



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 June 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Staff Partnership Forum (SPF) Briefing Paper
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling, Executive Director of Workforce & OD & Deputy Chief Executive
SWYDDOG ADRODD: REPORTING OFFICER:	Anthony Dean, Joint Chair of SPF Lisa Gostling, Joint Chair of SPF

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Er Gwybodaeth/For Information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The purpose of this report is to provide the People, Organisational Development and Culture Committee (PODCC) with an update from the Staff Partnership Forum in relation to their joint work on the implementation of the non-pay elements of the collective agreement for 2022-24 for Agenda for Change (AfC) staff.

Cefndir / Background

To enable this work to progress in partnership, a number of workstreams were established at a workshop in December 2023. Each workstream is jointly chaired with a nominated lead from the trade unions and a management representative.

The non-pay programme of work was also incorporated into a Welsh Health Circular (WHC)-(2024) 017, dated 28 March 2024 to provide a framework for the delivery in partnership of certain non-pay elements. There are three parts to the circular: -

- Part 1 – Immediate assurance
- Part 2 – Required
- Part 3 – Expected

Each Health Board is required to submit a report to Welsh Government (WG) on progress to date at regular intervals in the year – May 2024, July 2024, September 2024 and January 2025. This first report requires the Health Board to provide an assurance report confirming that the measures outlined in Part 1 are in place and a baseline assessment for Part 2 has been undertaken.

Each briefing to PODCC will provide an overview of the work to date in relation to the workstreams and the broader non-pay elements of the collective agreement. Appended to this report is the draft assurance report for May 2024.

Asesiad / Assessment

Four workstreams were established in December 2023 following a scoping exercise of the key issues arising from the non-pay deal in relation to:

- Flexible working – to include flexible rostering practice and rosters.
- Agency reduction – with links to incentivising pay, contracts and general Terms and Conditions.
- Retention – to include retire and return.
- Sickness absence – to include parity between support for mental health and physical Health.

A follow up workshop took place in April 2024 where highlights of the work to date and next steps were discussed. To monitor the work going forward, a subgroup of the Staff Partnership Forum will be established to oversee the workstreams more formally.

A summary for each workstream is provided below:

Flexible working

The task and finish group has been established and is due to meet in June, consisting of clinical and operational managers and staff who have a positive outlook on the value of flexible working, with the aim of:

- Defining what flexibility means: develop a clear definition and vision for flexibility in Hywel Dda University Health Board.
- Developing a flexible culture: change hearts and minds to build a culture which promotes flexible working at team level.

An essential part of this will include exploring how to overcome barriers to flexible working (captured in the December 2023 workshop and broadly categorised as operational, developmental, behavioural, cultural).

Key actions undertaken to date include:

- working with our Workforce Information team to create a monthly data report of flexible working requests recorded in the Electronic Staff Record.
- discussing with our Leadership Development team to begin exploring options to incorporate flexible working (and retire and return) into Health Board Leadership Development Programmes, e.g. LEAP, from a strategic decision-making perspective to encourage a 'hearts and minds' change at leadership level.
- scoping how our Organisational Development (OD) Relationship Managers could add an assessment of flexible working maturity into their exploration phase when working with services/teams.
- organising (yet to take place) a lunch and learn education session for staff on flexible working, which will include a section on retire and return.

As this work also aligns with the Health Board's wider retention programme, updates will be shared with the specific retention groups as necessary, including Nursing, Medical and Allied Professional Healthcare (AHP) (AHP scheduled to begin in September 2024). Additionally, areas of collaboration with the Health Board's new Rostering Group will be explored.

Agency reduction

The task and finish group has been established, and have met to discuss and progress the elements included within the National Workplan:

- To reduce the spend on Agency staff and to ensure that we offer fair pay in line with AfC (which includes wider benefits than pay alone) to our own workforce rather than fund the profits of private sector agencies. We will work in social partnership to reduce reliance on agency workers through all means possible including adherence to the NHS Agenda for Change Terms & Conditions.
- Incentivise NHS employment e.g. weekly pay, annualised hours, additional hours.
- Review the use of overtime and bank rates to incentivise.
- Any extra hours added onto the end of the shift due to work pressures will be paid at overtime rates across all roles

Key themes identified at the workshop in December were:

- Data: to understand what the data is telling us about: a) our nursing workforce and why they choose to work for an agency b) how we plan and manage services to generate the need for an agency workforce?
- Action: Create baseline assessment, Understand workforce
- Culture Process/Change: what do we know and what can we learn from our data/intelligence to improve/change the processes and culture to encourage and retain agency nurses within our workforce?
- Health & Wellbeing: what do we need to improve to enable our workforce to flourish?
- Training & Education: what does our workforce and management need to know to encourage good roster practices, workforce management and effective leadership?

Issues highlighted at the workshop:

- Treatment for specialist areas and skillsets for agency rates – what do we need to specialist versus generalist skill sets? More nurses than every dispersed across more specialist services: respiratory, diabetes i.e. Band 6.
- The development of business plans for development of specialist services and general growth in demand in community setting is exceeding the growth in workforce pipelines (specialist and generalist) leading to agency usage/increases.
- Reduction in participation from 37.5hrs to 34.5hrs 2022 it was 142 today it is 232. How are we accounting for this in workforce gaps
- Bank access and visibility of shifts – using good rostering practices to enable our staff to access.
- Valuing the whole experience of working in the Health Board to encourage onboarding of agency staff to substantive roles.
- Focusing on individuals, teams and whole system.
- Simpler for agency nurses to join us, harder for our own health board colleagues to move from one ward to another. Need to refine a process for internal moves. Indicative figure is 60% internal moves versus 40% external joiners.

Key Actions identified:

- Create baseline assessment.
- Understand “True” workforce gap – Demand and Capacity.
- Monitoring mechanisms in line with Variable Pay Expenditure Reduction & Effectiveness Group / WHC All Wales and Core Delivery Group.
- Operational Workforce Plans for 2024/25 completed and includes Agency Reduction Plan 50% reduction year on year.

- Develop Plan for Agency Reduction that incorporates or aligns to wider plans i.e. flexible working etc.

Retention to include Retire and Return

The task and finish (T&F) group has been established and is due to meet early June, consisting of managers and staff who have experienced the retire and return process.

An initial discovery piece of work has been carried out, which included a focus group and a survey. The survey was shared with all staff who had retired and returned. Feedback from both methods will be prioritised by the task and finish group.

Key actions undertaken to date include:

- creating a video resource to enable and educate staff in relation to the process.
- creating a SharePoint page to capture all information pertaining to retire and return.
- organising (yet to take place) a lunch and learn education session for staff on flexible working, which will include a section on retire and return.

As this work also aligns with the Health Board's wider retention programme, updates will be shared with the specific retention groups as necessary, including Nursing, Medical and AHP (AHP scheduled to begin in September 2024).

Sickness Absence

A sickness/wellbeing task and finish group has been established with initial meetings taking place in March and April. Plans are in place to amalgamate the work currently being undertaken by the T&F group in respect of Exploration of Mental Health Stats. with this work stream.

The work will focus on key non-pay elements of the WG Non pay Deal which included:

- Health and wellbeing, specifically support to enable individuals to remain in work or return sooner following a period of sickness absence.
- Ensure that support for the mental wellbeing of staff has parity with physical wellbeing support.
- Support for individuals to enable people to remain in work or return from absence as quickly as possible.
- A focus on redeployment (including cross boundary working) rather than sickness absence when this is appropriate.
- Full implementation of the Fatigue and Facilities and Midwives Caring for You Charters.

Actions identified:

- Improve manager skills and knowledge in respect of sickness absence management
- Application of compassionate leadership and management support.
- Improve digital access capability/provide alternatives to digital resources (to support reasonable adjustments and redeployment opportunities).
- Balance deployment opportunities – remove fear and suspicion.
- Hard focus on prevention of sickness absence.
- Better understanding of reasonable adjustments – explore training provision in respect of this.
- Provide safe spaces for better engagement.
- Senior Leadership Team to engage in flu programme.
- More of an informal approach to resolving issues.

- Better understanding of menopause symptoms and better support available for managers and staff.
- Improved conversations and dialogue between staff and their manager.
- Ensure positive role models of behaviour to promote psychological safety.
- Job Shares for succession planning and reasonable adjustments.
- Expand wellbeing champion network.
- Review actions identified in the WF sickness absence plan to inform work of this T&F group rather than duplicate.
- Key metrics and statistics to be developed/assessed to determine if any meaningful correlations e.g: How many people return to work within 12 week window, Break down of top 5 reasons for sickness, Short term V Long term sickness, Repeat patterns of sickness.

Argymhelliad / Recommendation

The Committee is asked to:

- **NOTE** the content of the report.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	N/A
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 2. Working together to be the best we can be 3. Striving to deliver and develop excellent services 4. The best health and wellbeing for our individuals, families and communities
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 5. Offer a diverse range of employment opportunities which support people to fulfill their potential

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Welsh Health Circular (2024) 017 - Implementation of the Non-pay Elements of the 2022-4 Collective Agreement Welsh Health Circular (2023) 046 – All Wales Control Framework for Flexible Workforce Capacity
Rhestr Termau: Glossary of Terms:	Included in the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None arising from this paper.
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	None arising from this paper.
Risg: Risk:	Delivery on the Welsh Health Circular has to be reported to Welsh Government in May 2024, July 2024, September 2024 and January 2025. Failure to comply may impact our relationship with Welsh Government and our local and national trade unions.
Cyfreithiol: Legal:	None arising from this paper.
Enw Da: Reputational:	Reputational risks may arise from a failure to implement all aspects of the Welsh Health Circular within our control.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	None arising from this paper.