



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

|  |  |
|--|--|
| <b>DYDDIAD Y CYFARFOD:</b><br><b>DATE OF MEETING:</b>  | 15 April 2024  |
| <b>TEITL YR ADRODDIAD:</b><br><b>TITLE OF REPORT:</b>  | Performance Assurance & Workforce Metrics                                |
| <b>CYFARWYDDWR ARWEINIOL:</b><br><b>LEAD DIRECTOR:</b> | Lisa Gostling, Director of Workforce and Organisational Development (OD) |
| <b>SWYDDOG ADRODD:</b><br><b>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 and 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 29 February 2024 (unless stated otherwise for NHS Wales benchmarking datasets).

**Cefndir / Background**

The dashboard has been developed to report on the individual delivery plans for the 12 specific requirements, targets have been identified against the eight strategic statements of intent in the 10 year strategy to demonstrate the link between the target and progress in delivery of our strategy.

The dashboard in Appendix 1 is produced bi-monthly with the full range of metrics and Key Performance Indicators (KPIs) presented 6 monthly to PODCC in February and August.

**Asesiad / Assessment**

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

- Overall staff engagement score – scale score method
  - The response rate has dropped back to the 10% rate last seen in November 2022. Ways to increase participation are continually being explored.
  - More detailed methods of reporting are being explored with the focus on maintaining anonymity.
- Agency spend as a percentage of total pay bill; Variable pay (agency, locum, bank and overtime: monthly position)

- Work has been undertaken to bring a reduction in off contract agency usage to drive costs down. There has been no off contract agency use since June 2023.
- 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 year 2022.
  - Following the refresh of data in January 2024 an action plan will be developed to drive compliance.
- Percentage of sickness absence rate of staff
  - The rolling rate of 6.3% is 1.51% above the Health Board target of 4.79%.
- Qualitative report providing evidence of available 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: Additional professional scientific and technical (84.4%), Estates and Ancillary (76.5%) and Medical & Dental (47.1%), all of which continue to increase.
- 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).
  - The combined appraisal compliance has steadily been increasing from 64.8% in February 2022 to 71.6% in February 2023 and further increased to 76.6% in February 2024.
- Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job.
  - The rate steadily increased from 63.5% in April 2023 to 71.3% February 2024.
- 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 or child barred list check is required.
  - October 2022 saw for the first month since July 2021 where compliance dropped below 100%. This is due to a risk assessment being undertaken for an Apprentice to start prior to their Disclosure and Barring Service (DBS) check being returned. This was to ensure the Apprentice could start on their employment and educational pathway. A DBS was received after commencement which contained no information.
  - July 2023 saw the only other drop from 100% where a staff member started prior to their DBS check being completed or a risk assessment being undertaken. During routine reporting this was identified, mitigating action taken with learning put in place for the Appointing Manager concerned. A DBS has now been received which contained no information.

We have included statistical process chart (SPC) in relation to staff engagement, agency spend as a % of total pay bill, % sickness absence rate and the percentage of staff who have had an appraisal in the last 12 months.

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 and Culture Committee is requested to:

- **NOTE** the content of the report.
- **TAKE ASSURANCE** on performance in key areas of the Workforce and OD agenda.

| Amcanion: (rhaid cwblhau)<br>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   |
| Parthau Ansawdd:<br>Domains of Quality<br><a href="#">Quality and Engagement Act (sharepoint.com)</a>                                     | 3. Effective   |
| Galluogwyr Ansawdd:<br>Enablers of Quality:<br><a href="#">Quality and Engagement Act (sharepoint.com)</a>                                | 3. Data to knowledge   |
| 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   | 2c Workforce and OD strategy   |
| Amcanion Llesiant BIP:<br>UHB Well-being Objectives:<br><a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a> | 2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS   |

### Gwybodaeth Ychwanegol:

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

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



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CYMRU  
**NHS**  
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Hywel Dda  
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| 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%              |
| 2023 Sample in March        | 999     | 168              | 17%           | 75%              |
| 2023 Sample in April        | 1001    | 178              | 18%           | 72%              |
| 2023 Sample in May          | 990     | 181              | 18%           | 74%              |
| 2023 Sample in June         | 994     | 175              | 18%           | 76%              |
| 2023 Sample in July         | 985     | 181              | 18%           | 74%              |
| 2023 Sample in August       | 1002    | 170              | 17%           | 73%              |
| 2023 Sample in September    | 972     | 182              | 19%           | 74%              |
| 2023 Sample in October      | 988     | 161              | 16%           | 74%              |
| 2023 Sample in November     | 997     | 152              | 15%           | 73%              |
| 2023 Sample in December     | 977     | 107              | 11%           | 72%              |
| 2024 Sample in January      | 939     | 135              | 14%           | 73%              |
| 2024 Sample in February     | 944     | 94               | 10%           | 76%              |

Engagement Score by Staff Group

| Role                                   | Mar-23 | Apr-23 | May-23 | Jun-23 | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Administrative and Clerical            | 77%    | 76%    | 74%    | 72%    | 76%    | 74%    | 75%    | 76%    | 76%    | 74%    | 77%    | 75%    |
| Allied Health Professionals            | 79%    | 71%    | 69%    | 79%    | 81%    | 71%    | 72%    | 77%    | 77%    | 78%    | 69%    | 75%    |
| Estates, Facilities & Support Services |        | 79%    | 82%    |        | 58%    |        |        |        |        |        |        | 79%    |
| Healthcare Scientists                  | 69%    |        |        | 67%    | 63%    | 73%    |        |        |        |        |        |        |
| Medical and Dental                     | 65%    | 57%    | 63%    | 77%    | 71%    | 56%    | 66%    | 73%    | 73%    | 69%    | 73%    |        |
| None of these                          |        |        |        |        | 70%    |        |        |        |        |        |        |        |
| Nursing and Midwifery                  | 73%    | 73%    | 78%    | 77%    | 75%    | 76%    | 75%    | 71%    | 71%    | 70%    | 72%    | 75%    |
| Other Clinical Services                | 70%    | 71%    |        | 73%    | 63%    |        | 76%    | 83%    | 83%    | 70%    |        |        |
| Other Scientific and Technical         |        | 58%    | 78%    |        | 68%    | 72%    |        |        |        |        |        |        |
| Other                                  |        |        |        |        |        |        |        |        |        | 62%    |        |        |

Note -

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

Current Performance

February 2024 engagement is the highest it has been since June 2023 and is inline with the 2020 NHS Wales Survey.

Performance Against Trend

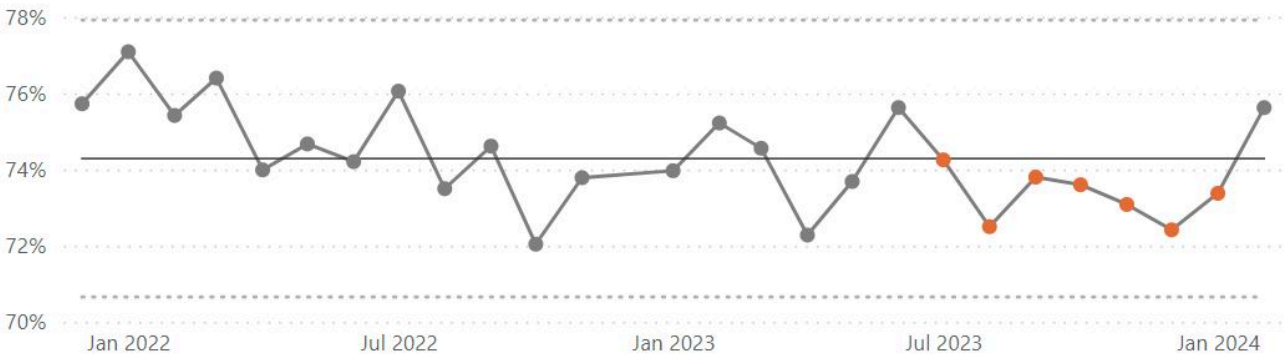
Whilst the engagement score has increased, the response rate has dropped to the lowest rate to date of 10%.

Future Positive Actions

The staff survey will be re-launched with additional promotion now the communication officer post has been successfully appointed into.



Our overall score for staff engagement (Hywel Dda survey)



This indicator is showing expected (common cause) variation.

Expected performance is between 70.7% and 77.9%

Key

- Upper and lower limits
- Mean
- Target
- Ambition

Variation - how are we doing over time

- Improving variation
- Usual variation
- Concerning variation

Assurance - performance against target

- Always hitting target
- Hit and miss target
- Always missing target

Trajectory - performance against our ambition

- Trajectory met
- Within 5% of trajectory
- More than 5% off trajectory

| Latest period | National target | Target aim | Latest actual | Variation | Assurance | Trajectory |
|---------------|-----------------|------------|---------------|-----------|-----------|------------|
| Feb 2024      |                 | Higher     | 75.62%        |           | N/a       |            |



Current Performance

▼

A Variable Pay Expenditure Reduction and Efficiency Group has been established to coordinate and oversee plans to reduce variable pay expenditure and financial run rates across medical, nursing (including HCSWs), Allied Health Professionals and administrative and clerical.

Performance Against Trend

▲

Agency spend has remained below 5% of the total pay bill since November 2023.  
Monthly variable pay fluctuates, although remains lower than the same period last year.

Future Positive Actions

▲

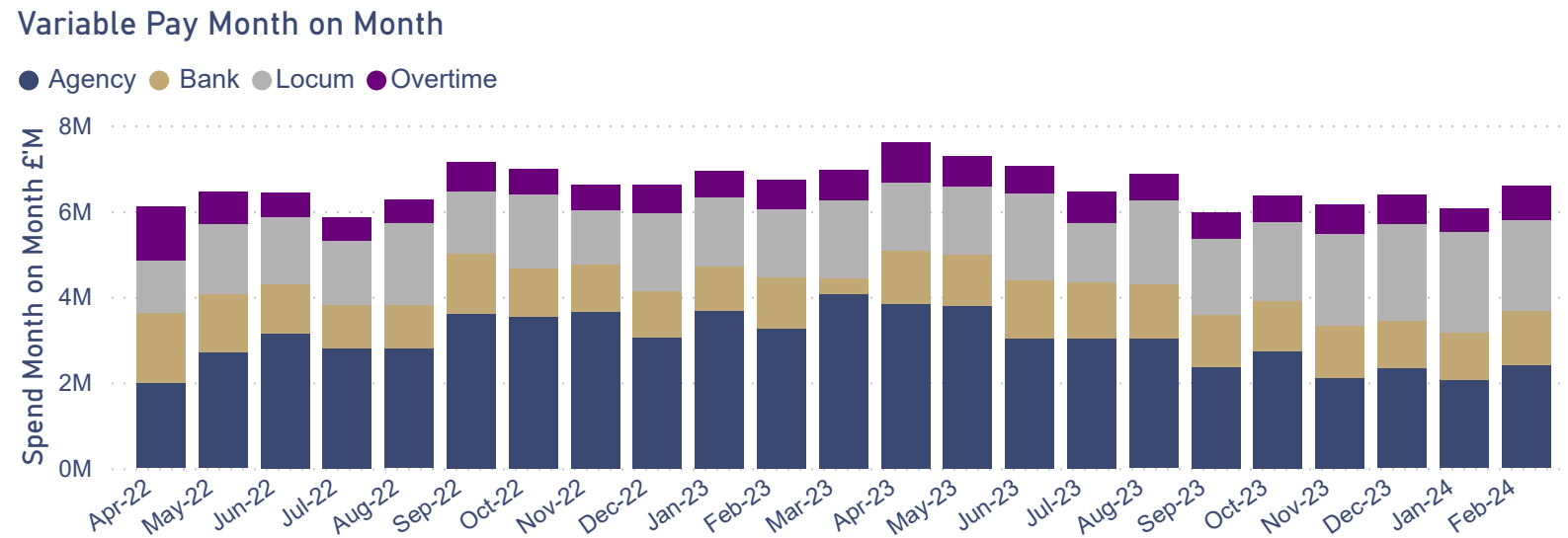
The variable pay expenditure group will work in partnership with operational teams to ensure clear understanding of individual service / directorate variable pay levels and individual highest earners and will work in partnership with operational teams to develop clear plans to reduce variable pay expenditure ensuring articulation of risks and benefits. This is in line with the HDUHB's organisational target of reducing variable pay by 50% for 2024/2025.

The process for engaging Medical, Allied Health Professionals and Healthcare Scientist agency workers has been strengthened and all requests for agency usage must be scrutinised and approved by the Financial Control Group. Improvements to the process mean that Workforce teams will be able to proactively track usage and focus efforts on targeting recruitment activities.

Nursing

The Nursing programme of work to reduce agency costs begins with a comprehensive analysis of agency usage at the ward level. This includes RAG ratings to pinpoint the reasons for agency use and potential solutions to eliminate or decrease use, based on ward stability levels. The programme of work to eradicate the use of agency HCSW is part of this cost reduction strategy. The programme of work is phased, with the initial efforts starting in Carmarthenshire.

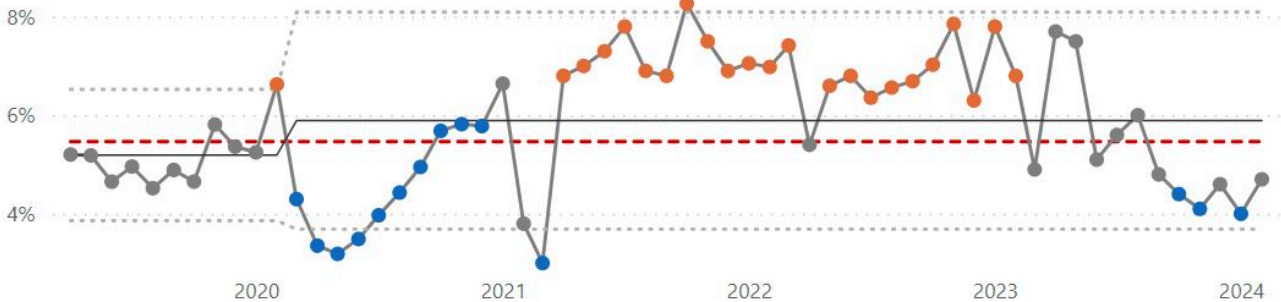
| Agency Spend as a percentage (%) of the total pay bill |           |           |           |           |
|--|-----------|-----------|-----------|-----------|
| Month Name   | 2020/2021 | 2021/2022 | 2022/2023 | 2023/2024 |
| April  | 3.36%     | 6.84%     | 6.46%     | 7.82%     |
| May  | 3.19%     | 7.04%     | 6.12%     | 7.62%     |
| June   | 3.45%     | 7.47%     | 6.94%     | 5.09%     |
| July   | 3.89%     | 7.95%     | 6.42%     | 5.62%     |
| August   | 4.58%     | 7.01%     | 6.46%     | 6.05%     |
| September  | 5.07%     | 6.79%     | 6.52%     | 4.81%     |
| October  | 5.84%     | 8.33%     | 6.94%     | 5.25%     |
| November   | 6.23%     | 7.77%     | 9.27%     | 4.19%     |
| December   | 6.07%     | 7.18%     | 6.23%     | 4.64%     |
| January  | 6.92%     | 7.15%     | 7.83%     | 4.04%     |
| February   | 3.98%     | 7.08%     | 6.89%     | 4.71%     |
| March  | 3.12%     | 5.13%     | 7.80%     |           |







Agency spend as a % total pay bill



This indicator is showing expected (common cause) variation. However, it also shows that improvement actions need to be identified and successfully embedded for the target to be consistently met.

Expected performance is between 3.7% and 8.1%

Key

- Upper and lower limits
- Mean
- Target
- Ambition

Variation - how are we doing over time

- Improving variation
- Usual variation
- Concerning variation

Assurance - performance against target

- Always hitting target
- Hit and miss target
- Always missing target

Trajectory - performance against our ambition

- Trajectory met
- Within 5% of trajectory
- More than 5% off trajectory

| Latest period | National target | Target aim | Latest actual | Variation | Assurance | Trajectory |
|---------------|-----------------|------------|---------------|-----------|-----------|------------|
| Feb 2024      | 5.47%           | Lower      | 4.70%         |           |           |            |

| Plan    | Education Commissioning | Complete/ In Progress |
|---------|-------------------------|-----------------------|
| 2020/21 | Out turn c2023          | ✓                     |
| 2021/22 | Out turn c2024          | ✓                     |
| 2022/23 | Out turn c2025          | ✓                     |
| 2023/24 | Out turn c2026          | ✓                     |
| 2024/25 | Out turn c2027          | ⌛                     |

Current Performance

Submission for financial year 2023/24 to cover the period up to circa 2026 complete. Refreshed placement matrix received and noted from HEIW.

Plans developing to create and inform the IMTP/E&C cycle 2024/25 to cover 2024-2027 i.e. HEIW contacted for update on forms and Forum/meetings with services to be scheduled.

Performance Against Trend

Ongoing discussions on deficits and use of alternative practitioner roles: i.e. Physician Associates, Advanced Paramedic Practitioners to determine the commissioning "ask" Specifically Physician Associate and role in stabilising our medical workforce and APP's as part of TUEC programme.

Future Positive Actions

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 overall workforce data/analytics approach.

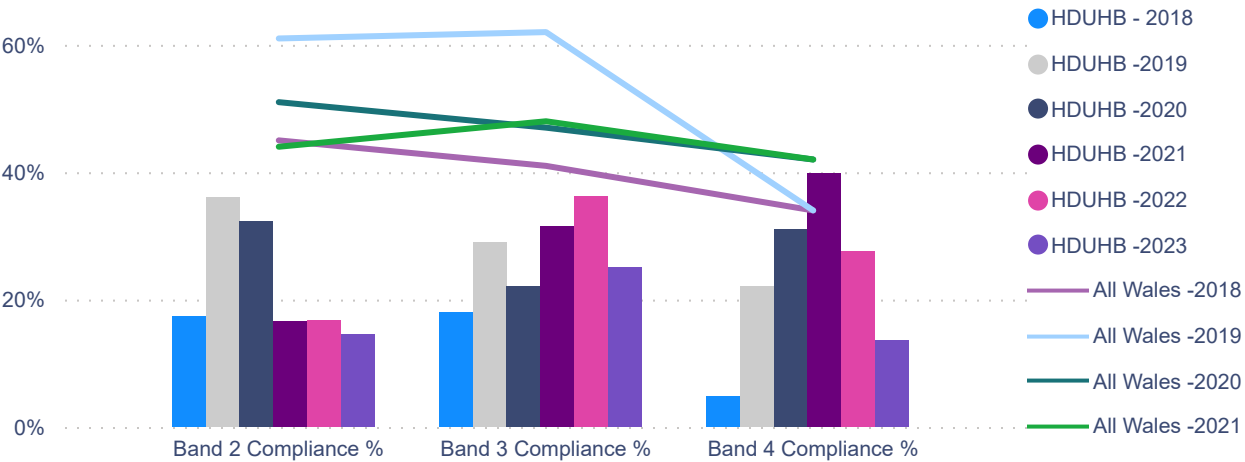
NHS delivery framework target: 3.B: Deliver requirements of regulators – b) Submit data in relation to HCSW framework on annual basis and related requirements for funding. Strategic Delivery Lead: Assistant Director of People Development  
Operational Delivery Lead : Learning & Development Manager  
This target aligns to the following statement of intent:  
2 - Recruiting and Retaining Great People , 4 - Delivering a Workforce Fit for the Future



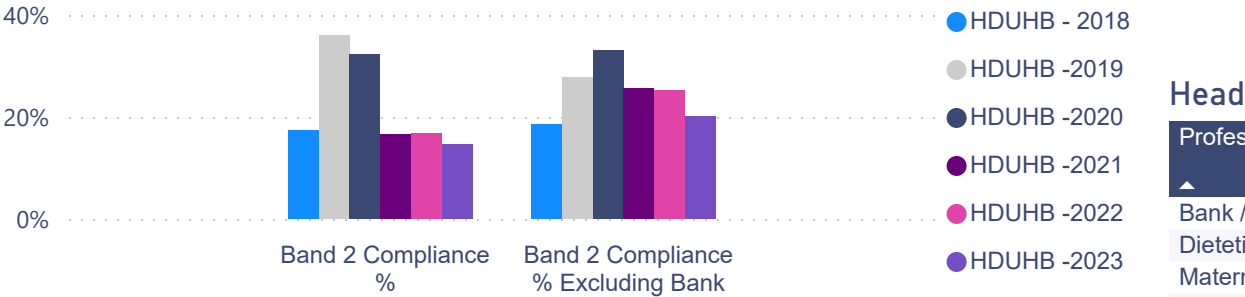
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Career Framework Data



Impact of Bank Compliance on Career Framework Data



January - December 2023

Career Framework- Percentage with requisite level of health related qualification

| Profession                                      | % Level 2 | % Level 3 | % Level 4 |
|---|-----------|-----------|-----------|
| Bank / Temporary Staff (on Bank only contracts) | 6.0%      | 17.6%     | 11.8%     |
| Dietetics                                       |           |           | 7.7%      |
| Maternity                                       | 13.8%     | 33.3%     | 0.0%      |
| Nursing Adult                                   | 20.1%     | 26.4%     | 17.1%     |
| Nursing Child                                   | 25.9%     | 20.0%     | 50.0%     |
| Nursing Community                               | 29.1%     | 33.0%     | 27.3%     |
| Nursing Learning Disability                     |           | 23.1%     | 0.0%      |
| Nursing Mental Health                           | 16.3%     | 31.6%     | 8.6%      |
| Occupational Therapy                            |           | 0.0%      | 4.7%      |
| Operating Theatres                              | 26.2%     | 25.7%     | 60.0%     |
| Physiotherapy                                   | 0.0%      | 13.7%     | 0.0%      |
| Radiology                                       | 0.0%      | 9.4%      | 0.0%      |
| Speech and Language service                     |           | 0.0%      | 4.3%      |

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) | 810          | 49           | 108          | 19           | 17           | 2            |
| Dietetics                                       | 0            |              | 0            |              | 13           | 1            |
| Maternity                                       | 65           | 9            | 6            | 2            | 1            |              |
| Nursing Adult                                   | 938          | 189          | 284          | 75           | 111          | 19           |
| Nursing Child                                   | 27           | 7            | 10           | 2            | 20           | 10           |
| Nursing Community                               | 55           | 16           | 185          | 61           | 33           | 9            |
| Nursing Learning Disability                     | 0            |              | 39           | 9            | 19           |              |
| Nursing Mental Health                           | 80           | 13           | 133          | 42           | 35           | 3            |
| Occupational Therapy                            | 0            |              | 2            |              | 43           | 2            |
| Operating Theatres                              | 42           | 11           | 35           | 9            | 10           | 6            |
| Physiotherapy                                   | 2            |              | 51           | 7            | 43           |              |
| Radiology                                       | 1            |              | 64           | 6            | 20           |              |
| Speech and Language service                     | 0            |              | 4            |              | 23           | 1            |
| Total   | 2020         | 294          | 921          | 232          | 388          | 53           |

|   |  |
|---|--|
| Current Performance   | Future Positive Actions  |
| HDdUHB annual performance fluctuates considerably, with greater cleansing of data and continuation to do so through ESR.  | The Strategic People Planning and Education Group will have oversight of the data relating to the AWCF and oversee improvement. Following refresh of the data in January 2024, a deep-dive will be carried out, along with an action plan to drive compliance. |
| Performance Against Trend   |  |
| HDdUHB data is significantly lower than the 'All Wales' comparison. The December 2023 data shows a decline in performance, matching the decline in non-registered workforce accessing qualifications due to challenges around backfill and recognising financial constraints on services. |  |

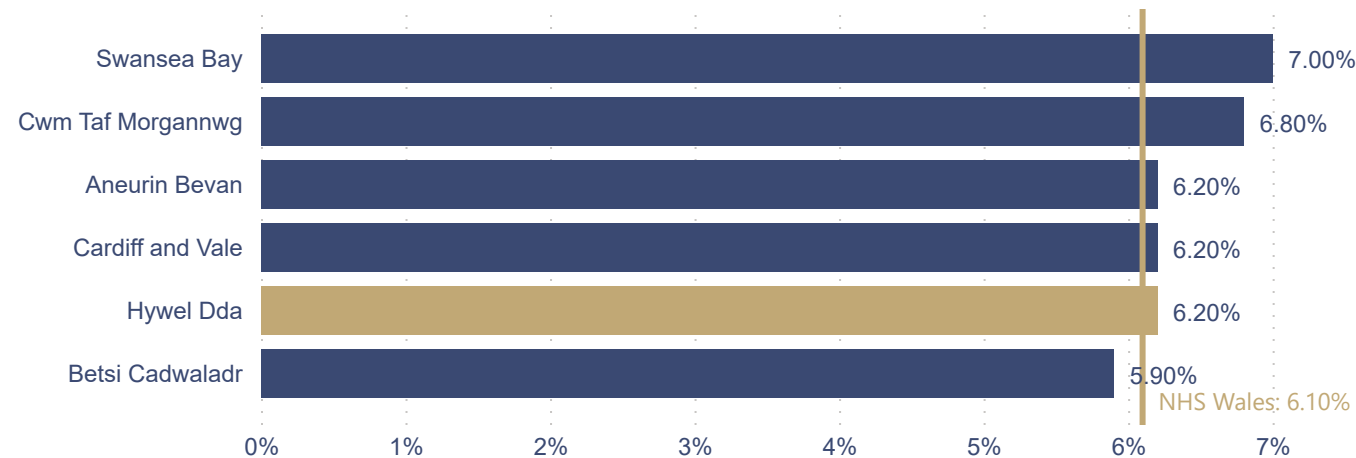
NHS delivery framework target: 5.A.i - Develop plans to deliver, on a sustainable basis - Percentage of sickness absence rate of staff Strategic Delivery Lead: Deputy Director of Workforce & Organisational Development Operational Delivery Lead: : Head of Workforce

This target aligns to the following statement of intent:

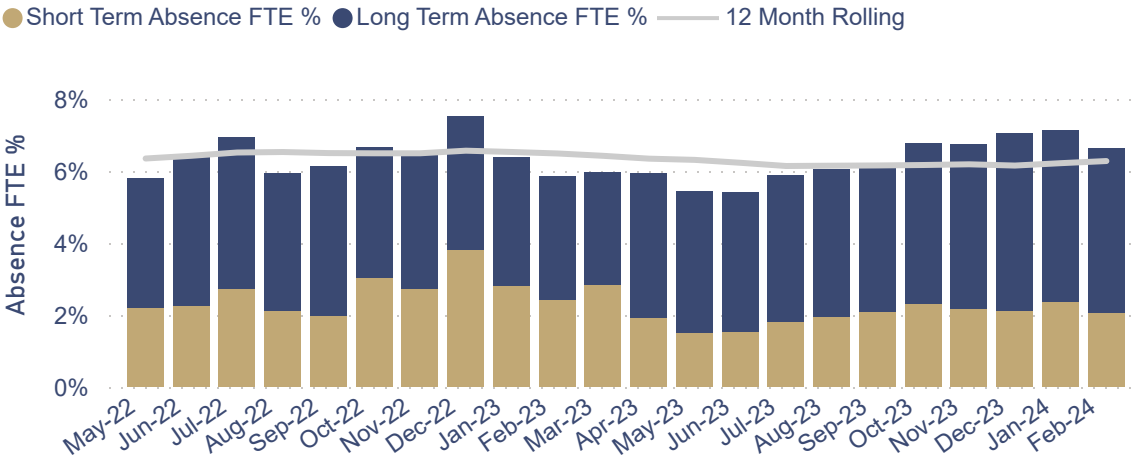
3 - Engaging our Staff



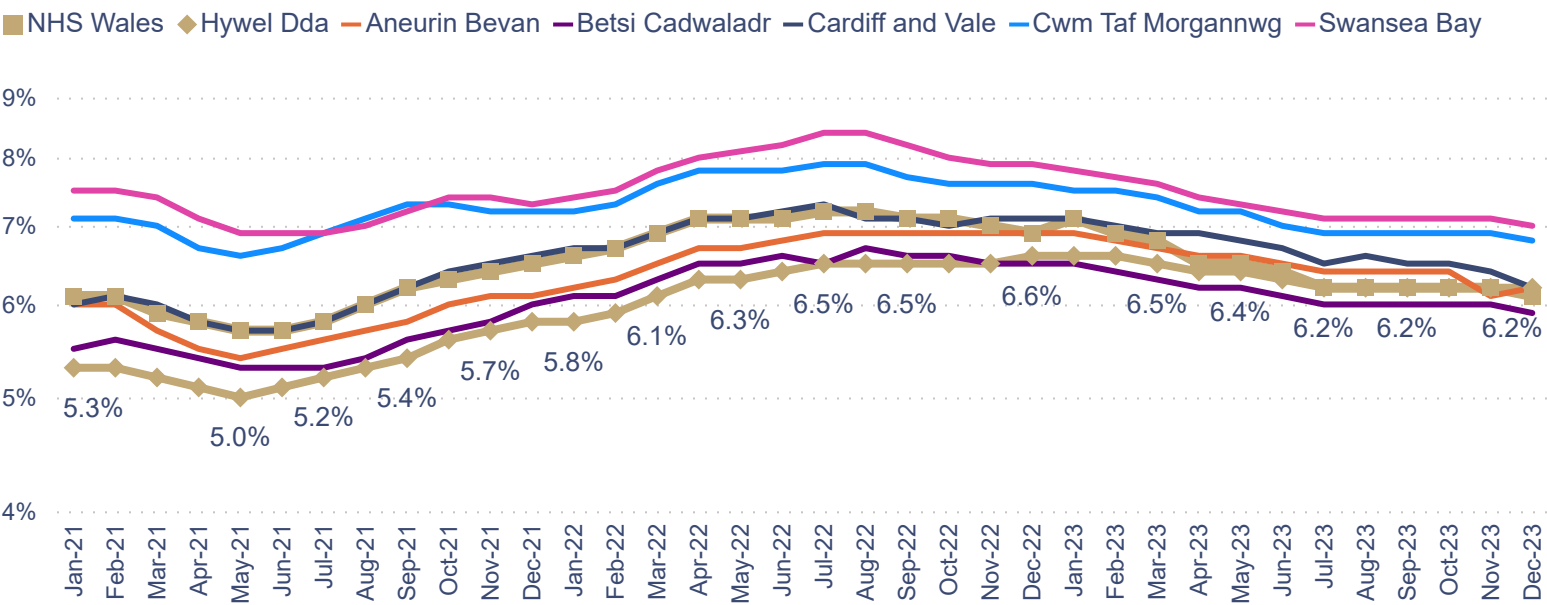
12 month rolling sickness absence rates (UHBs only) to December 2023



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



Rolling 12-month sickness absence rates, Jan '21 to Dec'23



**Current Performance**

We continue to see higher levels of absence than seen prior to the pandemic even though some services have made significant improvements in their absence rates over the past 12 months. Industrial action may also impact our absence rates especially if the action continues into the spring and summer months. Seasonal cough/colds/flu absences remain high but are consistent for the time of year when compared to previous years.

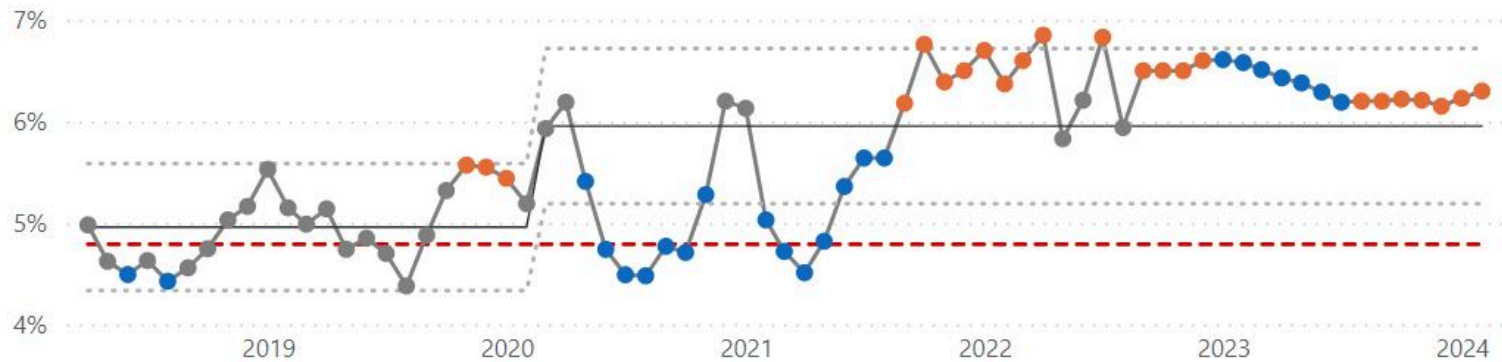
**Performance Against Trend**

HDUHB data remains consistently lower or equal to the majority of the other UHBs in Wales based on the latest data set. Whilst the average rolling 12 month figure reported is 6.2 %, it should be noted that this figure is based on 13 NHS organisations in Wales, some of which are much smaller organisations.

**Future Positive Actions**

Meeting with TU leads to discuss sickness absence plan.  
Estates & Facilities to undertake 4 sickness absence audits  
Sickness absence task & finish groups to have its first meeting and to prepare workplan  
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.  
As part of our planning objectives this year a sickness absence action plan to review all internal processes and documentation against our mission for kinder people processes has been developed.

% sickness absence rate of staff



National target 12m reduction. Live data subject to change.

The latest data is showing a concerning trend and improvement actions need to be identified and successfully embedded for the target to be met.

Expected performance is between 5.2% and 6.7%

Key

- Upper and lower limits
- Mean
- Target
- Ambition

Variation - how are we doing over time

- Improving variation
- Usual variation
- Concerning variation

Assurance - performance against target

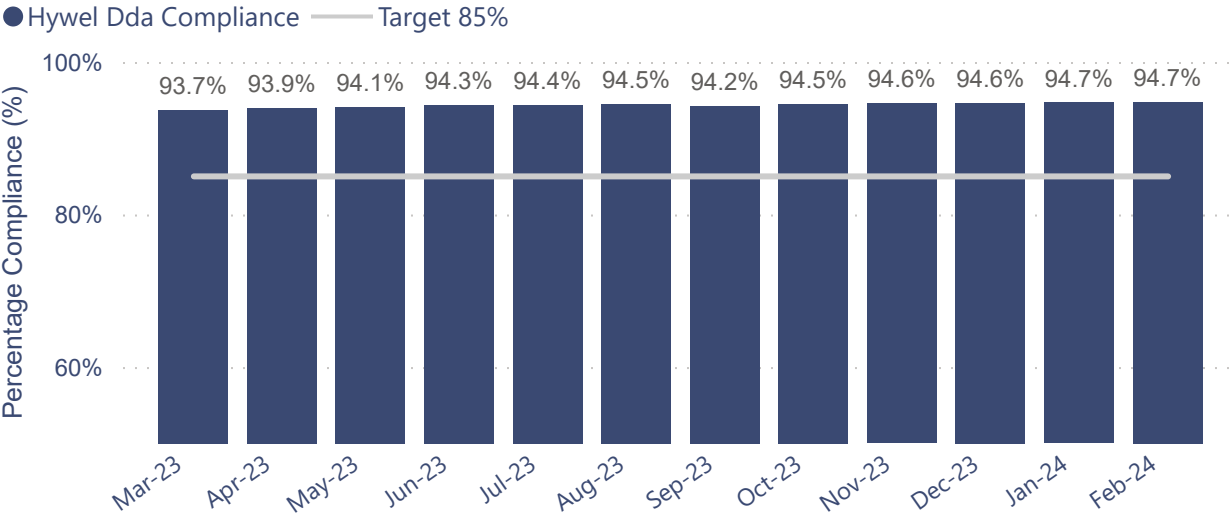
- Always hitting target
- Hit and miss target
- Always missing target

Trajectory - performance against our ambition

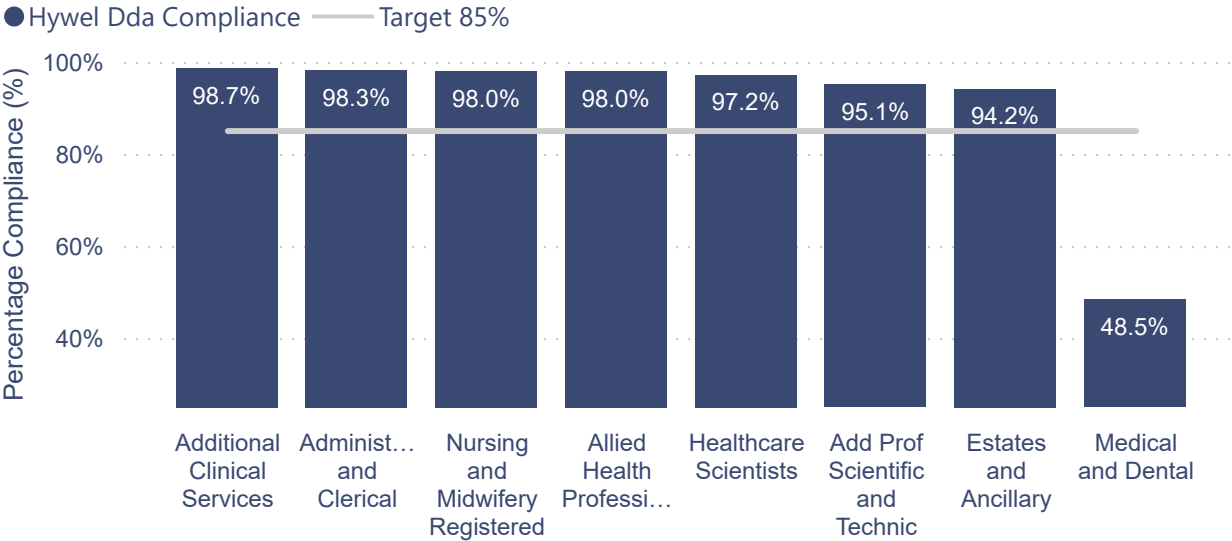
- Trajectory met
- Within 5% of trajectory
- More than 5% off trajectory

| Latest period | National target | Target aim | Latest actual | Variation | Assurance | Trajectory |
|---------------|-----------------|------------|---------------|-----------|-----------|------------|
| Feb 2024      | 4.79%           | Lower      | 6.30%         |           |           |            |

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

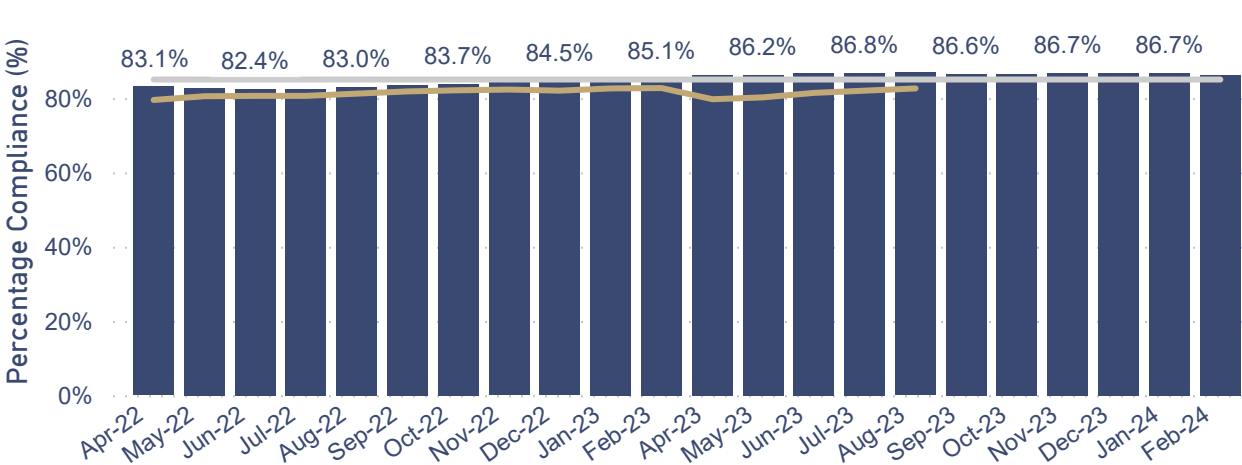
A new Hywel Dda working group has been set up to review the training recommendations and resources in the draft Dementia L&D framework. They have begun to identify if any new training resources should be delivered to target groups and also explore options for suitable Agored module units meet the framework.





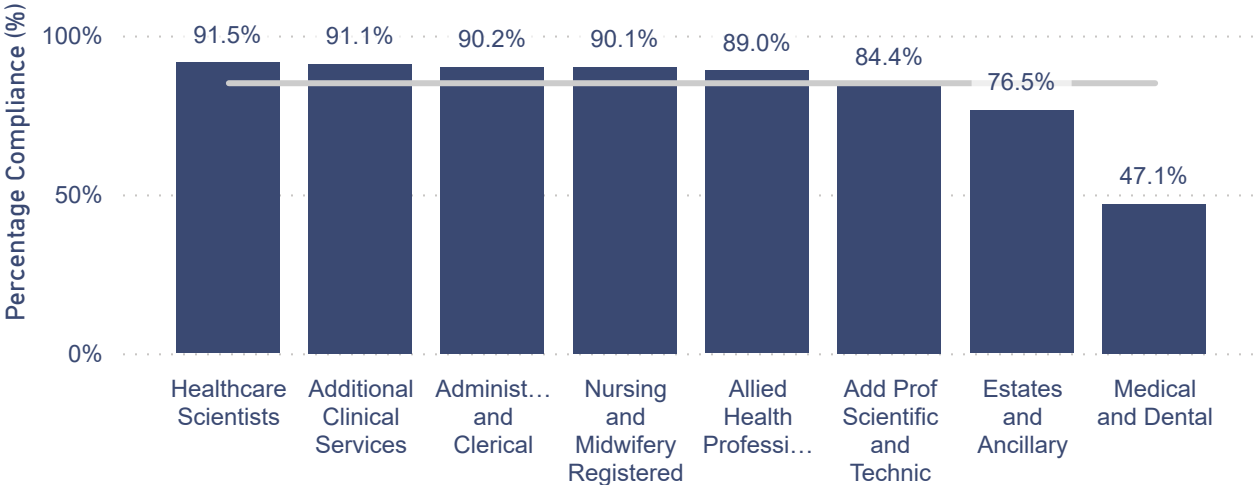
Core Skills Training Framework (CSTF) compared to NHS Wales Performance and Target of 85%

Hywel Dda Compliance NHS Wales Target 85%



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

Hywel Dda Compliance Target 85%



Current Performance

Collectively performance has been well sustained over the winter period which is often a peak renewal period as it falls on the anniversary of historic recruitment campaigns to address winter pressures.

Performance Against Trend

The Health board continues to perform better than NHS Wales and above target of 85%.

Future Positive Actions

Drilled down into more detail we can see significant decline There's been a significant decline in Estates and Facilities since the last report. Five 3-year competencies have all dropped by over 3%, suggesting that there was a big push to improve compliance around this time, three years ago. L&D are liaising with the relevant departments within E&F to offer support however these staff will need to be given protected time by the service to complete their training.



NHS delivery framework target: 5.A.i - Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job & Percentage of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (exc Drs and Dentists in training)  
Operational Delivery Lead: Head of Culture and Workforce Experience  
This target aligns to the following statement of intent:  
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



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

- Aug-23 64.1%
- Sep-23 75.8%
- Oct-23 68.9%
- Nov-23 71.1%
- Dec-23 67.3%
- Jan-24 65.2%
- Feb-24 71.3%

**Current Performance**

Slightly down on previous measurement, the organisation is maintaining compliance rates, even in the face of many workforce challenges. Early indications from the National Staff Survey show 80%+ confirmed that they have had a PADR. The organisations Board Outcome Survey averages 70% of staff say that the PADR is meaningful.

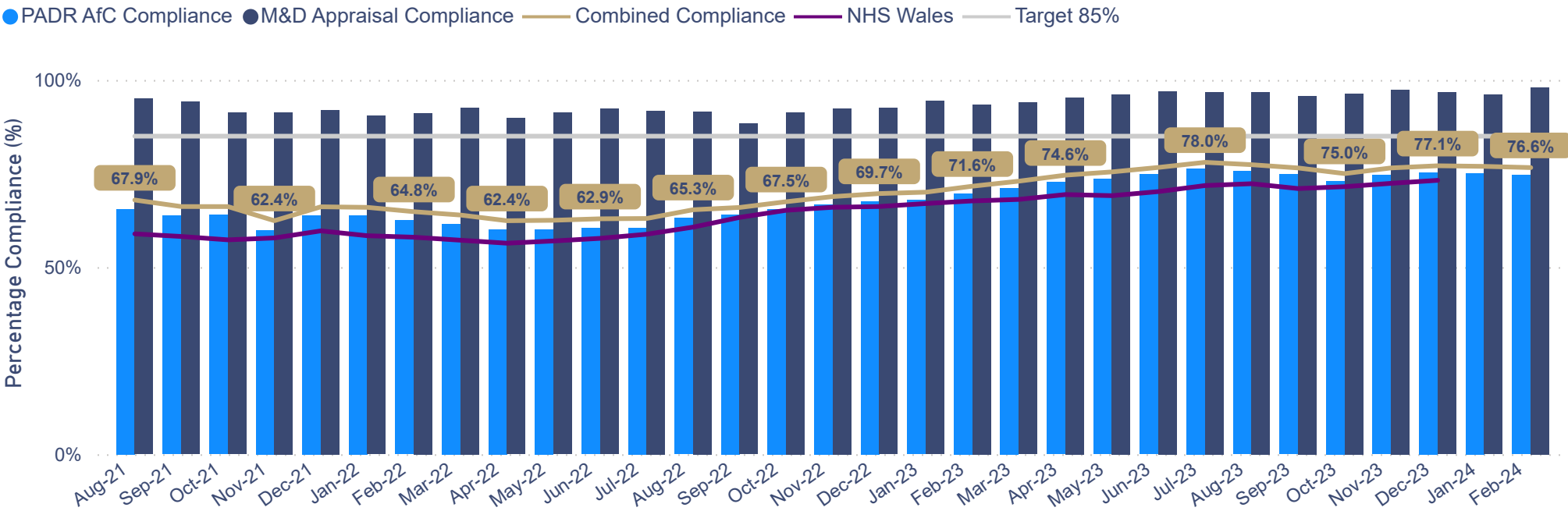
**Performance Against Trend**

Still a little away from Welsh Gov target of 85% but the organisation is ensuring that it aligns both measures of compliance with purpose.

**Future Positive Actions**

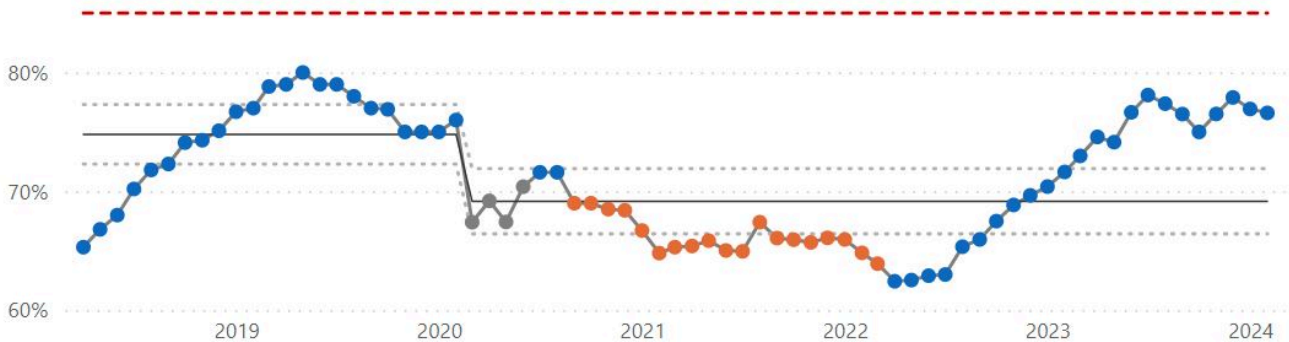
A performance management task and finish group is being set up to review the programme following the Staff Discovery report. The Performance Management module is being held monthly and attendance is still high. The ODRMs are integrating the need for purposeful performance management as part of Cultural Plans for teams and services.

PADR Compliance to NHS Wales Performance and Target of 85%





% staff who have had an appraisal in the previous 12 months



The latest data is showing improvement. However, improvement actions need to be identified and successfully embedded for the target to be met.

Expected performance is between 66.4% and 71.9%

Key

- Upper and lower limits
  - Mean
  - Target
  - Ambition
- Variation - how are we doing over time**
- Improving variation
  - Usual variation
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- Assurance - performance against target**
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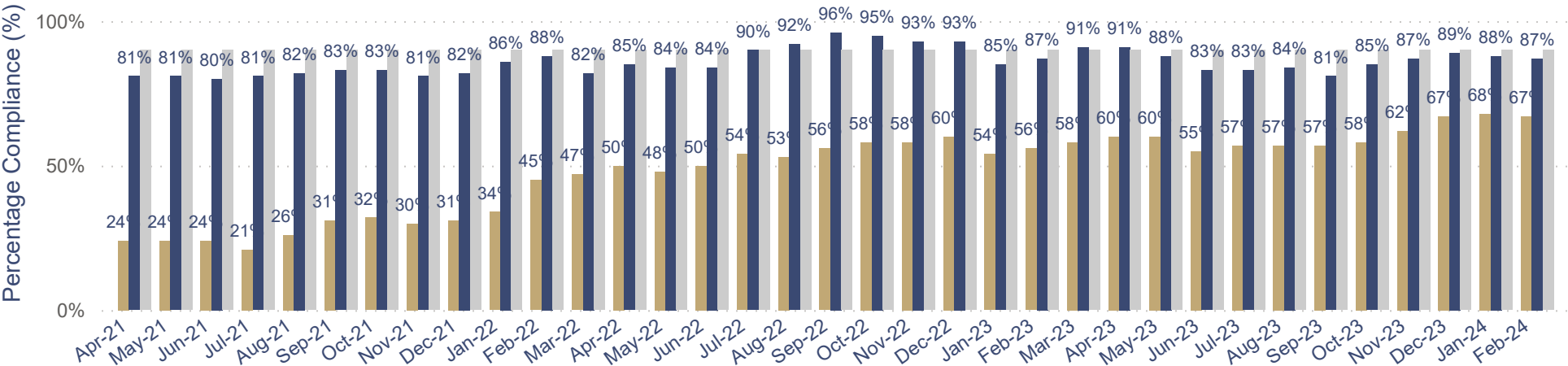
| Latest period | National target | Target aim | Latest actual | Variation | Assurance | Trajectory |
|---------------|-----------------|------------|---------------|-----------|-----------|------------|
| Feb 2024      | 85.00%          | Higher     | 76.60%        |           |           |            |

NHS delivery framework target: 5.A.i - 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).  
Strategic Delivery Lead: Medical Director Operational Delivery Lead: Head of Medical Education & Professional Standards  
This target aligns to the following statement of intent:  
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



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

Current Job Plan Job Plan 90% Target



Current Performance

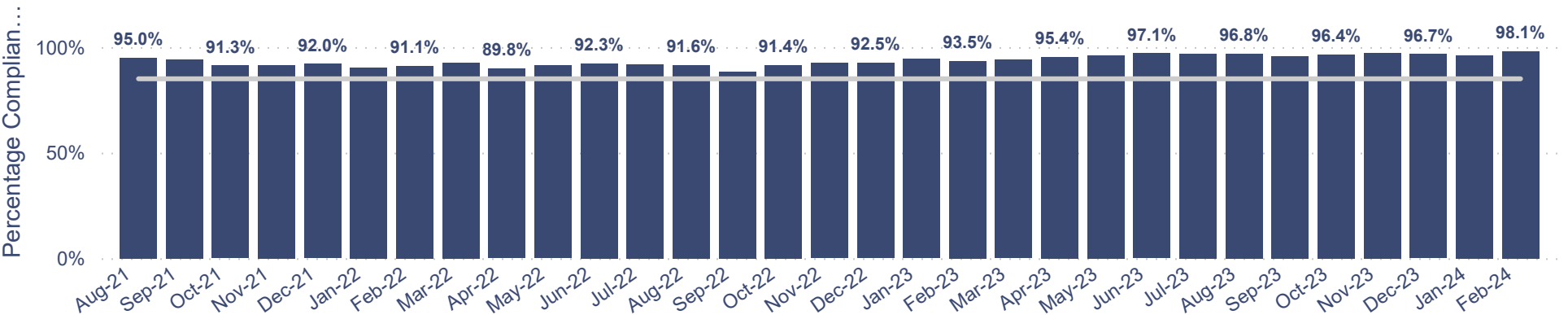
Job planning improvement is a slow process, due to numbers of job plans expiring monthly and new doctors being added.

Performance Against Trend

Continuing to make progress, clear improvement on previous years.

Medical Appraisal Compliance Performance against Target of 85%

M&D Appraisal Compliance Target 85%



Future Positive Actions

Monthly reports to be strengthened to highlight expiring job plans and include at DITS meetings.  
Executive Medical Director to lead job planning compliance meetings.  
Training to be offered for doctors and service support managers.

Current Performance

▲

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

Performance Against Trend

▲

July 23 a small dip in compliance from 100% to 99.2% as one employee commencing prior to their DBS being completed; a risk assessment was completed after starting. A DBS has now been received which contained no information.

Future Positive Actions

▲

Continue to perform at a high standard.

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.

| Axis   | Adult Barred Lists | Child Barred Lists | New Starters - Overseas | % Compliance |
|--------|--------------------|--------------------|-------------------------|--------------|
| 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%       |
| Mar-23 | 143                | 141                | 7                       | 100.0%       |
| Apr-23 | 142                | 132                | 2                       | 100.0%       |
| May-23 | 153                | 146                | 3                       | 100.0%       |
| Jun-23 | 103                | 102                | 3                       | 100.0%       |
| Jul-23 | 120                | 120                | 3                       | 99.2%        |
| Aug-23 | 119                | 115                | 7                       | 100.0%       |
| Sep-23 | 170                | 171                | 5                       | 100.0%       |
| Oct-23 | 207                | 200                | 6                       | 100.0%       |
| Nov-23 | 180                | 174                | 6                       | 100.0%       |
| Dec-23 | 111                | 107                | 10                      | 100.0%       |
| Jan-24 | 147                | 144                | 6                       | 100.0%       |
| Feb-24 | 121                | 118                | 7                       | 100.0%       |