

# The Strategic Workforce integrated Planning & evaluation (*SWiPe*<sup>®</sup>) Framework



## What is *SWiPe*?

*SWiPe* is a methodology that takes a strategic approach to transformation, incorporating population needs, the future vision for meeting these needs and workforce requirements. The approach works well for cross-organisational, place based planning. It uses high-level classifications for activity and workforce that allows strategic thinking and planning across organisations and agencies.

The language of care functions, or *high level groupings of tasks and activities designed to achieve an outcome for patients and clients*, provides the back-bone of the approach and the ability to translate between activity, workforce and finance. Workforce requirements for effective delivery of these care functions are then assessed at four defined skill levels, i.e. foundation, core, enhanced and advanced.

*SWiPe* is both a strategic and an integrated approach that complements local operational planning for service redesign and workforce transformation as it combines:

- Population health needs for a particular group of people, for example those who are frail or who have complex needs;
- Strategic service transformation and redesign, for example increased out-of-hospital care; and
- The opportunities and constraints when these are applied to the size and shape of the future workforce.

*SWiPe* can be linked to more dynamic System Dynamics modelling allowing planners to ask 'what if' questions of activity, workforce and financial assumptions.

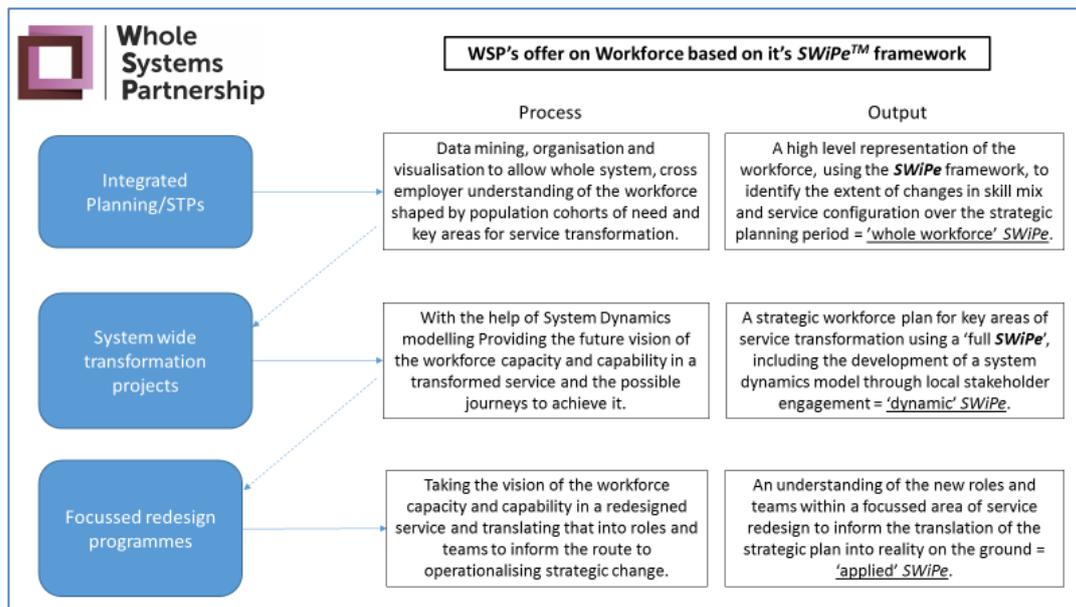
## Benefits of using the *SWiPe* approach

The framework is consistent with health and social care planning processes such as Sustainable Transformation Plans (STP) and is also being used to describe the workforce requirements around place based care. It is an approach which works well across agencies and organisations by providing a common framework to help with engagement. The modular approach enables a high-level consensus, and is capable of extension to increasingly sophisticated, integrated and detailed planning coherent with overall strategy.

There is an increasing bank of knowledge and application which continues to inform our work with clients. By integrating strategic planning for the service and workforce into a coherent framework the inter-dependencies between them become much clearer. By its nature, *SWiPe* can integrate activity, workforce and financial planning coherently and can inform the scale and timing of key service redesign objectives.

## Application

The framework can be applied at different levels, as in the following diagram:



A range of tools can be applied at the different levels including population cohort analysis, spreadsheets and systems dynamics models, all within the overall *SWiPe* framework. Other tools for workforce data interrogation and preliminary analysis can also be harnessed to support the *SWiPe* approach.

## The *SWiPe* structure

*SWiPe* works on a number of dimensions:

- The delivery of care functions, or groupings of activities, that achieve a particular outcome for the population cohort, for example comprehensive assessment, ongoing support or crisis response.
- The scaling of these care functions based on local needs, i.e. how many episodes or spells will be needed and where will they be delivered?
- The weighting of these care functions, i.e. how much human resource in relative terms is required to deliver each care function?
- The ideal capability necessary to achieve positive outcomes for clients, i.e. with what are these service functions most effectively delivered? This allows for assessment in the light of new ways of working and the potential for new roles.

These dimensions are combined to determine the future shape of the workforce that is commensurate with local needs and the future shape of services.

## Using *SWiPe*:

*SWiPe* requires active engagement of local partners to ensure the benefits of working within the same framework. It also requires commitment to gather and validate the information and data used to populate the modelling tools. The following provides a list of the core information that has been used to inform existing *SWiPe* applications:

- Local demographic profiles and projections for population cohorts, alongside indicators of levels of need such as deprivation or health life expectancy;
- Population level targets for service transformation e.g. rates of unscheduled hospital admissions;
- The existing shape of the workforce across local health and care providers at an aggregated skill level.