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| Children and Young People’s Psychological Trainings  (CYP PT)  CYP Mental Health (MH) Leadership |
| Version 2.4, 26 March 2024 |

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# Background and context

Children and young people’s mental health (CYP MH) services continuously need to change and adapt in the face of national and local policies, the needs of children, young people and families, and workforce and other challenges. All this needs to happen in line with the principles of CYP MH (formerly CYP Improving Access to Psychological Therapies (IAPT)). The successful implementation of transformational change requires skilled leadership and collaborative efforts across relevant sectors (health, social care and education within the NHS, schools, other statutory bodies and the voluntary, community and faith sector).

This programme aims to support those in CYP MH leadership roles to implement transformational change in their services. It seeks to develop participants’ knowledge, both personally and professionally, of their leadership role. It aims to:

* provide knowledge and encourage critical appraisal of the theoretical, research, systemic and implementation literature that underpins service delivery, change and the leadership role
* consider practical tools to manage change effectively and support workforce planning
* develop participants’ understanding and implementation of evidence-based leadership
* encourage consideration of equity, diversity and inclusion (EDI) among the population served by their service, as well as in their organisation and workforce, and examine what this means for leadership and service delivery
* develop a framework to support reflective practice in relation to both the implementation of change and their practice in the leadership role
* recognise the value of the user and carer perspective in enhancing care, expanding support and informing application of theory to practice as well as contributing to future learning

The programme is relevant for all leaders and service managers with responsibility for delivering CYP MH services and supporting service transformation and workforce development in education, social care, the voluntary, community and faith sector, digital mental health organisations and NHS settings. Higher education institutions (HEIs) should outline the entry requirements for their individual programmes.

The programme is commonly delivered and accredited by higher education institutions (HEIs) across the country. However, it is also available in some areas as a continuing professional development (CPD) pathway. It is recommended that this remains an option if considered appropriate by the relevant HEI/NHS England (NHSE) commissioners in that area.

# Introduction to the CYP MH leadership themes

The table below provides information about the themes, aims and learning objectives that should be covered in the curriculum of all CYP MH leadership programmes.

In addition, it includes some ideas for content that courses might include to meet these aims and learning objectives; some of these ideas are expanded upon in the appendices. However, there will be some variation in this content according to the differing needs in the CYP MH services served by HEIs across the country.

| **Theme/aim** | **Learning objectives** | **Content that courses might include to meet the learning objectives** |
| --- | --- | --- |
| **Policy and the national and local CYP MH service landscape**  **Aim:** For participants to be aware of national and local policies that shape CYP MH provision, including how to use these to inform workforce planning. | **Learning objectives:**  By the end of the course, participants will:   * be aware of the policy landscape in the UK in relation to the mental health of children and young people * have knowledge of the timeline for key policy drivers that have shaped the development of CYP MH services in England * have an overview of the development of CYP MH training, including the economic argument for training and developing the workforce * understand the needs of the population and communities local to their service * understand how to use national and local policies and knowledge of needs in their local area to inform workforce planning for their service | **Ideas about content:**   * Brief overview of the span of different types of CYP MH psychological training, examining how they are linked to historical policies and the development and delivery of evidence-based practice. * Issues relating to staff retention, career progression and accreditation within CYP MH psychological training. * An understanding of the expansion and development of the supervision workforce. * An understanding of their role as leads in supporting these current issues. * Referencing key current national policies that are important in guiding CYP MH service provision, considering what is most relevant for the course participants/region (see Appendix 1 for a list of possible policies). * Details of how to access policy and information about local implementation issues. Understanding how to use these sources of information as levers for implementation of CYP MH services in their own organisational context. * Awareness of current NICE guidance on relevant mental health issues in children and young people. * An understanding of the prevalence of children and young people’s mental health problems, with up-to-date benchmarking data. This data should highlight where there are differences due to health inequalities. * Brief overview of CYP MH commissioning priorities, as well as the partnership between relevant organisations. * An understanding of CYP MH principles that provide a minimum standard for services, as well as more developed service models such as i-THRIVE. * Understanding development of service pathways in the current context of integrated care boards and integrated care systems. * Looking at the advice provided by the main charities covering children and young people’s mental health, to gain some insight into what expectations they set for users/carers. |
| **Equity/diversity/inclusion intersectionality**  **Aim:** For participants to develop an understanding of and an ability to promote EDI in the context of their CYP MH leadership role, both in relation to their local population and their organisation and workforce. | **Learning objectives:**  By the end of the course, participants will:   * understand the importance of having inclusive, diverse organisations * understand the following concepts:   + equity and diversity, and the legal and ethical considerations associated with them   + intersectionality * be able to reflect upon the processes and structures that may promote or impede diverse and inclusive organisations * be able to reflect upon the qualities and behaviours of inclusive leaders * have developed skills that promote and foster diverse and inclusive organisational cultures, such as conflict management, and be able to apply these to ‘real world’ leadership scenarios * recognise the importance of creating ongoing plans to implement, monitor and assess initiatives and practices that underpin inclusive and diverse cultures | **Ideas about content:**   * Consideration of the importance of equity and diversity in leadership. * Consideration of leadership within organisations, reflecting upon structures and processes that contribute to bias and stereotypes, and strategies, structures and processes that promote inclusivity and mitigate against bias. * Consideration of the complexity of intersectionality and its impact. * Promotion of self-reflection and self-awareness with regard to power and privilege in the leadership position. * Developing strategies and skills for building and leading diverse teams. This might include recognising and establishing allies and advocates and developing an organisational culture action plan. * Considering the diversity of the workforce and ways in which this can be improved to reflect the demographics of the served population. * Understanding ways of promoting and embedding culturally sensitive practices, and ensuring services are welcoming and inclusive. |
| **Partnership working/systemic thinking**  **Aim:** For participants to develop an understanding of the importance of different types of partnership working in CYP MH provision, and skills in ways of facilitating this. | **Learning objectives:**  By the end of the course, participants will:   * understand the principles and aims of different types of partnership working * understand the relevant legislation and guidance relating to strategic partnerships between organisations/agencies and how this applies to their area of work * reflect on their role as leaders in establishing and maintaining effective partnership work * understand key partnerships that drive effective outcomes in their area of work, including:   + - service users and communities     - carers and carer support groups in the area     - internal partners     - external partners     - strategic bodies in their area/region | **Ideas about content:**   * Content from a variety of sources on the nature of partnerships – for example:   + - all parties involved have some sort of personal stake in the partnership     - all partners are working towards an explicit common goal     - the partners have a similar ethos or system of belief     - the partners work together over a reasonable period     - there is a mutual understanding of the value of each partner’s contribution     - there is respect and trust between the partners * Developing an awareness of: * relevant policies/legislation (such as the Health and Care Act 2022) and how partnership working underpins this legislation * the roles of integrated care boards, integrated care partnerships, place-based partnerships and provider collaboratives * statutory guidance, such as NHSE’s ‘Working in partnership with people and communities’ * the education system and the influences (both positive and negative) on children and young people’s mental health * children’s safeguarding partnerships and responsibilities under [Working together to safeguard children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2) * education legislation and the Department for Education’s working arrangements with schools * Encouraging reflective practice among participants in areas such as: * existing partnerships that they are engaged in, and their role as leaders in working in partnership * how they model behaviours to other staff and colleagues * how they ensure that partnerships are effective in achieving the goals of their organisation in meeting the needs of service users * Consideration of different levels of partnership and how these apply to their service/area. * Networking and sharing information and knowledge. * Joint referrals systems or joint working. * A consortium model of joining together in certain aspects of the work. * Integration and fully multi-agency or shared services. * Identifying key partners relevant to their area of work, including building partnerships with their service users, carers and community. * Consideration of ways to develop partnerships with key agencies within the NHS, as well as what external partnerships exist or require development, and barriers to/facilitators of partnership working. * Working with organisations beyond statutory services for true joined-up working and collaboration, including knowledge and understanding that digital mental health and wellbeing provision are a key part of a truly integrated pathway. |
| **Leadership theory and personal leadership values and style**  **Aim:** To introduce different theories and models of leadership so that the participants can apply these to their own work as leaders. | **Learning objectives:**  By the end of the course, participants will:   * understand and apply relevant leadership models and self-assessment and feedback tools to understand their own leadership practices and their impact on people, teams and outcomes * be able to reflect on their own leadership behaviours, their impact on others, and their leadership development | **Ideas about content:**   * Leadership theory: consideration of prominent leadership models, including consideration of the evidence base/critical appraisal of these models, and understanding their applicability to participants’ service settings and their own leadership practice (see Appendix 2 for examples of leadership theory and self-assessment tools). * Self-assessment and use of feedback: to be able to identify and reflect upon their own leadership strengths, areas of development and challenges, using tools and feedback including; * the impact of their leadership behaviour on their team and on outcomes * being flexible and adapting based on situations and individual/team needs and challenges * consideration of ways to support continuous learning as a leader (for example, listening, curiosity, reflexivity and seeking feedback) * Inclusivity and diversity: critical appraisal of leadership models/theory through the lens of inclusion and diversity and recognition of how leadership behaviours can promote or hinder diversity and inclusion. |
| **Interpersonal leadership styles and organisational culture**  **Aim:** For participants to examine their interpersonal leadership skills, gain knowledge in organisational culture, and learn how to support others, applying these skills in their workplace. | **Learning objectives:**  By the end of the course, participants will:   * develop knowledge and skills in working with, and influencing, others * develop knowledge and skills in building interpersonal relationships within and outside their own team * understand how to address interpersonal difficulties and conflict * develop knowledge and skills relating to the development of others and promoting staff retention * develop knowledge and skills in leading with care and developing psychological safety for staff and service users * assess the current culture of an organisation/system, ways they contribute to it, and levers that can be used to change it | **Ideas about content:**   * Personal interpersonal style: * consideration of positive interpersonal styles and communication skills (for example, clear communication, honest and open dialogue, adjusting language to suit setting, diplomacy, humility, curiosity, the ability to hear and listen, delegating, trust, empowering others, boundaries and the ability to work collaboratively with others * Managing difficult conversations: * consideration of ways to facilitate communication with the range of stakeholders involved in CYP MH service provision * consideration of ways of influencing others and managing ‘upwards’ * Embedding teamwork and creating effective teams:   + creating a positive and safe team culture and environment, facilitating communication between others in their teams/organisations   + enabling all staff to have a voice, and including a critical voice when they have something to raise * Looking after staff: * compassionate leadership * promoting staff wellbeing and resilience, and addressing burnout * providing psychological safety for staff * enabling staff development (training, meaningful appraisals, personal development, positive and negative feedback) * developing ways of addressing conflict and bullying * supportive management of incidents and mistakes * empowering others and promoting autonomy * developing an explicit EDI plan for the team/workforce * Making use of the expertise and support around them, noting the importance of continual learning and mentorship in shaping a culture of learning. * Organisational culture:   + consideration of relevant theories relating to effective organisational culture and leadership   + considering ways to analyse the culture of their organisation   + considering ways in which they contribute to the culture in their team and organisation   + addressing inequalities in teams/organisations and promoting anti-discriminatory practices   + considering key elements to promote a culture of psychological safety within the work environment for staff and service users   + considering trauma-informed approaches where appropriate |
| **Service transformation in practice**  **Aim:** To develop knowledge of models, frameworks and theory that will enable participants to implement effective service transformation, driven by national and local policy and need. | **Learning objectives:**  By the end of the course, participants will:   * understand how the five core principles of CYP MH (formerly CYP IAPT) inform and impact the transformation process * understand national and local commissioning arrangements relevant to CYP MH * develop knowledge about their own local transformation/strategy for CYP MH and how their organisation engages with this * develop knowledge of models, frameworks and theory for effective implementation and service transformation, and how to use these to develop and implement a transformation plan for service change * understand the role of workforce planning in transformation and be aware of the range of resources available to support the process * understand a range of options to measure the impact of the service transformation | **Ideas about content:**   * How the five core principles can drive change and influence the change process. * National guidance on organisational structures and the laws/rules governing the various sectors (including MH). * Understanding of national, regional and local drivers of change and policy and how to access relevant related data and statistics. * Local drivers for change. * Knowledge of other stakeholders/charities that operate in their local area with whom they can collaborate. * Knowledge of models, frameworks and theory for effective implementation and service transformation. * Business planning/project planning. * National workforce plans for health and education, for example. * Principles and elements of workforce planning at different levels in an organisation/across systems, using good practice examples and relevant resources. * Workshops simulating the transformation process. * Ensuring from the planning stages that there is collaboration with carers to truly embrace the ethos of a new way forward. * The place of digital services in transformation. * Demand and capacity modelling. * Awareness of new roles, their benefits and how to support their introduction, for example, with parents/carers, peer support workers |
| **Evidence-based practice and service evaluation**  **Aim:** For participants to understand how to effectively make use of evidence-based practice and service evaluation to inform and guide service development and workforce planning. | **Learning objectives:**  By the end of the course, participants will:   * understand how to access and critically evaluate the evidence base in relation to CYP MH interventions and service delivery:   + to benefit children, young people and their families/carers   + to use the evidence base and outcomes in wider reporting   + to improve efficiency and effectiveness and inform workforce development * effectively engage with and support clinical, operational and management staff to make use of evidence and outcomes data to inform workforce development * effectively engage with feedback from children, young people and their families/carers on their experience of services and ensure this feedback is used in a meaningful way to support service improvement * incorporate complaints, common themes and their investigation findings into service development to fully close the circle * have knowledge and awareness of both the benefits and common challenges/pitfalls of service evaluation * understand how outcomes data can be made accessible to all partners (including children, young people, parents and carers) and can be effectively used to create an authentic participatory feedback process that guides workforce development and strategic and business plans | **Ideas about content:**   * Review the definition and principles of evidence-based practice and access up-to-date information, for example, guidelines from the National Institute for Health and Care Excellence, Cochrane Library systematic reviews, and evidence from the Child Outcomes Research Consortium. * Review the NHS Mental Health Services Data Set, including requirements, processes and rationale, and gain some knowledge of the SNOWMED codes used within the data set. * Review the principles and practices of outcome-informed practice as it relates to service delivery and development. * Encourage critical appraisal of the evidence base and challenge research data assumptions. * Encourage engagement with evaluation data, wider service information and feedback from multiple perspectives to continually develop and improve services and inform strategic planning. * Provide examples and/or case studies of related service evaluation (including effective partner engagement and feedback processes) as a platform to enable conceptualisation and critical analysis of these themes. |
| **Ensuring meaningful participation at all levels of services**  **Aim:** For participants to understand the importance of meaningful participation across service design and delivery, and develop methods of embedding this effectively in their service. | **Learning objectives:**  At the end of the course, participants will:   * understand the importance of participation by children, young people, parents, carers and the community across service design and delivery * understand models of effective participation and practical tools for CYP MH services * understand how to embed a culture of participation in their service and ensure there are appropriate systems in place to do this * demonstrate ideas about what participation with service users and communities can mean in practice | **Ideas about content:**   * The Lundy model and practical tools for putting this into practice:   + Article 12 of the United Nations Convention on the Rights of the Child; introduction to children’s rights   + applying the 9 basic requirements for meaningful and ethical child participation   + ensuring the involvement of those with lived experience in the course and when setting up participation groups in services   + examples of participation in practice in different areas of service design and delivery   + considering how to develop a workforce that includes and is supportive of those with lived experience, for example, through a peer support programme * Consider the spectrum of opportunities to influence: * participation: developing ways in which children, young people, parents and carers contribute to decisions about the services they or others receive * co-design: developing ways in which children, young people, parents and carers contribute to the definition of problems and creation of solutions. This can happen at any point in programme planning and delivery, and can happen more than once * co-production: children, young people, parents and carers are involved in the planning, design, delivery and evaluation of a process/project in its entirety. This requires complete power sharing * consultation: children, young people, parents and carers are asked for their views and opinions on a piece of project work or at a certain point of policy/strategy development. This also involves structured feedback or ‘You Said, We Did’ responses from professionals * Leadership: young people, parents and carers are trained to lead on project or programme delivery. * Learning practical ways of working with advocates and family champions. |

# Course structure, teaching and learning strategies

The course will be delivered across 12 teaching days. In addition to these, all students should be given an extra 3 study days across the year to facilitate their learning and ability to meet the course requirements.

Courses should include a mix of lectures and academic teaching, including teaching about the theory and skills that support the learning objectives. They should also include smaller group sessions that support participants in making sense of the large group sessions, linking them to their own work context, facilitating reflective practice and supporting their personal leadership development. These groups will also support students with their chosen service transformation project, which they engage in during the year (see the ‘Assessment’ section below).

The aims of the course in relation to key themes relevant to CYP MH leadership development have been set out above. However, there are some ‘golden threads’ that should be woven through the course as a whole:

* + - * Participation and co-production

Ensure that participation and co-production are embedded throughout the programme:

* in the way in which the programme is delivered
* in how service leads are encouraged to lead and transform services in practice
  + - * Equity, diversity and inclusion

Ensure that EDI is consciously considered throughout the programme:

* in how the programme is delivered
* in how participants are encouraged to actively promote EDI in their leadership and service transformation
  + - * Systemic thinking

Ensure that systemic considerations are consciously reflected on throughout the programme:

* + encourage participants to bear in mind the complexity of CYP MH needs, the different expectations that may need addressing and the range of services, support and systems that are involved in addressing difficulties and achieving positive outcomes
  + support participants in understanding and conceptualising their leadership role within the CYP MH and wider healthcare system, as well as the wider societal and cultural context, rather than just within their individual team and/or organisation
  + understand how changes in one part of the CYP MH system may impact on other parts of the system
    - * Staff wellbeing

Ensure that this is consciously considered throughout the programme:

* consider ways to support staff in their teams and organisations, including the importance of a compassionate leadership approach
* consider the needs of staff and the ways in which their external context and lived experience impact on these
* consider how staff can look after themselves and build a network of support in their leadership role
  + Working from the evidence

Ensure that this is consciously considered throughout the programme:

* using national and local evidence bases and outcomes to support clinical practice, service design and workforce planning
* encouraging critical appraisal of the evidence in relation to the needs of different communities and populations
* Workforce planning

Ensure that the programme is mindful of ways in which all the themes relate to workforce planning:

* + consider ways in which national and local policy, needs and objectives inform workforce planning
  + consider factors relating to EDI in workforce planning
  + collaborate with relevant stakeholders and partners in workforce planning, including those with lived experience of/who use CYP MH services
  + make appropriate use of the evidence base and service evaluation to inform workforce planning

(Please see Appendix 3 for more ideas on possible learning objectives and teaching content relating to workforce planning.)

* Developing participants as reflective leaders
* encourage a reflective stance throughout in relation to professional and personal development in their leadership roles

# Assessment

#### Assessment overview

When the course is delivered as a postgraduate certificate programme, assignments will need to follow the requirements of the specific HEI. As such, there is flexibility in how each HEI wishes to apply the learning objectives with regard to the assessment modality.

The course key learning objectives should be assessed using a combination of oral and written assignments, such as presentations, written essays and reflective diaries. Assessments should examine students’ knowledge, understanding and application of all intended learning outcomes, with specific reference to the ‘golden threads’ of the curriculum, and should include the following:

1. Demonstrate knowledge and critical understanding of theories of leadership and change management, and how they apply to the individual as well as within organisations.
2. Review the causes and effects of organisational change and identify leadership strategies to enable and lead effective change within organisations. This will include a critical and applied understanding of the role of local and wider systems in service change, as well as reflection on the individual’s own leadership style and characteristics during the process of leadership and change.
3. Critically examine an organisation’s ability to satisfy its service users and develop a critical understanding of participative models of service user involvement and their implementation within the organisation, as well as EDI considerations.
4. Demonstrate design and delivery of service transformation consistent with the core CYP MH (formerly CYP IAPT) principles.

#### Assessments

As mentioned above, each HEI will have flexibility in relation to methods of assessment to ensure the learning outcomes have been met. However, all courses should ensure that they include the following:

1. Transformation project implementation and outcomes: presentation(s) and/or written report(s)

All students should be assessed, either through written assignments or oral presentations, on the development and implementation of their transformation project. Both the transformation project and the assessment criteria for this assignment should align with the intended learning outcomes of the programme and the core principles of CYP MH delivery. This will include a combination of the following:

* why they want to bring about this change/why it is necessary or important:
* reference to national and local policies/drivers that inform their choice of transformation project
* analysis of the specific CYP MH service context and examination of the process by which specific objectives are agreed and defined within the local setting
* reflection and analysis of key organisational and managerial facilitators and barriers
* mapping of key stakeholders and collaborators, including service users/carers, and the potential supports and barriers to implementing the project
* description of a change plan for their service and their role within this
* consideration of the engagement of wider systems in developing and implementing change
* discussion about what success will look like and how they will measure the outcome of the project
* consideration of anticipated challenges – what are the difficulties that must be overcome to achieve the ideal?
* a brief description of the implementation of the project
* the impact of feedback on the implementation process – their understanding of this and further action based on this analysis
* the outcomes of the project
* plans for the future sustainability of change
* a critical review of the project, for example, the impact of organisational systems on the process of change; the impact of parallel change processes on the process of change
* reflections on their leadership practice, for example, what aspects of the project were most challenging? What skills were helpful? What did they learn about themselves as a leader?

1. Leadership skills and reflexivity

All students should also be assessed in relation to leadership skills and reflexivity in their leadership role. For example, this may include:

* + an in vivo format of assessment, such as a role-play/video recording of a conversation/meeting relating to their leadership role; a guided role-play or podcast-style interview; a discussion regarding the change project; or an anticipated difficult conversation
  + a reflective log that may take the style of a traditional written paper, a blog or a dummy website accompanying a podcast
  + carrying out and reflecting on the results from a 360-degree appraisal

#### CPD pathway

If a CPD training pathway is available within the local HEI context, it is advisable for each trainee to actively undertake and engage in a transformation project. This practical application helps integrate the ideas from the course into practice, thereby enhancing and reinforcing the trainee’s experience. For example, this might include a (non-assessed) written or oral presentation of their project rationale and strategy, and then a post-project presentation in which they outline key findings and learning.

# Appendices

#### Appendix 1. Theme: policy and national and local CYP MH service landscapes – list of policies to consider referencing/discussing

* ‘Every Child Matters’ (2003)
* ‘National Service Framework for Children, Young People and Maternity Services’ (2004)
* National Advisory Council reports
* ‘No Health Without Mental Health’ (2011)
* Health and Social Care Act 2012
* ‘Closing the gap’ (2014)
* ‘Future in Mind’ (2015)
* ‘Five Year Forward View for Mental Health’ (2016)
* Children and Social Care Act 2017
* ‘Transforming Children and Young People’s Mental Health’ (2017)
* ‘Long Term Plan’ (2019)
* ‘COVID-19 Recovery Strategy’ (2020)
* ‘Promoting and Supporting Mental Health and Wellbeing in Schools and Colleges’ (2021)
* ‘SEND review: right support, right place, right time’ (2022)
* ‘NHS Long Term Workforce Plan: what employers need to know’ (2023)
* ‘Core20PLUS5’

#### Appendix 2. Theme: leadership theory, and personal leadership values and style – examples of leadership models and self-assessment tools

Compassionate, transformational, servant and specific health models such as the Healthcare Leadership Model and the Primary Colours Model of Leadership. Self-assessment tools and feedback: Strengthscope, Myers–Briggs Type Indicator, NHS self-evaluation, 360-degree appraisal.

#### Appendix 3. Additional ideas to support learning on workforce planning

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| Successful workforce design and planning ensures that there are the right number of staff, with the right skills and competencies, in the right place, at the right time to deliver services that provide the best possible care to children, young people and families and meet demand, within an affordable budget. A range of factors have an impact on the supply and demand of suitably skilled and qualified healthcare, administrative and managerial staff, and therefore a long-term national approach to workforce design and development is necessary. Workforce planning is a continuous process of shaping the workforce to ensure that it can deliver organisational objectives now and in the future. Resources are limited and workforce planning takes time to achieve. Effective workforce planning requires an integrated approach. It takes a significant amount of time to train healthcare professionals, people’s expectations of the workplace are shifting, and competition in the labour market will evolve over time.  A workforce plan will ensure that actions to tackle these factors in the short, medium and long term can be assessed against the current and future need for staff. | | |
| **Theme/aim** | **Learning objective** | **Content** |
| **Workforce design and planning**  **Aim:** For participants to be aware of the importance of workforce planning, including factors that should inform it and ways of doing it. | * Policy context: awareness of the system-wide context that is influencing and impacting on the development of the CYP MH workforce. * Understanding of what workforce planning is, its importance and why we do it. What does the workforce plan aim to achieve? * Awareness of key characteristics and considerations to support workforce planning. * Understanding the importance of engaging the workforce, service partners and all relevant stakeholders in the design and planning process, for example, adult mental health, the local authority, paediatrics. * Understanding the importance of staff engagement and wellbeing to support the success of workforce design and planning. * Understanding the importance of data-driven decision-making linked to workforce planning. * Understanding the leadership actions that will be necessary to ensure a workforce plan is delivered. * Understanding both current and future workforce considerations and driving forces, for example, emerging technologies, artificial intelligence and mobilisation of community assets. | 1. Include relevant policies, for example those listed in Appendix 1. Focus on the relevant workforce sections in current policy documents. Focus specifically on: ‘NHS People Plan’; ‘NHS Long Term Workforce Plan’; ‘Transition from children’s to adults’ services for young people using health or social care services’ (2016); ‘HEE Strategic Framework for Children and Young People’s Mental Health Inpatient Workforce’; other relevant competency frameworks; and other relevant workforce policy documents from the local authority, Department for Education, voluntary sector organisations and integrated care systems. 2. Values and vision: link to relevant strategies. Include information on how to access relevant policy and information about local implementation issues. Consider key drivers for change. 3. Awareness of workforce planning, models and processes – why, what, who and how – and access to workforce planning tools to support workforce planning. Include tools such as HEE Star, the CYP MH integrated workforce planning tool, CReST and WRaPT. 4. Understand their own organisation’s strategic direction, business plans and goals, and how these will link to and inform workforce design and planning. 5. Generate facts, metrics and data to guide strategic workforce planning that aligns with the organisation’s goals, objectives and initiatives to ensure data-driven decision-making is achieved; for example, understand population needs by completing a local needs assessment. 6. Understand current workforce data, link to benchmarking data, and learn how to use these sources of information as levers for the implementation of CYP MH services in their own organisational context. Also consider the Workforce, Training and Education MH dashboard (the Electronic Staff Record) and NHSE workforce planning data. 7. Understand workforce dynamics, including vacancy rates across different staff groups, retention/turnover dynamics, and links with staff wellbeing, protected characteristics and socio-economic factors. Consider innovative approaches to recruitment for achieving a representative workforce. 8. Link to available evidence-based interventions, current workforce roles, and the capacity, capabilities and competencies of the workforce, including a skills audit. Reference EDI. 9. Outline the local training offer and how this is linked to policies, needs assessments and the delivery of evidence-based practice, underpinned by staff supervision and appraisal. 10. Understand what the workforce needs to look like, and the considerations that will support future workforce design, planning and productivity – for example, recruitment and retention, ways of working, and new roles and skills mixes, considering audit, leadership, job planning, succession/talent management and EDI. 11. Consider gap analysis and action planning, thinking about how to use the sources of information listed above as levers to support the implementation of CYP MH workforce planning in their own organisational context. 12. Understand the importance of staff engagement and wellbeing throughout the design, planning, implementation and review process. Consider what organisational strategies and resources may need to be in place to support the wellbeing of the current and future workforce. 13. Understand the benefits to productivity of staff wellbeing, including improved outcomes for children and young people (improved retention, increased motivation and engagement, less absence, reduced burnout). 14. Understand what the workforce needs to look like to meet service needs, and influence this process by ensuring that workforce considerations are part of the service and financial planning process. 15. Understand the importance of staff supervision and appraisal, including clearly defined staff roles, career/job planning and workload. 16. Understand what factors may need to be in place to support the wellbeing of the current and future workforce. |