Chapter 25
Making It Work or Making It Better:
Workforce Potential in a Complex World

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ABSTRACT

This reflective case history describes and reflects on an innovative workforce project for specialist health and care practitioners that ran in the northeast of England from 2009 to 2011. It draws on the findings from the project's change and benefit, action research, and realist evaluations to make the case for elevating and engaging more fully with workforce potential to address endemic and pervading complexity, change, and challenge. It identifies a key "diversity-opportunity" dynamic within the project, linked to learning and working differently, and making a difference. This is transferable to other adult learning, development, and change programs that are collaborative and outcome-focused, supporting evidence/experience-based practice.

INTRODUCTION

This reflective case history draws on evidence from a two year, mentoring-based, learning, development and change initiative for health and care staff that was ground breaking at the time (Lawson, 2012). It regrettably came to an abrupt end as its funding stream ceased. Concurrently, commitments to disseminate and adopt findings were frustrated by situational changes: the loss of key staff and stakeholders; fundamental strategic re-organisations of health and care (Kings Fund, 2013; NHS Choices, 2013) and austerity-driven financial and performance challenges (NHS England, 2014). For me, this did not diminish what was achieved and a sense that there was a great deal to be learned from understanding what had worked, with what impact and how. To be able to pursue this, I was fortunate to make it the focus of a PhD (Lawson, 2017), reported here as a project-in-practice that generated an evidence/experience base to provide a worked example of a practice-research-practice continuum and the accumulation of knowledge in complexity.

Reflecting on this project and my research, and informed by my wider experience as a service manager, project manager and now researcher, I believe that workforce potential, individually and together, may too often be overlooked during change when positioned as 'associated people issues' or 'soft issues of management', referred to in Chapter 1 of this book. I am therefore seeking to make the case for elevating and engaging more fully with workforce potential to address endemic and pervading complexity, change and challenge, particularly across health and care. This position requires managers, human resource development (HRD) practitioners and external change agents to reflect on the breadth and boundaries of their own specialist knowledge and skills when engaged in change activities, and to reappraise the purpose, dynamics and opportunities within the relationships and conversations they have with the broader workforce and extending to, in this sector, people accessing their services. A shift to a more collaborative change approach would address the underlying, structurally embedded tension between performance and experience. Significantly, such an approach would move the focus on outputs to outcomes that matter to them all; not merely making systems work, but making them better.

I start by describing the workforce initiative and the Mentoring Programme within it. I then consider the new knowledge that has come from its evaluation. Finally, I reflect on it as evidence for policy and practice that might begin to inform several currently 'unsubstantiated' assumptions identified in Chapter 1 and support evidence/experience-based, collaborative practice in this area.

THE WORKFORCE INNOVATIONS PROGRAMME (WIP): THE PROJECT-IN-PRACTICE

Background

The Workforce Innovations Programme (WIP) was set up by an unique commissioning-led, cross-sector Neurosciences Network (NENN) in the north east of England that was established in 2008. It was the Network's response to regional workforce and service gaps for people living with long term neurological conditions in order to address the lack of progress in delivering the Quality Standards in the National Service Framework (NSF) for Long-term Conditions (DH, 2005). The NSF was strategic policy at the time and due for national review in 2010. Fortuitously, a two-year regional workforce development innovation fund became available in late 2008 under which the strategic funders' ambitions for thinking outside the box aligned with those of the Neurosciences Network.

The Network made a successful bid for the Workforce Innovations Programme (WIP), with three integrated strands:

- **Forums:** The strategic strand comprising four local forums covering the region, to support co-ordinated commissioning (contracting), re-design and delivery;
- **Website:** The information and communication strand to provide a central point of access to resources, links and contacts; and
- **Mentoring Programme:** The operational strand to develop the workforce, aligned with national policy and local need. This would run in parallel with the strategic work of the forums to ensure workforce readiness. This strand is the focus of this reflective case history.

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