

# London Regional Public Health Workforce Action Plan

September 2022 – March 2025

Progress in 2023/24 and look ahead to 2024/25



Office for Health  
Improvement  
& Disparities



UK Health  
Security  
Agency



ADPH  
London

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AUTHORITY

**NHS**

# Signatories:

The London Public Health Workforce Development action plan is a working document presenting the priorities of partners across the region to inform a collective strategic approach to public health workforce development.

The aim of this plan is to respond to the Public Health Workforce Development needs of the region, recognising that we all play an active role in its successful delivery.

This plan represents the regional programme of work and activities and includes both new interventions and projects identified by the Collaborative and existing interventions. Local and organisational plans will be in place to inform specific priorities relevant to place.

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Co-chairs of London Public Health Workforce Collaborative

# The London Public Health Workforce Collaborative brings together partners to develop a unified strategic approach to public health workforce development

**Vision:** Building a healthy, happy and thriving workforce that reflects the diversity of our London population and is ready, willing and able to improve the lives of all Londoners and reduce inequalities in the short, medium and longer term

## Aims:

1

Aim 1 Develop and deliver an **integrated**, **multi-level** and **holistic approach** to training and **life-course learning** for the **core public health workforce**

2

Aim 2 Provide exemplary **system leadership** to influence and develop dynamic and innovative workforce development initiatives to improve the lives and wellbeing of all Londoners and reduce inequalities in London

**integrated:** ensuring that workforce development is coordinated across all stakeholder organisations

**multi-level:** this strategic approach is designed to improve workforce development at regional, sub-regional (ICS) and place-based levels

**holistic approach:** the action plan aims to improve workforce development across a number of dimensions, in particular workforce capacity, workforce capability and workforce wellbeing

**life-course learning:** commitment to training the future and current workforce at all career stages and for public health professionals to continually improve their practice

**core public health workforce:** those who work primarily in a role in one or more of the public health domains (health improvement, health protection, healthcare public health, health intelligence, academic public health)

**system leadership:** using combined skills and expertise of collaborative members and their teams to coordinate efforts across health and care system in a way that maximises health and wellbeing gains for Londoners



# London Public Health Workforce Collaborative:

## Our ambitions and principles

Ambitions are not mutually exclusive. The ambitions will be used to test and evaluate the Collaborative's success. Equality, diversity and inclusion (EDI) runs through all ambitions and actions as a 'golden thread' but also have a specific ambition and actions on EDI which requires our specific focus.

### Pan-London collaboration and knowledge exchange



- System complexity necessitates distributive leadership and mutual learning
- Stepping outside core purpose to impact positively on the impact of all Londoners
- Collaborative can shape strategic direction of workforce development across London

### Systematic workforce intelligence and planning



- Better understanding of workforce supply including increased demographic awareness and demand to improve decision making and workforce agility
- Quantitative data beyond specialist workforce difficult to obtain
- Soft intelligence supports real time decision making and continuous improvement

### Delivering workforce outcomes that are equitable, seek representation of all backgrounds and support inclusion



- Enable equity of access, experience and outcomes in public health careers at all levels
- The workforce should better represent the community they serve
- Fostering cultures that are psychologically safe and encourage a sense of belonging

### Right capacity of core and wider public health workforce and assurance of diversity at all levels of that pipeline



- Staff are our most important asset for delivery
- Public health will deliver best health outcomes for all groups and communities with optimum number of staff at all levels in our organisations
- Staff have an understanding of the importance of tackling health inequalities

### Continuous improvement in workforce capability, systems and structures



- Work should enable us to be the best versions of ourselves
- Lifelong learning values staff, supports resilience, retention and ability to challenge
- Growing skills at all levels improves skill mix, decision making, talent management and succession planning
- Monitor our performance and continuously addressing barriers to achieving representation and equity of access to training and career opportunities

# Key achievements and impact



A1 & A2

Ensure **governance and mechanisms** in place to deliver vision, aims and ambitions of the London Workforce Collaborative and continue influencing the **development of a multi-professional School of Public Health**



B2 & C1

Agree a set of actions (C1) and core principles to **remove structural barriers to representation** informed by scoping work (B2) to understand career entry and progression points



D1

Establish formal support for applicants to submit a **specialist portfolio** to UKPHR to strengthen specialist pipeline and ensure an equitable offer across London organisations



E1

Develop a **central CPD hub** to provide a central place for signposting onto public health learning events, resources and training to help ensure all those working in London are aware of the opportunities available



E2

Initiate a **rolling London development programme** for existing and emerging skills complimenting existing offers, promoting networking and addressing a key gap in bringing the public health workforce up to speed with key public health issues

High-level update on delivery March 2024: **There is further work in 2024/25 for across all 5 project**

Governance agreed. Need meeting rhythm for 2024/25. Priorities of School of Public Health to be discussed at stakeholder roundtable in March.

Reports discussed at 18.7.23 Collaborative to remove structural barriers to recruitment, retention and progression. Next step EDI action plan.

1<sup>st</sup> applicant has been accepted onto the specialist portfolio register. Phase II delivery ongoing for 27 participants. 3 pre-applications expected by end of March '24.

CPD landing page with interactive regional map launched on FPH website November 2023. Now need to populate with upcoming events and training.

Delivery group has drafted programme of virtual workshops and in person conference for 2024. Further work on content and delivery underway.

# Existing regional BAU: key achievements and impact



A3

Deliver **London Public Health Forum** - providing a high-level strategic conversation on urgent and critical public health priorities



B2

Continuous liaison across all Collaborative member organisations to increase completion of the annual **HEE specialist and practitioner data collection survey**



D2

Develop opportunities to embed public health into **specialty medical training**



D3

Implement an equitable **public health practitioner registration support scheme** and development offer for the public health practitioner workforce



D4

Establish **population health fellows** across wider health and care system and at least one in every ICS to embed public health core skills and knowledge across the wider NHS workforce to improve population health

## High-level update on delivery March 2024:

PH forum page on ADPH L website. Forum on child poverty and nutrition delivered on 1.11.23. 250 attendees. Smoking and vaping forum on 13.3.24. 200 attendees.

2022 report published. Survey to revert to being every two years. Next survey to be commissioned Oct 2024. Findings difficult to interpret. Further work paused.

Toolkit for paediatric registrars was relaunched Sept 2023. Work on training started with School of Psychiatry. First dual accreditation PH/GP registrars start in August 2024, alongside PH, GP VTS posts.

20 practitioners actively working on their practitioner portfolios and London Practitioner network established. Contract with NHS E for 2 further cohorts.

Two fellows finished in August 2023 and three began in September 2023. Priorities for work to be partly shaped through March 2024 stakeholder roundtable.

# Budget

## Update on spend

- Original budget £200,000 from HEE
- Spend to date (February 2023/24) £109k.
- Budget remaining £91k.

## Look ahead

- Planned budget will be redistributed to focus funding on: the sustainability of the SRbPA route; project management until March 2025; and a F2F CPD session in the autumn.
- WT&E have found an additional £45k to maintain funding of our project manager. This is critical to delivery of the Collaborative's actions in 2024/25.

## Ambition: Pan-London Collaboration and knowledge exchange



**Challenge/opportunity:** There is a need to work as an integrated system on public health workforce development. Opportunity to establish a delivery mechanism and develop robust partnership governance and shared accountability to jointly oversee the delivery of the aim and objectives of the Public Health Workforce Collaborative to address this. Linked to [Aim 1](#)

Item	Priority actions	Progress update for 2023/24	Look forward for 2024/25
Shape strategic direction of workforce development across London	<b>A1. Ensure sustainable governance and leadership of collaborative</b>	ToR and expanded membership – completed. Delivery group meeting monthly Collaborative last met in February 2024 to review progress in 2023/24 and agree priorities for 2024/25	Monthly delivery group meetings Collaborative to meet 3x in 2024/25, next after mayoral elections Annual review at PHSLG. Agreed approach after August (part of February Collaborative discussion)
	<b>A2. Influence development of the School of Public Health to include the wider workforce.</b>	School of Public Health being developed in restructured WT&E (formerly, HEE London)  Restructuring nearing completion	Embedding of new School of PH infrastructure and governance. Roundtable with external stakeholders early March to discuss School of PH priorities. Consider opportunities for Collaborative. Develop opportunities for more informal WFD discussion, greater borough involvement
Keeping the public health family connected	<b>A3. Deliver regional Public Health Forum</b>	3x forums a year, number of delegates, hit rates on website, evaluation.  Discuss rotating lead organisation or region. <a href="#">Promotional video produced</a> . Latest PH forum delivered 12 March 2024. 200 attendees. Sir Chris Whitty keynote speaker	Consider future development. Should lead organisation or region rotate?  Plan forum for early summer. F2F event expanding PH forum concept in the autumn.



## Ambition: Systematic workforce intelligence and planning



**Challenge/opportunity:** No accurate understanding of the challenges and opportunities of the whole public health workforce to deliver public health priorities. Data exists for specialist workforce, including public health speciality trainees. Roles below specialist level are difficult to count and posts fluctuate. There is a need to better understand the workforce in real time and where we can most impact in current financial climate. Linked to [Aim 2](#)

Item	Priority actions	Progress update for 2023/24	Look ahead for 2024/25
Understand career entry and progression points	<b>B1. Identify the barriers and enablers in public health career entry, progression and retention</b>	£50k spent to commission 2 pieces of work.  Transformation Partners presented findings on HPT recruitment and retention. UCL literature and interview research presented at 18.7.23	Ensure reports are available on ADPH L website  Deliver next steps agreed by Collaborative in July 2023 (see C1)
Develop a regional perspective of the public health workforce	<b>B2. Increase completion of the annual HEE specialist and practitioner data collection survey.</b>	Report published <a href="#">2022 final report published</a> . Ongoing challenged with London completion rate.	Next survey to be commissioned Oct 2024. Action currently paused.
Develop quantitative understanding of whole public health workforce <b>*NEW*</b>	<b>B3. Collate, analyse and interpret data</b> that organisations hold on demographic and protected characteristics	New action from February Collaborative meeting	Delivery group leads to discuss data with NHS E workforce data leads, including registrar data, learn from expertise  Develop KPIs to monitor improvements in making workforce more diverse, will require additional capacity to make possible

## Ambition: Delivering workforce outcomes that are equitable, seek representation and support inclusion



Challenge/opportunity: There is a need to bring together existing workforce intelligence and understand actions already taken and the gaps/where the collaborative can add value to ensure equitable workforce outcomes. Improvements needs to be made against a backdrop of budget restraint, recruitment freezes and the possibility that Public Health is deprioritised post-pandemic. Linked to [Aim 2](#)

Item	Priority actions	Progress update for 2023/24	Look ahead for 2024/25
Removing structural barriers to representation in recruitment and retention	<b>C1. Agree a set of actions and core principles to remove structural barriers to representation in recruitment and retention.</b>	<p>B1 research, WRES data and other sources discussed at July 2023 Collaborative</p> <p>Request for EDI action plan. Initial draft, still needs work</p> <p>London UKHSA health protection teams have developed their own EDI action plan (Laura Pomeroy)</p>	<p>Develop Collaborative EDI action plan with small number of deliverable actions</p> <p>Share generalisable learning from UKHSA EDI action plan</p> <p>Ensure sustainability of specialist portfolio route support (D1) in recognition of its importance in increasing diversity of specialist workforce. Expand support offer to tackle systemic barriers.</p>
Diversifying the workforce and encouraging systems leadership	<b>C2. Work together to deliver the ADPHL's Supporting Black, Asian and Minority Ethnic communities action plan</b>	Work yet to start	<p>Delivery group leads to discuss potential next steps with ADPH L. The aim is to establish a strong support network for psychological safety that is embedded in London public health.</p> <p>Work with boroughs to encourage local recruitment to secondments and entry level jobs.</p> <p>Monitoring diversity of Educational Supervisors to reflect registrar diversity</p>

# Ambition: Right capacity of core and wider public health workforce and assurance of diversity at all levels of that pipeline



Challenge/opportunity: Workforce planning for specialists shows major gaps across the system and a need to increase the specialist pipeline. The impacts of new consultants coming through the public health specialty training programme will only start to be felt in 2027 and is therefore critical for the specialist supply that we look to other ways of supporting the development and capacity of the workforce and strengthen the workforce pipeline as a whole. Linked to [Aim 1](#)

Item	Priority actions	Progress update for 2023/24	Look ahead for 2024/25
Strengthening specialist pipeline	D1. Establish formalised support for <b>Specialist UKPHR portfolio</b> .	Programme costing £78K for 1 <sup>st</sup> cohort Programme coordinated by WT&E and workforce delivery group project manager with support from steering group. 1 <sup>st</sup> applicant has been accepted onto the specialist portfolio register. Phase II delivery ongoing for 27 participants. 3 pre-applications expected by March 2024.	Hope to move to sustainable, continuously open programme. <a href="#">A top Collaborative priority for 2024/25</a>  Encourage applications by senior borough public health staff
Developing public health capacity within speciality medical training	D2. Develop opportunities to embed public health into <b>specialty medical training: paediatrics, GP and psychiatry</b> . Identify opportunities in other specialties e.g. GUM, HIV. Develop opportunities to embed public health into training for <b>allied health professionals e.g. pharmacists and public health nurses</b>	Toolkit for paediatric registrars was relaunched Sept 2023. Work on training started with School of Psychiatry.	First dual accreditation GP and public health registrars start in August 2024. Work across all 3 specialities ongoing.  Identify learning from dual accreditation GP process and share best practice Identify opportunities in other specialities e.g. GUM, HIV  Develop public health placements for other specialties outside dual accreditation and for allied health professionals  Develop public health registrar placements in ICSs/ICBs

## Ambition: Right capacity of core and wider public health workforce and assurance of diversity at all levels of that pipeline



Challenge/opportunity: As local public health teams reduce in size due to funding pressures a proactive approach to career progression and succession management is needed in addition people come into public health via non-traditional routes and may need support with understanding the technical competencies within public health and/ or support for commissioning in public health expertise. Linked to [Aim 1](#)

Item	Priority actions	Progress update for 2023/24	Look forward for 2024/25
Public Health practitioner development	D3. Establish formalised <b>support for practitioner UKPHR portfolio</b> : equitable access; mentor, assessor and verifier capacity; practitioner peer network; apprenticeships	Increased number of registrants and career development for this workforce 2023 scheme underway with 20 practitioners; contract for facilitator in place with NHSE for 2 further cohorts. The London Practitioner Network established, and 3 Network meetings taken place, including one f2f New assessors trained; still a challenge to find new verifiers. Refresher training held annually	Identify more verifiers 2024 practitioner scheme Continue delivery of practitioner peer network Light touch support for apprenticeships  Appoint 10 apprentices if METIP funding request is successful
Population health fellows	D4. Regional delivery of <b>Population Health Fellows</b> to meet NHS Long Term Workforce Plan aspiration of one Population Health Fellow in every ICS.	National funding provided from NHSE Cohort 4 started in Sept. 3 Fellows recruited who complete the programme	Waiting on national team for Cohort 5. METIP 5 fellows, on pause while work ongoing to formalise qualification Identify opportunities for fellows to liaise with wider system, e.g. directors of public health and their teams. Identify new ways for fellows to connect with the wider public health workforce e.g. contributing to registrar training days

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Item	Priority actions	Progress update for 2023/24	Look forward for 2024/25
Strengthen provider workforce as delivery arm of public health <b>*NEW*</b>	D5. Strengthen <b>capacity and capability of public health nursing workforce</b> [PHN could be focus for Collaborative in 2024/25. A lot of work on D&A workforce already underway. SH could be a future focus]	NHS E roundtable public health action plan being implemented.  Discussions about public health nursing priorities with boroughs ongoing.  Strong support from February Collaborative to include new priority action	Development of public health nursing capacity and capability action plan  Collaborative to provide strategic leadership to raise profile of work and support implementation.

## Ambition: Continuous improvement in workforce capability, systems and structures



Challenge/opportunity: Training and development opportunities are available but there is no central repository for London's public health workforce. This means people may not be aware of training opportunities that would benefit them. This results in inequitable access to CPD opportunities. There is also a need to bring together a rolling London development programme, complimenting existing offers, promoting networking and addressing a key gap in bringing the public health workforce up to speed with key public health issues. Linked to [Aim 1](#)

Item	Priority actions	Progress update for 2023/24	Look forward for 2024/25
Equitable access to learning and continued professional development	E1. <b>A central point of access</b> to navigate the various CPD and career progression opportunities available.	£30K funding now spent. CPD landing page with interactive regional map launched on FPH website November 2023.	Start promoting L&D opportunities on CPD landing page e.g. E2 learning events, PH forum, registrar conference. New School of Public Health page.
Equitable access to learning and continued professional development	E2. Commission annual rolling programme of <b>learning events</b> (mixture of virtual and face to face)	£47K including project manager costs Delivery group has drafted programme of virtual workshops and in person conference for 2024	Development and delivery of festival of learning Evaluation of festival of learning Consideration of resources needed to enable rolling programme
Equitable access to learning and continued professional development <b>*NEW*</b>	E3. Support development of a <b>dynamic and flexible workforce</b> . Work could include sharing job specs, sharing service specs, informal rotations, short secondments, workshops, networks and peer support	Priority in a number of Collaborative related discussions in 2023/24. Shared Sharepoint spaces difficult to set up across boroughs	Discuss with ADPH lead about ideas to take forward Develop short action plan Identify resource to deliver (could be project manager) Present workforce Collaborative action plan to ICS workforce/supply delivery boards, starting with NCL

# High-level Risk Register for 2024/25

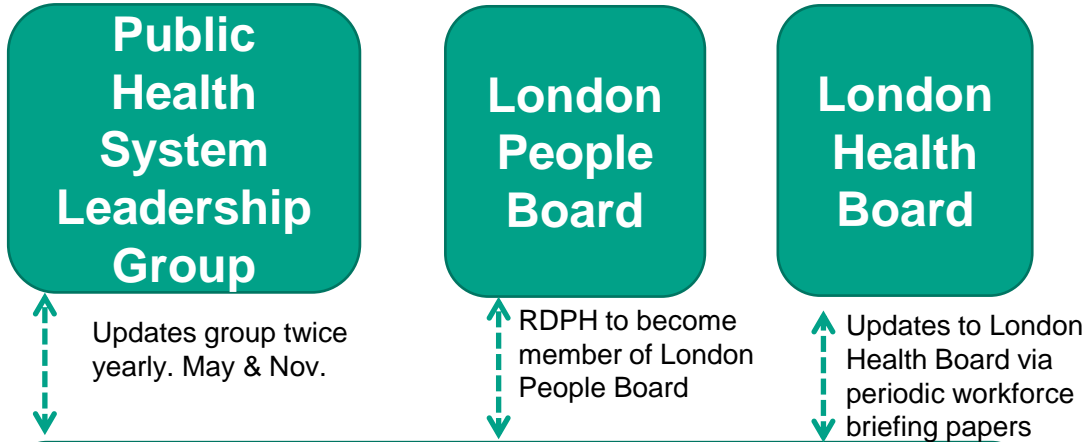
Risk description	Category	Likelihood	Impact	RAG	Migrating action
<b>1.1. Provider public health workforces</b> (public health nursing, drugs & alcohol, sexual health) facing funding and capacity challenges	Workforce constraints and capacity	4	3	12	Start with public health nursing, largest budget line in most local authority budgets. Develop strategic action plan in 2024/25 for London.
<b>1.2 Reduced staff budgets</b> provide insufficient Public Health staffing capacity in London to include delivery of The Collaborative's ambitions and associated projects.	Workforce constraints and capacity	4	4	16	Ensure workplan is achievable within existing resource, prioritising and deprioritising where required. Close working between WT&E and OHID London Funding identified by WT&E to maintain project manager post until March 2025.
<b>1.3 Insufficient training numbers and a leaky pipeline</b> to meet current and future projections on numbers of public health specialists	Workforce constraints and capacity	3	3	9	Central responsibility for PH Specialist training will remain with HEE. National conversations taking place to address this which include FPH. Interim solution to address via portfolio support offer.
<b>1.4 Ensuring a more equitable, diverse and inclusive workforce.</b> Identified activities may not proportionate to scale of the challenge	EDI	3	4	12	Activities are a good place to start Implementation of wider workforce priorities between HEE, NHSE, OHID Can be more ambitious in future years

Categories	(including but not limited to) – strategic, political, financial, legal/legislative, external/internal dependency, organisational/operational, reputational, stakeholder, service delivery, technical, delivery implementation, workforce constraints
Likelihood	1 rare, 2 unlikely, 3 possible, 4 likely, 5 almost certain
Impact	1 negligible, 2 minor, 3 moderate, 4 major, 5 catastrophic
RAG Rating	Using the chart calculate the risk score for the risk

Likelihood	RAG RATING MATRIX				
5. Almost Certain	5	10	15	20	25
4. Likely	4	8	12	16	20
3. Possible	3	6	9	12	15
2. Unlikely	2	4	6	8	10
1. Rare	1	2	3	4	5
Impact	1. Negligible	2. Minor	3. Moderate	4. Major	5. Catastrophic

# Refreshed governance to strengthen collaborative

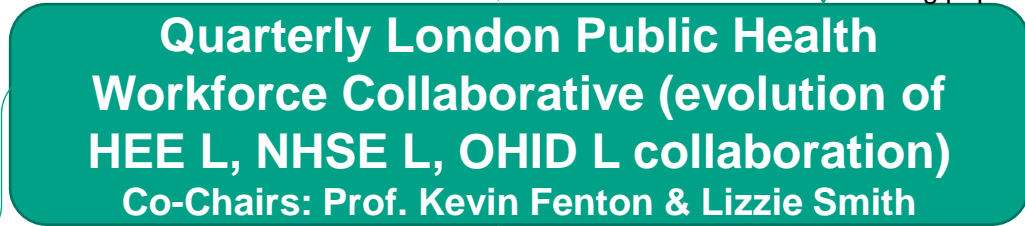
Link to strategic groups



## Key functions and role:

Political backing, challenge and oversight  
Fitting our work into wider strategic context

OHID WFD team secretariat



Set strategic direction, enabler, champion  
Ensure workforce development is a strategic priority  
Voice representing key stakeholders.  
Where funding involved, governance will sit with funding organisation.



Delivery of Collaborative action plan. Management of the Collaborative fund including financial and performance monitoring.  
Identification of shared challenges and possible solutions.





# Delivery in 2023/24

## Forward look to 2024/25

- Strong delivery of action plan in 2023/24 despite reduction in staff capacity in OHID and WT&E.
- The Collaborative agreed to consolidate and continue delivery of 2023/24 priorities in 2024/25.
- The Public Health System Leadership Group has also agreed the approach for 2024/25.
- Three new priority actions were approved by the Collaborative:
  - Collate, analyse and interpret available workforce data (B3)
  - Focus on public health nursing (D5)
  - Dynamic and flexible workforce (E3)
- Project manager post key to delivery. Thanks to additional WT&E funding the post is secure until March 2025.

# Comments, questions or suggestions

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