

## **Hywel Dda University Health Board**

### **Agility to Flex Workforce to Covid Planning**

#### **Final Internal Audit Report**

**November 2020**

**Private and Confidential**

**NHS Wales Shared Services Partnership**

**Audit and Assurance Services**



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### **ACKNOWLEDGEMENT**

NHS Wales Audit & Assurance Services would like to acknowledge the time and co-operation given by management and staff during the course of this review.

### **Disclaimer notice - Please note:**

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## **1. Introduction and Background**

The review of the organisation's ability to flex the workforce to Covid planning was completed in line with the Hywel Dda University Health Board Internal Audit Plan for 2020/21. The relevant lead Executive Director for this review was the Director of Workforce & Organisational Development (OD).

## **2. Scope and Objectives**

The overall objective of the review was to confirm that the Health Board has the ability to flex the workforce in order to meet Covid-19 planning arrangements.

The areas that the review sought to provide assurance on were:

- Workforce plans have been developed and modelled in line with the Health Board's strategic aims and national guidance in response to the Covid pandemic;
- Arrangements are in place to enable employees, both current and new, to efficiently receive training prior to their placements; and
- The progress of workforce plans are regularly submitted to a group or committee for scrutiny and review.

## **3. Associated Risks**

The potential risk considered in this review were as follows:

- Non-compliant workforce plans that do not meet service needs;
- Employees do not receive appropriate training; and
- Lack of regular reporting within the Health Board.


## **OPINION AND KEY FINDINGS**

### **4. Overall Assurance Opinion**

We are required to provide an opinion as to the adequacy and effectiveness of the system of internal control under review. The opinion is based on the work performed as set out in the scope and objectives within this report. An overall assurance rating is provided describing the effectiveness of the system of internal control in place to manage the identified risks associated with the objectives covered in this review.

The overall level of assurance that can be assigned to a review is dependent on the severity of the findings as applied against the specific review objectives and should therefore be considered in that context.

The level of assurance given as to the effectiveness of the system of internal control in place to manage the risks associated with the Agility to Flex Workforce to Covid Planning is **Substantial** assurance.

RATING	INDICATOR	DEFINITION
<p style="text-align: center;"><b>Substantial Assurance</b></p>		<p>The Board can take <b>substantial assurance</b> that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with <b>low impact on residual risk</b> exposure.</p>

Overall, the controls in place to manage the organisations ability to quickly flex and upsize the workforce as and when required due to the ongoing pandemic situation is of a satisfactory standard. We conclude that the changes in strategy and approach taken, and decisions made by the Workforce & Organisational Development (W&OD) in relation to the demands arising from the urgent situation were thorough and demonstrated a robust approach.





The W&OD function also adapted its delivery of training to both new and existing staff during the Covid period to ensure it met the new challenges facing the organisation. Guidance and protocols in regard of workforce issues were made available to all employees via a dedicated intranet page.

Furthermore, sound governance arrangements were established during the Covid pandemic through the Command and Control structure including a dedicated Workforce Task & Finish Group.

One medium priority finding was identified in relation to the completeness of mandatory and statutory training of Covid new starters.

## 5. Assurance Summary

The summary of assurance given against the individual objectives is described in the table below:

Audit Objective		Assurance Summary*			
					
<b>1</b>	Workforce plans have been developed and modelled in line with the Health Board's strategic aims and national guidance in response to the Covid pandemic				✓
<b>2</b>	Arrangements are in place to enable employees, both current and new, to efficiently receive training prior to their placements			✓	
<b>3</b>	The progress of workforce plans are regularly submitted to a group or committee for scrutiny and review				✓

\* The above ratings are not necessarily given equal weighting when generating the audit opinion.

### Design of Systems/Controls

The findings from the review have highlighted **one** issue that is classified as a weakness in the system control/design for Agility to Flex Workforce to Covid Planning. This is identified in the Management Action Plan as (D).

### Operation of System/Controls

The findings from the review have highlighted no issues that are classified as weaknesses in the operation of the designed system/control for Agility to Flex Workforce to Covid Planning.

## 6. Summary of Audit Findings

The key findings are reported in the Management Action Plan at Appendix A.

### **OBJECTIVE 1: Workforce plans have been developed and modelled in line with the Health Board's strategic aims and national guidance in response to the Covid pandemic.**

The strategic aims and priorities for Workforce and Organisational Development (W&OD) were set out in the Health Board's draft *Our Three Year Plan 2020-23*. However, following the unprecedented environment that unfolded at the beginning of the year as a result of the Covid pandemic, significant changes were implemented in order to meet the new demands placed upon the Health Board with all medium to long term plans put on hold and a focus placed on the delivery of short term (immediate) plans.

A key aim at the outset of the pandemic was the urgent response required from the W&OD function to mobilise the existing workforce and ensure a sufficient new workforce supply was in place to meet service delivery requirements. This was achieved through the following processes.

- Workforce modelling was undertaken that allowed for the identification of service demands and assumptions such as the estimation on additional bed requirements and potential increase in sickness absence, current workforce supply and the shortfall in key position such as registered nurses, healthcare support workers, domestic staff and porters in order to meet expected demand.
- A campaign was initiated at the end of March 2020 to recruit Health Care Support Workers and Facilities staff via the NHS Jobs and social media platforms in order to fill the gaps identified in the workforce models.
- The rollout of a scaled back recruitment process, via telephone interviews to enable the rapid employment of new starters, was developed, reported to the Gold Command Group and subsequently implemented.
- The establishment of a 'Deployment Centre' enabled requests for additional staff/new roles to be processed and prioritised swiftly, and for existing staff whose skill sets could support these requests to be deployed from their existing roles to meet these priorities. The deployment process also enabled those staff who were shielding or who had other underlying health issues to be able to deliver care for patients through different working arrangements.

- A registered nurse redeployment programme was also developed and implemented in order to support nurses returning to clinical practice.
- Governance arrangements were established with the Workforce Planning Task & Finish Group and the Workforce Bronze Group part of the Command and Control structure. In addition, county workforce groups were also established to aid with localised workforce planning.
- The W&OD Team have developed guidance and protocols in relation to a number of key areas including key workers, deployment, redeployment, shielding, accommodation, home working, antigen and antibody testing. The documents were made available via a dedicated Covid workforce intranet page enabling easy one-stop access to information for all staff.

To enable the W&OD Team to implement the new workforce plans noted above and the impact of social distancing, self-isolation and staff shielding, some routine processes within the W&OD Team such as personal appraisals and absence audits were paused. A paper presented to the People Planning and Performance Assurance Committee on the 27<sup>th</sup> August 2020 by the Director of Workforce & OD, noted that the operational teams have started to undertake sickness reviews and that the Absence Advisors were due to re-commence sickness auditing imminently via Microsoft Teams.

The Health Board has provided quarterly *Coronavirus (COVID-19) NHS Wales Operating Framework* reports to the Welsh Government on the progress of their strategic objectives and goals during 2020/21.

The W&OD Team had put in place a structured and robust approach to flexing the workforce since the beginning of the Covid pandemic. We can also confirm that the W&OD have recently revised workforce modelling plans based on lessons learned and the service demands and gap in workforce supply for 501 'surge beds' identified for Covid and winter pressures. A risk assessment of the options available the Health Board was set out and presented in the *Workforce Planning Further Update* report submitted to the Silver Command and Control Group in September 2020.

**No matters arising.**

## **OBJECTIVE 2: Arrangements are in place to enable employees, both current and new, to efficiently receive training prior to their placements**

During Quarter 1 of 2020/21, approximately 1,100 job offers were made in response to the Covid pandemic. In order to manage the mass recruitment of new and returning staff, the Learning & Development Department adapted their



approach in delivering training. To facilitate this new approach, the following was implemented.

- Face-to-face induction programmes were replaced with a virtual system, whilst the usual 'welcome day' was replaced with a telephone call, welcome email and handbook of organisational information.
- Mandatory training e-learning modules normally completed in a classroom environment with facilitator support was replaced with an e-learning platform alternative.
- Mandatory and statutory training programmes were condensed to enable new and returning staff, hired by the Health Board during Quarter 1 of 2020/21, to be placed in a position as swiftly as possible. This included training programmes such as Manual Handling to be reduced from two days to one day and the *Skills2Care* bespoke programme for healthcare support workers being reduced from seven to three days.

The Learning & Development Department also adapted their training approach for current staff. Whilst leadership programmes were put on hold, virtual coaching training was rolled out for the Executive Team and 53 senior leaders across the Health Board as part of the *Staff Psychological and Well-Being Plan*. Virtual coaching was further extended to cover Assistant Directors and Service Delivery Managers from April 2020 onwards, increasing the reach to 112 managers. Plans are in place to continue this approach until the end of March 2021.

In addition to the Covid pandemic, the Health Board also faces the challenge of winter pressures during 2020/21. Recognising the need to build further resilience for front line leaders, the Learning & Development Department will be extending the coaching provision offer to cover a further 46 staff including:

- The nursing tier reporting to the Assistant Directors of Nursing;
- Service Delivery Managers in Mental Health; and
- Senior Nurse Managers and Clinical Nurse Leaders across the organisation.

A project has commenced to develop an interim virtual welcome day utilising Microsoft Teams. Furthermore, a Digital Learning Task and Finish Group has been developed in order to consider future ways of delivering the learning and development agenda.

As part of the audit, we reviewed whether all new and returning starters hired at the start of the Covid pandemic had completed the required mandatory and statutory training. Whilst we were provided with the numbers of individuals that

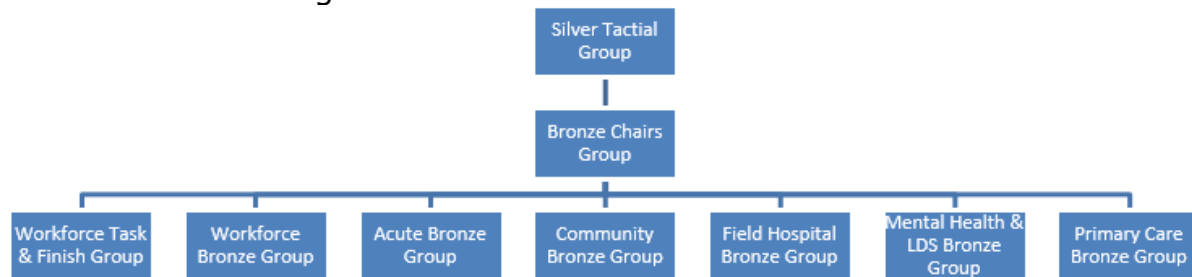
had completed training, the total number of new and returning starters during this period was not provided; therefore, compliance levels for mandatory and statutory training were unable to be ascertained.

**See Finding 1 at Appendix A.**

### **OBJECTIVE 3: The progress of workforce plans are regularly submitted to a group or committee for scrutiny and review**

Since the onset of the Covid pandemic, a number of formal boards, groups and committees were stood down and a Command and Control structure implemented to deal with the Health Board's response since March 2020.

During this period, the governance arrangements for workforce planning were set out in the following structure.



A review of the Workforce Task & Finish Group minutes and papers for the period June to October 2020 confirmed the regular attendance of W&OD personnel including the Director of W&OD as the group's Chair. In addition, a review of the Silver and Bronze Tactical Group minutes and papers for the period July to November 2020 confirmed the progress and consideration of workforce issues.

County workforce planning meetings had also been setup for Carmarthenshire, Ceredigion and Pembrokeshire. A review of the three county meetings in October 2020 confirmed that W&OD employees attended those meetings, in addition to other supporting departments including Finance and Hospital Management to scrutinise workforce planning arrangements and progress within their localities.

We can also confirm that the Director of W&OD has regularly submitted presentation papers to the People, Planning and Performance Assurance Committee (PPPAC) meetings since June 2020. The presentation papers focused on the four key areas:

- Workforce Performance and Well-being;
- Resourcing and utilisation;
- Organisational Development; and

- Workforce Development and Education.

The Health Board has also submitted *Coronavirus (COVID-19) NHS Wales Operating Framework* reports to the Welsh Government for quarters 1 and 2 during 2020/21.

**No matters arising.**

## 7. Summary of Recommendations

The audit findings and recommendations are detailed in Appendix A together with the management action plan and implementation timetable.

A summary of these recommendations by priority is outlined below.

<b>Priority</b>	<b>H</b>	<b>M</b>	<b>L</b>	<b>Total</b>
<b>Number of recommendations</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>

<b>Finding 1 – Training of Covid-19 Starters (D)</b>	<b>Risk</b>
<p>Whilst we were provided with the numbers of individuals that had completed training, the total number of new and returning starters during this period was not provided; therefore, compliance levels for mandatory and statutory training were unable to be ascertained.</p>	<p>Employees do not receive appropriate training.</p>
<b>Recommendation 1</b>	<b>Priority level</b>
<p><b>Management should ensure arrangements are in place to capture and monitor all new and returning employees’ hired during the Covid-19 pandemic and their compliance in completing the required mandatory and statutory training.</b></p>	<p style="text-align: center;"><b>MEDIUM</b></p>
<b>Management Response</b>	<b>Responsible Officer/ Deadline</b>
<p>Actions:</p> <ul style="list-style-type: none"> <li>• Revisit Covid-19 Phase 1 recruitment cohort and feedback compliance to Workforce Bronze.</li> <li>• All clinical induction call-backs to be planned and progress update to be reported to Workforce Bronze for Covid-19 phase 1 recruitment.</li> <li>• Revisit Covid-19 Phase 2 recruitment cohort and feedback compliance to Workforce Bronze</li> <li>• All clinical induction call-backs to be planned and progress update to be</li> </ul>	<p>Head of Workforce Education &amp; Development</p> <p>27<sup>th</sup> January 2021</p>

reported to Workforce Bronze for Covid-19 phase 2 recruitment.


- L&D to continue to allocate mentors to new starters to support completion of mandatory training.


Following Phase 1 of the COVID-19 recruitment, the L&D function carried out a full review of the compliance of all Covid Starters, including both mandatory training and where the bespoke shortened clinical induction program had been completed. Support was given to individuals by the L&D team as well as working with line managers to support completion of all E-learning modules. In terms of the clinical induction, a plan has been produced to ensure where there are gaps in the need for onboarding clinical staff, all HCSW are called back to complete the remaining training and achieve the full clinical training accredited modules. This plan allows for surge in recruitment priorities and will continue as the pressures to onboard clinical staff reduces.


In addition, the lessons learned from the first phase of the Covid-19 onboarding has meant new starters have been assigned an L&D Administrative Mentor, who contact regularly to ensure timely completion of all e-learning modules. This has proven beneficial and supported timely completion of mandatory training.


## Appendix B - Assurance Opinion and Action Plan Risk Rating

### 2020/21 Audit Assurance Ratings

 **Substantial Assurance** - The Board can take **substantial assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with **low impact on residual risk** exposure.

 **Reasonable Assurance** - The Board can take **reasonable assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with **low to moderate impact on residual risk** exposure until resolved.

 **Limited Assurance** - The Board can take **limited assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. More significant matters require management attention with **moderate impact on residual risk** exposure until resolved.

 **No Assurance** - The Board has **no assurance** arrangements in place to secure governance, risk management and internal control, within those areas under review, which are suitably designed and applied effectively. Action is required to address the whole control framework in this area with **high impact on residual risk** exposure until resolved.

### Prioritisation of Recommendations

In order to assist management in using our reports, we categorise our recommendations according to their level of priority as follows.

Priority Level	Explanation	Management action
<b>High</b>	Poor key control design OR widespread non-compliance with key controls. PLUS Significant risk to achievement of a system objective OR evidence present of material loss, error or misstatement.	Immediate*
<b>Medium</b>	Minor weakness in control design OR limited non-compliance with established controls. PLUS Some risk to achievement of a system objective.	Within One Month*
<b>Low</b>	Potential to enhance system design to improve efficiency or effectiveness of controls. These are generally issues of good practice for management consideration.	Within Three Months*

\* Unless a more appropriate timescale is identified/agreed at the assignment.



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