviours needed to support and reinforce that culture.”

www.jcpalliancing.com
2.8 Features of integrated teams

Historically, integrated teams have tended to include health and social care practitioners, for example community mental health teams. Members of integrated teams may have included nurses, occupational therapists, social workers, and physiotherapists, among others.

Current thinking about the best ways to meet people’s needs incorporates a wider range of practitioners, such as housing specialists, community development workers, or any other set of practitioners who, by being brought together, can offer care and support in a seamless and person-centred way.

An integrated team is much more than a set of practitioners working in the same place but continuing with their practice more or less as they previously did. An integrated team operates in an inter-professional, collaborative way, with members working together to use their resources effectively to enable and empower people who need care and support. It is characterised by having a clear, shared direction, with open and honest communication built on mutual trust and respect. In an integrated team people know their lines of accountability and responsibilities, and there are clearly defined roles that everyone understands.

Collaboration and innovation are key to effective team working. It requires not only the professional expertise that each individual brings with them, but also an approach that incorporates:
- support between team members
- sharing knowledge, experiences and ideas
- a common set of values
- trust, openness and honesty, so people feel safe to share concerns and gaps in their knowledge
- listening to each other
- a flexible and positive attitude to new ways of working
- openness and enthusiasm about change that provides better care and support
- a sense of professional identity at the same time as a willingness to push boundaries.
3. Measuring the impact on provision

The success of any workforce development initiative is ultimately measured by its impact upon the experiences of people receiving care and support. This means seeing integration as a way to achieve what people using services want. Local discussions will highlight specific goals, but there are also national markers and statements that can be drawn upon.

National Voices says integration means:

“...services that are organised around, and responsive to our human needs” which means NOT: “falling through gaps…organisational barriers and boundaries that delay or prevent access to care”

“We want services to be seamless and care to be continuous.”

“..primary and community health services, social care services, and services from voluntary organisations should all mesh together to help us succeed in managing our lives and conditions.”

2012

National Voices has also produced a set of statements from people using care and support services that can help in measuring impact, see www.nationalvoices.org.uk

TLAP’s Making it Real, markers for progress cover six key areas:

- Information and advice
- Active and supportive communities
- Flexible integrated care and support
- Workforce
- Risk enablement
- Personal budgets and self-funding

The statements were drawn up in partnership with people receiving care and support and with provider organisations, and include “what I want” statements alongside a breakdown of what this means in practice.

The website includes a number of resources for introducing and monitoring change.

www.thinklocalactpersonal.org.uk
Measuring the impact of workforce development is the key function of the workforce outcome measurement model. Skills for Care has developed an Outcomes Measurement Model for exactly this purpose. It identifies six key stages:

1. Identify Workforce Development Requirements
2. Design cost Effective workforce Solution
3. Identify Change Required
4. Identify Issues and Desired Outcome
5. Review and Redefine
6. Implement and Monitor Solution

This cycle is described in detail with prompt questions alongside example of how it has been used in practice.


The Analyse-Plan-Do-Review cycle is described with practical guidance, and with templates to support implementation, in Skills for Care’s Practical approaches to workforce commissioning.


Another approach is the Six Steps Workforce Planning methodology, which also helps explore integrated workforce planning, linked to workforce commissioning. Further information can be found at

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