



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	15 December 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Performance Assurance & Workforce Metrics
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce and Organisation Development (OD)
<b>SWYDDOG ADRODD: 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 31 October 2022.

##### 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
  - The response rates since May 22 have dropped compared to previous months, with October's response rate standing at 18%, which is 1% more than the 2020 NHS Wales Staff Survey.
  - Whilst we saw an increase in staff engagement in July 2022 the October figure of 72% is the lowest recorded this year and from the previous NHS Wales surveys.
  - 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.

- In December 2022 we will be reviewing the first years results and focusing on new ways to reach areas with relatively low response rates as well as looking to provide performance data beyond the directorate level currently being reported.
- 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.
- Percentage of sickness absence rate of staff;
  - Sickness for April-22 to July-22 on average has been 1.3% higher than respective months in 2021. In August 2022 we saw a reduction of in month absence in line with last year's level. Although in line with last years levels, October has seen an increase in month from August & September 2022.

*In line action PODCC(22)109 please refer to Appendix 2 which gives an overview of the 4 main sites in month & Rolling 12 month absence in comparison to the overall health board absence rate.*

- 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 at an informed level;
  - Overall the Health Board is over the target of 85% and has steadily been increasing compliance, currently performing at 93.3%.
  - All staff groups with the exception of Medical and Dental are above the 85% target. Medical & Dental staff group have a low rate of 45.1%.
- Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation
  - Our performance has been steady we are slightly below our 85% target.
  - We have 3 staff groups that are below the 85% target; Add Prof scientific & technical (84.1%), Estates & Ancillary (79.2%) and Medical & Dental (41.4%). 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.

- o For the first month since July 2021 compliance has dropped 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.

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: 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: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7.1 Workforce 7. Staff and Resources
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
Amcanion Cynllunio Planning Objectives	1A NHS Delivery Framework targets
Amcanion Llesiant BIP: UHB Well-being Objectives: <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: Evidence Base:	Data extracted from a range of workforce information systems.
Rhestr Termiau: 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.

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Not applicable.
<b>Ansawdd / Gofal Claf: 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: Workforce:</b>	All metrics and performance indicators contained in the report have direct relevance to the workforce agenda
<b>Risg: Risk:</b>	Not applicable.
<b>Cyfreithiol: Legal:</b>	Not applicable.
<b>Enw Da: Reputational:</b>	Not applicable.
<b>Gyfrinachedd: Privacy:</b>	All data presented is anonymous.

**Cydraddoldeb:  
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.



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%

Engagement Score by Staff Group

Role	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22
Administrative and Clerical	77%	79%	75%	74%	79%	80%	77%	77%	74%
Allied Health Professionals	78%	79%	71%	78%	72%	74%	73%	75%	69%
Estates, Facilities & Support Services	71%	79%	76%				65%		72%
Healthcare Scientists		75%	72%	65%	75%		78%	83%	81%
Medical and Dental	74%	58%	71%	76%	71%	78%	71%	67%	59%
None of these	77%	81%	84%	75%	87%	76%	69%	73%	68%
Nursing and Midwifery	78%	75%	73%	73%	69%	74%	71%	73%	74%
Other Clinical Services	82%	77%		82%			86%	73%	
Other Scientific and Technical		81%	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

Current Performance

The Staff Engagement score of 72% in October is lower than previous Hywel DdaNHS Wales surveys.

Performance Against Trend

The response rates since May 22 have dropped compared to previous months, with October's response rate standing at 18%, which is 1% more than the 2020 NHS Wales Staff Survey.

Whilst we saw an increase in staff engagement in July 2022 the October figure of 72% is the lowest recorded this year and from the previous NHS Wales surveys.

Future Positive Actions

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.

In Dec 2022 we will be reviewing the first years results and focusing on new ways to to reach areas with relatively low response rates as well as looking to provide performance data beyond the directorate level currently being reported.

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.  
  
Agency spend as a percentage of the total pay bill during the period April to October 2022 ranged between 6.12% and 6.94%. During the same period in 2021/22, agency spend ranged between 6.84% and 7.95%.  
  
Variable pay in October 2022 was comparable to that between June and August 2022 and is lower than in the same period in 2021/2022.

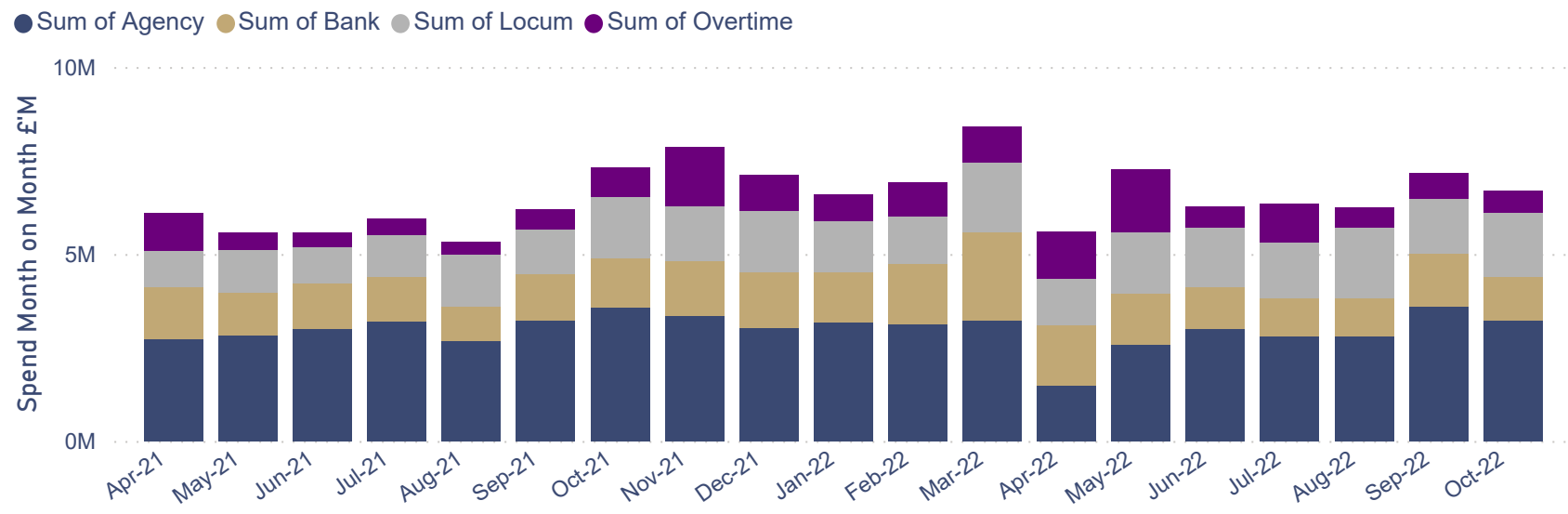
Future Positive Actions

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%	
December	6.07%	7.18%	
January	6.92%	7.15%	
February	3.98%	7.08%	
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.

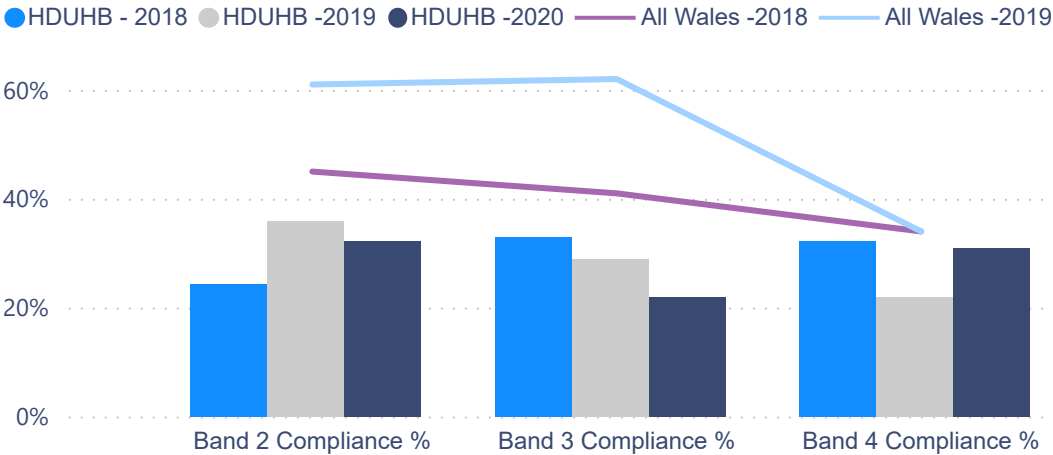
Future Positive Actions

▲  
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



Current Performance

HDUHB annual performance fluctuates considerably due to Covid-19 mass recruitment and changes in system reporting. The data recording mechanism used is now through ESR, providing accuracy for future data collection.

The ESR reporting was a pilot for HEIW, with only two Health Boards having reached this milestone.

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 2020 All Wales data.

Future Positive Actions

L&D continue to cleanse data and input all qualifications towards the framework in ESR, creating one source of truth. A dedicated role is now in place to support services to reach compliance.

Qualifications are being developed to allow for Band 4 achievement.

Attendance at senior management meetings for services to promote All Wales Compliance against Target.

Career Framework- Percentage with requisite level of health related qualification

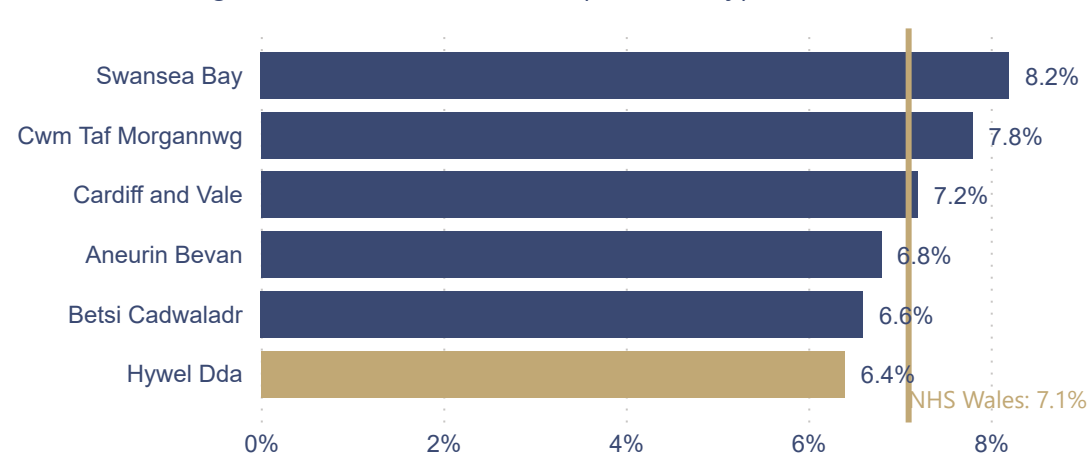
Profession	% Level 2	% Level 3	% Level 4
Bank Staff (on Bank only contracts)	2.1%	8.8%	37.5%
CAMHS	0.0%	58.3%	100.0%
Dietetics	0.0%	0.0%	0.0%
Nursing & Midwifery	25.7%	33.3%	43.2%
Occupational Therapy	0.0%	36.4%	28.6%
Other Allied Health Discipline	0.0%	0.0%	58.3%
Physiotherapy	0.0%	39.1%	57.9%
Podiatry	0.0%	0.0%	0.0%
Radiology	0.0%	14.3%	0.0%
Speech and Language service	0.0%	100.0%	17.6%

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

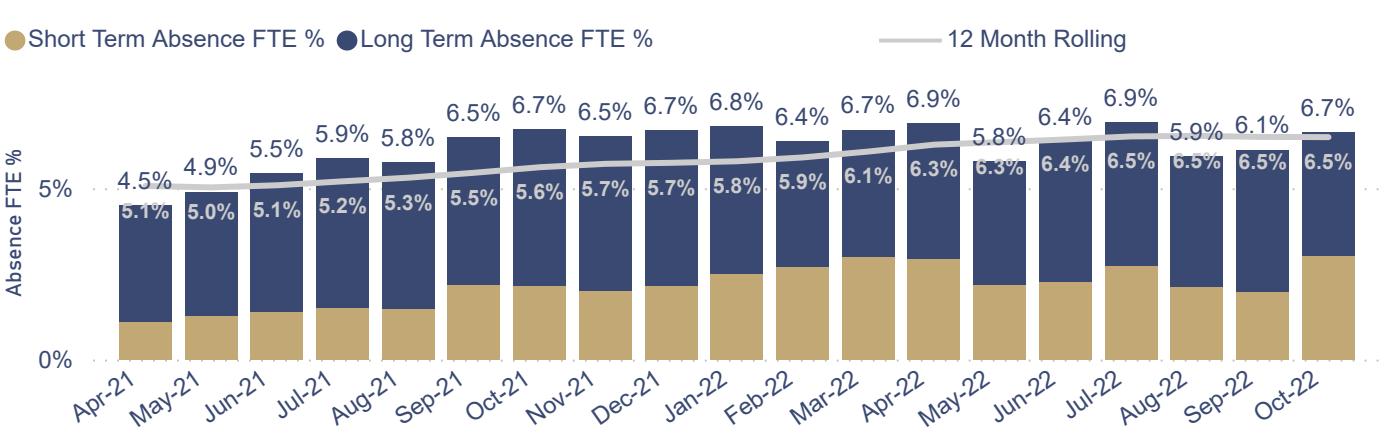
Headcount

Profession	Headcount B2	Number at L2	Headcount B3	Number at L3	Headcount B4	Number at L4
Bank Staff (on Bank only contracts)	676	14	57	5	8	3
CAMHS	0	0	12	7	2	2
Dietetics	0	0	6	0	1	0
Nursing & Midwifery	1076	277	655	218	95	41
Occupational Therapy	0	0	11	4	49	14
Other Allied Health Discipline	1	0	2	0	12	7
Physiotherapy	4	0	46	18	38	22
Podiatry	0	0	2	0	2	0
Radiology	1	0	28	4	7	0
Speech and Language service	0	0	3	3	17	3
Total	1758	291	822	259	231	92

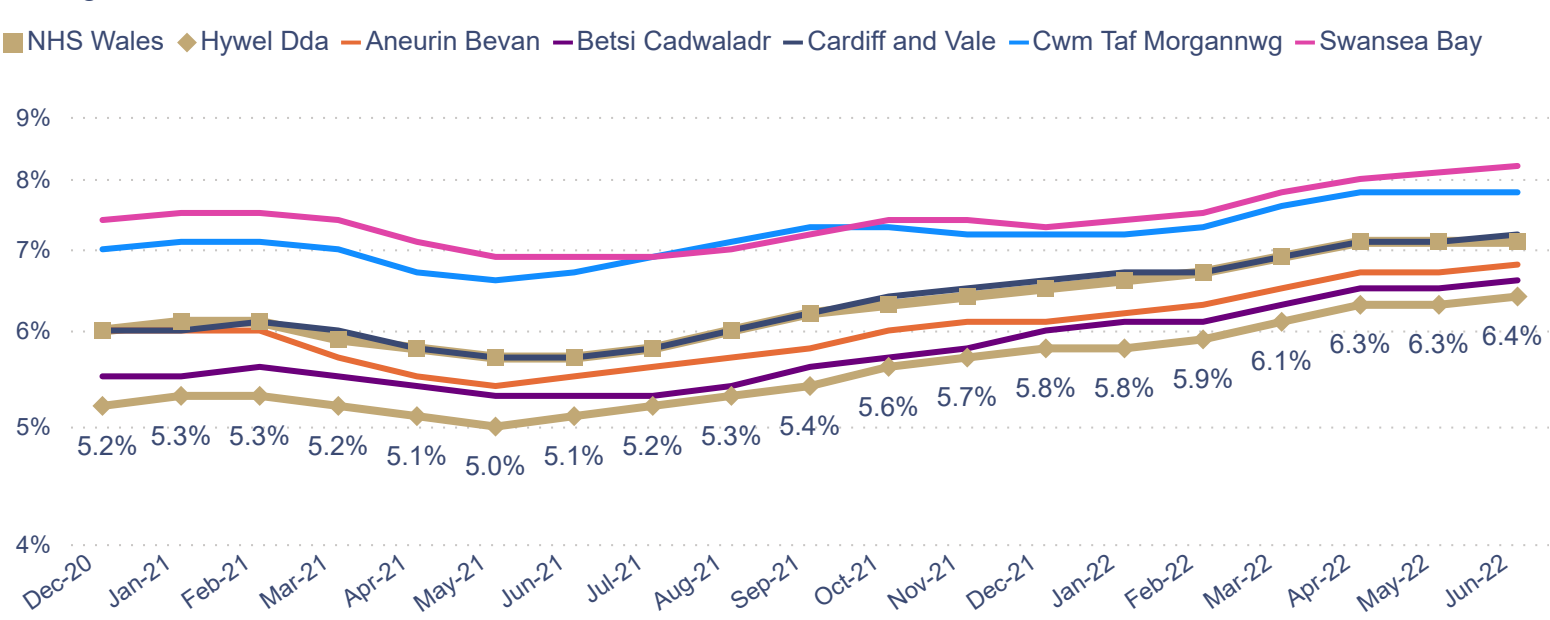
12 month rolling sickness absence rates (UHBs only) to June 2022



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 Jun'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).

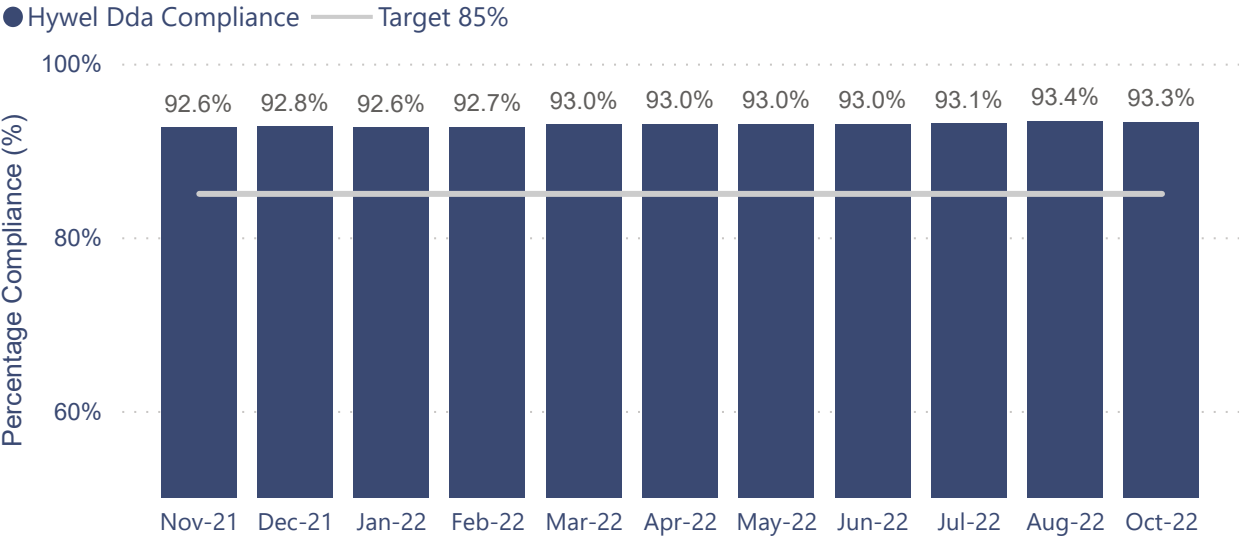
Performance Against Trend

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%.

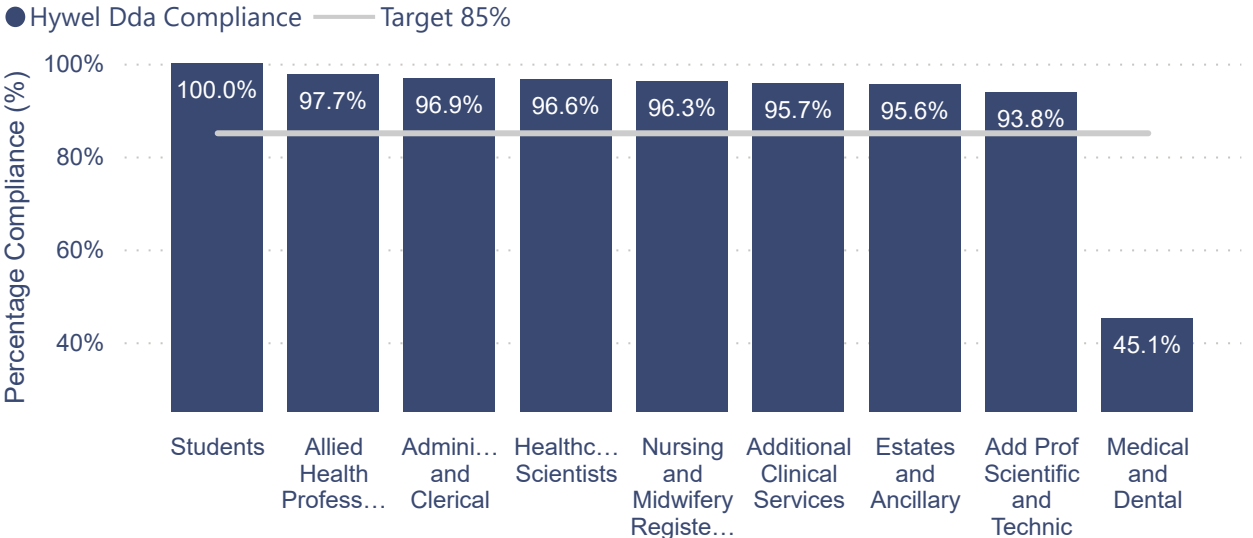
Future Positive Actions

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 at an Informed Level



Percentage of Staff completing Dementia Training at an Informed Level



**Current Performance**

Compliance is currently at 93.3% as at October 2022.

Qualitative report submitted September 2022.

**Performance Against Trend**

There remains little progress resulting from the joint work carried out as part of the West Wales Care Partnership due to conflicting priorities and covid-19 recovery.

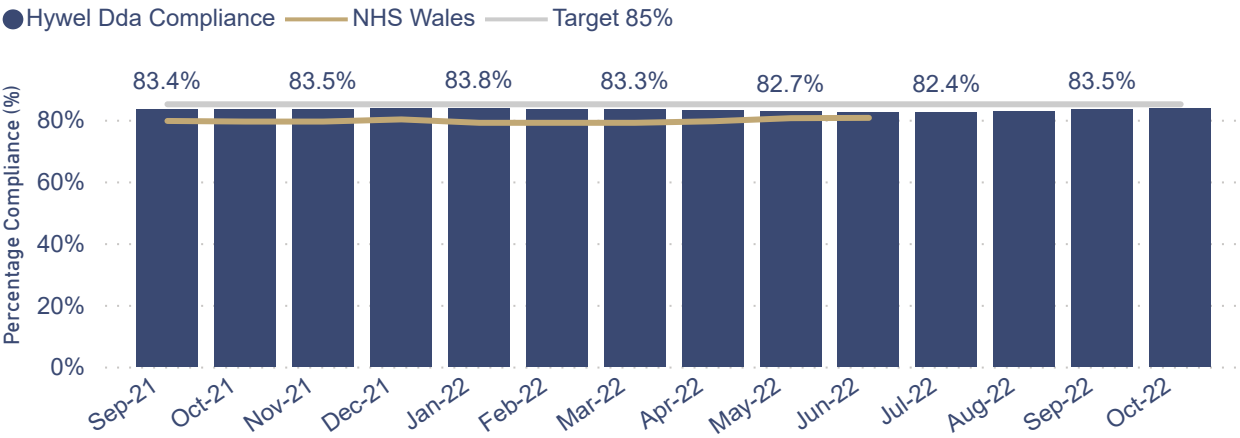
This is well above the 85% target and this is a stable picture, being over 92% for the last 12 months.

**Future Positive Actions**

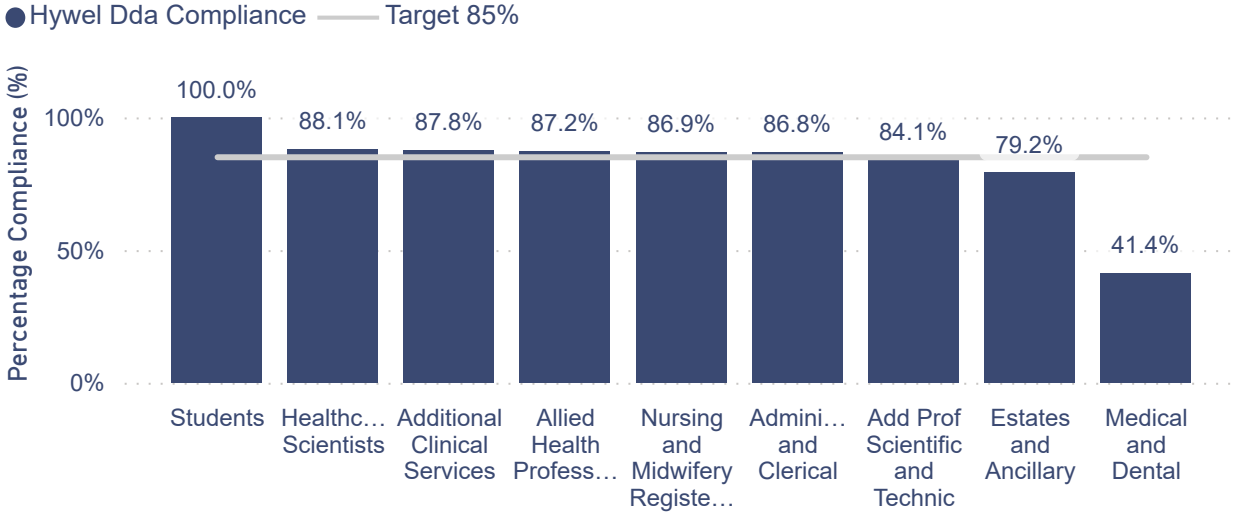
Continue to promote training and monitor compliance alongside other training monitoring processes.

New representation agreed for the Regional Working Group & set up of an internal Dementia Working group within Hywel Dda Health Board to drive agenda, feeding into the strategic education structure. Meeting planned for November 2022.

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

Whilst HDD performance is above the Wales average, engagement with eLearning continues to be an area of focus.

A data analysis exercise has been undertaken identifying certain staff groups and services, with very low compliance levels which is likely to impact overall HB %.

There is anecdotal evidence of digital exclusion amongst some staffing groups such as those who do not ordinarily have access to computers in work.

We are anticipating overall performance to be affected next quarter due to increased prevalence of leave and service pressures associated.

Performance Against Trend

The L&D Team has:

- improved access to competencies on individual ESR dashboards which make it easier for staff to complete modules
- provided extra eLearning sessions to overseas nurses
- provide a dedicated information and advice service to staff requiring support with eLearning
- delivered 20 minute online sessions with over 500 line managers to discuss corporate induction, reminding line managers to provide protected time to complete eLearning modules.

A combination of these activities has seen a gradual increase in compliance in all modules.

Future Positive Actions

The L&D Team will:

- continue to liaise with services regarding trends within their own areas
- continue to deliver the online sessions to managers promoting CSTF
- source access to devices to support staff who do not ordinarily have access to devices in work
- promote training sessions that are available as an alternative to eLearning modules which satisfy CSTF
- continue to reach out to Medical & Dental teams to improve engagement.

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

- May-22  
60.47%
- Jun-22  
61.11%
- Jul-22  
65.22%
- Aug-22  
64.82%
- Sep-22  
67.16%
- Oct-22  
63.10%

Current Performance

Managing Performance training sessions are still run on a weekly basis to allow all staff to attend. October 2022 has seen a further 35 staff complete the training, with 102 staff booked onto future sessions.  
 Course feedback has been excellent with the team following up with attendees after 3 months to gain more intelligence on sustained learning -  
 93.4% of respondents claimed they knew how to write SMART objectives.  
 90% believed they were making positive contributions to promote an employee led performance management culture.  
 81.7% believed they knew the distinction between performance management and PADR  
 61.7% thought that the training had changed their thoughts around performance management and PADRs.

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.

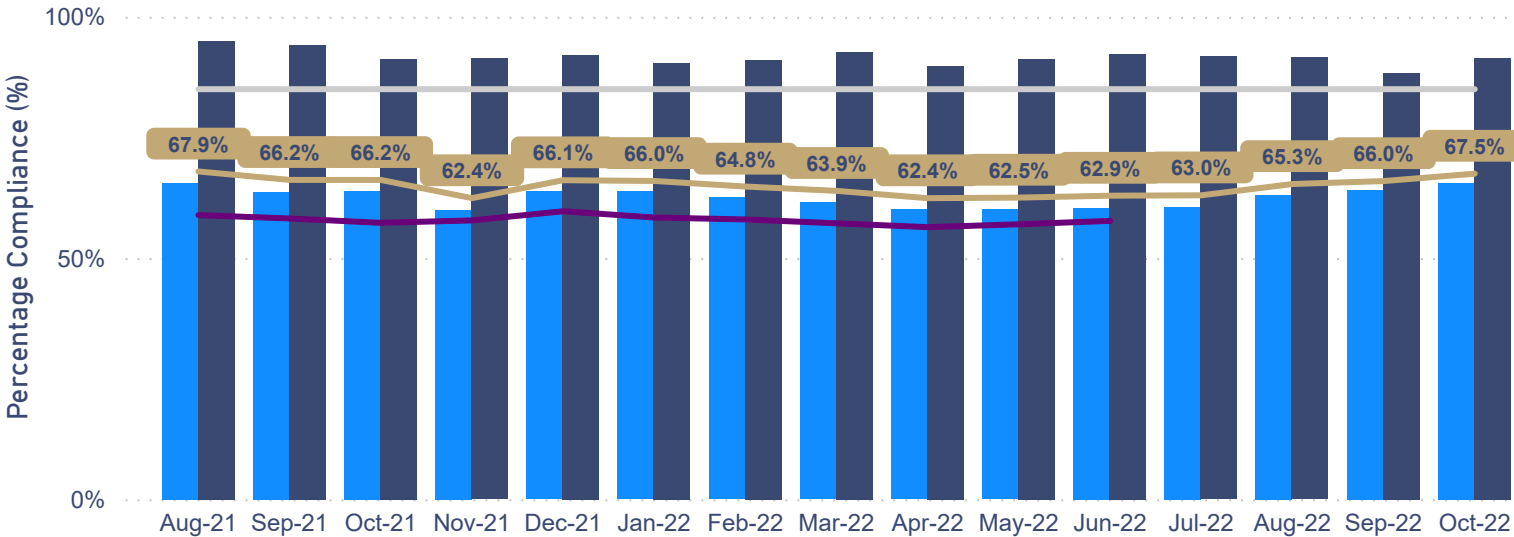
Future Positive Actions

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 have completed two drafts for review. There are some questions on whether the form will pre-populate fields such as name, title and dates and this is being clarified with the National ESR Group. Meeting to be arranged in November 2022

The All Wales Pay Progression Policy was implemented in October 2022 . Communications to raise awareness of the policy were shared across the organisation. A toolkit and posters to support successful completion of the pay progression process has been developed and have been uploaded to the intranet. 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. Queries are being managed via the Workforce Department, Culture & Workforce Experience generic account and performance management training.

PADR Compliance to NHS Wales Performance and Target of 85%

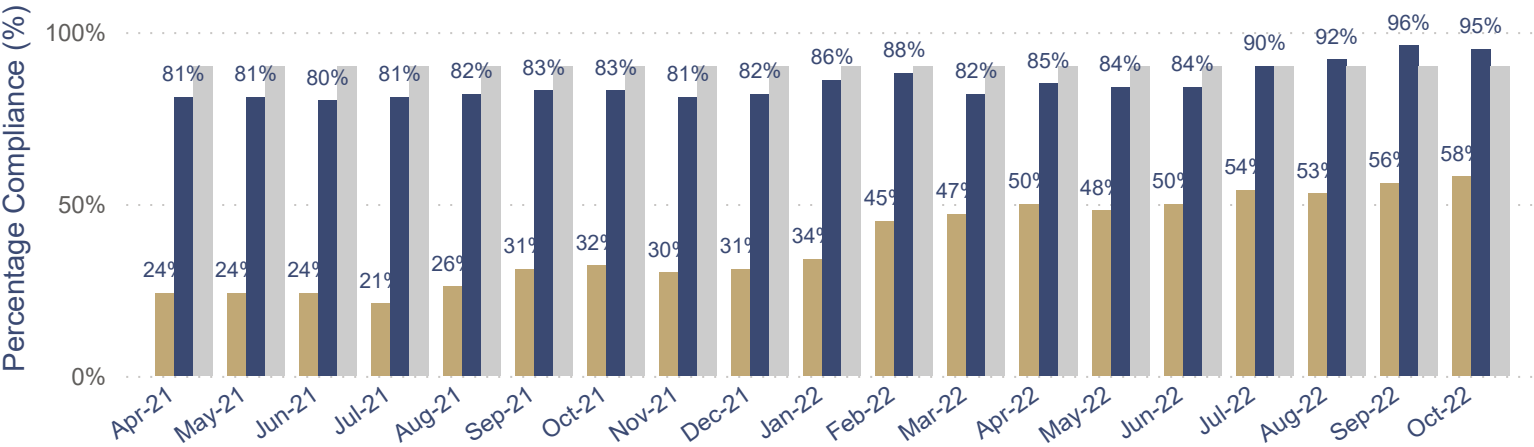
● PADR AfC Compliance ● M&D Appraisal Compliance — Combined Compliance — NHS Wales — Target 85%





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

● Current Job Plan ● Job Plan ● 90% Target



Current Performance

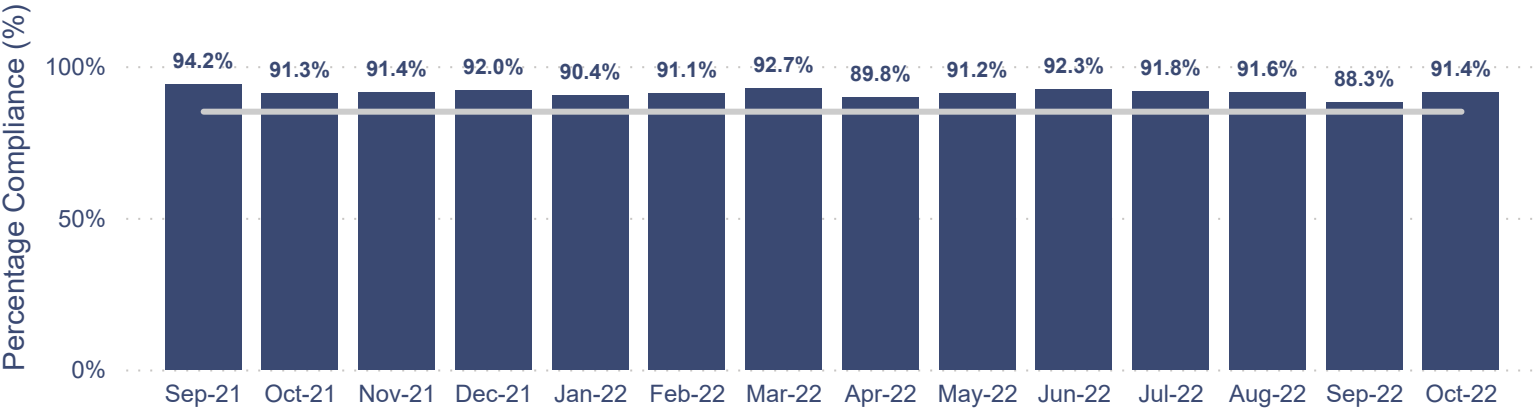
Current performance continues to improve on a monthly basis.

Performance Against Trend

Steady Improvement.

Medical Appraisal Compliance Performance against Target of 85%

● M&D Appraisal Compliance — Target 85%



Future Positive Actions

Work continues on a monthly basis with Heads of Service and Service Delivery Manager to improve overall job plans. Monthly report issued to services.

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	Health & Social Care Apprentice	% 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	1	99.5%

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

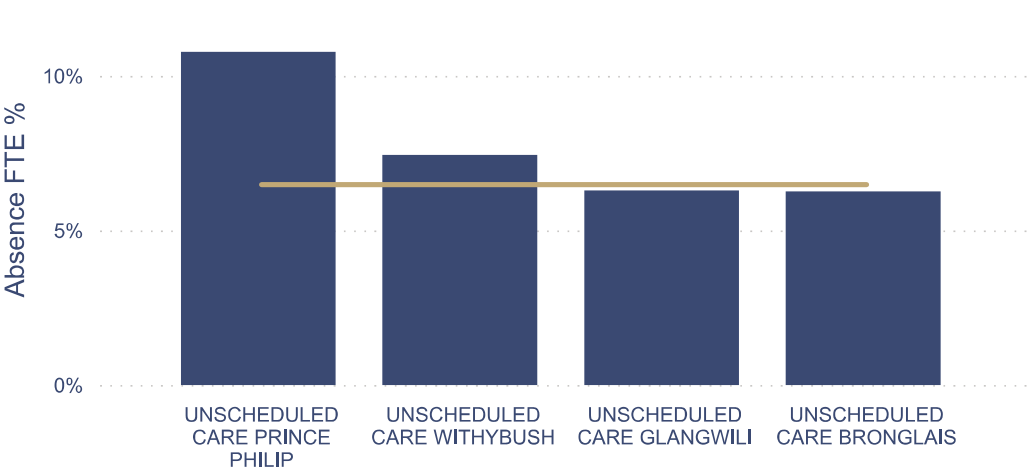
Note : All overseas recruits would have provided Overseas police checks as they cannot have a DBS until they have been in UK for 3 Months.



Appendix 2 - Action PODCC(22)109  
The 4 main sites in month & Rolling 12 month absence in comparison to the overall health board absence rate.

Directorate	Absence FTE %	Rolling 12M % FTE
UNSCHEDULED CARE BRONGLAIS	6.3%	6.0%
UNSCHEDULED CARE GLANGWILI	6.3%	7.2%
UNSCHEDULED CARE PRINCE PHILIP	10.8%	8.3%
UNSCHEDULED CARE WITHYBUSH	7.4%	7.3%

● Absence FTE % — In Month Absence HDUHB



● Rolling 12M % FTE — Rolling 12m Absence HDUHB

