



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	19 June 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Performance Assurance & Workforce Metrics
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling, Director of Workforce and Organisation Development (OD)
SWYDDOG ADRODD: REPORTING OFFICER:	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 30 April 2023.

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 rate is gradually increasing from the 10% in November 2022 up to 18% in April 2023.
- Agency spend as a % of total pay bill.
- Variable pay (agency, locum, bank & overtime: monthly position).
 - Work is being undertaken to bring a reduction in off contract agency usage to drive costs down.
- 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.
- Percentage of sickness absence rate of staff:
 - We have seen a 1.7% drop in the in-month rate since the spike in December 2022; seeing the rates reduce from the 7.5% to 5.8%.
 - As part of the planning objectives, a sickness absence plan is being developed to review all processes and documentation in line with our mission for kinder people processes.
- 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.
- 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 2 staff groups that are below the 85% target; Estates & Ancillary (80.9%) and Medical & Dental (42.2%). These rates have increased since February by 1.2% and 2% respectively.
 - 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 (exc Doctors 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).
- 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.
 - October 2022 saw for the first month since July 2021 compliance 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 the apprentice could start on employment and educational pathway.
 - Since October 2022 we have consistently been performing at 100% compliance.

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

PODCC is requested to:

- Note the content of the report and take assurance of performance in key areas of the Workforce and OD agenda.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	2. Culture and valuing people 3. Data to knowledge Choose an item. Choose an item.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	3. Effective 6. Person-Centred Choose an item. Choose an item.
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	2c Workforce and OD strategy Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

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 Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable

Ansawdd / Gofal Claf: Quality / Patient Care:	Performance reported in a number of the key performance indicators will have an impact on the quality of patient care.
Gweithlu: Workforce:	All metrics and performance indicators contained in the report have direct relevance to the workforce agenda
Risg: Risk:	Not Applicable
Cyfreithiol: Legal:	Not Applicable
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	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%
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%

Engagement Score by Staff Group

Role	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Jan-23	Feb-23	Mar-23	Apr-23
Administrative and Clerical	74%	79%	80%	77%	77%	74%	71%	76%	76%	77%	76%
Allied Health Professionals	78%	72%	74%	73%	75%	69%	73%	73%	74%	79%	71%
Estates, Facilities & Support Services				65%		72%					79%
Healthcare Scientists	65%	75%		78%	83%	81%	63%		80%	69%	
Medical and Dental	76%	71%	78%	71%	67%	59%	77%	73%	73%	65%	57%
None of these	75%	87%	76%	69%	73%	68%	82%		83%		
Nursing and Midwifery	73%	69%	74%	71%	73%	74%	75%	72%	74%	73%	73%
Other Clinical Services	82%			86%	73%					70%	71%
Other Scientific and Technical	77%			80%							58%
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

Performance Against Trend

The response rate is gradually increasing and is now back up to 18%.

Current Performance

The staff engagement score has fallen 3% in April 2023 to 72% which is the lowest since October 2022.

Future Positive Actions

We are currently looking at ways to increase participation which includes rebranding the invite email, filming messages and developing communications to show staff how the data is being used. We are also looking to report data beyond the directorate level whilst still ensuring anonymity.

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

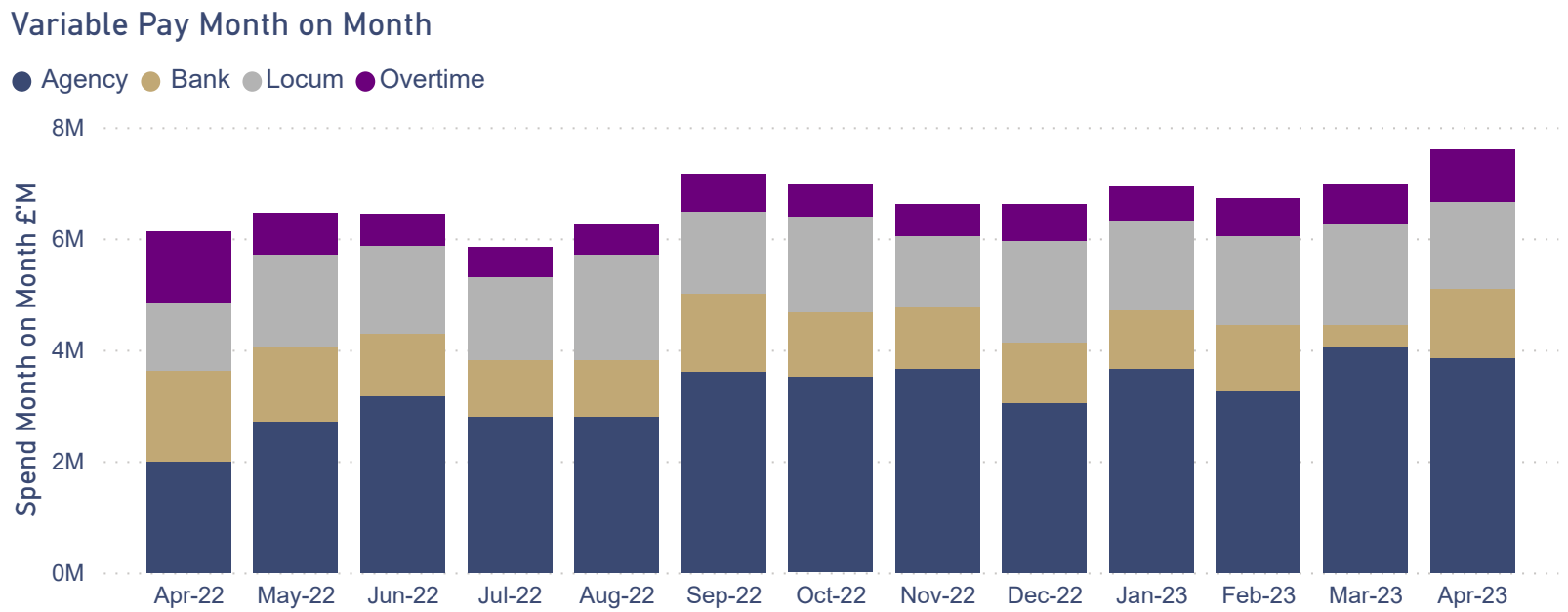
2023/24 agency spend as a percentage of the total pay bill has increase compared to the same period in 2022/23. Variable pay in April 2023 is higher than in the same period in 2022/23 and at it's highest level since April 2022.

Variable pay in February 2023 is lower than in the same period in 2021/2022.

Future Positive Actions

Nurse stabilisation has started in WGH with 15 nurses in May 2023. Exit plans are in place in GGH with all USC areas moving to escalation for Off-framework use. Further work is ongoing to improve escalation process and reduction of off-framework agency use within USC GGH and PPH and Critical Care GGH and ITU PPH.

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%	
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%	9.27%	
December	6.07%	7.18%	6.23%	
January	6.92%	7.15%	7.83%	
February	3.98%	7.08%	6.89%	
March	3.12%	5.13%	7.80%	



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.

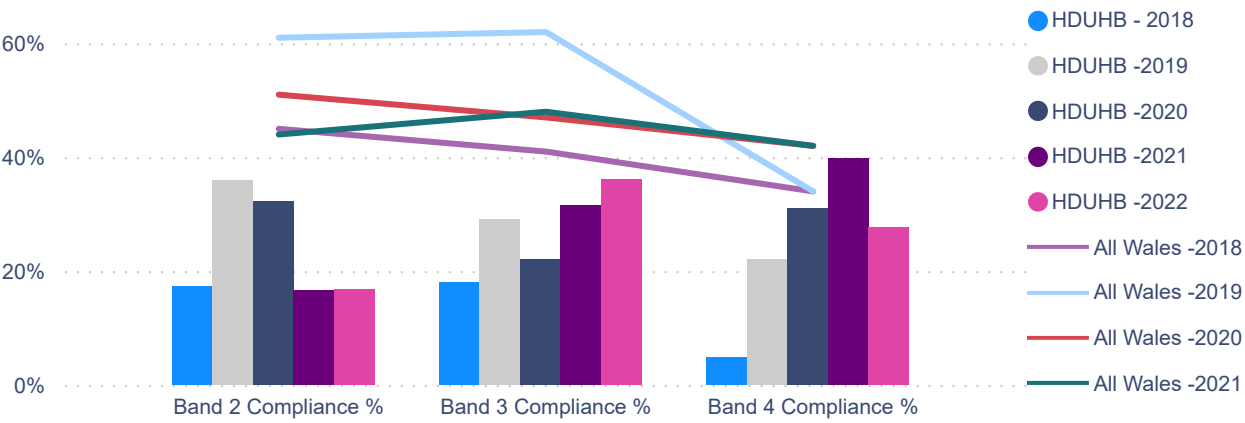
Future Positive Actions

▲
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.

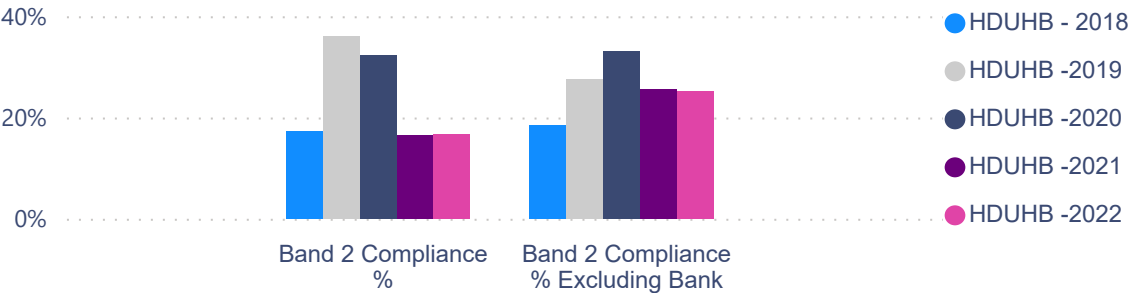
This is a significant piece of work that requires reflection in relation to our effectiveness work program.



Career Framework Data



Impact of Bank Compliance on Career Framework Data



Current Performance

HDUHB annual performance fluctuates considerably The data recording mechanism used is now through ESR, providing accuracy for future data collection.

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.

Future Positive Actions

A Career Framework Compliance Group will be set up with the aim of looking at how this compliance data is displayed, including those accessing qualifications.

L&D also to attend service lead meeting to discuss compliance and create action plans for each service.

January - December 2022

Career Framework- Percentage with requisite level of health related qualification

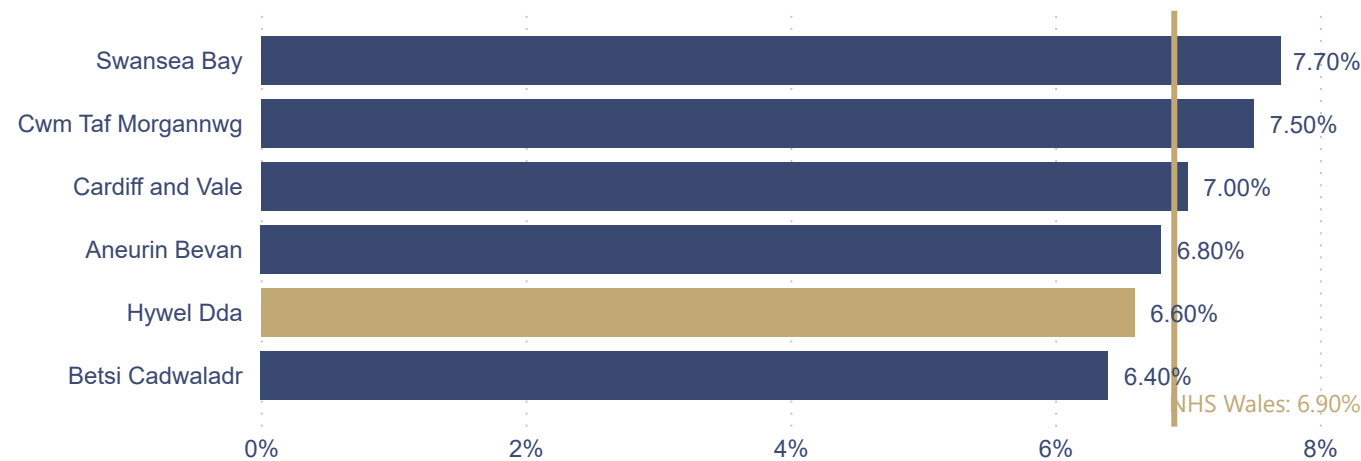
Profession	% Level 2	% Level 3	% Level 4
Bank / Temporary Staff (on Bank only contracts)	0.3%	0.0%	0.0%
Dietetics	0.0%	0.0%	33.3%
Maternity	19.7%	0.0%	0.0%
Nursing Adult	25.3%	33.5%	34.9%
Nursing Child	28.6%	33.3%	30.8%
Nursing Community	31.7%	50.5%	57.9%
Nursing Learning Disability	0.0%	25.5%	15.4%
Nursing Mental Health	17.5%	41.7%	50.0%
Occupational Therapy		66.7%	10.9%
Operating Theatres	26.3%	52.0%	83.3%
Physiotherapy	0.0%	42.9%	25.9%
Radiology	0.0%	17.6%	9.1%
Speech and Language service	0.0%	66.7%	5.3%

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

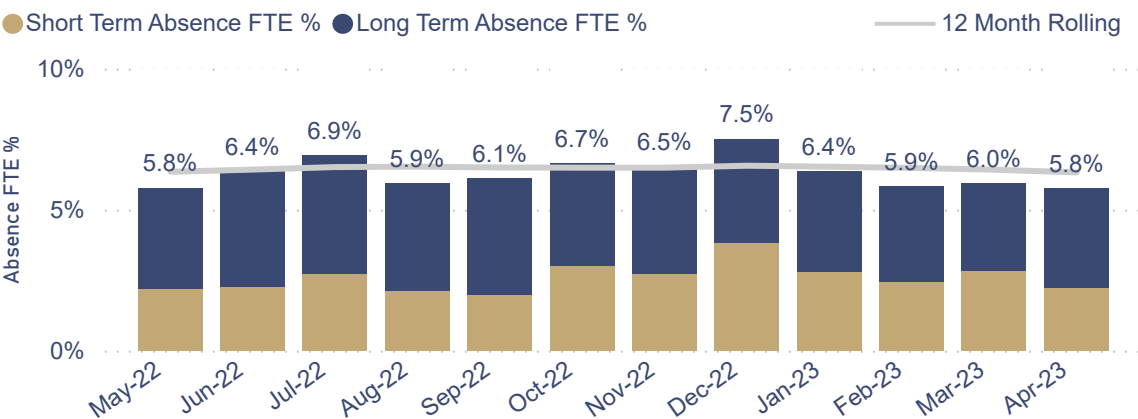
Headcount

Profession	Headcount B2	Number at L2	Headcount B3	Number at L3	Headcount B4	Number at L4
Bank / Temporary Staff (on Bank only contracts)	587	2	63	0	16	0
Dietetics	0	0	2	0	12	4
Maternity	61	12	4	0	0	0
Nursing Adult	850	215	236	79	63	22
Nursing Child	35	10	24	8	39	12
Nursing Community	104	33	186	94	19	11
Nursing Learning Disability	0	0	55	14	13	2
Nursing Mental Health	80	14	108	45	2	1
Occupational Therapy	0	0	6	4	55	6
Operating Theatres	19	5	25	13	6	5
Physiotherapy	2	0	21	9	54	14
Radiology	0	0	34	6	11	1
Speech and Language service	0	0	3	2	19	1
Total	1738	291	767	274	309	79

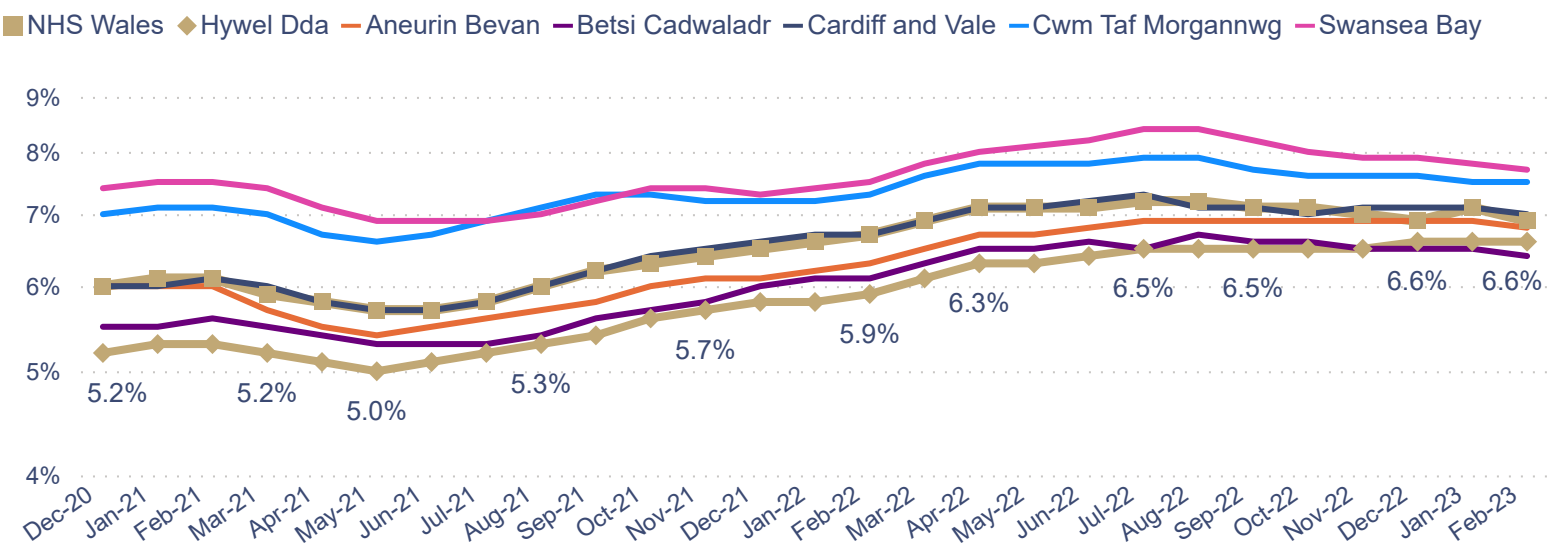
12 month rolling sickness absence rates (UHBs only) to February 2023



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



Rolling 12-month sickness absence rates, Dec '20 to Feb'23



Current Performance

In the rolling 12 month period, we have seen an increase in overall HB absence rates (up to 6.6% in February 2023).

Performance Against Trend

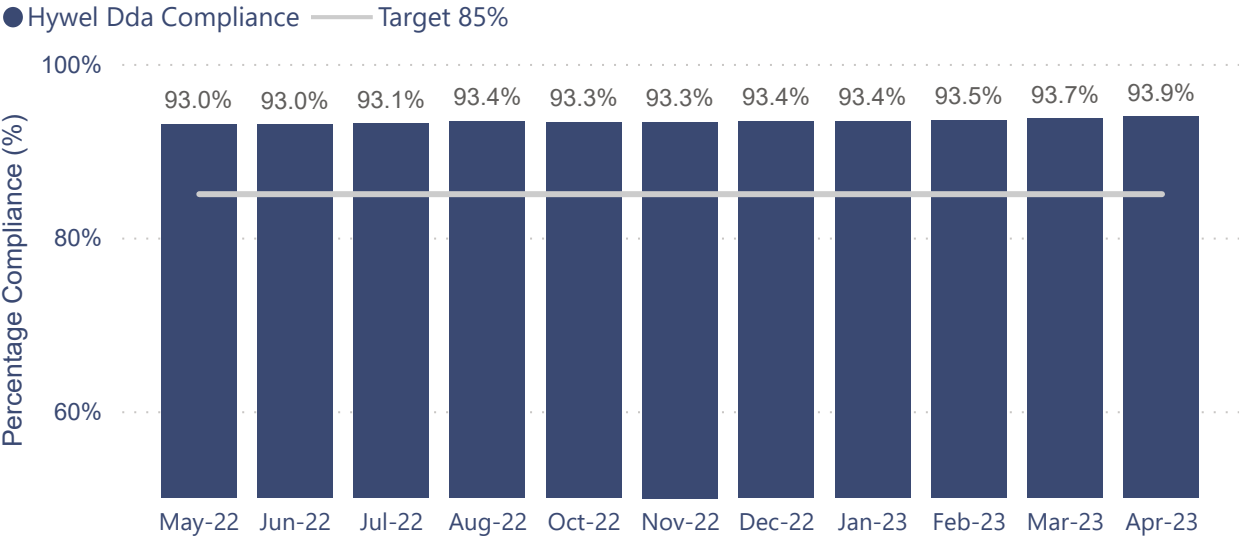
HUHB data remains lower than the majority of the other UHBs in Wales based on the latest data set (February 2023). The average NHS Wales rolling 12 month figure being 6.9%.

Future Positive Actions

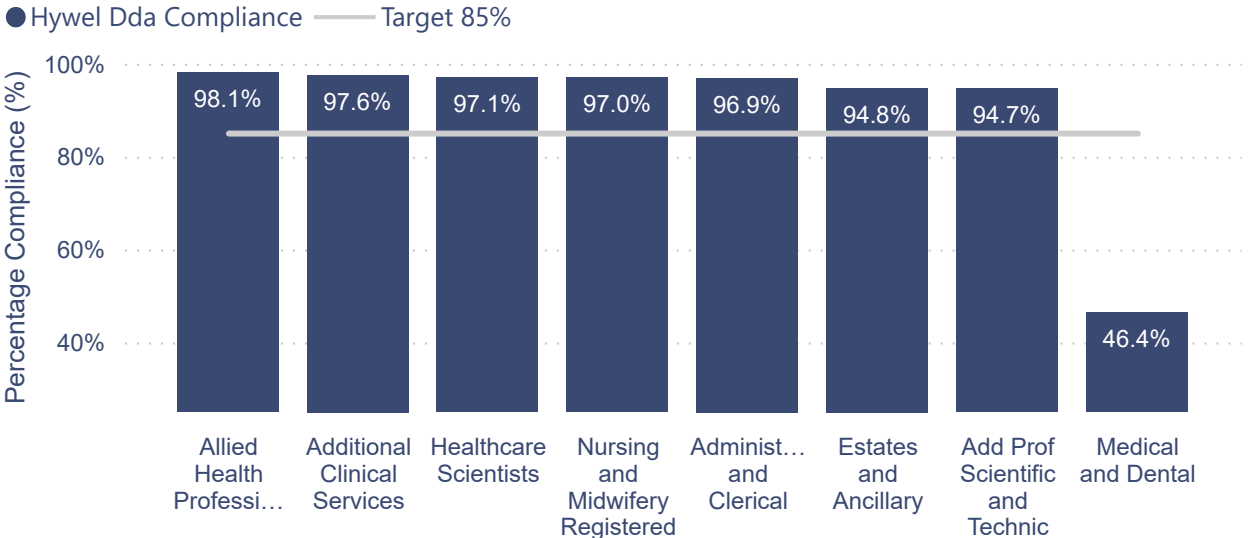
Workforce will continue to offer support and advice to managers in the management of both short and long term sickness absence. These include supporting managers with undertaking sickness reviews, providing training to managers and conducting sickness audits. We additionally offer a suite of interventions 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.

As part of our planning objectives this year we are developing a sickness absence action plan to review all internal processes and documentation against our mission for kinder people processes

Percentage of Staff completing Dementia Training



Percentage of Staff completing Dementia Training



Current Performance

Dementia training is well above trend in most staff groups

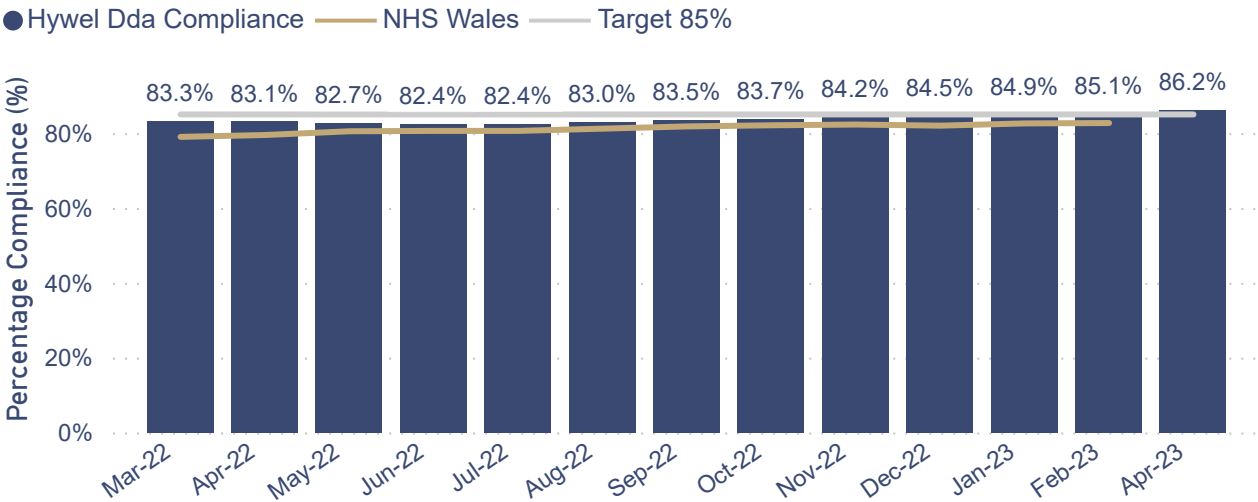
Performance Against Trend

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.

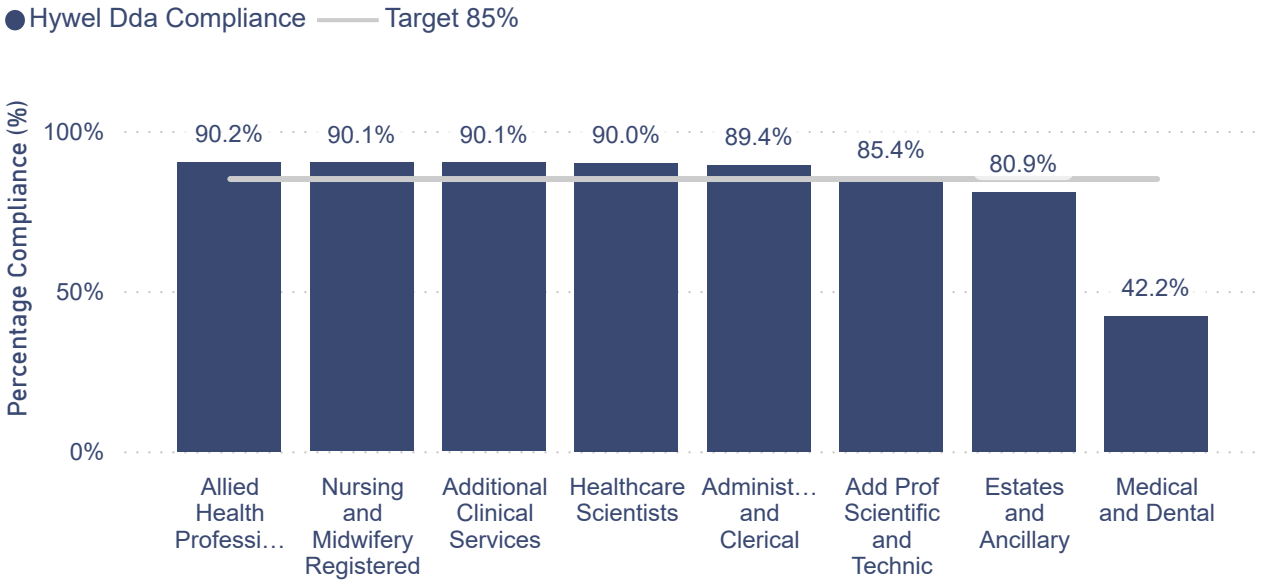
Future Positive Actions

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%



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



Current Performance

Access to computers has been advertised and provided. Temporary additional resource provided to assist with data entry into ESR. This, along with a range of activity led by L&D, has seen the Health Board achieving an overall compliance rate of 86.2%. A significant difference between our highest and lowest performing staffing groups remain

Performance Against Trend

HDD performance has consistently improved over the last twelve months - including the performance of the staffing groups below the 85% threshold.

Future Positive Actions

Small increases can be seen across all areas. Nonetheless, the support available from L&D for services and individuals will remain indefinitely

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



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

Current Performance

Sessions run on a weekly basis to allow all staff to attend. April 2023 has seen a further 53 staff complete the training. Bespoke sessions are arranged on a priority basis with services where compliance is concerning against the national target.

Performance Against Trend

The Culture & Workforce Experience (C&WE) Team have implemented a training booking process in collaboration with the Learning and Development (L&D) department to increase availability and options for staff.

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.

Oct-22

63.10%

Nov-22

59.79%

Jan-23

62.50%

Feb-23

68.52%

Mar-23

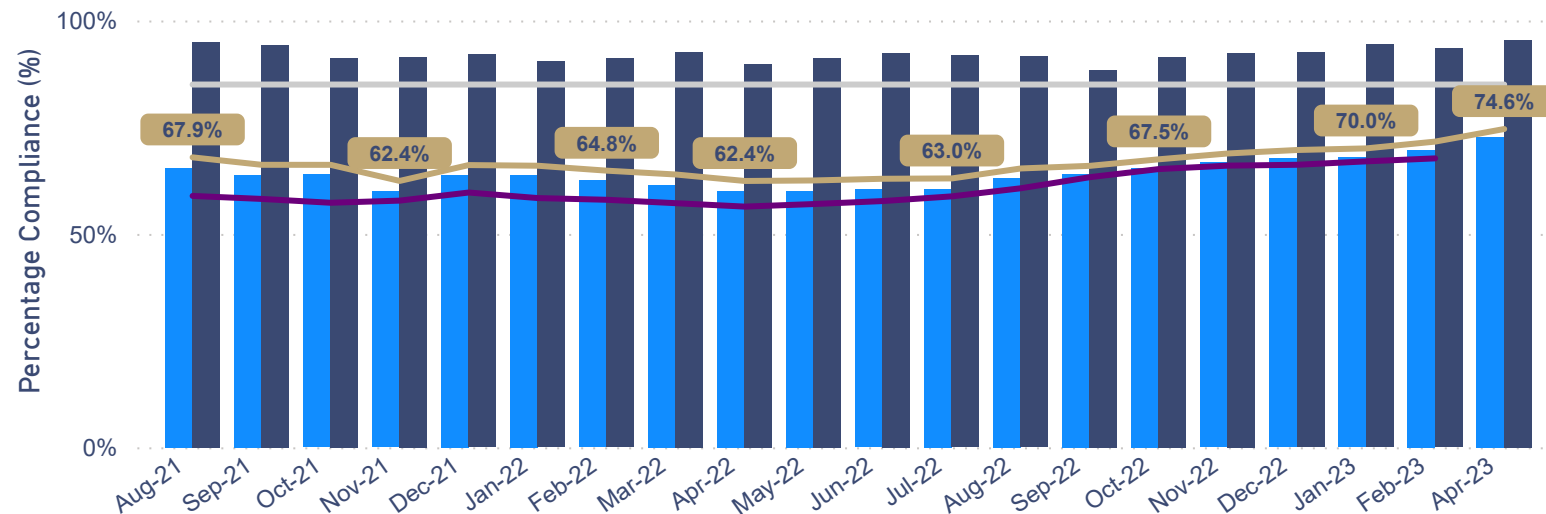
67.26%

Apr-23

63.48%

PADR Compliance to NHS Wales Performance and Target of 85%

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



Future Positive Actions

All Wales Pay Progression Policy - 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. Ongoing queries are being managed via the Culture & Workforce Experience generic account, performance management training and Operational Human Resources

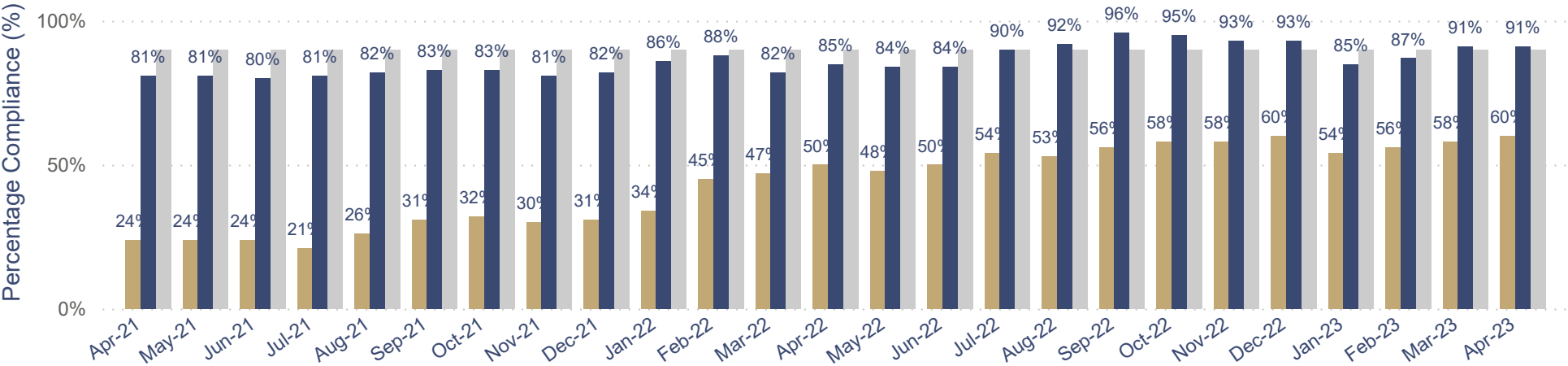
A new programme for staff and leaders is being piloted to ascertain reasons for low PADR compliance and implement support mechanisms to enable improvements

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 & Deputy CEO 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

Progress continues to move steadily, the slow pace is due to the large numbers of job plans expiring Dec 2022 and Jan 2023.

Performance Against Trend

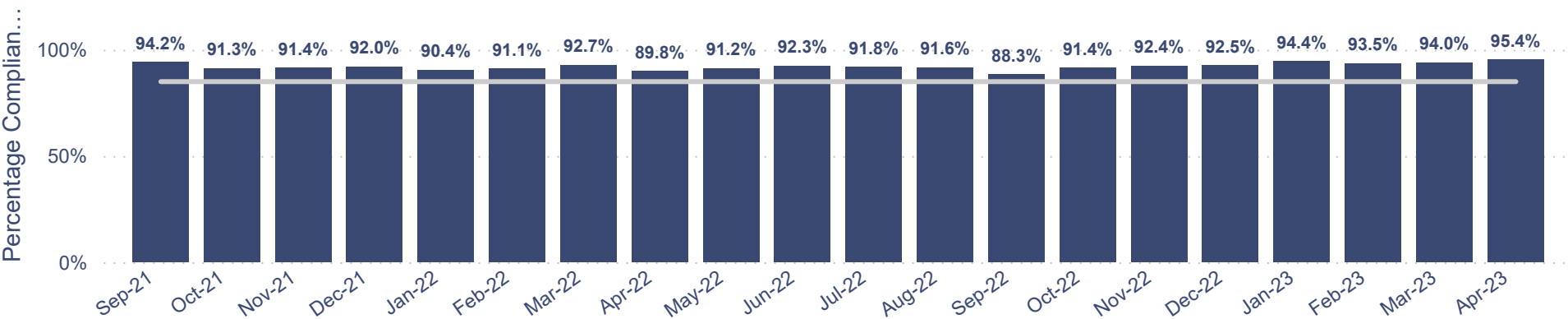
Steady Improvement.

Future Positive Actions

Deputy Medical Director and the Head of Medical Education and Professional Standards and Medical Directorate Support and Revalidation Manager met with the General Managers from Women and Children, Withybush and Glangwili to support with the improvement required. The final meeting is due to take place at the end of the month with the General Manager and Clinical lead from Planned Care. We are currently working on updating the Escalation process. Monthly reports continue to be issued to the Service Delivery Manager, General Manager, Clinical Lead and or Head of Service

Medical Appraisal Compliance Performance against Target of 85%

M&D Appraisal Compliance Target 85%



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	% 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	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%

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.