NHS

Cheshire and Merseyside

Mental Health
Workforce Strategy

2025 – 2030

This, the first, Cheshire and Merseyside Mental Health Workforce Strategy represents a vital step in our commitment to improving the mental health and wellbeing of our community. In an era where mental health challenges are increasingly prevalent, having a well-equipped and supported workforce is paramount to ensuring that individuals receive the care and support they need, when they need it.

This strategy recognises the critical role of our mental health workforce in providing high-quality, accessible, and culturally sensitive services. It sets out a clear vision for a future where our workforce is not only adequately resourced and trained but also valued, respected, and empowered to deliver the best possible care.

Our key priorities include attracting and retaining skilled professionals, fostering a culture of continuous learning and development, promoting well-being within the workforce, and ensuring equitable access to mental health services for all. We will achieve this through collaborative partnerships across all sectors, including healthcare, education, social services, emergency services and voluntary and community organisations.

This strategy is more than just a plan; it's a roadmap to a healthier, more resilient community. By working together, we can create a system where mental health is prioritised, stigma is reduced, and individuals feel empowered to seek help and support.

We are confident that this strategy will make a real difference in the lives of individuals, families, and our community as a whole. We are committed to its implementation and to working collaboratively to achieve its goals.

As Senior Responsible Officer for Cheshire and Merseyside mental health services, I would like to extend my sincere thanks to Vicky Allen for leading the development of this workforce strategy, which I have no doubt has far-reaching value beyond mental health alone. I would also like to thank the wider Cheshire and Merseyside MH Programme Team, and colleagues within stakeholder organisations who have provided valuable insight and contributed to the development and testing of accompanying workforce frameworks, tools, and shared principles to shape how we think about, and plan for our workforce, for years to come.

Tim Welch

Contents

Page

Introduction and scope

Introduction and scope

This strategy outlines the commitments and the approach to be taken that will contribute to the delivery of an inclusive, engaged, sustainable and flexible mental health workforce. It sets out why these commitments have been chosen and how working in collaboration across the Integrated Care System (ICS), in partnership with all key stakeholders and those who access mental health, we can strive to improve both outcomes and experiences and reduce inequalities for our population.

Our ambition in the Workforce Strategy for Mental Health directly translates into a Strategic Mental Health Workforce Plan that is a key component of the strategy. The actions in the plan will come together to deliver a diverse, motivated, engaged and valued and sustainable health and social care mental health workforce, with the capacity, competence and confidence to meet the needs of the people of Cheshire and Merseyside. Specifically, this means that:

| We will have a workforce with the right values, behaviours, knowledge, skills, competence and confidence to deliver evidence-based care, and support people's wellbeing | We will have a workforce in sufficient numbers to be able to deliver responsive mental health services that meets the needs of the people of Cheshire and Merseyside. | We will have a workforce that is reflective of the population's diversity and cultural identities. | We will have a workforce that feels valued and is valued | We will have a workforce that can provide effective person centred, trauma informed, rights based compassionate services and support |

What do we want our Strategy to do?

- Set out the vision for the future workforce and the high-level actions that need to be taken to ensure that we achieve that vision

- To be aspirationally realistic (Achievable with elements of flexibility) yet simple, accessible, easily understood

- Build and expand on our previous successes and continue to transform services that improve the health and well-being of the people of Cheshire and Merseyside

The strategy sets out how we will:

- Put in place a new approach to strategic workforce planning;

- Support the reduction in demand on service and focus resources on those who most need them;

- Support our workforce to develop new approaches to supporting communities;

- Work together as partners to provide a more joined up mental health workforce;

- Diversify and widen routes into careers in mental health (e.g. apprenticeships), develop new routes into practice for established professionals and establish new roles to expand the mental health workforce;

- Inspire and attract, recruit, train and retain the workforce by making careers in mental health more attractive;

- Transform our approaches to recruitment routes and working practices

All organisations that provide mental health services to the population of Cheshire and Merseyside should consider the commitments and actions in this strategy in their local workforce plans, tailored to meet local gaps and issues and creating local workforce solutions.
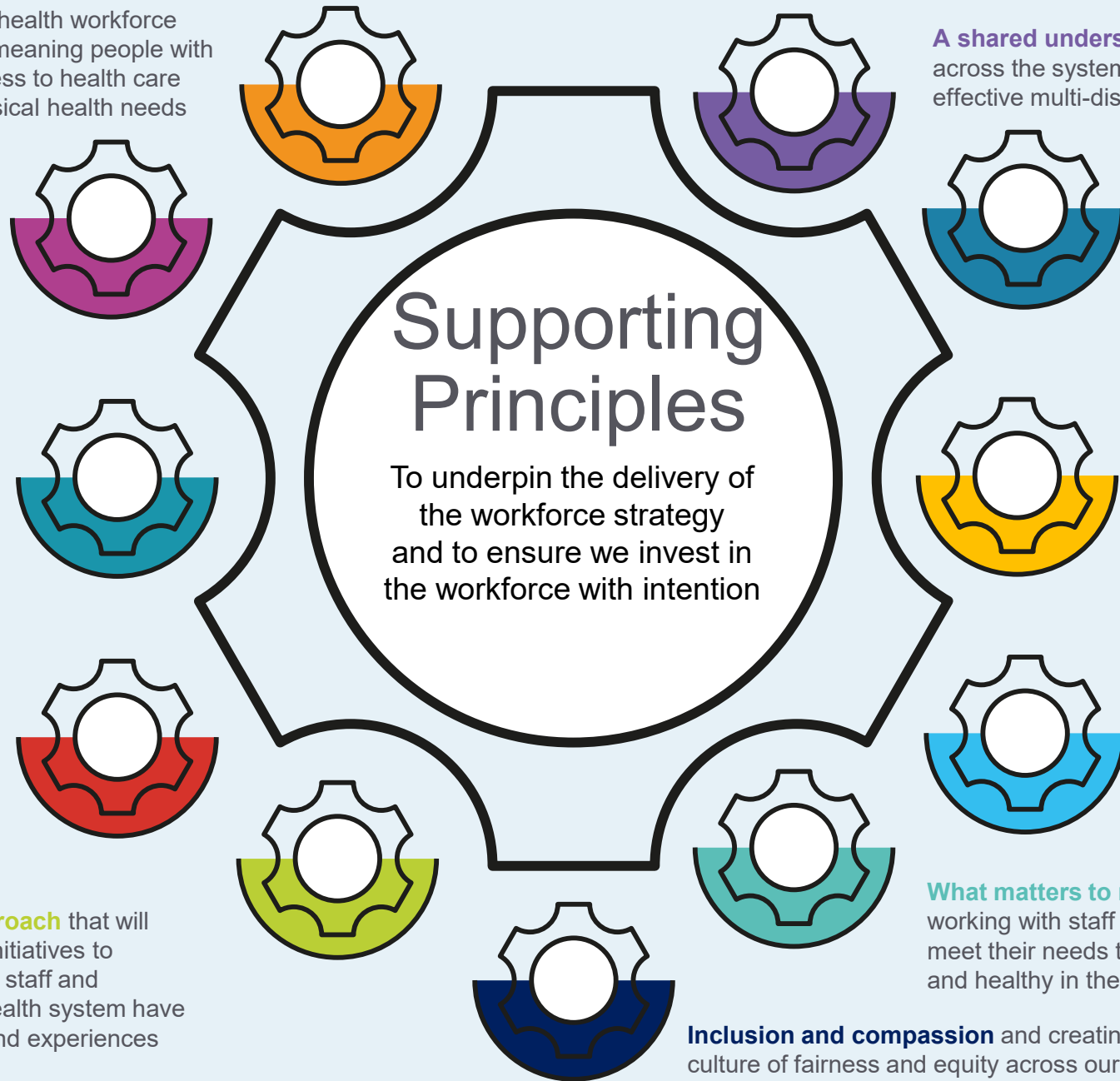
Supporting Principles

To underpin the delivery of the workforce strategy and to ensure we invest in the workforce with intention

Parity of esteem that values the mental health workforce equally to the physical health workforce meaning people with mental health needs have the same access to health care services and support as people with physical health needs

A relationship based approach that prioritises the quality of interpersonal connections between all staff and volunteers, focusing on building trust, open communication and mutual respect – rather than focusing on task-oriented performance

A collaborative approach that treats staff and volunteers as valued individuals with unique needs and strengths

A flexible approach to our workforce – where it is located and the functions it is performing - that allows us to take a system wide and tailored approach to supporting communities and ensuring we are providing the right support in the right place at the right time

A connected partnership approach that will utilise wider cross partnership initiatives to maximise impact and ensure all staff and volunteers across the mental health system have equal access to opportunities and experiences

A shared understanding and language will be developed across the system that will help foster teamwork and effective multi-disciplinary working

Effective and meaningful engagement with staff themselves, experts by experience and wider stakeholders allowing these groups to actively participate in the strategy implementation and feedback their views and suggestions for ongoing review and evaluation of the impact

Professional and personal development and support will be pivotal to provide workers with the necessary confidence, competence and experience to work directly with our communities

A commitment to wellbeing in the workplace creating a work environment that actively promotes and supports staff and volunteers' physical, mental and emotional health

What matters to me will involve listening and working with staff to jointly find solutions to meet their needs to ensure they are happy and healthy in their work

Inclusion and compassion and creating a culture of fairness and equity across our workforce taken forward with strong compassionate inclusive leadership

National and local policy context

NHSE 10 Year Plan (2025)

The aim of the plan is to focus on the three shifts:
- from hospital to community
- from analogue to digital, and
- from treatment to prevention

The intention being to personalise care, give more power to patients, and ensure that the best of the NHS is available to all.

The NHS 10-year plan has significant implications for the workforce, focusing on retaining existing staff, increasing domestic training and recruitment, and reducing reliance on international recruitment.

The plan aims to reshape the workforce to better align with a shift towards community-based care and increased use of digital technology. This includes expanding training opportunities, particularly in areas with shortages, and supporting the development of new roles and skills.

NHSE priorities and operational planning guidance

Immediate 'supporting the workforce' priority areas:
- Improving staff experience
- Retention
- Attendance

Immediate 'improving productivity' priority areas:
- Reducing temporary staffing spend
- Removing 'off framework' agency use
- Implementing more productive and flexible working practices

NHSE Quality Functions: Responsibilities of Providers, ICBS and NHSE (2024)

Workforce, Education and Training Quality is an area of focus:
Role of the ICB
- Understand and influence how multi-professional education quality is integrated into service quality and safety systems and drives quality improvement priorities
- Build a culture that better attracts and retains learners to local systems,
- Lead education quality improvement programmes, aligned to national/regional and local priorities

Role of Providers
- Ensure quality of clinical placement provision within education and training models, including supervision
- Collaborate with professional bodies, curriculum/ programme leads and key stakeholders to shape curricula, assessments and programmes.
- Ensure clear line of sight to Board/ committees on education and training quality, including timely and proactive management of risks

Cheshire and Merseyside Health and Care Partnership Interim Strategy (2023-28)

Focuses on the areas that can and should be done better by working collectively together.
- Create the conditions for staff to work in the health and care system to end our reliance on agencies
- Up-skill and re-skill staff to work in an integrated system with different competencies / new roles
- Promote staff health and wellbeing and optimise the time staff are in work • Embed new culturally competent ways of working
- Enable multiple models of employment and engagement
- Develop leadership and talent management
- Work as system partners to develop a social care academy to show the equal priority with clinical training.
- Deliver our public sector equality duty (2010 Act) to be an employer of choice for all staff, investing in positive action to attract, recruit, develop and retain staff from unrepresented groups

Setting the context for Cheshire and Merseyside

It is important to set the context within Cheshire and Merseyside at the time of launching this first mental health workforce strategy. The NHS in England is facing challenging times with reorganisation at a national, regional and ICB level and the need to make significant financial savings. All of this has a direct impact on the capacity and the ability of the system to be able to "grow" its workforce.

All of this change and uncertainty requires us to be innovative and creative in the way we approach our workforce. It is essential that we get the foundations right so that we can retain the staff and volunteers that we have and to position us to be able to grow and transform our workforce when the time is right. We need to collaborate across the system to maximise the resources we already have in place to enable a redesign and redefine of our workforce profile.

The initial focus is not on doing more, but rather on doing things differently within the resources and capacity available. For example, developing and embedding strategies to support, develop and retain staff and leadership that fosters compassion, development and support it is possible to improve clinical efficiencies and support value for money.

Organisations within the Cheshire and Merseyside mental health system will be at different places with regards to system design, transformation and workforce developments and so the starting premise for implementing this strategy will be a commitment to the principles and pillars it sets out. It will then be for the organisations within our mental health system to prioritise the ambitions that they choose to take forward, taking into account what they already have in place.

WHAT
SUCCESS
WILL LOOK LIKE

The **vision** for the Cheshire and Merseyside mental health workforce

- A diverse, sustainable, skilled and competent workforce that is valued and respected

- A workforce with attractive career choices

- A happy, healthy workforce providing excellent compassionate care

- Multidisciplinary teams, working across health, social care, and third and independent sectors

- Recognition of the critical role the workforce play in supporting people with a range of mental health needs in a variety of settings.

The workforce in scope for this strategy

This is a multi-professional workforce strategy that encompasses all age ranges and protected characteristics aligning with the models of care and standards of service needed in the future.

The strategy also takes into account the roles of private and third sector provider services, volunteers and carers as well as statutory services.

While we have been able to identify the specific mental health workforce, we recognise that within the NHS, wider public sector and the voluntary sector many practitioners and volunteers will deliver only part of their role in mental health services whilst others will be delivering mental health interventions within non-mental health settings/ services, but are not easily identified within the data. For the purposes of this strategy, we have described the workforce across eight of the larger groups working in mental health services supporting children and adults across the spectrum of need:

- medical staff
- registered nurses
- health care support workers
- psychological professionals
- allied health professionals
- wider public sector staff (including social care; housing; blue light services)
- peer support workers and experts by experience
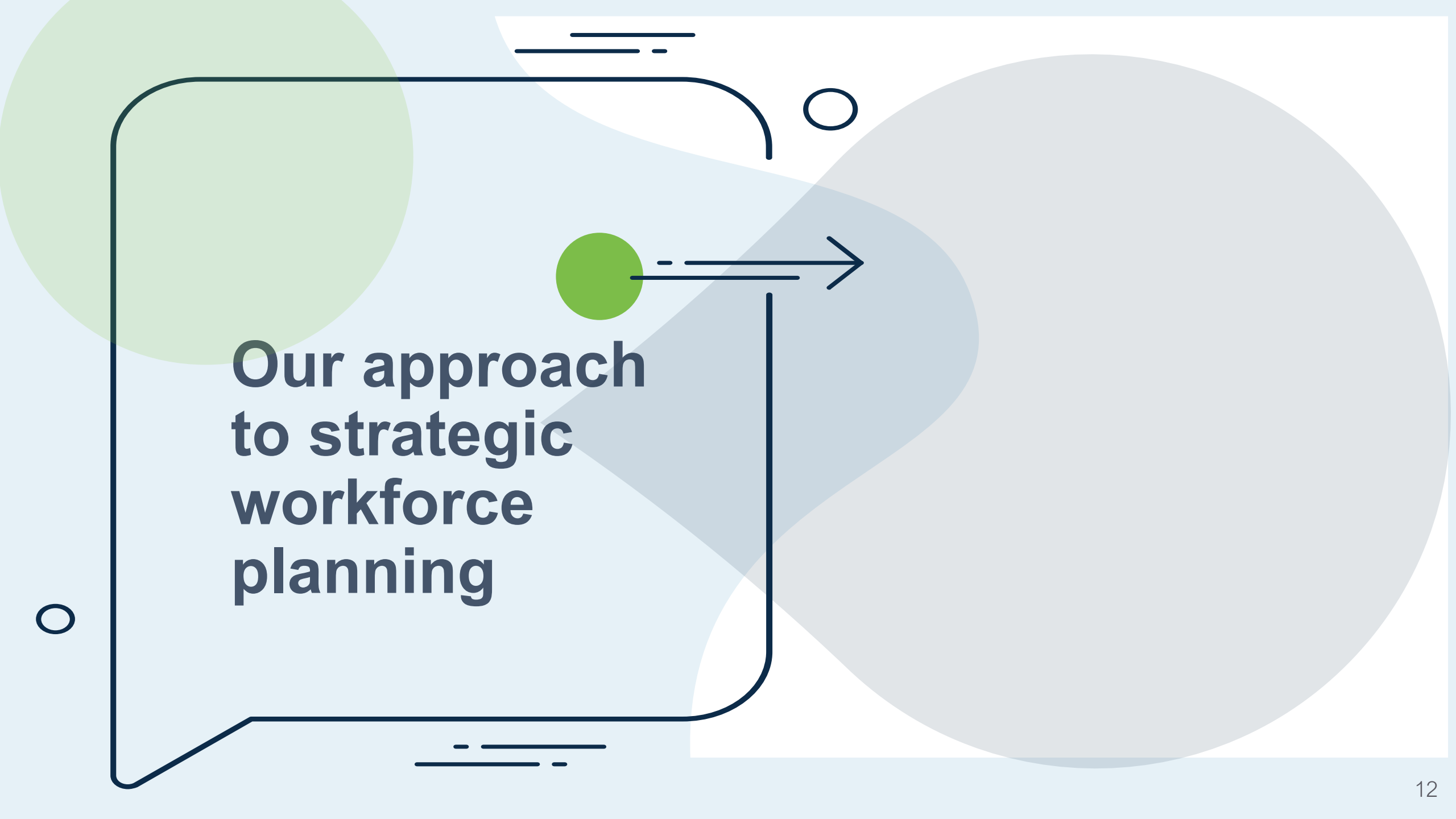- volunteers

Changing the profile of the mental health workforce in Cheshire and Merseyside

What is driving and affecting our workforce

- Changing public and staff expectations of work and health care
- Increasing demand for mental health services
- Demographic changes
- Service transformation and opportunities to deliver services differently – with an increased focus on prevention and community rather than hospital-based approach to delivering mental health services
- Changing skill mix
- Time available for education and training
- Legislative requirements
- Technological developments
- Ensuring the workforce reflects and responds to the diversity of communities and populations
- Increasing correlation between physical and mental health conditions
- Workforce shortages and a decrease in the number of training places has led to an increase in vacancy figures across the system
- An increase of workforce in the younger age bands indicating some level of success with newly trained and younger professionals coming into the workforce to replace those who are retiring.

How we can build and shape our workforce of the future

- Increasing graduate, post graduate and career training pathways
- Increasing alternative entry level pathways into careers in mental health
- Retaining current workforce
- Inspiring and attracting a new workforce by making careers within mental health services an attractive option
- Creating flexible education and working solutions
- Enhancing professional and career development
- Developing new and emerging roles
- Strategic approaches to workforce modelling
- Improving planning and workforce sustainability
- Ensuring the workforce meets the needs of our communities and populations
- Opportunities to provide training to physical health and wider groups of staff in delivering basic interventions to support good mental wellbeing
- Enhanced knowledge, skills and increased use of Multi-disciplinary teams and digital technology
- Multidisciplinary, inter-professional teams with enhanced knowledge and skills

Our approach to strategic workforce planning

The need for strategic workforce planning

- The intention of workforce planning is to ensure we adopt a systematic approach to identifying the right workforce to achieve our system level strategies and objectives and to ensure we create and plan to deliver that workforce

- We will know we have the right workforce when we have the capability to achieve our shared objectives as a mental health system

- To do this we need to consider the 7 "rights" of workforce planning

Right capability   **Right shape**   **Right size**   **Right location**   **Right time**   **Right cost**   **Right risk**

The Cheshire and Merseyside mental health service and workforce modelling framework

The framework enables us to take a longer view of what people (staff and volunteers) are needed and where, when and with what skills, competencies etc to deliver support in response to the forecast demand delivering the best service our population with mental health and emotional wellbeing challenges require. The framework considers workforce supply and demand and develops action plans to address gaps

MODEL
6-Step Process

1 — Understand the population need

Define the pathway of care
2

3 — Map the service model activity

Define the workforce
4

5 — Workforce Supply Plan

Plan, implement and monitor
6

Baseline
Supply
Demand
Gap analysis
Action plan
Deliver

The service and workforce modelling framework is foremost a strategic model focusing on aligning service design and transformation and workforce planning to support the delivery of integrated whole system mental health services
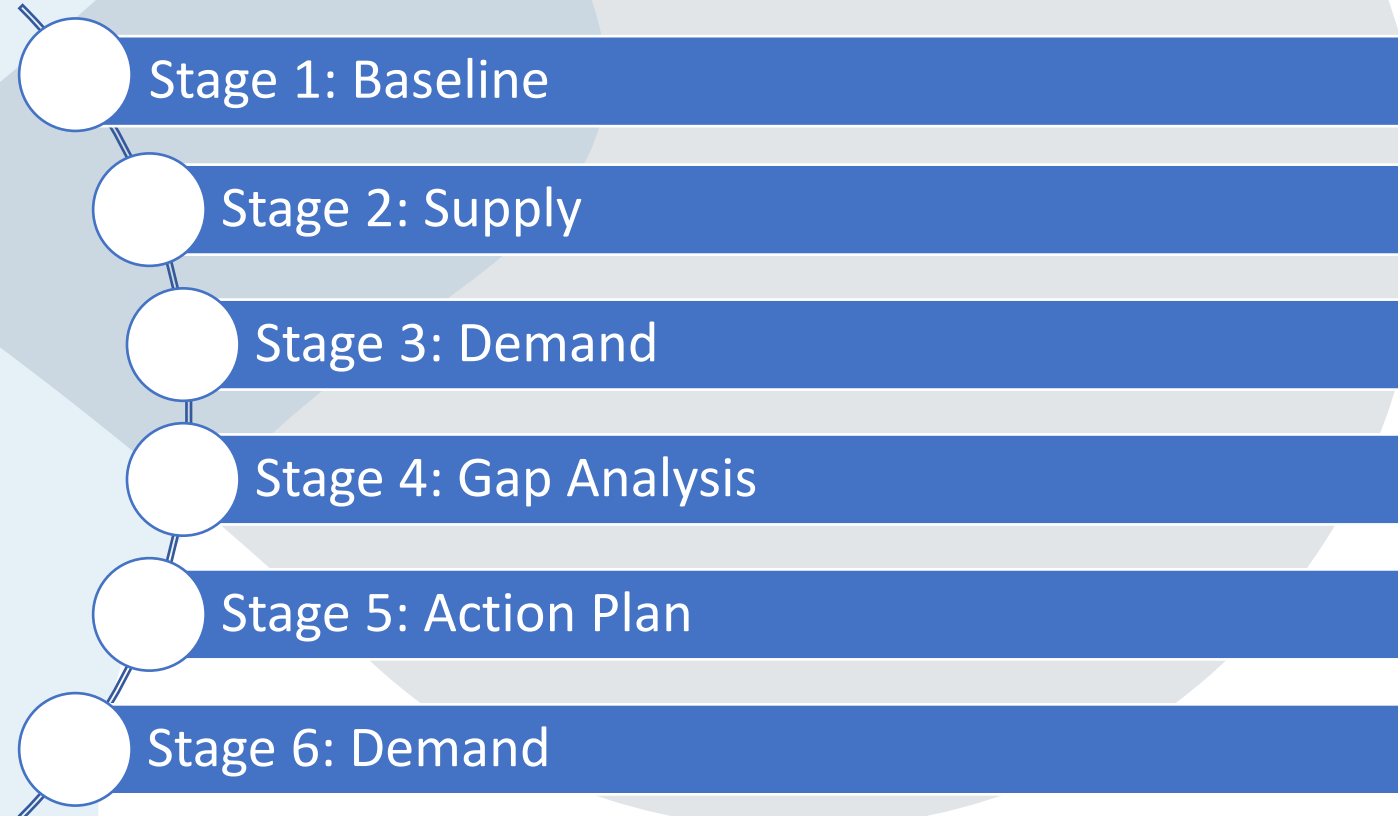
It takes a holistic view of the system and anticipates and plans for long term requirements based on forecast demands

Workforce talent pipeline (supply) planning

The fifth stage of the Cheshire and Merseyside six step service and workforce modelling framework is to develop a talent pipeline plan. The plans will be developed at different levels across the system at either organisational level or care group/ divisional level and these will culminate an overarching Cheshire and Merseyside talent pipeline plan.

Talent pipeline plans will be developed utilising the six-stage model of workforce supply planning.

Stage 1: Baseline

Stage 2: Supply

Stage 3: Demand

Stage 4: Gap Analysis

Stage 5: Action Plan

Stage 6: Demand

15

Our workforce strategy aligns to the Cheshire and Merseyside ICB strategic commitments and values, the NHS People Plan and the NHS People Promise.

The People Promise

Prioritising the **health** and **wellbeing** of all **our people**

We take a positive and proactive approach in supporting the health, safety and wellbeing of our NHS people, ensuring that work has a positive impact. We address health inequalities at work and in our communities.

Creating a **great employee experience**

We understand the diverse needs, expectations and experiences of our NHS people, and use that insight to tailor our people services. We attract and retain people in health and care, creating a positive impact on our communities.

Ensuring **inclusion** and **belonging** for all

We use our expertise and influence to create an inclusive culture, which values and celebrates our diversity. We listen to our people and take action to ensure there is equity for everyone.

Supporting and **developing** the **people profession**

We support everyone working in the people profession to be their very best and reach their full potential. Together we provide outstanding people practices.

Harnessing the **talents** of all our **people**

We help all our people to fulfil their ambition and potential. We build strong leadership and management capability at all levels.

Leading **improvement, change** and **innovation**

The people profession is productive, efficient and responsive. Our operating model delivers transformation and embeds innovation across organisations and systems.

Embedding **digitally** enabled **solutions**

We make best use of technology and digital solutions to deliver great people services. We develop our digital capability to equip ourselves for the future.

Enabling new ways of **working** and **planning** for the **future**

We enable our people to work differently, to support new models of care. We anticipate the needs of the health and care system, and play our part in creating a sustainable supply of workforce which meets the needs our patients now and for the future.

The **core pillars** of the workforce strategy

The Cheshire and Merseyside Mental Health Workforce Strategy is built around five core pillars – all of which are focused on ensuring we can attract, recruit and retain the right workforce now and in the future

We will develop new workforce models to support and complement our existing staff to build sustainability will be in place.

Inspire and Attract

Recruit

Train

Retain

Reform

PILLAR 1 **INSPIRE and ATTRACT**
We will attract people into new roles and training opportunities within mental health services and specific recruitment and attraction campaigns, aligned to new careers promotions and in conjunction with higher education partners to ensure that potential applicants are made aware of these new opportunities

PILLAR 2 **RECRUIT**
We will ensure we have a continuous supply of skilled talent to meet evolving demands, drive innovation with the necessary skills and mindset to navigate future challenges and contribute meaningfully

PILLAR 3 **TRAIN**
We will need to train more staff in certain areas to ensure we have a sufficient pipeline, ensure that our attrition from training rates remains low and that we continue to maximise our employment of those we train. Building careers through education

PILLAR 4 **RETAIN**
We need to ensure that we retain those who we train and ensure that there is a high transfer from training into employment.
We need to ensure that we retain staff who might otherwise have chosen to retire by offering greater flexibility across the entire employment life cycle.

PILLAR 5 **REFORM**
We will need to consider existing skills, prior learning and the contribution of those outside of the 'traditional' mental health, care and third sector services (e.g. unpaid carers, youth workers, education professionals, housing and other public sector services such as blue light services).

The transitional approach to implementing the strategy

This strategy will be implemented in a phased approach over the next 5 years so that we can ensure we:
1. get the foundations right to enable workforce redesign and transformation
2. we invest in initiatives and activities to redesign the workforce
3. we embed the workforce transformation so that we can ensure we have in place a sustainable workforce for the future

year 1 — Foundations

year 2 — Foundations and retention

year 3 — Retention and investment

year 4 — Investment and growth

year 5 — Embed and enhance

The focus will be on getting consistent foundations in place to support the development and growth of the workforce

We will continue with a focus on getting the foundations right. There will be an increased focus on retaining the workforce and filling vacancies

We will continue to focus on retention and will ensure the foundations are embedded so that workforce growth can be invested in

We will be focused on investing in the workforce and growing the workforce in line with talent pipeline plans (subject to finance)

We will focus on consolidating the work that has been done and ensuring all activity is embedded in practice to ensure we can enhance our workforce as much as possible

18

Getting the **foundations** right

The initial focus of this strategy is to "get the foundations right".

This is about making sure we have the core essentials in place to support, develop and grow a healthy, resilient and sustainable workforce.

The core foundations we will be working on getting right are detailed below – all of these areas also support the core pillars of the strategy of:
1. inspire and attract
2. Recruit
3. Train
4. Retain
5. Reform.

Ultimately it can help ensure those receiving services and support receive high quality care

Supervision and peer support

Career progression and growth

Training and professional development

Wellbeing

The Enablers

Finance

- Maximising all funding streams to support the development and expansion of the workforce Understanding and recognising return on investment by considering workforce productivity
- Operational planning and working within the financial parameters for the workforce and its impact on planned establishment
- Education and Training Activity Plan (ETAP) and utilising NHSE funded training
- Utilising Trust, provider and organisation budgets for staff training and development

- Detailed profile of the needs and outcomes of the population to inform service delivery and in turn shape the workforce profile required
- Understanding of patterns of demand and supply to determine flexibility needed within the workforce
- Increased investment in early intervention and prevention requiring a different workforce profile within the system
- Alignment between six steps strategic service and workforce modelling and commissioning intentions
- Increased growth and expansion with the voluntary and third sector and in partner organisations

Leadership and Culture

- Strong transformational and change management leadership
- Developing staff to have the right skills, knowledge, experience and confidence
- Compassionate and collective leadership and a positive shaping of the culture of the organisation
- Creating a healthy wellbeing culture and supporting framework
- Development of leaders within mental health services so that they can lead the organisational design and changes that need to underpin the development of the future workforce. This will give people the skills they need to innovate and improve mental health services.

IDEA

Strategic commissioning

Technology, data and intelligence

- Alignment with the C+M digital and data strategy
- Mobile digital technology for staff
- Development of a mental health workforce dashboard at a system level
- Development and strengthening of data literacy for non-data practitioners
- Maximising forthcoming upgrades to ESR
- Matching digital developments to health inequalities

20

Our ambitions

1

Inspire and attract

What we are doing now:

- Establishing links with education providers to raise awareness of careers in mental health
- Development of case studies to showcase careers in mental health
- Increasing online presence to promote careers e.g. webinars linked to recruitment activity
- Expanding placement opportunities to provide a breadth of exposure to mental health careers
- Developing career pathways to promote the breadth and depth of progression opportunities

What we are going to do:

- Develop a range of approaches to attract from a wider representation of communities and across the breadth of ages
- Increase volunteering opportunities e.g. as peer support workers/ experts by experience; project work for students
- Clearly communicate our values and culture during the recruitment process.
- Dispel the myths about what it's like to work in mental health and spark the passion supporting next steps to apply, for example by showcasing the good news stories and positive experiences of our workforce and the rewards of working in mental health
- Cascade information about career opportunities in mental health far and wide e.g. through schools, colleges and universities; community groups
- Develop a range of routes to enable future staff to develop skills, experience and competencies in readiness for employment including work experience, cadets and volunteering opportunities
- Break down the barriers that prevent young people (those aged 16 and 17) working in clinical roles

The indicators of success :

- An increase in the number of applicants we are receiving for jobs
- The quality of candidates being appointed into roles
- A lower employee turnover that demonstrates we are attracting and retaining talent effectively.
- Flexible working approaches available to all staff

2 Recruit

WHAT THIS WILL MEAN FOR THE FUTURE:
- We will be consistently attracting high-quality candidates who are a good fit for the roles and our culture.
- We will be achieving quick hiring times and experiencing low turnover rates among new hires
- We have a diverse workforce with the necessary skills, competencies and experiences to meet the demands of the role and functions of the organisation
- We employ the right people who align with our organisational culture and values
- We have the right workforce across our entire mental health system

What we are doing now:

- Developing a fuller understanding of the population and profile – now and in the future

- Developing a competency based approach to defining the workforce profile and to inform the roles required

- Working with education providers to develop resources to support students in seeking, and applying, for roles within mental health

- Improving job descriptions and person specifications

- Creating opportunities for careers in mental health from wider professional groups

- Improving how we recruit our peer support workers and experts by experience

What we are going to do:

- Develop more apprenticeship routes – to include working with higher education / universities to develop new pathways to supplement those already available.

- Create a smooth and welcoming onboarding experience to help new hires integrate into the organisation and its culture.

- Modernise recruitment processes and reduce complexity to make the process more flexible, quicker and accessible to a wider pool of prospective employees

- Better understand which sourcing channels (e.g., job boards, social media, employee referrals) are most effective in attracting qualified candidates

- Fill the vacancies we have and reduce our reliance on temporary staffing (e.g. agency and bank)

- Embed values based and competency based recruitment

- Understand the conversion activity from education into employment within Cheshire and Merseyside

- Develop clear career pathways so people can see the variety of roles and progression that is possible

The indicators of success :

- The workforce is diverse and reflective of the needs of our communities and populations and meets their needs

- A shorter time to hire (the duration from job posting to new hire start date)

- A better quality of hire assessed by measuring the performance, retention, and cultural fit of new hires.

- A high offer acceptance rate (the percentage of candidates who accept a job offer)

- Positive candidate experiences

- Hiring managers are satisfied with the quality of candidates and the efficiency of the recruitment process

- High application completion rates

23

3 Train

WHAT THIS WILL MEAN FOR THE FUTURE:

- Our approach to defining the workforce is led by the competencies needed to deliver our services
- There is alignment between taught curriculums and the knowledges, skills and competencies we need in our workforce
- Staff are skilled and experienced and supported to develop personally and professionally in line with population need and agreed models of care – increasing the impact we have on people's outcomes

What we are doing now:

- Undertaking comprehensive training needs analysis activities across care groups
- Continual training demand scoping and allocation through the NHSE ETAP (Education and Training Activity Plan) process – this includes wider inclusion of non-NHS providers delivering mental health services
- Developing approaches to reflective practice and learning
- Developing innovative approaches to practice based learning such as simulation training – e.g. recent work between Mersey Care NHS FT with Liverpool John Moores University and this has been rolled out now across multi- agency partners for their learning

What we are going to do:

- Roll-out of legacy mentors concept and use of retire to return opportunities to share learning and experience and to coach and mentor staff
- Increase advanced practice opportunities
- Explore the potential for multi-professional roles in MH
- Widen the scope for senior non-clinical roles
- Ensure training and development is built into job planning
- Expand the preceptorship model across a wider range of roles
- Develop a robust approach to induction and onboarding so people come into their roles fully informed and clear about the organisation culture, processes and practice
- Increase the number of placement opportunities to help raise the profile of services, career opportunities and to attract more staff
- Ensure there is sufficient good quality supervision and CPD training to support the workforce to be flexible and responsive
- Share expertise and learning across organisations

The indicators of success:

- High levels of learner satisfaction
- High course/ learning completion rates
- Access to the right level of education capacity to meet demand
- High levels of knowledge, skill and competence retention
- High levels of productivity
- Clear transfer of learning to practice
- Stakeholder confidence in practitioners

24

4

Retain

WHAT THIS WILL MEAN FOR THE FUTURE:

- Reduced turnover of staff and the associated financial impact
- Higher workforce engagement and productivity
- Improved quality and continuity of care
- Enhanced organisational culture
- The workforce will be happy, healthy, feel valued and supported wherever they work
- Staff and volunteers will be committed to long term careers within mental health

What we are doing now:

- Adhering to safe staffing requirements when planning the workforce
- Flipping exit interviews to focus not on the process and checklist approach but to focus on what could be done to retain people
- Expanding preceptorship programmes to extend support to new staff
- Supervision demand and capacity reviews to develop a robust and sustainable supervision pipeline for the future
- Development of career pathways so that staff can identify their progression opportunities and provide clarity about what is required to move across/ though the pathways

What we are going to do:

- Formal check ins (e.g. 100 day engagement sessions) to see how we can enhance experiences of staff as a new starter
- Develop rotation arrangements and support internal transfer schemes for career development for staff as well as providing opportunities to prevent potential burn out
- Create conditions for people to return from private practice
- Develop wellbeing and reflective practice frameworks to support staff
- Robust supervision and reflective practice arrangements
- Ensure good career conversations that foster strong relationships, help staff understand their strengths and weaknesses, identify development needs, and align personal and professional goals
- Increase and encourage flexible work life balance opportunities
- Provide proactive and effective wellbeing support
- Promote equality, diversity, and inclusion (EDI) ensuring fair access to opportunities and a positive, inclusive work environment
- Embed a compassionate culture built on civility, respect and equal opportunity

The indicators of success :

- Reduced turnover rates with more staff within the mental health system in Cheshire and Merseyside
- Reduced sickness levels with more people supported to stay in work and/or return quickly after a period of absence
- Staff feel supported, capable (trained, resourced and connected) and become more resilient as a result.
- The service system becomes more robust, effective, responsive and fit for the future.

5 Reform

WHAT THIS WILL MEAN FOR THE FUTURE:

- Staff working in different ways, including with each other and with patients, and practitioners able to spend more time with individuals providing high quality care.
- More staff in new and enhanced roles, who will both be able to maximise their own skillset and free up the time of staff in traditional roles to maximise theirs
- Increase in the size and proportion of NHS staff working in non-acute settings
- Multi-professional and multi-agency workforce models will be the norm
- We will be building up the workforce into different roles and positions up to all levels so we have the workforce available and ready for wide range of roles

What we are doing now:

- Developing and expanding the range of psychological professions within the workforce
- Developing a Cheshire and Merseyside approach and framework to inspiring, recruiting and developing the peer support/ experts by experience workforce
- Expanding partnership models with the voluntary sector
- Developing a mental health workforce dashboard and aligning it to service activity dashboards so that we can take a more data informed approach

What we are going to do:

- Roll out and embed a system-wide integrated strategic approach to service redesign and workforce planning with a longer term view
- Increase and improve the focus, and skill of leaders, on succession planning
- Ensure there is an effective change management approach in place to support strategic workforce transformation
- Grow the number of NHS staff working in primary, community and mental health services as a proportion of the overall workforce.
- Enhance the digital literacy, competence and confidence of our workforce by upskilling and training staff to maximise technologies and avoid the risk of de-skilling,
- Enhance specialist knowledge while also maintaining and developing their generalist and core skills – to support health and care practitioners to work in multidisciplinary, integrated teams

The indicators of success:

- Flexible education and working solutions
- Effective and sustainable multi-disciplinary working
- Strategic workforce talent pipeline plans being implemented
- Flexibility in the workforce to better support the whole system in response to changing needs, including across organisational boundaries within the ICS
- Increased productivity
- Stronger and more prevalent role for the voluntary and third sector
- Reduced vacancies as a result of strategic workforce redesign
- A learning and improvement culture within organisations

Implementation of the Strategy and delivery of the Plan

- To deliver this strategy we will need to work together at national, regional, and local levels.

- Implementation plans will be developed and taken forward in partnership with staff, stakeholders and experts by experience and those accessing our services across the system

- These actions will come together to deliver high quality mental health services through a motivated, engaged and valued, mental health workforce, with the capacity, competence and confidence to meet the mental health needs of the people of Cheshire and Merseyside

Appendices

The workforce experience

People Promise elements	Sub-scores
We are compassionate and inclusive	Compassionate culture
	Compassionate leadership
	Diversity and equality
	Inclusion
We are recognised and rewarded	No sub-score
We each have a voice that counts	Autonomy and control
	Raising concerns
We are safe and healthy	Health and safety climate
	Burnout
	Negative experiences
	Other questions [Not scored]
We are always learning	Development
	Appraisals
We work flexibly	Support for work-life balance
	Flexible working
We are a team	Team working
	Line management
Themes	**Sub-scores**
Staff Engagement	Motivation
	Involvement
	Advocacy
Morale	Thinking about leaving
	Work pressure
	Stressors

The results of the NHS Staff Survey are measured against the seven People Promise elements and against two themes (Staff Engagement and Morale).

The reporting also includes sub-scores, which feed into the People Promise elements and themes.

The tables contain the results for the 2024 NHS Staff Survey and are presented in the context of best, average and worst results for similar organisations where appropriate

Within this strategy we have included a high-level overview of the results for the seven elements of the People Promise and the two themes to provide an indication of the NHS workforce experience within Cheshire and Merseyside
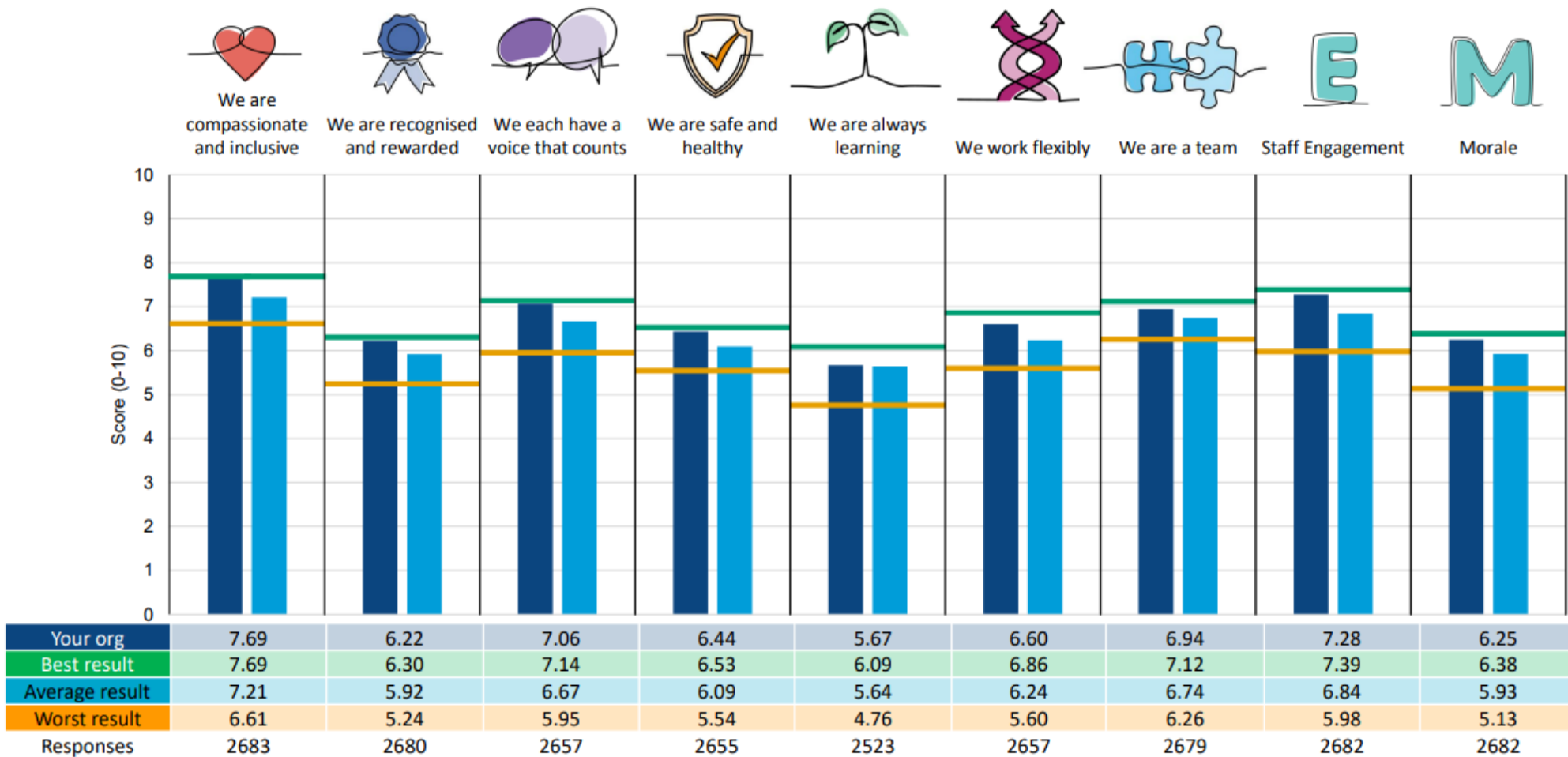
The priorities and ambitions within this strategy reflect the experiences presented through the staff survey

31

The Alder Hey experience

Alder Hey Children's NHS Foundation Trust Benchmark report

The Merseycare experience

The Cheshire Wirral Partnership experience

People Promise elements and themes: Overview

Survey Coordination Centre — NHS

People Promise elements, themes and sub-scores are scored on a 0-10 scale, **where a higher score is more positive than a lower score.**
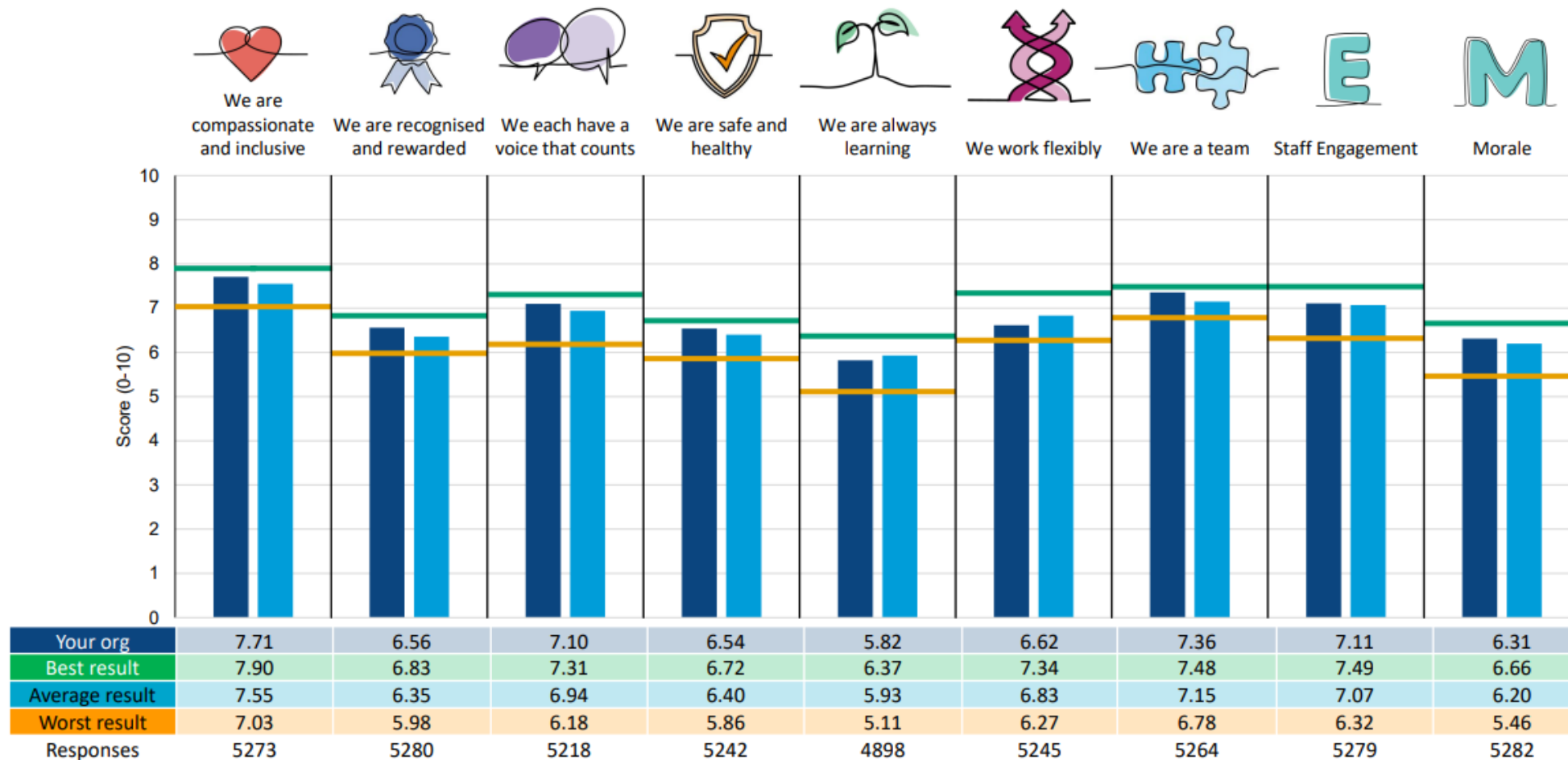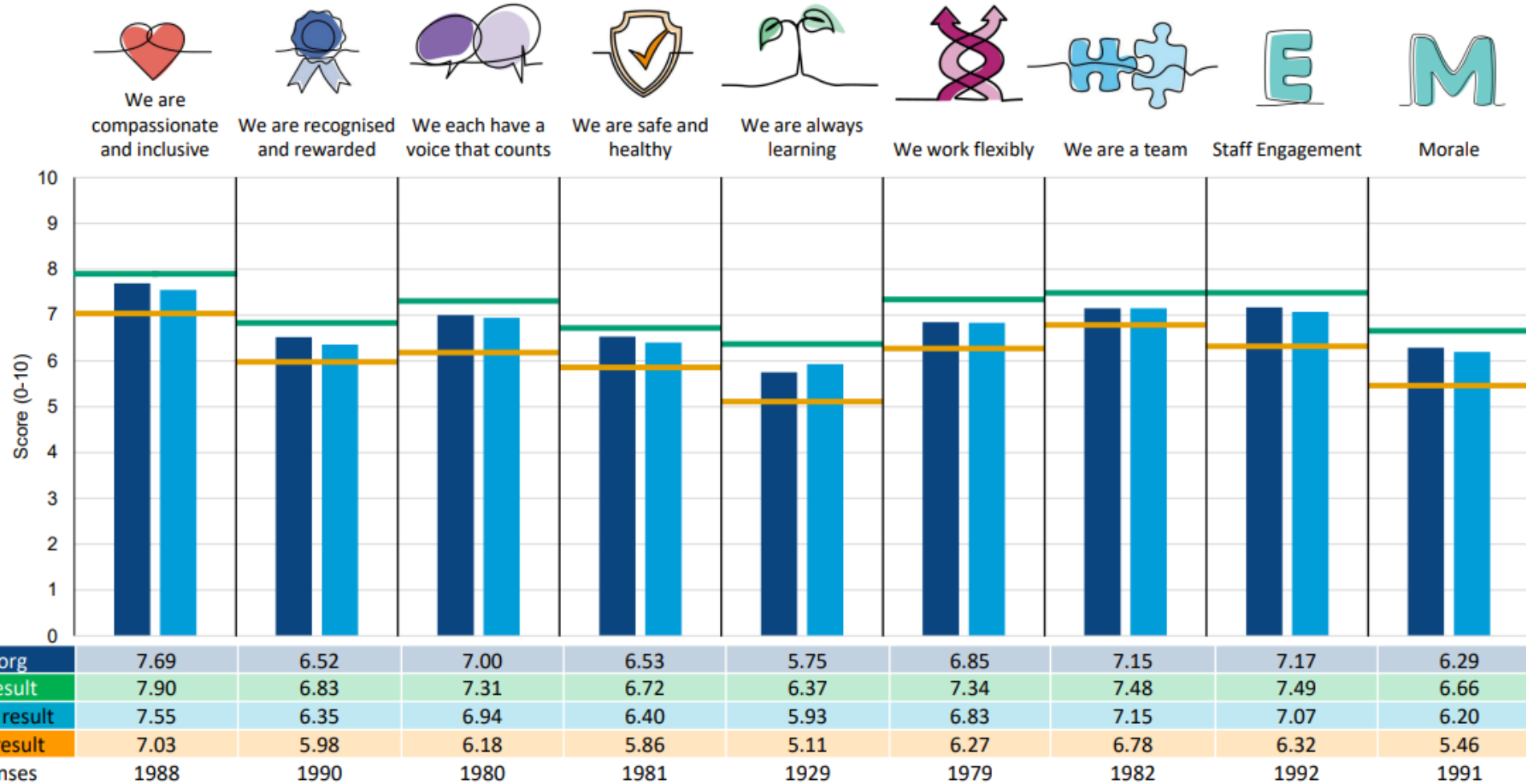
	We are compassionate and inclusive	We are recognised and rewarded	We each have a voice that counts	We are safe and healthy	We are always learning	We work flexibly	We are a team	Staff Engagement	Morale
Your org	7.69	6.52	7.00	6.53	5.75	6.85	7.15	7.17	6.29
Best result	7.90	6.83	7.31	6.72	6.37	7.34	7.48	7.49	6.66
Average result	7.55	6.35	6.94	6.40	5.93	6.83	7.15	7.07	6.20
Worst result	7.03	5.98	6.18	5.86	5.11	6.27	6.78	6.32	5.46
Responses	1988	1990	1980	1981	1929	1979	1982	1992	1991

Cheshire and Wirral Partnership NHS Foundation Trust Benchmark report

34

The lived experience of mental health services in Cheshire and Merseyside (Community mental health survey, 2024)

The survey looks at the experiences of people, across NHS providers, who received specialist care or treatment for a mental health condition between 1 April 2024 and 31 May 2024. Questions included in the survey consider support while waiting for care, experiences of different aspects of care and treatment, crisis care, and involvement in care.

Responses were received from 200 people at Cheshire and Wirral Partnership NHS Foundation Trust

Category	Patient Response	Compared with other trusts
Support while waiting	7.3 / 10	About the same
Mental Health Team	6.4 / 10	About the same
Planning care	6.3 / 10	About the same
Involvement in care	6.5 / 10	About the same
Medication	6.6 / 10	About the same
Psychological Therapies	8.1 / 10	About the same
Crisis Care Support	5.3 / 10	About the same

Category	Patient Response	Compared with other trusts
Crisis Care Access	7.1 / 10	About the same
Support with other areas of life	3.5 / 10	About the same
Support in accessing care	4.8 / 10	About the same
Respect, dignity and compassion	7.9 / 10	About the same
Overall experience	6.9 / 10	About the same
Feedback	3.0 / 10	About the same

The lived experience of mental health services in Cheshire and Merseyside (Community mental health survey, 2024)

The survey looks at the experiences of people, across NHS providers, who received specialist care or treatment for a mental health condition between 1 April 2024 and 31 May 2024. Questions included in the survey consider support while waiting for care, experiences of different aspects of care and treatment, crisis care, and involvement in care.

Responses were received by 208 people at Mersey Care NHS Foundation Trust.

Category	Patient Response	Compared with other trusts
Support while waiting	7.0 / 10	About the same
Mental Health Team	6.6 / 10	About the same
Planning care	6.1 / 10	About the same
Involvement in care	6.5 / 10	About the same
Medication	7.0 / 10	About the same
Psychological Therapies	8.7 / 10	About the same
Crisis Care Support	5.5 / 10	About the same

Category	Patient Response	Compared with other trusts
Crisis Care Access	6.9 / 10	About the same
Support with other areas of life	3.7 / 10	About the same
Support in accessing care	5.7 / 10	Somewhat better than expected
Respect, dignity and compassion	8.4 / 10	Better than expected
Overall experience	7.1 / 10	About the same
Feedback	2.0 / 10	About the same

The Cheshire and Merseyside Children & Young People's Mental Health Plan 2024 – 2026 developed in conjunction with children, young people and their families provides valuable insights into their experiences of mental health services

Children and young people, Parents and Carers told us it works well when….

- ✔ You see the same professional for help e.g. Care Navigators and Key worker
- ✔ You are listened to
- ✔ Allowed to be involved
- ✔ Communication is good
- ✔ There is a range of services and choice
- ✔ You can access mental health and wellbeing support via youth based groups in the community

Professionals & stakeholders told us it works well when….

- ✔ Co-location of good quality support is provided in community based and non-clinical settings with trained and trauma informed staff
- ✔ Children and young people can input into their own care
- ✔ Children and young people can access help and support via school
- ✔ Collaboration and good communication exists across services that may be supporting a young person. Working together and wrapping around support
- ✔ Staff are friendly, approachable and committed
- ✔ A range of services are available to meet different levels of needs
- ✔ Parental support is provided
- ✔ Online support is offered

Children, Young People, Parents and Carers told us….

- The workforce could be better equipped to support young people:
  - from LGBT+ communities
  - with a suspected neurodiversity and/or learning disability
  - who have experienced trauma
- Professionals could work better together to provide more seamless and joined up care – no wrong door approach across services
- We need to improve our communication and pathways of care so children and young people only need to tell their story once
- Families would value support with early family/ Infant relationships from birth to age 5

- Waiting times can be long to access support
- Children and young people would like to see improvements in support when transitioning to adult support, but also between services depending on their needs
- We need to increase access to early help and support and provide this in a place that children and young people (and their parents and carers) can easily access
- We need to work towards no age-based thresholds and focus on the needs of each individual
- Co-occurring needs should be better supported e.g. Mental Health and Autism

Professionals and stakeholders told us

- Waiting times are too long
- There is a need to focus more on earlier intervention and prevention
- Thresholds to access services can be high and too rigid.
- To build relationships based on trust takes time (patience and tenacity), a different (skilled) way of working.
- That Eating Disorder services need to be trauma informed and services provided for Avoidant Restrictive Food Intake Disorder (ARFID)
- We need to better understand the impact of services
- Early years services are a gap and there is an inequitable offer across places