



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	19 August 2025
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Performance Assurance & Workforce Metrics
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Executive Director of Workforce and Organisation Development (OD) and Deputy CEO
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Michelle James, Head of Resourcing and Utilisation

<b>Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)</b>
Er Sicrwydd/For Assurance

**ADRODDIAD SCAA  
SBAR REPORT**

<p><b><u>Sefyllfa / Situation</u></b></p> <p>A purpose of the People, Organisational Development &amp; Culture Committee (PODCC) is to provide assurance to the Board on best practice around the workforce and organisational development (OD) agenda.</p> <p>This report provides assurance of delivery against national delivery framework targets. The dataset presented is accurate as at 30 June 2025 (unless stated otherwise e.g. for NHS Wales benchmarking datasets).</p>
<p><b><u>Cefndir / Background</u></b></p> <p>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.</p> <p>The frequency in which the dashboard in Appendix 1 is produced has been amended in line with the committee frequency and as such is reported quarterly with the full range of metrics and Key Performance Indicators (KPI's) presented annually in February.</p>
<p><b><u>Asesiad / Assessment</u></b></p> <p>The dashboard in Appendix 1 presents performance against the following national delivery framework targets:</p> <p>Overall staff engagement score – scale score method</p> <ul style="list-style-type: none"> <li>The response rate has fluctuated through 2024/25 from its lowest at 13% to the apex of 23%. In June 25 there was a 16% response rate. Ways to increase participation are continually being explored.</li> </ul>

- More detailed methods of reporting are being explored with the focus on maintaining anonymity.
- Engagement score has been continuously above 70% although it has fluctuated between 75% in April 20204 and 70%; current rate in June 2025 shows 73% engagement.
- There are a number of strategies created to help build staff engagement across the organisation and instigate feelings of pride from working for Hywel Dda University Health Board. These include
  - Recognition and Appreciation programmes
  - Positive/Supportive Work Environment
  - Professional Development and Opportunities for Growth
  - Strong Leadership Programmes such as LEAP.

Agency spend as a % of total pay bill; Variable pay (agency, locum, bank & overtime: monthly position).

- Work has been undertaken to bring a reduction in all temporary workforce to drive costs down. There is a continued trend of reducing nursing agency use in line with the Nursing Stabilisation Plans.
- A Medical Stabilisation Group has been established to oversee the stabilisation of the medical workforce. This group aims to assess, analyse, and implement action plans to reduce agency reliance across professional groups while aligning workforce pipelines to ensure high retention rates.
- A phased approach is being implemented to reduce allied health professional and health science premium costs, with bank staff being utilised as a cost-saving measure.
- For variable pay we only have this level of granularity from this current financial year and moving forward.

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 2023.
- HEIW has confirmed that once a HCSW has enrolled on the Clinical Induction, they are on the All Wales Career Framework (AWCF) pathway. This has resulted in a measurable increase in compliance for the Health Board for Bands 2, 3 and 4.
- Moving forward, the following actions will be undertaken:
  - Increase opportunities to raise the profile of the AWCF compliance in Senior Manager Team meetings and other platforms.
  - Twice yearly progress updates to the Strategic People, Planning and Education Group (SPPEG) – May (post submission of data to Welsh Government) and November (interim position update).

Percentage of sickness absence rate of staff

- The Health Board sickness absence target is a reduction on the 2024/25 outturn 6.60%, in June the 12 month rolling sickness rate was a reduction of 0.04% to 6.56%.

- Anxiety, stress and depression continues to account for the highest reasons for absence across the health board at 31.7%. This is in line with other organisations.
- Designated support from Workforce & OD continues to be utilised to help address concerns aligned to ER matters which are impacting on employee's wellbeing and attendance.

Qualitative report providing evidence of available learning and development in line with the Good Work – Dementia Learning and Development Framework.

- The Percentage of staff completing dementia training is consistently well above the 85% target.
- The only staff group not above the 85% target are medical and dental.
- Bespoke support will be offered to any areas who are not currently demonstrating compliance with 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; we continue to be above our 85% target.
- We have 2 staff groups that are below the 85% target: Estates & Ancillary (83.0%) and Medical & Dental (52.6%). These rates continue to steadily increase.
- The Learning and Development team are currently working closely with both Medical and Dental, and Estates and Facilities. Action plans remain in place; these have enabled bespoke training packages to be developed collaboratively with key stakeholders.

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 continued to increase raising month on month, currently sitting at 83.9%.

Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job

- The rate has fluctuated between 67% and 80% in the last six months, with the current rate being the highest at 79.6%.

Consultant/Specialty and Associate Specialist (SAS) doctors with a job plan & Consultants/SAS doctors with an up-to-date job plan (reviewed with the last 12 months).

- Continued progress and clear improvements have been seen, although there has been a 4% decrease since March 2025. Current job plans are recorded at 82% against a target of 90%.
- The slight decline in trend has been impacted by a large number of job plans expiring.
- An escalation process is in place to encourage clinicians to sign off their job plans.

Percentage of compliance for staff appointed into new roles where an adult or child barred list check is required.

- We continue to maintain 100% compliance over 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 & Culture Committee is requested to:

- **NOTE** the content of the Performance Assurance and Workforce Metrics report and **RECEIVED 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
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	3. Effective
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	3. Data to knowledge
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Positive futures
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation
Amcanion Llesiant BIP: UHB Well-being Objectives: <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:

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

**Strategic Planning Objective 1:  
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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National Delivery Framework Target	Operational Delivery Lead
Overall staff engagement score – scale score method	Head of Culture and Workforce Experience
Agency spend as a % of total pay bill	Senior Workforce Manager – Workforce Efficiency
Variable pay (Agency, Locum, Bank & Overtime: monthly position)	Senior Workforce Manager – Workforce Efficiency
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	Assistant Director of People Planning
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	Future Workforce Programme Manager
Percentage of sickness absence rate of staff	Assistant Director of People Management
Qualitative report providing evidence of provided learning and development in line with the Good Work – Dementia Learning and Development Framework	Clinical Education Manager
Percentage of employed NHS staff completing dementia training at an informed level	Clinical Education Manager
Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation	Learning & Development Manager
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
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
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
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
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

**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

**NHS delivery framework target: 1.i - Develop plans to deliver, on a sustainable basis – Overall staff engagement score – scale score method**  
 Strategic Delivery Lead: Assistant Director of Organisation Development; Operational Delivery Lead: Head of Culture and Workforce Experience  
 This target aligns to the following statement of intent:  
**3 - Engaging our Staff**



### Staff Engagement Score Year on Year

Year Of Survey	Sent to	Number Completed	Response Rate	Engagement Score
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 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%
2024 Sample in March	935	120	13%	70%
2024 Sample in April	931	132	14%	75%
2024 Sample in May	947	123	13%	71%
2024 Sample in June	914	157	17%	71%
2024 Sample in July	917	171	19%	71%
2024 Sample in August	909	157	17%	72%
2024 Sample in September	900	207	23%	73%
2024 Sample in October	901	198	22%	73%
2024 Sample in November	886	203	23%	73%
2024 Sample in December	902	139	15%	71%
2025 Sample in January	899	190	21%	71%
2025 Sample in February	888	188	21%	70%
2025 Sample in March	886	166	19%	72%
2025 Sample in April	901	184	20%	73%
2025 Sample in May	877	195	22%	74%
2025 Sample in June	897	147	16%	73%

### Engagement Score by Staff Group

Role	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25
Administrative and Clerical	70%	76%	72%	75%	76%	73%	76%	73%	73%	72%	73%	71%
Allied Health Professionals	71%	70%	74%	72%	72%	71%	69%	69%	73%	71%	75%	73%
Estates, Facilities & Support Services	81%		66%		74%			56%		77%	72%	
Healthcare Scientists	46%	83%	70%	78%			77%	69%			72%	
Medical and Dental	72%	67%	77%	67%	79%	65%	62%	61%	72%	77%	62%	78%
None of these			71%				70%	73%				
Nursing and Midwifery	75%	72%	74%	73%	71%	70%	73%	70%	70%	71%	75%	72%
Other Clinical Services	64%	66%		71%	61%	69%		73%			80%	76%
Other Scientific and Technical			70%									
Other	71%				66%	80%			70%			

**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 for the staff voices survey fluctuates monthly but has an average of 73%, this was above the engagement score for national staff survey of 71%.

#### Performance Against Trend

The survey is a thermometer measure so there are many aspects that impact the measure. The organisation is still seeing data that aligns with the monthly average.

#### Future Positive Actions

The organisation has many agendas that are driving positive action for staff engagement. These include speak up – make meaningful change, appreciation and benefits programmes, cultural work in services, leadership and staff development and local accountability for staff survey results at tier 2 and 3 levels.

NHS delivery framework target: 1.i - Develop plans to deliver, on a sustainable basis – agency spend as a % of total pay bill.

Variable pay (Agency, Additional, Bank & Overtime: monthly position) Strategic Delivery Lead: Assistant Director of People Planning

Operational Delivery Lead: Senior Workforce Manager – Workforce Efficiency

This target aligns to the following statement of intent:

8 - Developing Workforce Efficiency and Effectiveness



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Current Performance

Medical Agency Staff

Total Medics Engaged: 20

Breakdown by Service Area:

-Unscheduled Care (USC), Glangwili (GGH): 6

-USC, Prince Philip (PPH): 1

-USC, Withybush (WGH): 2

-Mental Health & Learning Disabilities (MH&LD): 5

-Planned Care: 2

-Blood Services (Haematology/Histopathology): 3

Grades: Range from Consultant to F2 and Resident Doctor level

Upcoming Addition: 1 medic due to start on 21 July (total remains at 20 for the month)

Key Drivers of Increase:

Doctor handover period for training posts (first Wednesday in August)

Short planning window to identify gaps in HEIW training allocations

Internal recruitment delays for temporary cover

Outflow of doctors progressing to higher training posts

Financials:

Agency Spend Target: £259,768.10 Current Trend: Usage increasing.

AHP/HCS Agency Staff

Total AHP/HCS Engaged: 15

Breakdown by Profession:

-Radiology: 8

-Blood Sciences: 2

-Cellular Pathology: 2

-Dietetics: 1

-Physiology: 1

-Occupational Therapy (OT): 1

Key Drivers of Increase:

Ongoing vacancies

Sickness absence

Financials:

Agency Spend Target: £38,559.25 Current Trend: Usage increasing.

Nursing Agency Staff

Current Usage: 61.11 WTE (as of June 2025)

Key Actions:

Ongoing implementation of agency exit strategies

Alignment with onboarding of Newly Qualified Nurses from September 2025

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

Month Name 2025/2026

April	0.95%
May	1.59%
June	1.11%

Performance Against Trend

Agency spend has remained below 5% of the total pay bill since November 2023.

Future Positive Actions

Medical

Medical Stabilisation Group Established to:

-Oversee workforce stabilisation

-Reduce agency reliance

-Align workforce pipelines for retention

-Establishment Review with Pilot GGH Gen Med

AHP/HCS

Phase One Approach to reduce premium costs

Increased Use of Bank Staff as a cost-saving measure

Workforce Plan in Development to support implementation and reduce agency need

Radiology recruitment plan started with most roles out to advert.

Nursing

Introduction of Newly Qualified Nurses from September 2025 to reduce vacancies

Continued Risk Management for:

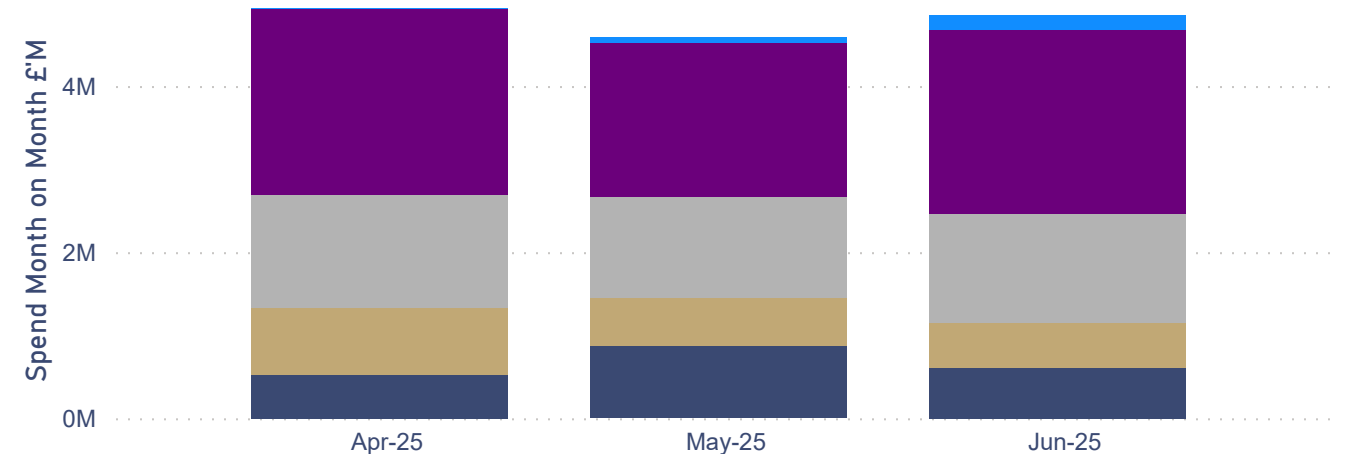
-Surge demand

-Enhanced support

-Sickness absence

Variable Pay Month on Month

● Agency ● Overtime ● Bank ● Additional ● Waiting List Initiative



NHS delivery framework target: 3.B: Deliver requirements of regulators – a) Submit Education and Commissioning template to HEIW aligned to IMTP submission on an annual basis Strategic Delivery Lead: Assistant Director of People Planning. Operational Delivery Lead: Assistant Director of People Planning  
 This target aligns to the following statement of intent:  
 2 - Recruiting and Retaining Great People & 4 - Delivering a Workforce Fit for the Future



Plan	Education Commissioning	Status
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	
2025/26	Out turn c2028	

**Key**

- Output known
- Completed
- In Progress

**Current Performance**

Submission for financial year 2024/25 to cover the period up to c2027 complete. Awaiting refreshed placement matrix from HEIW for next round.

**Performance Against Trend**

Submission to HEIW are completed as per guidance for all years from 2021 to date based on our current funded establishments. Detailed analysis of submissions available on request.

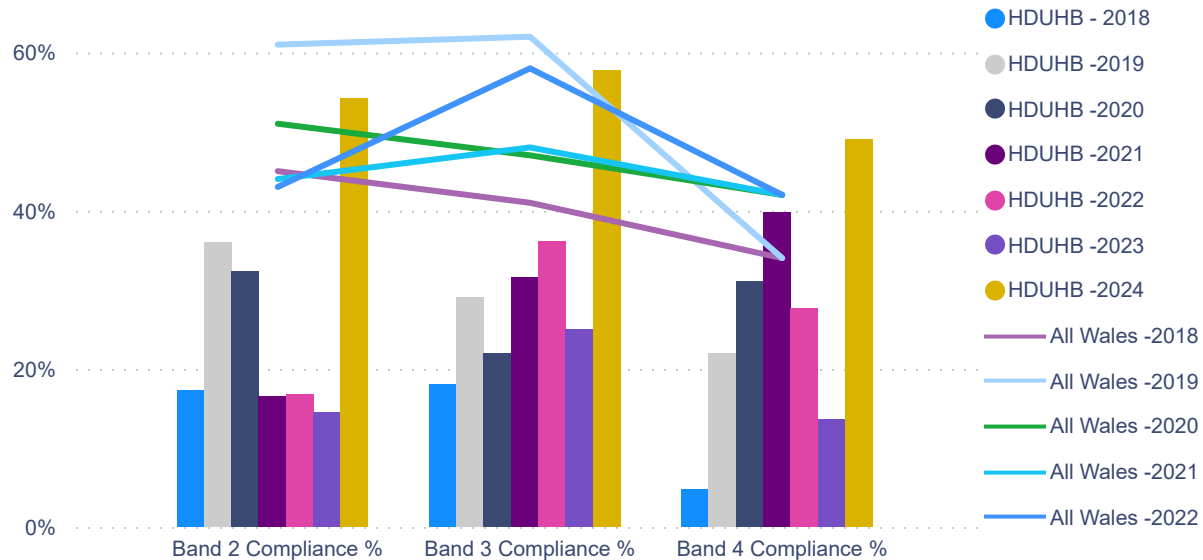
To note alternative workforce roles noted under APP, PA and CAAP have nominal figures included until a defined "future establishment" can be defined that includes a fuller model for development and expansion in the workforce.

**Future Positive Actions**

HEIW are due to publish a dashboard as part of the "observatory" offering to allow HB's to track the education commissioning process. Details to follow. Once known we will be able to assess further work linked to the People Regeneration work and our approach to future analytics fir education commissioning. Alignment has been made to the Higher Awards process which will continue to be strengthened.

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

**Career Framework Data**

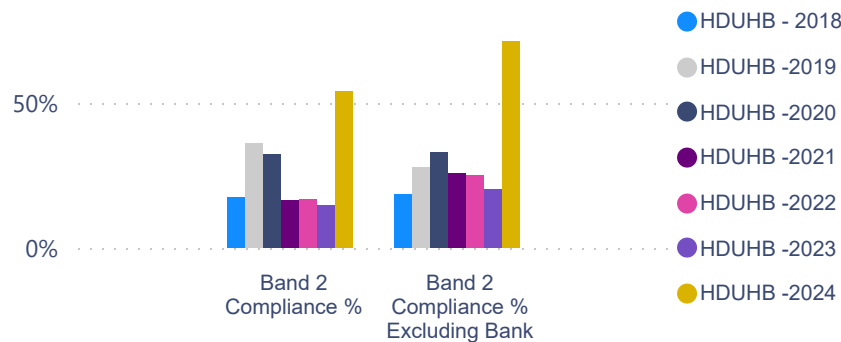


**Current Performance**  
 Compliance levels continue to show a positive upward trend, largely attributed to previous strategic actions including the provision of dedicated administrative support and comprehensive data cleansing efforts. Collaborative work is underway with Health Education and Improvement Wales (HEIW), who are preparing to establish a formal review of the career framework. Requests have been made to address identified anomalies in role definitions and equivalency recognition, particularly concerning long-standing staff, ensuring that the framework reflects current workforce realities and supports fair progression.

**Career Framework- Percentage with requisite level of health related qualification**

Profession	% Level 2	% Level 3	% Level 4
Speech and Language service	0.0%	25.0%	0.0%
Radiology	100.0%	24.2%	0.0%
Physiotherapy	0.0%	52.4%	23.9%
Operating Theatres	68.2%	64.0%	100.0%
Occupational Therapy	0.0%	20.0%	6.8%
Nursing Mental Health	74.0%	73.1%	20.0%
Nursing Learning Disability	50.0%	50.0%	42.9%
Nursing Community	75.3%	70.0%	85.0%
Nursing Child	88.5%	72.4%	90.7%
Nursing Adult	70.9%	58.7%	64.6%
Maternity	57.4%	50.0%	0.0%
Dietetics	0.0%	0.0%	33.3%
Bank / Temporary Staff (on Bank only contracts)	40.9%	50.7%	58.1%

**Impact of Bank Compliance on Career Framework Data**



**Future Positive Actions**  
 Collaborate with HEIW to review and address skews in compliance data and positively influence the review of the AWCf.  
 Continue to refine existing datasets and enhance data quality and reliability  
 Expand engagement through formal channels such as senior team meetings and other communication channels  
 Maintain biannual reporting to SPPEG, with updates provided in May and November of each year.

**Performance Against Trend**  
 Current compliance continue to remain on a positive trajectory, reflecting the sustained impact of interventions. While overall trends remain positive, some areas have been highlighted to HEIW for consideration including a equivalency for long standing staff members, which may positively impact compliance in future reporting periods.

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)	1455	595	337	171	43	25
Dietetics	0	0	0	0	6	2
Maternity	61	35	2	1	0	0
Nursing Adult	846	600	143	84	65	42
Nursing Child	26	23	29	21	43	39
Nursing Community	85	64	190	133	20	17
Nursing Learning Disability	4	2	46	23	14	6
Nursing Mental Health	77	57	78	57	20	4
Occupational Therapy	0	0	5	1	44	3
Operating Theatres	22	15	25	16	7	7
Physiotherapy	1	0	21	11	46	11
Radiology	1	1	33	8	7	0
Speech and Language service	0	0	4	1	5	0
<b>Total</b>	<b>2578</b>	<b>1392</b>	<b>913</b>	<b>527</b>	<b>320</b>	<b>156</b>

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: Assistant Director of People Management Operational Delivery Lead: : Head of Workforce

This target aligns to the following statement of intent:

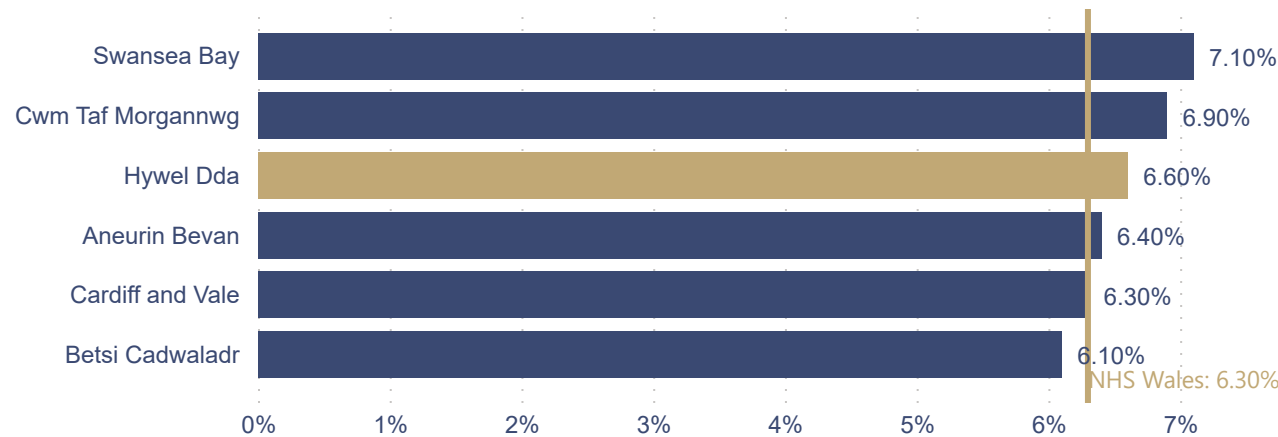
3 - Engaging our Staff



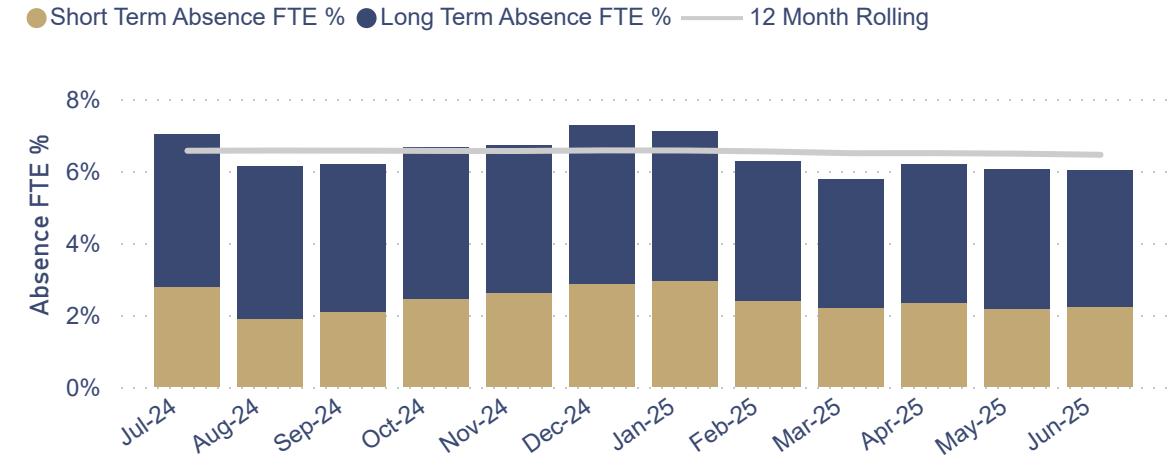
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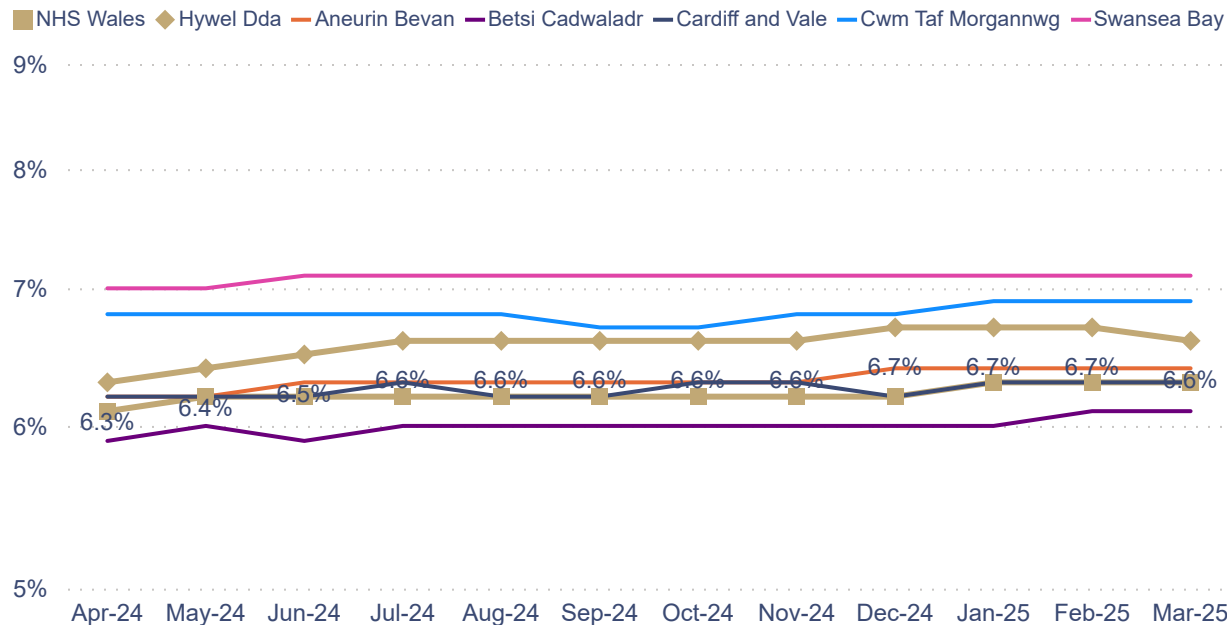
12 month rolling sickness absence rates (UHBs only) to March 2025



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



Rolling 12-month sickness absence rates, Apr'24 to Mar'25



**Current Performance**

Sickness rates have plateaued over the last 2 months (May and June) at 6% which is a slight improvement on comparative months last year (May 24 – 6.27%, June – 6.39%) The cumulative absence rate remains at 6.6%

**Performance Against Trend**

Anxiety, stress and depression continues to account for the highest reasons for absence across the Health Board (31.7%). Which is in line with other organisations. Absence due to other musculoskeletal problems has increased, moving from the 4th highest sickness reason to the second (9.9%), gastro problems remain as the third highest sickness absence reason (9.6%)

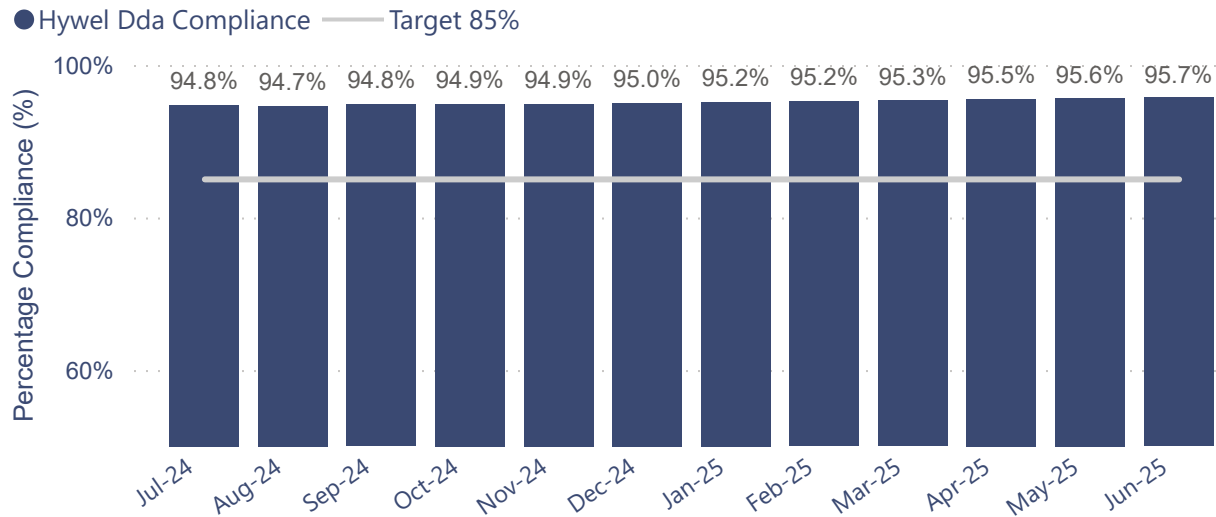
**Future Positive Actions**

Bite size training sessions: 9 session are in development and the first session – "How to conduct a Return-to-Work meeting" has been produced and is available on SharePoint : Sickness Absence Policy - Support For Managers - Bitesize training modules. Work has progressed on the development of the session on the OH referrals process. Workforce are liaising with colleagues in Swansea Bay who are developing a similar package of bite size training with a view for both HB to share/utilise work on this training package going forward.

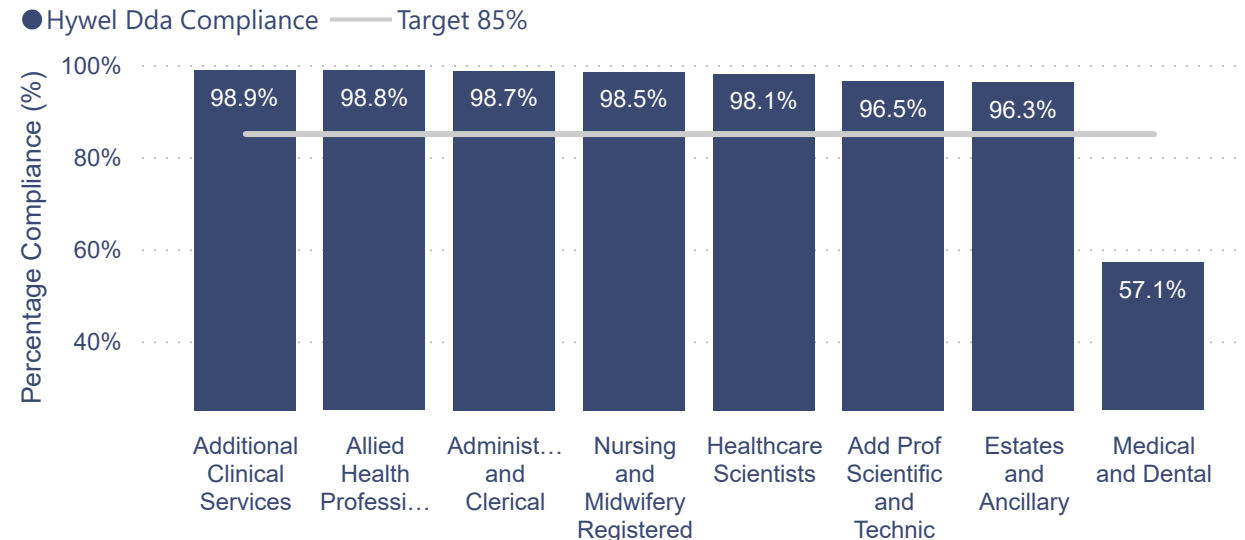
OH referral how to guide: To assist managers a useful "how to guide" is being developed to ensure managers can elicit the detail required from their Occupational Health referral in order to support individuals back to work in a timelier manner. Various examples of best practice referrals (reflecting the different job families) will be available for managers to use as a template to assist with more effective referrals.

Targeted support for sickness absence: Ongoing focused support from the WF Team continues in collaboration with Senior Managers with a focus on hot spots across all CCGs. Significant improvements have been made but it is duly notes rates are beginning to plateau. Designated support from WF & OD continues to be utilised to help address concerns aligned to ER matters such as R&R, Raising Concerns etc which are impacting on employee's wellbeing and attendance.

### Percentage of Staff completing Dementia Training



### Percentage of Staff completing Dementia Training



#### Current Performance

Health Board compliance for staff completing Dementia training, currently stands 10.7% above the target of 85%. When looking at service areas, all areas are currently compliant with this training by at least 11.3% above the 85% target (with Additional Clinical Services showing the biggest increase above target by 13.9%), an overall increase of 1.6% since March 2025, with the exception of Medical and Dental. Learning and Development continue to work closely with Medical and Dental, including service leads, to identify pockets of low compliance, and to facilitate targeted support to drive compliance.

#### Performance Against Trend

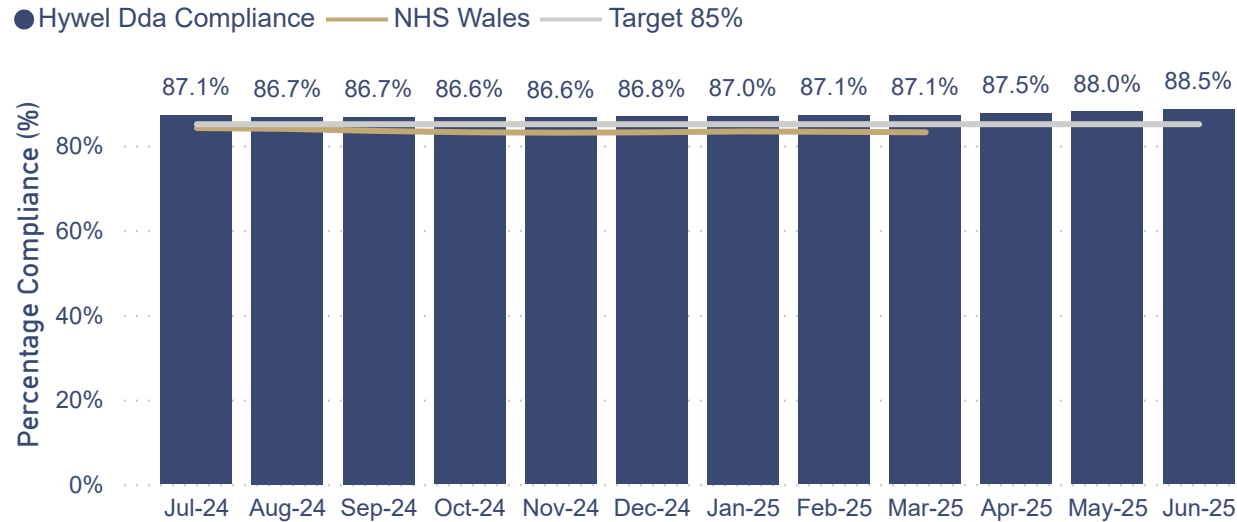
Over the last 12 months (July 2024 to June 2025), we have seen Health Board compliance in the successful completion of Dementia training, continuing to trend upwards from 94.8% in July 2024 to 95.7% in June 2025. This is an overall increase of 0.9%.

#### Future Positive Actions

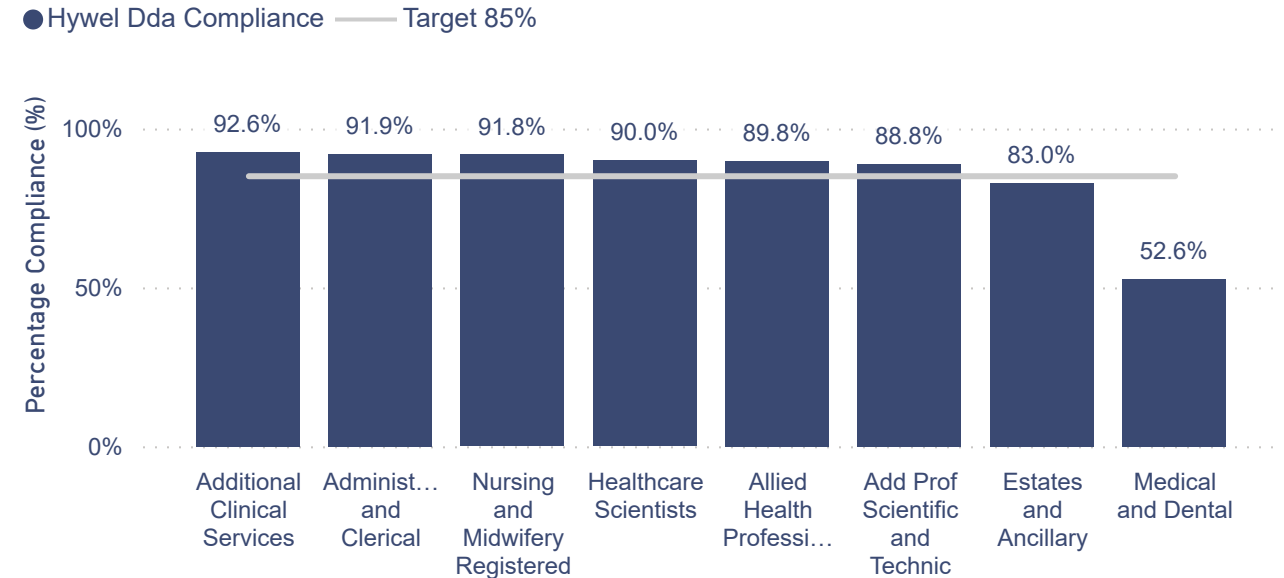
To sustain and further improve upon our current compliance with Dementia training, we will,

- \* Continue to monitor progress made across areas not achieving compliance.
- \* Look for opportunities to share good practice.
- \* Continue to reflect on data and using this data to drive strategies for improved completion of this training.
- \* Bespoke support will be offered to any areas who are not currently demonstrating compliance with Dementia training.
- \* Revisiting work carried out with service area leads for Medical and Dental to support with improved compliance within these areas.

### 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

Currently the Health Board is performing at 3.5% above the target of 85% for compliance with the Core Skills Training Framework, a notable improvement since March where compliance sat at 2.1% above target, growth of 1.4%, and we continue to be performing higher than the NHS Wales target. Furthermore, the majority of Staff Groups are performing above the 85% target by a minimum of 3.8%, with Additional Clinical Services achieving 7.6% above target, demonstrating continued growth since March 2025. Medical and Dental and Estates and Facilities are not currently reaching 85% compliance and action plans were put in place to support areas of low compliance and Learning and Development continue to work closely with these areas to monitor and improve compliance.

#### Performance Against Trend

Overall, compliance has grown by 1.4%, an increase in performance 1.1% from the 0.3% seen in March 2025, increasing from 87.1% to 88.5%.

#### Future Positive Actions

The Learning and Development team continue to work closely with both Medical and Dental, and Estates and Facilities. Action plans remain in place and continue to be modified. The introduction of action plans has allowed Learning and Development to work with key stakeholders to develop bespoke training packages and support which are already yielding improvements and are informing future plans. We should continue to see improvements over-time in terms of increasing compliance data across these areas, the use of action plans is a dynamic process that allows for the development of innovative future positive actions as and when opportunities are identified.

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)  
 Strategic Delivery Lead: Assistant Director of Organisation Development 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

**Current Performance**  
 The current position for PADR is 83.9%, the highest achieved by the organisation and only just short of the Welsh Government target of 85%.

**Performance Against Trend**  
 Managing performance agenda continues to build the compliance rate of PADRs being done. The module is still being held monthly and regular attendance is good. The OD team are now looking at areas of historical low compliance and contacting them to offer bespoke support in raising this

**Future Positive Actions**  
 OD have launched a performance management hub which houses all information regarding this agenda, it includes a poor performance toolkit and e-learning module "the art of the honest conversation". The team have also modified the learning module to concentrate on more action learning and building confidence in completing performance conversations successfully.

Dec-24  
77.0%

Jan-25  
67.4%

Feb-25  
74.5%

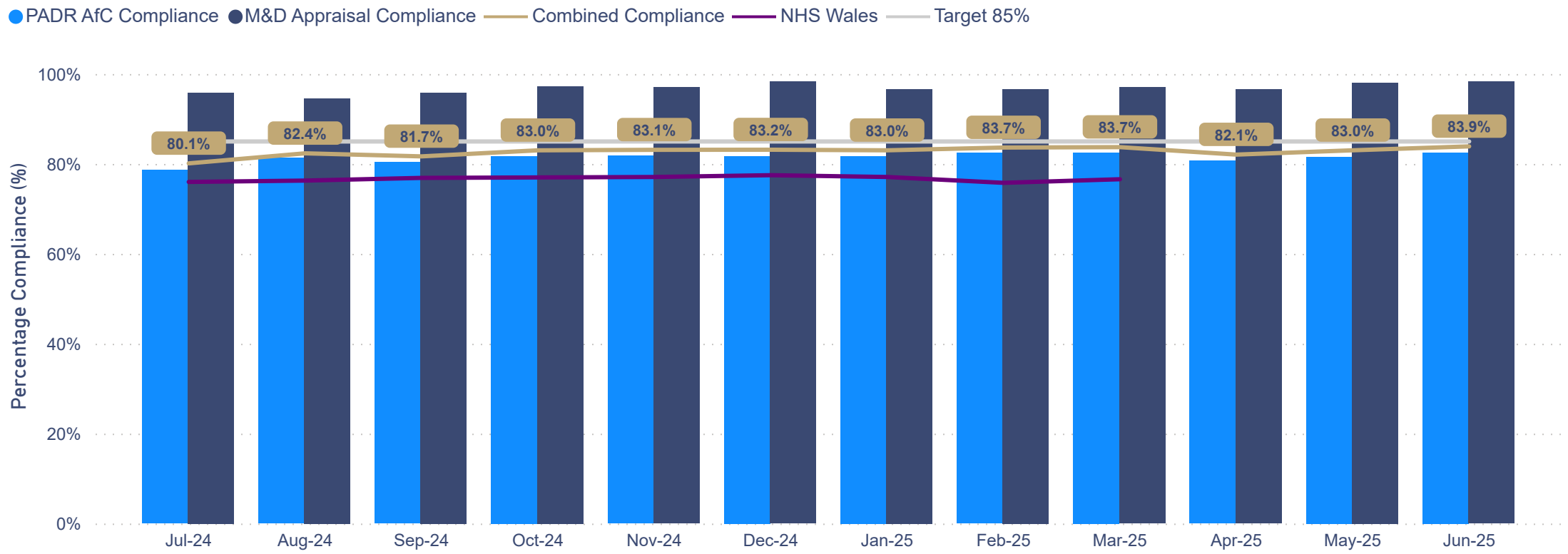
Mar-25  
72.3%

Apr-25  
73.9%

May-25  
68.2%

Jun-25  
79.6%

PADR Compliance to NHS Wales Performance and Target of 85%



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

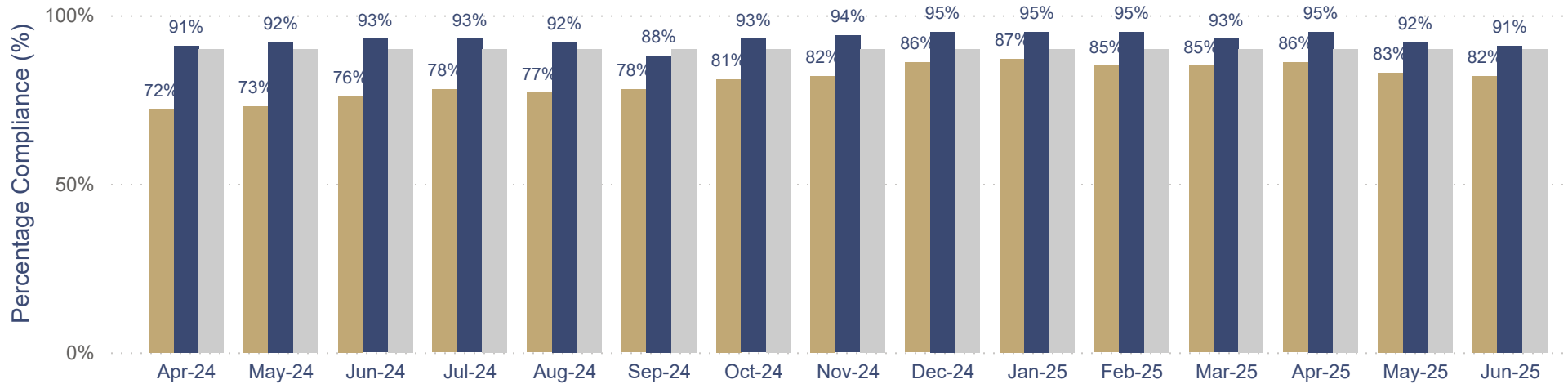
This target aligns to the following statement of intent:

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

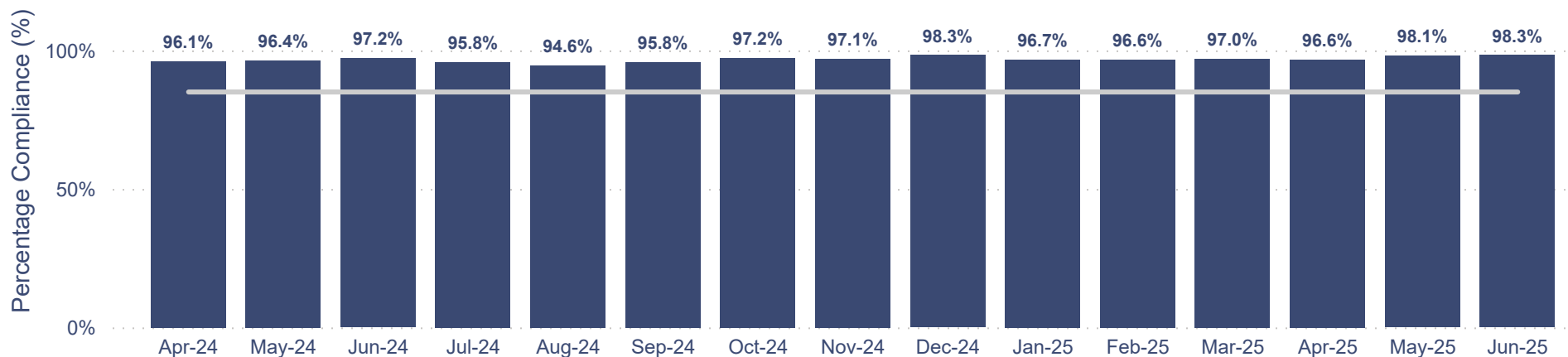


**Current Performance**  
 ▲ There was a decrease in compliance in May and June 2025, due to a large numbers of job plans expiring.

**Performance Against Trend**  
 ▼ Slight decline from trend due to a large number of job plans expiring affecting our current performance.

### Medical Appraisal Compliance Performance against Target of 85%

● M&D Appraisal Compliance — Target 85%



**Future Positive Actions**  
 ▼ Process in place for chasing up all clinicians to sign off their job plan. Escalation process in place, Medical Director will meet with Service Delivery Managers to ensure they have a plan in place to improve compliance. Maintaining compliance, All Service Delivery Managers are advised monthly of the job plans expiring and advised to focus on these.

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

Strategic Delivery Lead: Assistant Director of People Management

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

This target aligns to the following statement of intent:

6 - Developing High Performing Teams



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

### Current Performance

Performance remains compliant as per targets / expectations.

### Performance Against Trend

Performance is consistently at 100%

### Future Positive Actions

Continue to perform to a high standard with robust processes to achieve required outcomes.

### DBS Checks Processed

	Adult Barred Lists	Child Barred Lists	New Starters - Overseas	% Compliance
Apr-24	150	145	3	100.0%
May-24	102	102		100.0%
Jun-24	142	141	1	100.0%
Jul-24	128	128	4	100.0%
Aug-24	168	167	2	100.0%
Sep-24	236	229	3	100.0%
Oct-24	146	141	9	100.0%
Nov-24	123	122	1	100.0%
Dec-24	95	94	4	100.0%
Jan-25	164	156	5	100.0%
Feb-25	125	125	6	100.0%
Mar-25	137	125	2	100.0%
Apr-25	93	90	7	100.0%
May-25	111	112	2	100.0%
Jun-25	137	130	2	100.0%

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

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