

Strategic workforce planning,  
shaping and commissioning

# Self-assessment questionnaire

This self-assessment can be used by leaders/commissioners to enhance the strategic workforce planning, shaping and commissioning process and help with getting started. It forms part of your analysis to identify your current position to plan your next steps. There are five key categories with digital, co-production and person-centered ways of working embedded across all areas:

1. **Balancing service commissioning, workforce commissioning and finance**
2. **Leadership and wellbeing culture**
3. **Prevention, re-ablement and community development**
4. **Quality, safety and risk enablement**
5. **Strategic integrated working**





## 1. Balancing service commissioning, workforce commissioning and finance

<b>1</b>	There are outcome-based approaches to commissioning and procurement that enable people to take genuine choice and control.	
<b>2</b>	There is a market position statement which has been described and communicated locally.	
<b>3</b>	Equality, diversity and inclusion is embedded in service and workforce commissioning.	
<b>4</b>	The skills and development needs of the commissioners have been identified and steps taken to meet them.	
<b>5</b>	Key partners have been consulted to identify the appropriate data requirements and sources and any limitations such as cost and timescales.	
<b>6</b>	Data has been collated and analysed from people who employ personal assistants through direct payments, user led organisations and community and neighbourhood groups.	
<b>7</b>	Consideration has been undertaken to make Adult Social Care Workforce Data Set (ASC-WDS) a contractual requirement and potential support for providers to ensure compliance has been identified.	
<b>8</b>	Providers have costed workforce plans and training and development plans linked to future commissioning requirements taking into consideration recruitment and retention needs.	
<b>9</b>	The decommissioning and re-commissioning priorities are well defined to meet the needs for people who draw on care and support and are focused on outcomes.	
<b>10</b>	Specialist support, advice and training is provided to people who wish to employ their own personal assistants and to organisations who would like to offer Individual Service Funds.	
<b>11</b>	The workforce numbers, skills, knowledge and competencies required with new types of services are clearly defined in your workforce strategy, linked to your market position statement, including financial implications.	

### Comments



## 2. Leadership and wellbeing culture

1.	The DASS and team demonstrate professional leadership of strategic, workforce planning, shaping and commissioning in the local area.	
2.	There is a designated finance lead to support commissioning and workforce leads with transformation.	
3.	There is recognition that the development of new approaches to care and support will require change management skills, and digital leadership.	
4.	There are designated leads to consult and communicate with the internal and external workforce and the wider public about the service redesign and workforce transformation plans.	
5.	There is a co-production culture which includes skills in partnership building with people who draw on care and support, carers, and other citizens.	
6.	There is an open dialogue with the whole workforce to ensure they are engaged, involved, and supported at all stages of the process.	
7.	There are clear structures and statements which recognise and promote culture, equality, diversity, inclusion and wellbeing.	
8.	Leaders, managers, and frontline staff have the necessary skills to analyse Adult Social Care – Workforce Data Set and what it tells you about key workforce challenges and understand workforce solutions.	
9.	Mechanisms are in place to measure the impact of change on the workforce, including changes to their roles against expected outcomes.	
<b>Comments</b>		



### 3. Prevention, re-ablement and community development

1.	There is an open dialogue with people who draw on care and support, carers, families and other local community and neighbourhood groups.	
2.	There are arrangements in place for social workers, care providers and local agencies to promote community support, strength-based approaches, and conversational assessment to promote prevention.	
3.	The workforce recognises the value of investing in user led organisations locally, in order to create opportunities for co-production, as well as potentially delivering aspects of service provision.	
4.	The workforce implications of supporting care, user led organisations, disabled people's and carer's organisations, self-advocacy, peer support, co-operatives, VCSE, housing and community support, have been included in your strategy.	
5.	New roles have been identified and designed and skills and knowledge required to deliver effective support/community services which provide genuine and maximum choice and control.	
6.	The workforce delivers the care and support in partnership between individual employers, people who access care and support and their families, carers, community, voluntary and private sectors, health, and councils including wider support services such as housing, leisure, and community safety.	
7.	The system works together with community partners to understand and meet the diverse needs of the local population, including prevention and re-ablement services.	

#### Comments



#### 4. Quality, safety and risk enablement

1.	Directors of Adult Social Services and commissioners regularly review market quality against CQC single assessment framework.	
2.	Service providers have clear risk enablement policies and practice guidance.	
3.	Service providers embrace equality, diversity, and inclusion in their practice and how they will manage risk in an inclusive way.	
4.	Leadership and workforce support is available to ensure positive risk taking.	
5.	Relevant checks are undertaken across the whole workforce in relation to positive risk taking, safeguarding and regulation.	
6.	Individual employers, self-funders and personal assistants are supported to understand safeguarding.	
7.	Registered care managers are supported in the local area.	
8.	There is a local Adult Safeguarding Board multi-agency integrated workforce strategy.	
9.	Regulatory workforce requirements are being met across the whole social care sector and support is offered to improve quality where needed.	
<b>Comments</b>		



## 5. Strategic integrated working

1.	There is a workforce strategy that identifies how and what is required to progress the development more effectively through Joint Strategic Needs Assessment (JSNA).	
2.	There is a clear vision and statement about how you are working with health and wellbeing boards via Joint Local Health and Wellbeing strategies to inform the JSNA.	
3.	Equality, diversity and inclusion has been incorporated into strategic integrated working across health via local Integrated Care Boards (ICBs) and Integrated Care Partnerships (ICPs).	
4.	There is a digital strategy in place that has been communicated to providers.	
5.	There is joint financial investment in the local health and wellbeing strategy outcomes.	
6.	Challenges and strengths have been identified with strategic partners.	
7.	Joint workforce data with health and social care for the delivery of integrated services has been collated and analysed.	
8.	Joint workforce development plans with strategic partners have been costed and funding allocated.	

### Comments

## What's next?

Review your scores total for each section.

- Where do you rate highly - what is working well and what are the success factors resulting in this score? How will you maintain this success?
- What areas have the lowest scores?
- What action do you need to take and in which priority order to address these?
- What can you do to improve your middle scores?
- Use this analysis to help take you forward into the analyse, plan do and review approach.

