



## PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

|  |  |
|--|--|
| <b>DYDDIAD Y CYFARFOD:<br/>DATE OF MEETING:</b>  | 03 April 2023  |
| <b>TEITL YR ADRODDIAD:<br/>TITLE OF REPORT:</b>  | Performance Assurance & Workforce Metrics                              |
| <b>CYFARWYDDWR ARWEINIOL:<br/>LEAD DIRECTOR:</b> | Lisa Gostling, Director of Workforce and Organisation Development (OD) |
| <b>SWYDDOG ADRODD:<br/>REPORTING OFFICER:</b>    | Michelle James, Head of Resourcing and Utilisation                     |

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

A purpose of the People, Organisational Development & Culture Committee (PODCC) is to provide assurance to the Board on best practice around the workforce and organisational development (OD) agenda.

This report provides assurance of delivery against national delivery framework targets. The dataset presented is accurate as at 28 February 2023.

##### Cefndir / Background

PODCC is required to provide assurance to the Board on best practice around the workforce and OD agenda. This report provides assurance of delivery against national delivery framework targets.

##### Asesiad / Assessment

The dashboard in Appendix 1 presents performance against the following national delivery framework targets:

- Overall staff engagement score – scale score method
  - We are looking at various new methods to capture and report staff views in easy and accessible ways. This survey will continue to be sent to a random sample of employees every month to keep an ongoing measure of staff experience.
  - The response rate increased in January and again in February 2023 rising from 10% in November 2022 to 16% in February 2023. This is however still lower than the response rate for the same period last year.
  - No survey was run in December 2022.
- Agency spend as a % of total pay bill
- Variable pay (agency, locum, bank & overtime: monthly position).

- Education and Commissioning template to Health Education and Improvement Wales (HEIW) aligned to the Integrated Medium Term Plan (IMTP) submission on an annual basis
- Data in relation to Health Care Support Worker (HCSW) framework on annual basis and related requirements for funding
  - We are awaiting the receipt of all Wales information for the years 2020,2021 and 2022.
- Percentage of sickness absence rate of staff;
  - February 2023 in month absence rate has reduced compared to the same period last year.
  - We have seen a 1.6% drop in the in-month rate since the spike in December 2022 where rates increased to 7.5%.
- Qualitative report providing evidence of provided learning and development in line with the Good Work – Dementia Learning and Development Framework
- Percentage of employed National Health Service (NHS) staff completing dementia training
- Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation
  - Our performance has steadily been increasing and we are now slightly above our 85% target.
  - We have 3 staff groups that are below the 85% target; Add Prof scientific & technical (83.7%), Estates & Ancillary (79.7%) and Medical & Dental (40.2%).
  - L&D are continuing to reach out to Medical & Dental teams to improve engagement; this is the staff group that has the lowest compliance by a significant margin
- Percentage of headcount by organisation who have had a Performance Appraisal Development Review (PADR)/medical appraisal in the previous 12 months (excluding doctors and dentists in training)
- Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job
- Percentage of staff who have had a medical appraisal in the previous 12 months (excluding Doctors and Dentists in training) and Consultant/SAS doctors with a job plan and Consultants/SAS doctors with an up to date job plan (reviewed with the last 12 months)
- Percentage of compliance for staff appointed into new roles where a child barred list check is required
- Percentage of compliance for staff appointed into new roles where an adult child barred list check is required.
  - October 2022 saw for the first month since July 2021 compliance below 100%. This is due to a risk assessment being undertaken for an Apprentice to start prior to DBS being returned. This was to ensure Apprentice could start on employment and educational pathway.
  - Since October 2022 we have consistently been performing at 100% compliance.

The targets are presented in a format which will allow PODCC to assess the alignment between the key performance indicator and the intentions as set out in the 10-year Workforce, Organisational Development & Education Strategy.

## Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to note the content of the report as assurance of performance in key areas of the Workforce and OD agenda

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

|   |  |
|---|--|
| Committee ToR Reference:<br>Cyfeirnod Cylch Gorchwyl y Pwyllgor:  | 2.1 To provide assurance to the Board on compliance with legislation, guidance and best practice around the workforce and OD agenda, learning from work undertaken nationally and internationally, ensuring (HDdUHB) is recognised as a leader in this field |
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:<br>Datix Risk Register Reference and Score:  | Not Applicable   |
| Safon(au) Gofal ac Iechyd:<br>Health and Care Standard(s):  | 7.1 Workforce<br>7. Staff and Resources  |
| Amcanion Strategol y BIP:<br>UHB Strategic Objectives:  | 1. Putting people at the heart of everything we do<br>2. Working together to be the best we can be   |
| Amcanion Cynllunio<br>Planning Objectives   | 1A NHS Delivery Framework targets  |
| Amcanion Llesiant BIP:<br>UHB Well-being Objectives:<br><a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a> | 2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS   |

### **Gwybodaeth Ychwanegol:**

#### **Further Information:**

|  |   |
|--|---|
| Ar sail tystiolaeth:<br>Evidence Base:   | Data extracted from a range of workforce information systems. |
| Rhestr Termiau:<br>Glossary of Terms:  | Included within the body of the report.                       |
| Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee: | Not Applicable  |

### **Effaith: (rhaid cwblhau)**

| Impact: (must be completed)                                 |  |
|---|--|
| <b>Ariannol / Gwerth am Arian:<br/>Financial / Service:</b> | Not Applicable   |
| <b>Ansawdd / Gofal Claf:<br/>Quality / Patient Care:</b>    | Performance reported in a number of the key performance indicators will have an impact on the quality of patient care. |
| <b>Gweithlu:<br/>Workforce:</b>                             | All metrics and performance indicators contained in the report have direct relevance to the workforce agenda           |
| <b>Risg:<br/>Risk:</b>                                      | Not Applicable   |
| <b>Cyfreithiol:<br/>Legal:</b>                              | Not Applicable   |
| <b>Enw Da:<br/>Reputational:</b>                            | Not Applicable   |
| <b>Gyfrinachedd:<br/>Privacy:</b>                           | All data presented is anonymous  |
| <b>Cydraddoldeb:<br/>Equality:</b>                          | Not Applicable   |

**Strategic Planning Objective 1A:**  
**Develop and implement plans to deliver, on a sustainable basis, NHS delivery framework targets related to Workforce within the next 3 years.**



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

| National Delivery Framework Target  | Operational Delivery Lead   | Page Number |
|---|---|-------------|
| Overall staff engagement score – scale score method   | Head of Culture and Workforce Experience                          | 2           |
| Agency spend as a % of total pay bill   | Senior Workforce Manager – Workforce Efficiency                   | 3           |
| Variable pay (Agency, Locum, Bank & Overtime: monthly position)   | Senior Workforce Manager – Workforce Efficiency                   | 3           |
| HEIW Planning Objective 3.B: Deliver requirements of regulators – a) Submit Education and Commissioning template to HEIW aligned to IMTP submission on an annual basis  | Head of Strategic Workforce Planning and Transformation           | 4           |
| HEIW Planning Objective 3.B: Deliver requirements of regulators – b) Submit data in relation to HCSW framework on annual basis and related requirements for funding   | Learning & Development Manager                                    | 5           |
| Percentage of sickness absence rate of staff  | Head of Workforce   | 6           |
| Qualitative report providing evidence of provided learning and development in line with the Good Work – Dementia Learning and Development Framework   | Learning & Development Manager                                    | 7           |
| Percentage of employed NHS staff completing dementia training at an informed level  | Learning & Development Manager                                    | 7           |
| Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation  | Learning & Development Manager                                    | 8           |
| Percentage of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (exc Drs and Dentists in training)  | Head of Culture and Workforce Experience                          | 9           |
| Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job  | Head of Culture and Workforce Experience                          | 9           |
| Percentage of staff who have had a medical appraisal in the previous 12 months (exc Drs and Dentists in training) and Consultant/SAS doctors with a job plan & Consultants/SAS doctors with an up to date job plan (reviewed with the last 12 months) | Head of Medical Education & Professional Standards                | 10          |
| Percentage of compliance for staff appointed into new roles where a child barred list check is required   | Head of Recruitment and Workforce Equality, Diversity & Inclusion | 11          |
| Percentage of compliance for staff appointed into new roles where an adult child barred list check is required  | Head of Recruitment and Workforce Equality, Diversity & Inclusion | 11          |

**KEY: 8 Statements of Intent Contained within the 10 Year Workforce, Organisational Development(OD) and Education Strategy**

- 1 - Delivering Collective and Compassionate Leadership
- 2 - Recruiting and Retaining Great People
- 3 - Engaging our Staff
- 4 - Delivering a Workforce Fit for the Future
- 5 - Enabling Our People to Release Their Potential
- 6 - Developing High Performing Teams
- 7 - Delivering Innovation, System Learning and Change Agility
- 8 - Developing Workforce Efficiency and Effectiveness

Staff Engagement Score Year on Year

| Year Of Survey              | Sent to | Number Completed | Response Rate | Engagement Score |
|-----------------------------|---------|------------------|---------------|------------------|
| 2016 NHS Wales Staff Survey | 4535    | 1550             | 34%           | 74%              |
| 2018 NHS Wales Staff Survey | 9484    | 2401             | 25%           | 77%              |
| 2020 NHS Wales Staff Survey | 10533   | 1759             | 17%           | 76%              |
| 2021 Sample in December     | 1171    | 266              | 23%           | 76%              |
| 2022 Sample in January      | 1172    | 269              | 23%           | 77%              |
| 2022 Sample in February     | 1172    | 237              | 20%           | 75%              |
| 2022 Sample in March        | 1169    | 242              | 21%           | 76%              |
| 2022 Sample in April        | 1164    | 242              | 21%           | 74%              |
| 2022 Sample in May          | 1164    | 215              | 18%           | 75%              |
| 2022 Sample in June         | 1163    | 216              | 19%           | 74%              |
| 2022 Sample in July         | 1169    | 184              | 16%           | 76%              |
| 2022 Sample in August       | 1170    | 199              | 17%           | 73%              |
| 2022 Sample in September    | 1129    | 201              | 18%           | 75%              |
| 2023 Sample in October      | 940     | 168              | 18%           | 72%              |
| 2022 Sample in November     | 969     | 97               | 10%           | 74%              |
| 2023 Sample in January      | 1006    | 144              | 14%           | 74%              |
| 2023 Sample in February     | 1010    | 162              | 16%           | 75%              |

Current Performance

The Staff Engagement score has risen 3% from October 22 to 75% in February; which is the highest it has been since September 2022

Engagement Score by Staff Group

| Role                                   | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Jan-23 | Feb-23 |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Administrative and Clerical            | 75%    | 74%    | 79%    | 80%    | 77%    | 77%    | 74%    | 71%    | 76%    | 76%    |
| Allied Health Professionals            | 71%    | 78%    | 72%    | 74%    | 73%    | 75%    | 69%    | 73%    | 73%    | 74%    |
| Estates, Facilities & Support Services | 76%    |        |        |        | 65%    |        | 72%    |        |        |        |
| Healthcare Scientists                  | 72%    | 65%    | 75%    |        | 78%    | 83%    | 81%    | 63%    |        | 80%    |
| Medical and Dental                     | 71%    | 76%    | 71%    | 78%    | 71%    | 67%    | 59%    | 77%    | 73%    | 73%    |
| None of these                          | 84%    | 75%    | 87%    | 76%    | 69%    | 73%    | 68%    | 82%    |        | 83%    |
| Nursing and Midwifery                  | 73%    | 73%    | 69%    | 74%    | 71%    | 73%    | 74%    | 75%    | 72%    | 74%    |
| Other Clinical Services                |        | 82%    |        |        | 86%    | 73%    |        |        |        |        |
| Other Scientific and Technical         | 89%    | 77%    |        |        | 80%    |        |        |        |        |        |
| Bank/Agency                            |        |        |        |        | 57%    |        |        |        |        |        |

*Note -*  
 Any area with less than 5 responses will not be reported on so as not to identify anyone and respect confidentiality

Performance Against Trend

The response rate had dropped to 10% in November 2022, this has now increased back up to 16%

Future Positive Actions

We are continuously looking at various new methods to capture and report staff views in easy and accessible ways. This survey will continue to be sent to a random sample of employees each month to keep an ongoing measure of staff experience.

In Dec 2022 we reviewed the questions asked and as a result of feedback from staff we have given the option of a free text response as staff wanted to explain why they had answered in a certain way. We also added 2 additional questions around the health board vision and how they contribute to the health board objectives. We are looking to report performance data beyond the directorate level in the near future – whilst still ensuring anonymity. We are also developing feedback mechanisms to highlight the results and any action taken.

Current Performance

▲

The Health Board are not meeting the 12 month reduction trend for agency spend as percentage of the total pay bill.

Performance Against Trend

▲

2022/23 agency spend as a percentage of the total pay bill has reduced compared to the same period in 2012/22.

Variable pay in February 2023 is lower than in the same period in 2021/2022.

Future Positive Actions

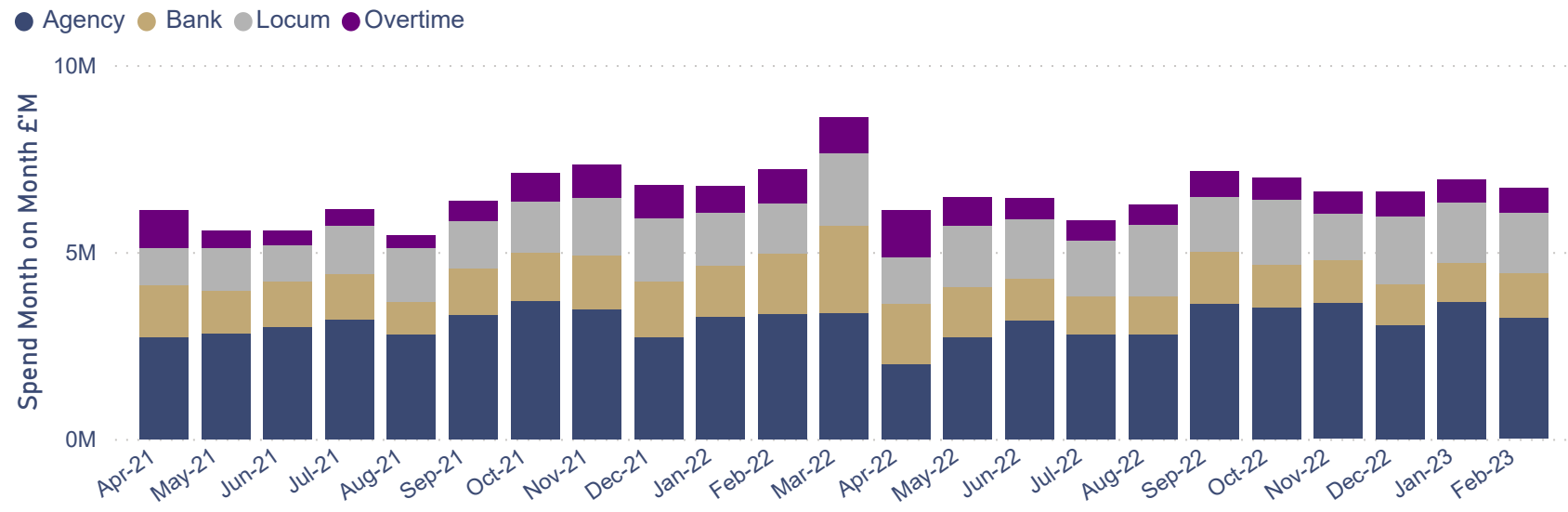
▲

A People Effectiveness Team has been established within the Workforce and OD Directorate who will oversee all Workforce Effectiveness Programmes. including nurse stabilisation and medical and AHP efficiency. The People Effectiveness team will drive the programme, test ideas and concepts, ensure delivery of stabilization, explore improved retention concepts and development opportunities . A temporary utilisation Dashboard will be developed to track staff group specific KPIs.

Agency Spend as a percentage (%) of the total pay bill

| Month Name | 2020/2021 | 2021/2022 | 2022/2023 |
|------------|-----------|-----------|-----------|
| April      | 3.36%     | 6.84%     | 6.46%     |
| May        | 3.19%     | 7.04%     | 6.12%     |
| June       | 3.45%     | 7.47%     | 6.94%     |
| July       | 3.89%     | 7.95%     | 6.42%     |
| August     | 4.58%     | 7.01%     | 6.46%     |
| September  | 5.07%     | 6.79%     | 6.52%     |
| October    | 5.84%     | 8.33%     | 6.94%     |
| November   | 6.23%     | 7.77%     | 9.27%     |
| December   | 6.07%     | 7.18%     | 6.23%     |
| January    | 6.92%     | 7.15%     | 7.83%     |
| February   | 3.98%     | 7.08%     | 6.89%     |
| March      | 3.12%     | 5.13%     |           |

Variable Pay Month on Month



Current Performance

Preparing submission for financial year 2023/24 to cover the period up to circa 2026.

Plans developing to create and inform for IMTP/E&C cycle 2022/23 to cover 2023-2026.

Performance Against Trend

Two ongoing queries to resolve over longer term Physician Associates and WAST Advanced Paramedic Practitioners Pipeline discussions.

Update from use of resource (UOR) group for Physicians Associates - a strategic conversation to be held at executive level around the role in stabilising our medical workforce.

Future Positive Actions

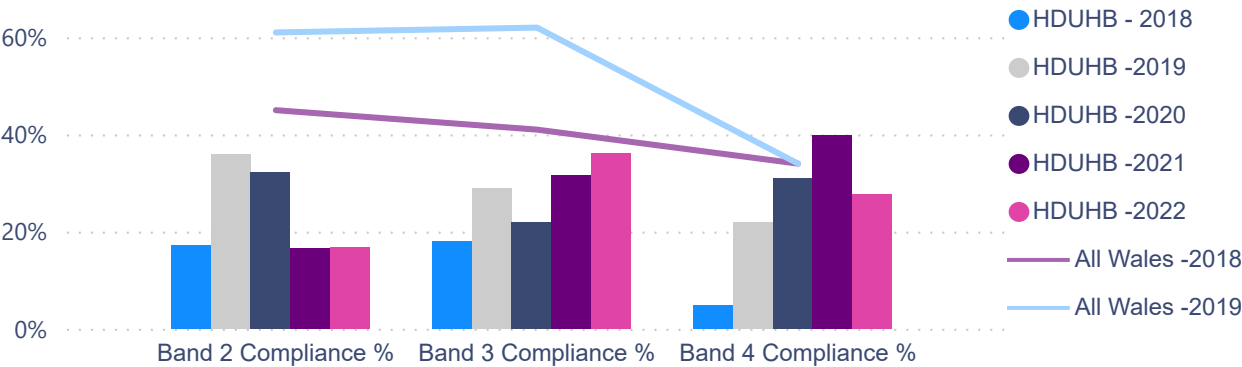
▲  
Process: Lessons learnt activity from 2022/23 commissioning to be undertaken and recommendations implemented for next year. An outcomes based Workforce Interventions Performance Dashboard will be developed to align to this work to track the whole pathway from education & commissioning requirements to placement capacity and recruitment streamlining on an annual basis.

This is a significant piece of work that requires reflection in relation to our effectiveness work program.

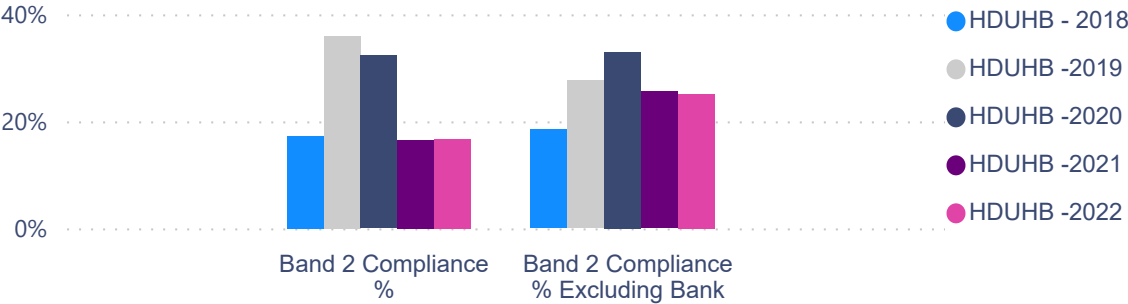




Career Framework Data



Impact of Bank Compliance on Career Framework Data



Current Performance

HDUHB annual performance fluctuates considerably The data recording mechanism used is now through ESR, providing accuracy for future data collection.

Performance Against Trend

HDUHB data significantly lower than the “All Wales comparison”, this is attributed to data reporting issues in previous years and also lack of structure to collect and record data.  
We are still awaiting All Wales data from 2020 to date.

Future Positive Actions

A Career Framework Compliance Group will be set up with the aim of looking at how this compliance data is displayed, including those accessing qualifications.

L&D also to attend service lead meeting to discuss compliance and create action plans for each service.

January - December 2022

Career Framework- Percentage with requisite level of health related qualification

| Profession                                      | % Level 2 | % Level 3 | % Level 4 |
|---|-----------|-----------|-----------|
| Bank / Temporary Staff (on Bank only contracts) | 0.3%      | 0.0%      | 0.0%      |
| Dietetics                                       | 0.0%      | 0.0%      | 33.3%     |
| Maternity                                       | 19.7%     | 0.0%      | 0.0%      |
| Nursing Adult                                   | 25.3%     | 33.5%     | 34.9%     |
| Nursing Child                                   | 28.6%     | 33.3%     | 30.8%     |
| Nursing Community                               | 31.7%     | 50.5%     | 57.9%     |
| Nursing Learning Disability                     | 0.0%      | 25.5%     | 15.4%     |
| Nursing Mental Health                           | 17.5%     | 41.7%     | 50.0%     |
| Occupational Therapy                            |           | 66.7%     | 10.9%     |
| Operating Theatres                              | 26.3%     | 52.0%     | 83.3%     |
| Physiotherapy                                   | 0.0%      | 42.9%     | 25.9%     |
| Radiology                                       | 0.0%      | 17.6%     | 9.1%      |
| Speech and Language service                     | 0.0%      | 66.7%     | 5.3%      |

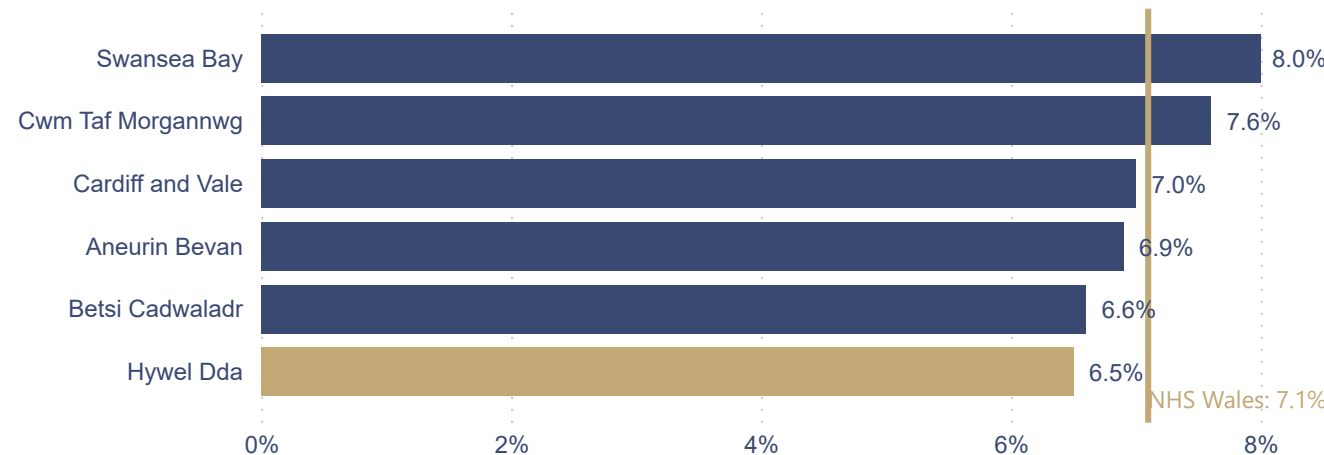
Please note that where zero percent is shown; there are minimal staff at this level for these professions. Please see headcount Table.

Headcount

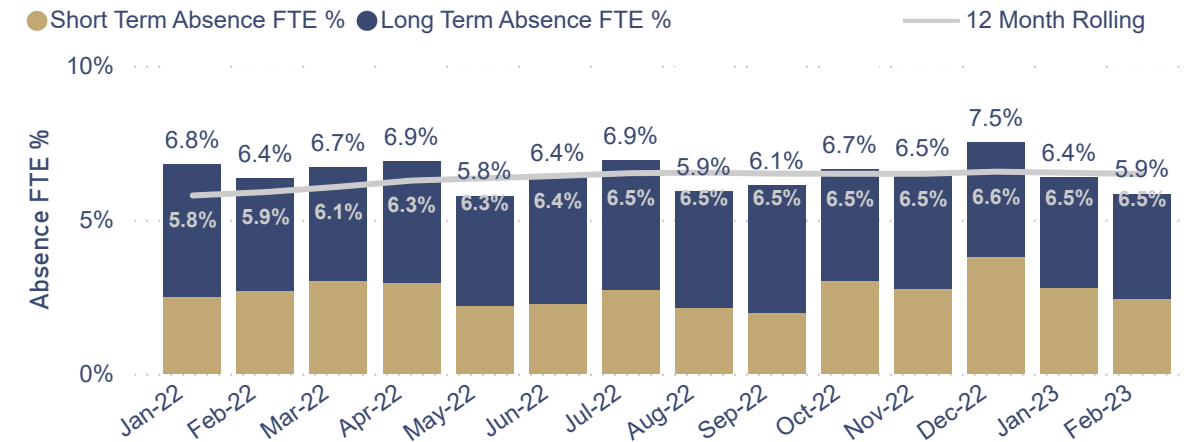
| Profession                                      | Headcount B2 | Number at L2 | Headcount B3 | Number at L3 | Headcount B4 | Number at L4 |
|---|--------------|--------------|--------------|--------------|--------------|--------------|
| Bank / Temporary Staff (on Bank only contracts) | 587          | 2            | 63           | 0            | 16           | 0            |
| Dietetics                                       | 0            | 0            | 2            | 0            | 12           | 4            |
| Maternity                                       | 61           | 12           | 4            | 0            | 0            | 0            |
| Nursing Adult                                   | 850          | 215          | 236          | 79           | 63           | 22           |
| Nursing Child                                   | 35           | 10           | 24           | 8            | 39           | 12           |
| Nursing Community                               | 104          | 33           | 186          | 94           | 19           | 11           |
| Nursing Learning Disability                     | 0            | 0            | 55           | 14           | 13           | 2            |
| Nursing Mental Health                           | 80           | 14           | 108          | 45           | 2            | 1            |
| Occupational Therapy                            | 0            | 0            | 6            | 4            | 55           | 6            |
| Operating Theatres                              | 19           | 5            | 25           | 13           | 6            | 5            |
| Physiotherapy                                   | 2            | 0            | 21           | 9            | 54           | 14           |
| Radiology                                       | 0            | 0            | 34           | 6            | 11           | 1            |
| Speech and Language service                     | 0            | 0            | 3            | 2            | 19           | 1            |
| Total   | 1738         | 291          | 767          | 274          | 309          | 79           |



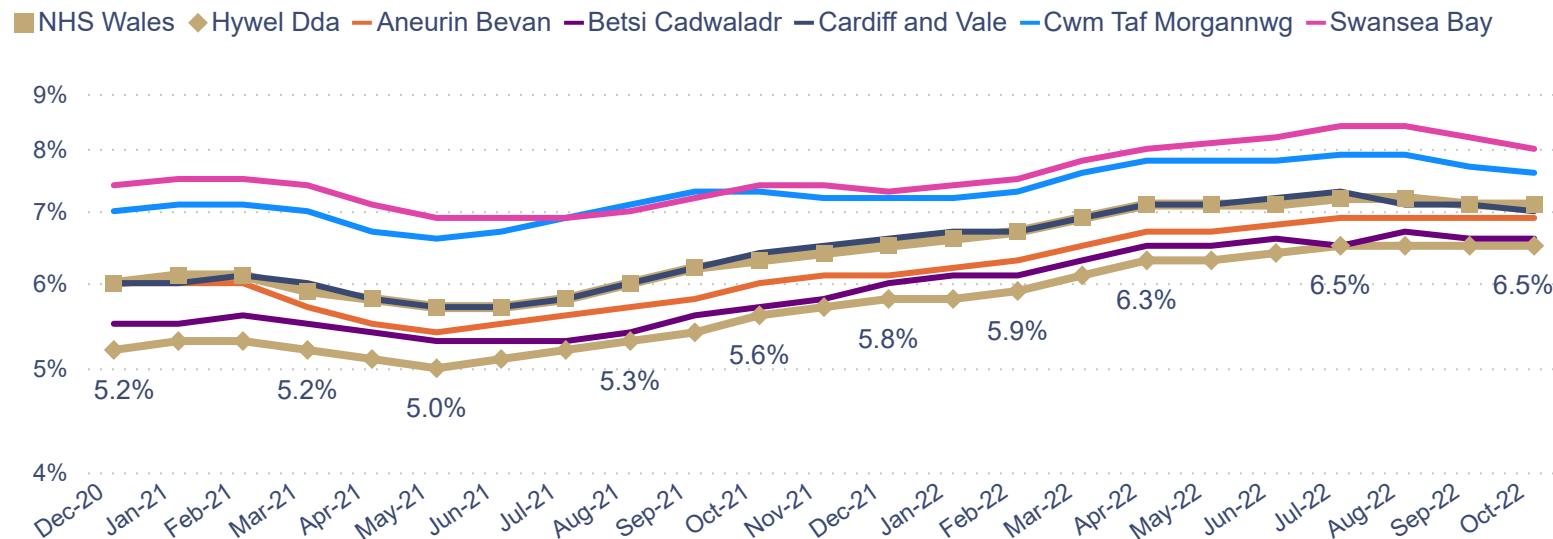
## 12 month rolling sickness absence rates (UHBs only) to October 2022



## Hywel Dda Sickness Absence Month on Month by Long Term & Short Term compared to Rolling 12m



## Rolling 12-month sickness absence rates, Dec '20 to Oct'22



### Current Performance

In the rolling 12 month period, we have seen an increase in overall HB absence rates (up to 6.5% in October 2022).

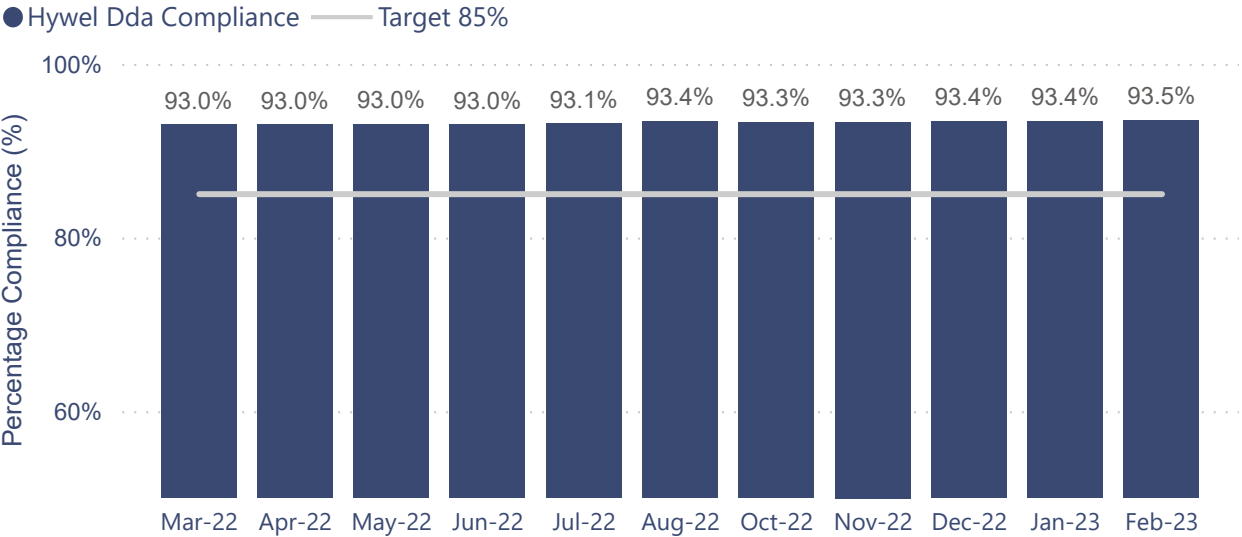
### Performance Against Trend

HUHB data remains lower than any of the other UHBs in Wales based on the latest data set (June 2022). The average NHS Wales rolling 12 month figure being 7.1%.

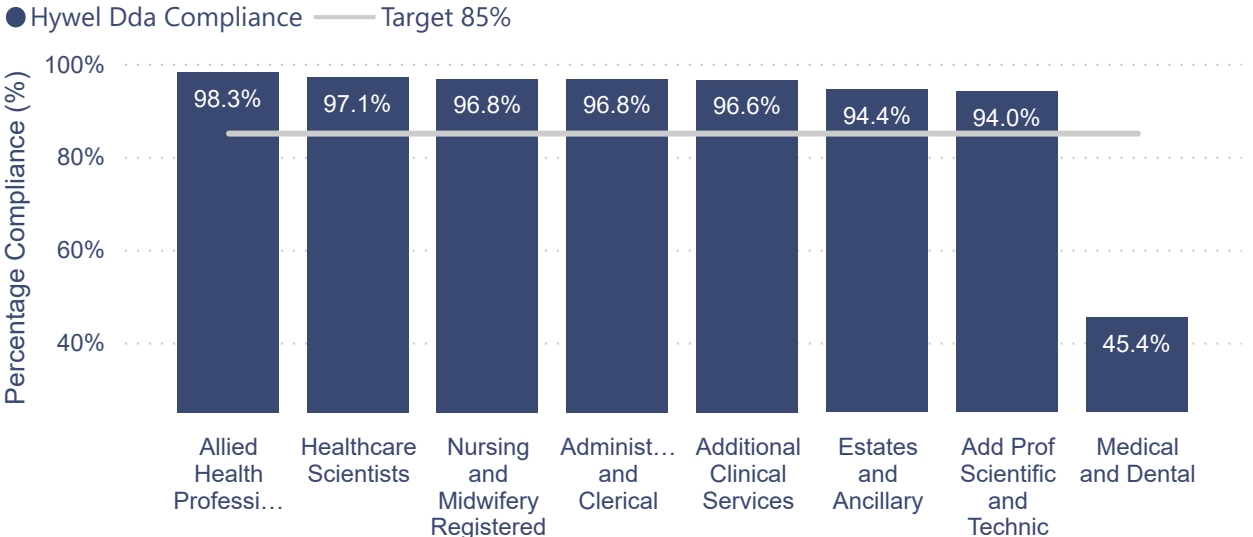
### Future Positive Actions

Workforce will continue to offer support and advice to managers in the management of both short and long term sickness absence. These include supporting managers with undertaking sickness reviews, providing training to managers and conducting sickness audits. We additionally offer a suite of interventions to support staff psychological wellbeing and signposting these resources. An enhanced level of support will be offered to those areas where a significant rise in absence rates has been seen in more recent months.

Percentage of Staff completing Dementia Training



Percentage of Staff completing Dementia Training



Current Performance

Dementia training is well above trend in most staff groups

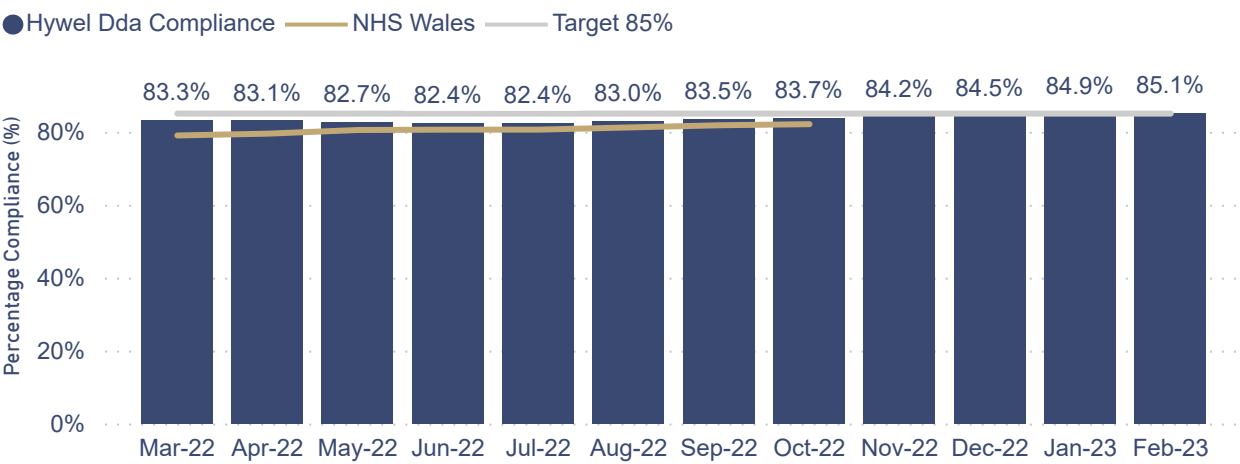
Performance Against Trend

West Wales Care Partnership with Hywel Dda and other partners have developed a draft Dementia L&D framework to support new training for the Good Work framework, however the Framework is in draft and is yet to be published.

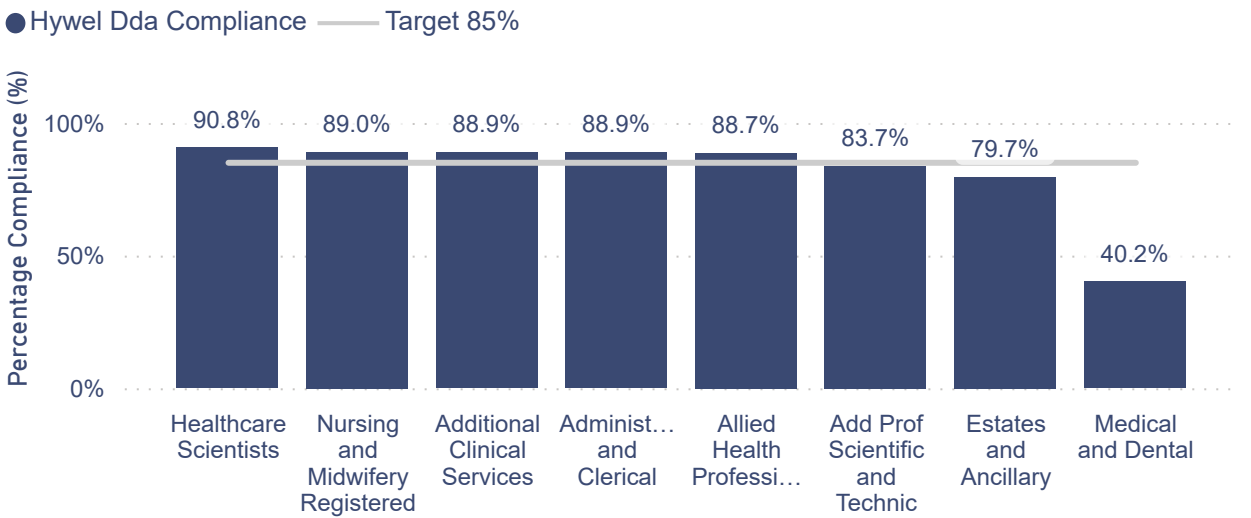
Future Positive Actions

A new Hywel Dda working group has been set up to review the training recommendations and resources in the draft Dementia L&D framework. They have begun to identify if any new training resources should be delivered to target groups and also explore options for suitable Agored module units meet the framework.

Core Skills Training Framework (CSTF) compared to NHS Wales Performance and Target of 85%



Core Skills Training Framework (CSTF) compared to Target of 85% by Staff Group



Current Performance

▲

Access to computers has been advertised and provided. Temporary additional resource provided to assist with data entry into ESR. This, along with a range of activity led by L&D, has seen the Health Board achieving an overall compliance rate of 85.1%. A significant difference between our highest and lowest performing staffing groups remain

Performance Against Trend

▲

HDD performance has consistently improved over the last twelve months - including the performance of the staffing groups below the 85% threshold.

Future Positive Actions

▲

All previously reported interventions will remain. L&D is working closely with under-performing staff groups.

Percentage of Staff from the engagement Survey who Strongly Agree or Agree that their PADR helps improve how they do their job

Aug-22  
64.82%

Sep-22  
67.16%

Oct-22  
63.10%

Nov-22  
59.79%

Jan-23  
62.50%

Feb-23  
68.52%

Current Performance

Managing Performance training sessions are still run on a weekly basis to allow all staff to attend.  
Feb 2023 has seen a further 50 staff attend the training  
19 staff booked on future sessions

Performance Against Trend

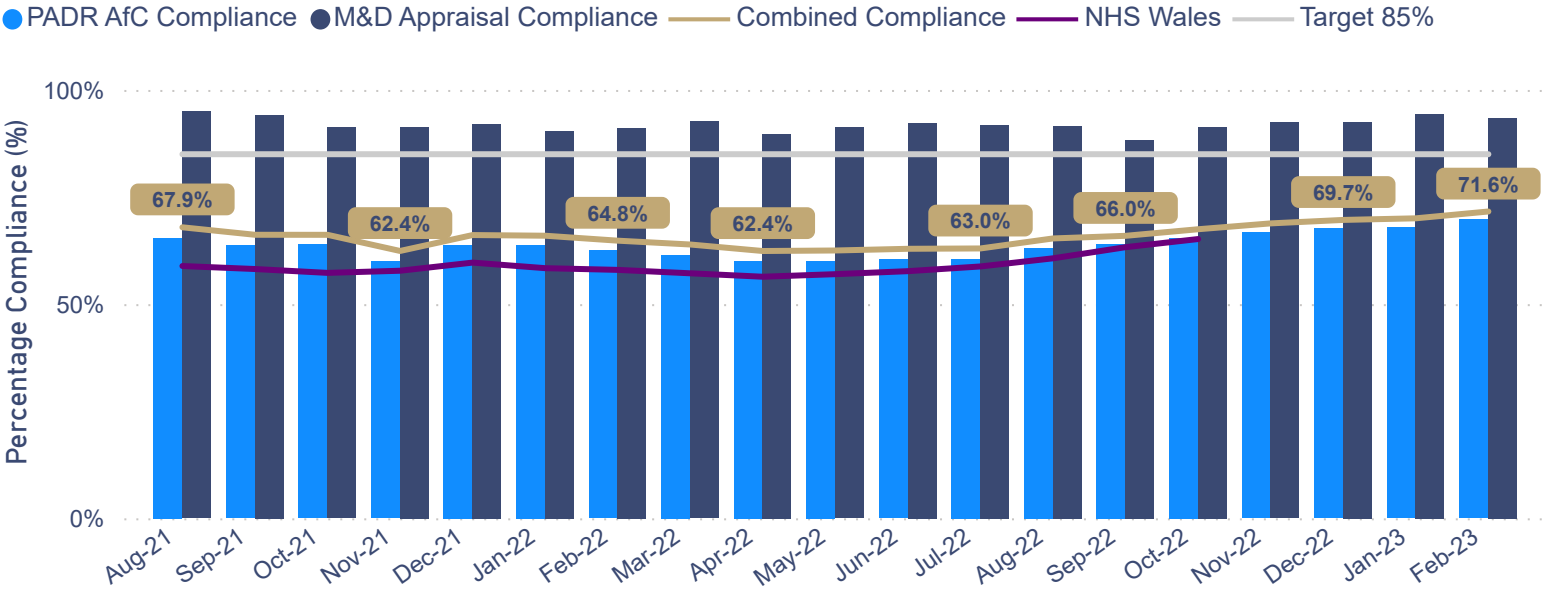
The Board Outcome Survey was implemented in December 2021, which asks a question that measures the impact of a PADR conversation. For the period July-Sept 2022 the survey showed that 64% of respondents strongly agreed or agreed that the PADR completed in last 12 months had been meaningful. This shows a positive trend of +2% on the previous quarter.  
Bespoke sessions are arranged on a priority basis with services where compliance is concerning against the national target.

Future Positive Actions

All Wales Pay Progression Policy - Managers now have to complete a pay progression review as part of the PADR process and record this on ESR to ensure staff receive their pay increments. This policy was implemented October 2022. Communications to raise awareness of the policy are continuing to be shared via the Health Board's communication channels. Queries are being managed via the Culture & Workforce Experience generic account, performance management training and Operational Human Resources.

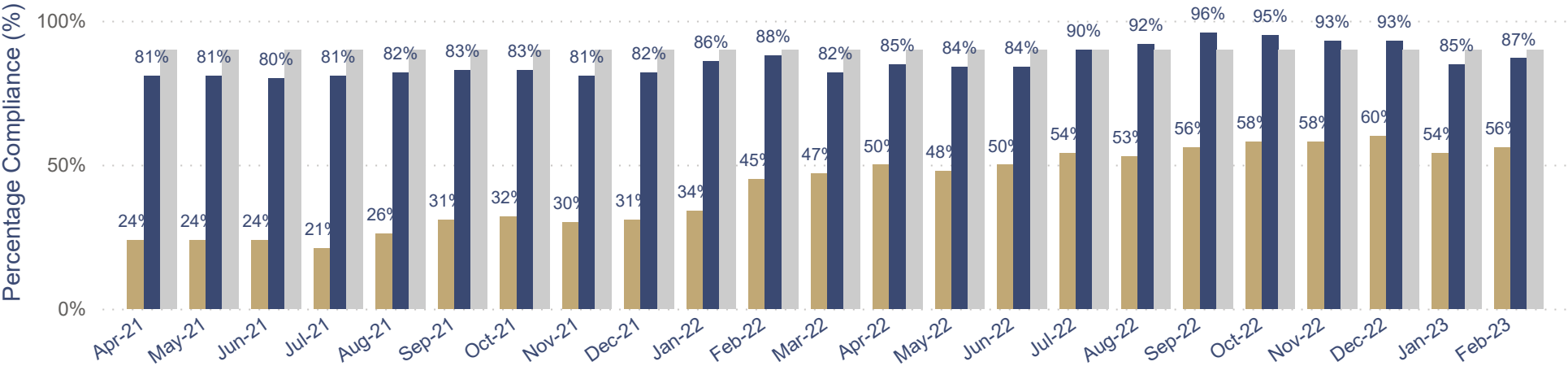
Pilot to reproduce the PADR in ESR - A new PADR form will support engagement by being a live document that is easier to complete and will provide more valid compliance figures across the organisation. Informatics are continuing to develop the form to enable pre-population of fields such as name, title and dates. C&WE Team are currently testing the latest version. Awaiting date of next meeting with National ESR Group.

PADR Compliance to NHS Wales Performance and Target of 85%



Consultants/SAS doctors with a Job Plan (Current is within 12 Months)

● Current Job Plan ● Job Plan ● 90% Target



Current Performance

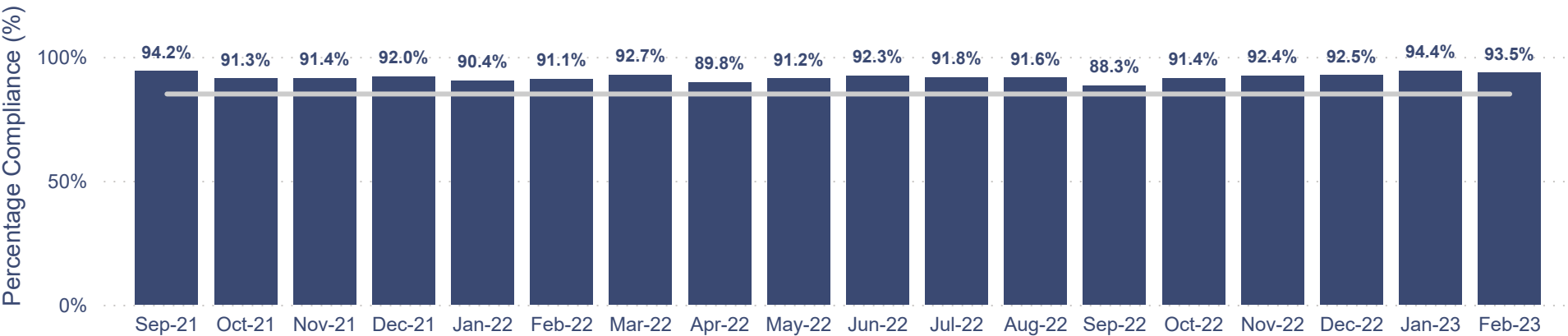
Performance is improving slowly on a monthly basis, the decrease in January was due to large number of job plans expiring.

Performance Against Trend

Steady Improvement.

Medical Appraisal Compliance Performance against Target of 85%

● M&D Appraisal Compliance — Target 85%



Future Positive Actions

Continue to work with Service Delivery Managers and Heads of Service to improve job planning compliance. Provide monthly update report that highlights outstanding job plans. Provide advice and guidance to doctors who have not signed off job plans.

NHS delivery framework target: 5.B.i Percentage of compliance for staff appointed into new roles where a child barred list check is required. & Percentage of compliance for staff appointed into new roles where an adult child barred list check is required.

Strategic Delivery Lead: Head of Resourcing & Utilisation

Operational Delivery Lead: Head of Recruitment and Workforce Equality, Diversity & Inclusion

This target aligns to the following statement of intent:

6 - Developing High Performing Teams



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

Current Performance

Monthly reporting confirms risk assessment undertaken for an Apprentice to start prior to DBS being returned. This was to ensure Apprentice could start on employment and educational pathway. Low risk as supervised.

Performance Against Trend

October has the highest volume in month of DBS checks. With the exception of a health & social care apprentice who has been risk assessed to ensure start date aligns to educational pathway, performance has been largely consistent.

Future Positive Actions

Continue to perform at a high standard.

DBS Checks Processed

| Axis   | Adult Barred Lists | Child Barred Lists | Overseas Doctors | % Compliance |
|--------|--------------------|--------------------|------------------|--------------|
| Jul-21 | 119                | 123                | 6                | 100.0%       |
| Aug-21 | 134                | 132                | 8                | 100.0%       |
| Sep-21 | 180                | 181                | 3                | 100.0%       |
| Oct-21 | 151                | 154                | 4                | 100.0%       |
| Nov-21 | 143                | 143                | 6                | 100.0%       |
| Dec-21 | 84                 | 83                 | 6                | 100.0%       |
| Jan-22 | 176                | 169                | 3                | 100.0%       |
| Feb-22 | 128                | 126                | 1                | 100.0%       |
| Mar-22 | 149                | 147                | 7                | 100.0%       |
| Apr-22 | 130                | 128                | 3                | 100.0%       |
| May-22 | 150                | 148                | 1                | 100.0%       |
| Jun-22 | 149                | 148                | 7                | 100.0%       |
| Jul-22 | 108                | 108                | 6                | 100.0%       |
| Aug-22 | 124                | 126                | 4                | 100.0%       |
| Sep-22 | 186                | 185                | 3                | 100.0%       |
| Oct-22 | 211                | 210                | 5                | 99.5%        |
| Nov-22 | 100                | 99                 | 5                | 100.0%       |
| Dec-22 | 80                 | 77                 | 4                | 100.0%       |
| Jan-23 | 179                | 147                | 3                | 100.0%       |
| Feb-23 | 131                | 132                | 8                | 100.0%       |

Compliance for staff appointed into new roles where an Adult or Child barred list check is required.

Note : All overseas recruits would have provided Overseas police checks as they cannot have a DBS until they have been in UK for 3 Months.