



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 May 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Performance Assurance & Workforce Metrics
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling, Executive Director of Workforce and Organisation Development (OD)/Deputy Chief Executive
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 31st March 2025 (unless stated otherwise e.g. for NHS Wales benchmarking datasets).

Cefndir / Background

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

The 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 KPI's presented annually in February.

Asesiad / Assessment

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

Overall staff engagement score – scale score method

- The response rate has fluctuated through 2024/25 from its lowest at 13% to the apex of 23%. In March 25 there was a 19% response rate. Ways to increase participation are continually being explored.

- 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 2024 and 70%; current rate in March 2025 shows 72% 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. 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.
- Exit plans are now in place for all 28 doctors, incorporating a mix of workforce pipelines, including national recruitment, development pathways, and pending international recruitment.
- 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.

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 Careers 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

- A new target has been set for a reduction in the Health Board's sickness absence percentage, the new target is a reduction in the 2024/25 rate of 6.60% for the 12 month rolling absence rate. In March 2025 the rolling monthly absence rate reduced from 6.65% in February 25 to 6.60%.

- Anxiety, stress and depression continues to account for the highest reasons for absence across the majority of the directorates. This is in line with other organisations.
- Temporary redeployment guidance has been developed, and will be embedded in the policies portal to support the All-Wales managing attendance at work policy.
- Deep dives into prevalent high sickness areas continues, with bespoke action plans/additional training devised to support.
- In March 2025 there was a significant reduction in the sickness absence in 3 areas;
 - Unscheduled Care (USC) Prince Phillip Hospital reduced from 9.58% (Jan), 7.26% (Feb) to 6.36% in March 2025, lowest rate for several years at least since April 21.
 - Carmarthenshire County reduced from 10.90% (Jan), 7.89% (Feb) to 5.83% in March 2025, again lowest rate for several years at least since April 21.
 - Facilities reduced from 10.86% (Jan), 9.03% (Feb) to 8.44% in March 2025, lowest rate since moving to Allocate in Aug 23.

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 the 85% target.
- We have 2 staff groups that are below the 85% target: Estates & Ancillary (77.3%) and Medical & Dental (50.3%). These rates continue to steadily increase.
- The Learning and Development Team is currently working closely with both Medical and Dental, and Estates and Facilities. Action plans have been developed and are currently being implemented and monitored collaboratively.

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 83.7%.

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 77% in the last six months. It currently sits at 72.3%.

Consultant/Specialist 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 2% decrease since January 2025. Current job plans are recorded at 85% against a target of 90%.
- An escalation letter is issued on behalf of the Responsible Officer where reminders fail.

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:

- TAKE 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 Quality and Engagement Act (sharepoint.com)	3. Effective
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	3. Data to knowledge
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Striving teams
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

**Gwybodaeth Ychwanegol:
Further Information:**

Ar sail tystiolaeth: Evidence Base:	Data extracted from a range of workforce information systems.
Rhestr Termau: 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

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 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
2022 Sample in August	1170	199	17%	73%
2022 Sample in September	1129	201	18%	75%
2023 Sample in October	940	168	18%	72%
2022 Sample in November	969	97	10%	74%
2023 Sample in January	1006	144	14%	74%
2023 Sample in February	1010	162	16%	75%
2023 Sample in March	999	168	17%	75%
2023 Sample in April	1001	178	18%	72%
2023 Sample in May	990	181	18%	74%
2023 Sample in June	994	175	18%	76%
2023 Sample in July	985	181	18%	74%
2023 Sample in August	1002	170	17%	73%
2023 Sample in September	972	182	19%	74%
2023 Sample in October	988	161	16%	74%
2023 Sample in November	997	152	15%	73%
2023 Sample in December	977	107	11%	72%
2024 Sample in January	939	135	14%	73%
2024 Sample in February	944	94	10%	76%
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%

Engagement Score by Staff Group

Role	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Administrative and Clerical	75%	72%	73%	70%	76%	72%	75%	76%	73%	76%	73%	73%
Allied Health Professionals	76%	70%	78%	71%	70%	74%	72%	72%	71%	69%	69%	73%
Estates, Facilities & Support Services			73%	81%		66%		74%			56%	
Healthcare Scientists			67%	46%	83%	70%	78%			77%	69%	
Medical and Dental	78%	58%	59%	72%	67%	77%	67%	79%	65%	62%	61%	72%
None of these						71%				70%	73%	
Nursing and Midwifery	77%	72%	67%	75%	72%	74%	73%	71%	70%	73%	70%	70%
Other Clinical Services	83%	70%		64%	66%		71%	61%	69%		73%	
Other Scientific and Technical			77%			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, Locum, 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

Exit plans are now in place for all 28 doctors, incorporating a mix of workforce pipelines, including national recruitment, development pathways, and pending international recruitment. These plans are now being utilised to phase out high-cost and non-direct engagement (Non-DE) workers.

Allied Health Professionals and Health Sciences

There are currently 22 agency workers across this professional group. While this number continues to decline, there remains a risk associated with the reliance on agency workers to meet health board performance targets.

Nursing

The use of nursing agency staff has reduced to 65.75 WTE as of April 2025, marking a further decline from the previous reporting period. Plans are in place to continue this reduction through agency exit strategies.

Future Positive Actions

Medical

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.

Allied Health Professionals and Health Sciences

Plans to reduce agency reliance are in place, but the increasing need to meet health board performance targets has led to a short-term rise in agency workers. A phase one approach is being implemented to reduce premium costs, with bank staff being utilised as a cost-saving measure. Investment papers highlight the growing demand, particularly in radiology, and a workforce plan is currently being drafted to support implementation while mitigating the need for agency workers.

Nursing

Plans are in place to introduce a new cohort of newly qualified nurses from September 2025, which will further reduce vacancy rates within the nursing professional group.

However, risks remain due to surge demand, enhanced patient support, and sickness, which may continue to drive unplanned agency use.

Performance Against Trend

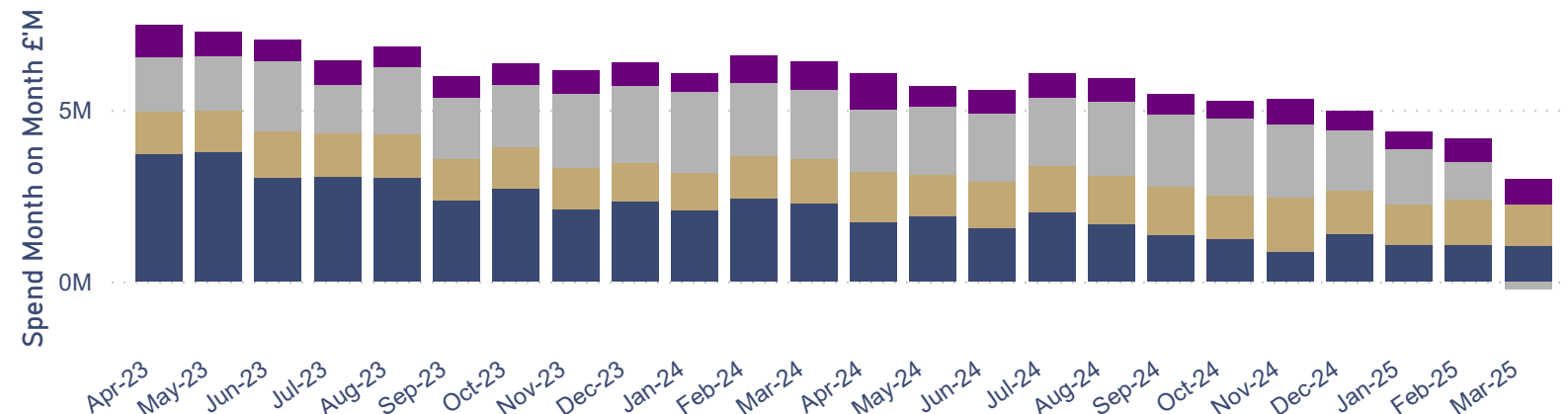
Agency spend has remained below 5% of the total pay bill since November 2023.

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

Month Name	2022/2023	2023/2024	2024/2025
April	6.46%	7.82%	3.40%
May	6.12%	7.62%	3.78%
June	6.94%	5.09%	3.08%
July	5.62%	5.62%	3.94%
August	6.46%	6.05%	3.29%
September	6.52%	4.81%	2.27%
October	6.94%	5.25%	2.41%
November	9.27%	4.19%	1.29%
December	6.23%	4.64%	2.57%
January	7.83%	4.04%	1.93%
February	6.89%	4.71%	1.95%
March	5.17%	3.05%	1.80%

Variable Pay Month on Month

● Agency ● Bank ● Locum ● Overtime



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



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.

We are planning to commence the 2025/26 round of education and commissioning for out turn of students.

We have now received information from HEIW on how they wish to approach the online education and commissioning portal. We are still in discussion with HEIW with regards to this year's process and the alignment of additional training needs, which will enable clear communication to be sent to Service Leads to assist with completion of their education commissioning return within agreed timelines.

To align with the Annual Planning cycle, we have revised our approach to align education commissioning discussions to Operational Workforce Planning, inclusive of ongoing training and education needs for current and future workforce.

We have devised a plan which will see the completion of the Draft submission by January 2025, and are in the process of aligning/working with professional leads and operational/corporate colleagues to enable an integrated approach to cover the 3 year annual planning cycle, with Executive sign off of all required submissions by February (to align with annual planning timeline) to submit to HEIW by 31st March 2025.

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

Performance Against Trend

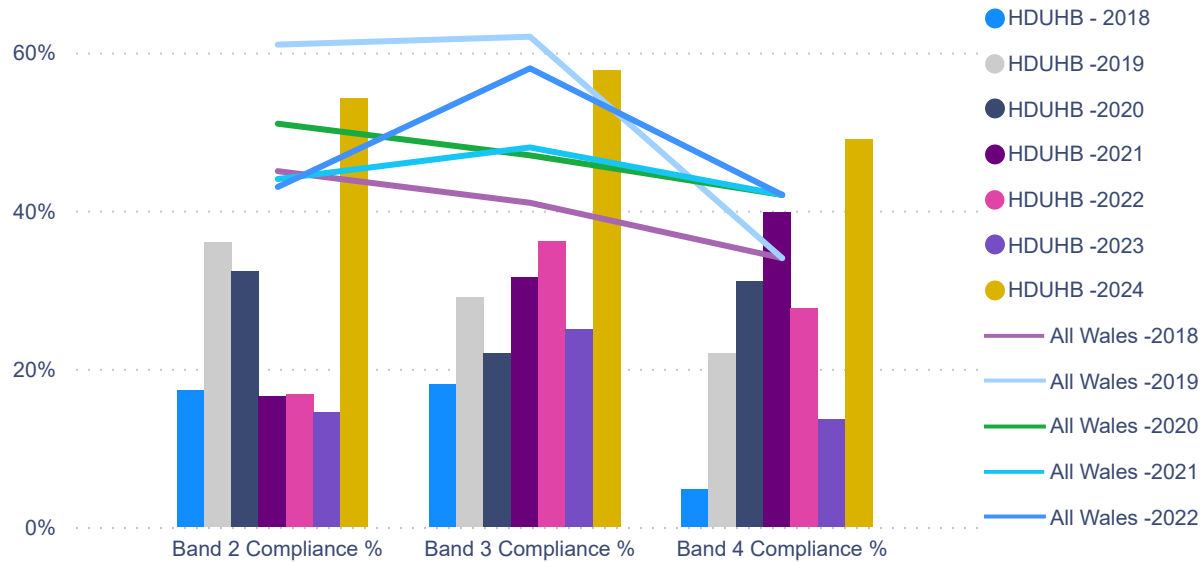
Submission to HEIW are completed as per guidance for all years from 2021 to date based on our current funded establishments. Detailed analysis of submissions available on request.

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 for education commissioning. Alignment has been made to the Higher Awards process which will continue to be strengthened.

Career Framework Data



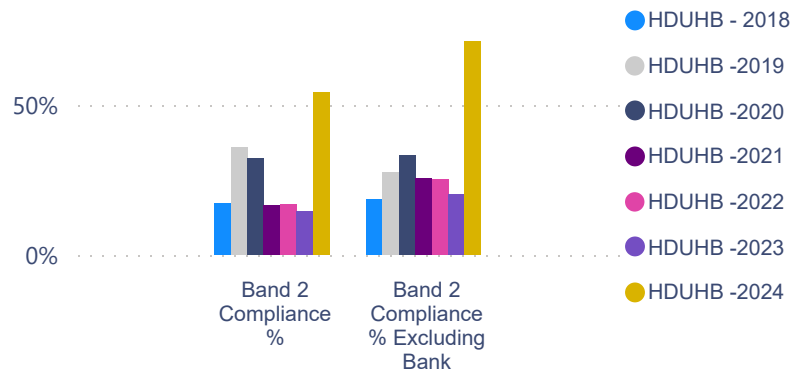
Current Performance

A number of steps have been taken to increase the AWCF compliance. A Career Framework Administrator was appointed in August 2024 and has used a number of methods to increase the compliance including; cleansing existing records, updating ESR records, connecting with individuals out of compliance for a position update and connecting with induction touch points to secure compliance.

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

- Continue to work with HEIW to identify anomaly careers that sit within the framework which are impacting compliance figures (e.g. Nursery Nurse roles)
- Continue to cleanse existing data to improve accuracy
- Increase opportunities to communicate about the AWCF in Senior Manager Team meetings and through other pertinent platforms
- Continue to report twice yearly to SPPEG (May and November)

Performance Against Trend

A key change in this period is the confirmation from HEIW that once a HCSW has enrolled on the Clinical Induction, they are on the AWCF pathway. This combination has resulted in a measurable increase in compliance for the Health Board for Bands 2, 3 and 4.

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
Total	2578	1392	913	527	320	156

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:

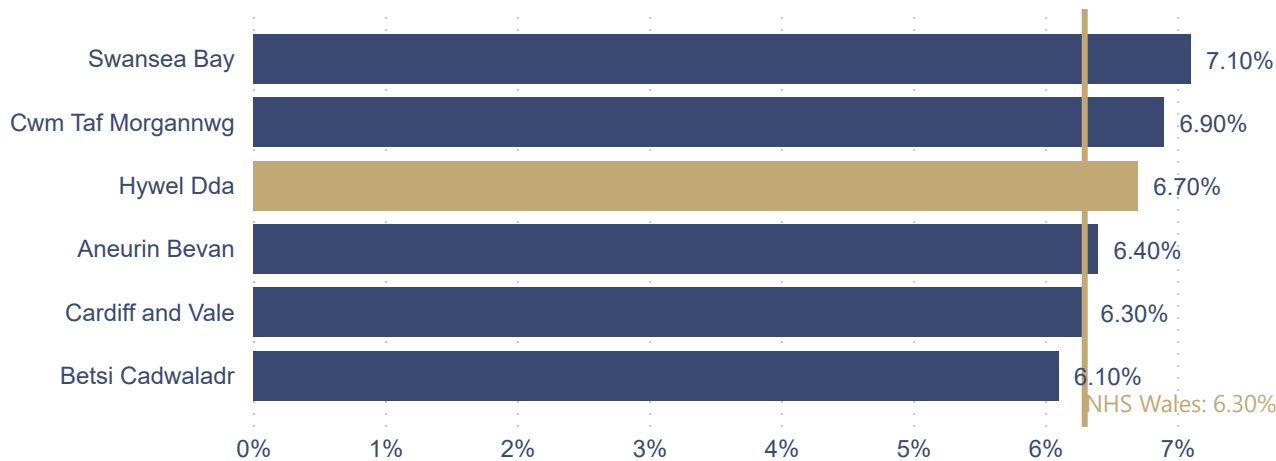
3 - Engaging our Staff



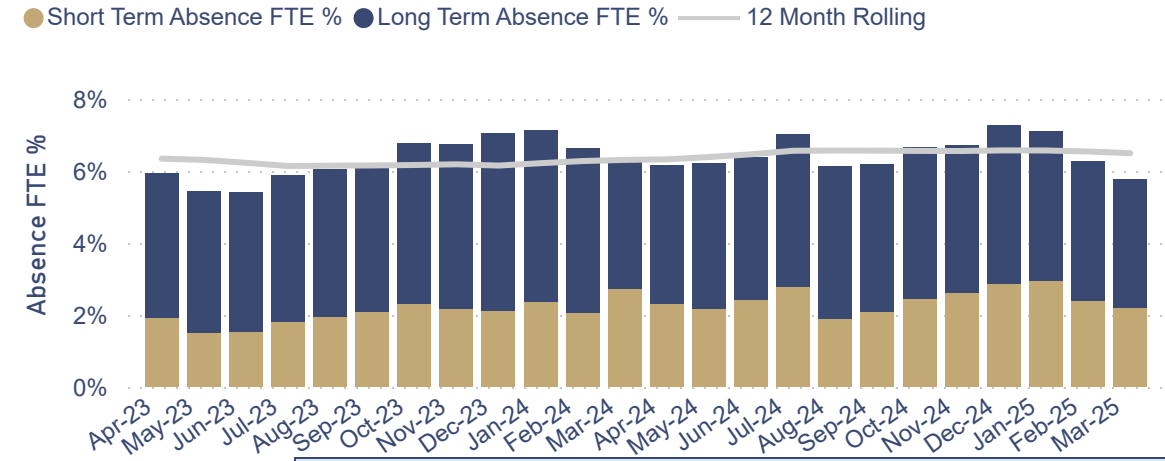
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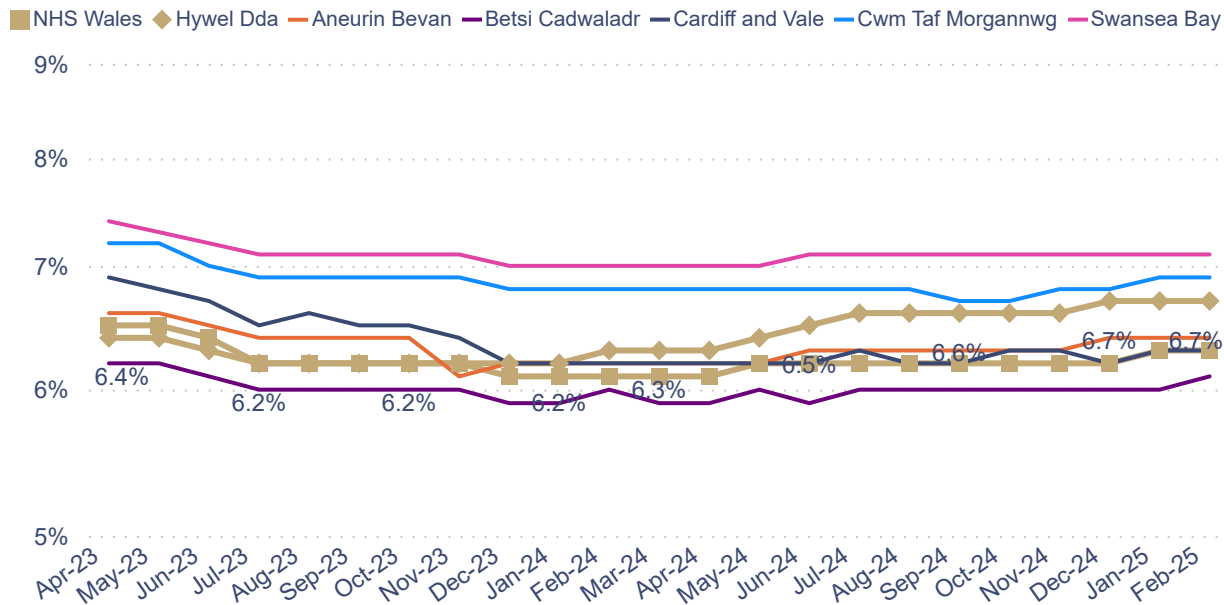
12 month rolling sickness absence rates (UHBs only) to February 2025



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



Rolling 12-month sickness absence rates, Apr'23 to Feb'25



Current Performance

There has been a steady decline in sickness absence rates across the HB to 5.77% in March. With a decrease in both short term and long term sickness absence rates. The rolling sickness absence rate is 6.70% so there are still improvements to be made as we have the third highest sickness absence rate across Wales for a UHB

Performance Against Trend

Anxiety, stress and depression continues to account for the highest reasons for absence across the Health Board (31.6%). Which is inline with other organisations. Absence due to cold, cough, flu (10.1%) remains the second highest sickness reason with gastro problems recorded as the third sickness absence reason (9.7%)

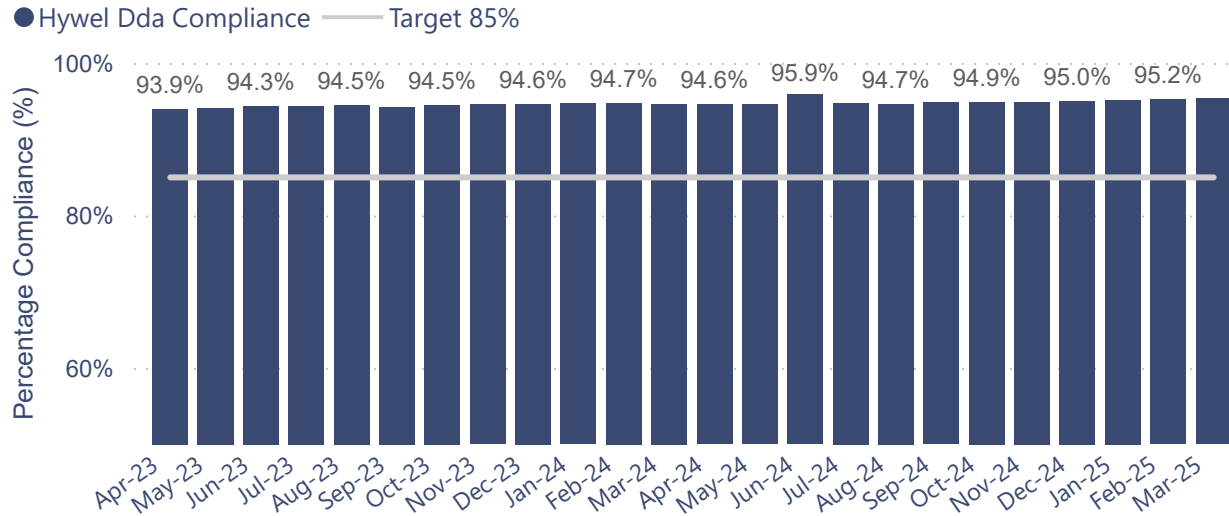
Future Positive Actions

Temporary redeployment flow chart: has been developed to support managers and staff understanding of the process. It will be embedded in the policies portal to support the All-Wales Attendance At Work Policy.

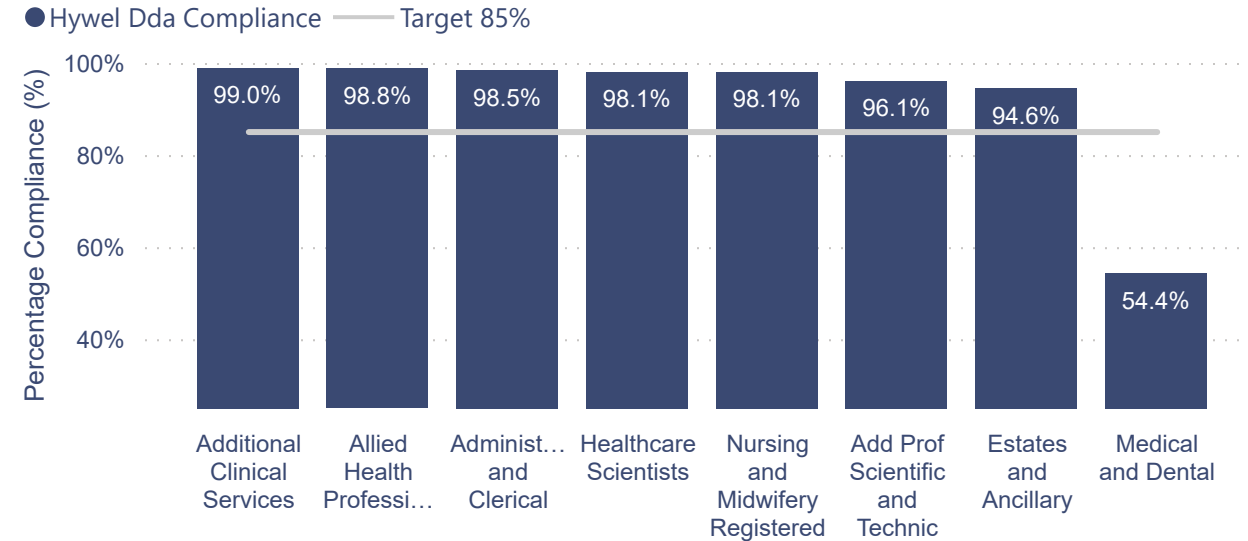
Bite size training sessions: 9 session have been developed to date and the first session "How to conduct a Return-to-Work meeting" has been produced and animated. Feedback on this first iteration has been given, awaiting amendments and final sign off.

Designated support: Deep dives into prevalent high sickness areas continues, with bespoke action plans/additional training devised to support. This will continue in collaboration and support from the WF teams and Senior managers from the Directorates – business as usual.

Percentage of Staff completing Dementia Training



Percentage of Staff completing Dementia Training



Current Performance

Health Board compliance for staff completing Dementia training, currently stands 10.2% above the target of 85%.

When looking at service areas, all areas are currently compliant with this training by at least 9.6% above the 85% target, with the exception of Medical and Dental.

Learning and Development are currently working 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

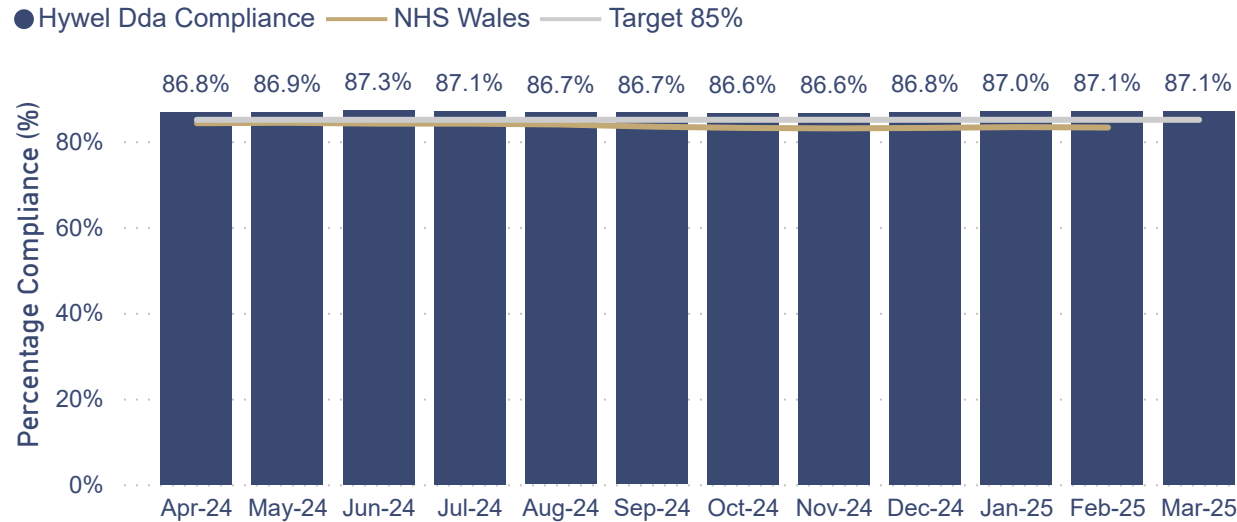
Over the last 24 months, we have seen Health Board compliance in the successful completion of Dementia training, trending upwards from 93.9% in April 2023 to 95.2% in March 2025. This is an overall increase of 1.3%.

Future Positive Actions

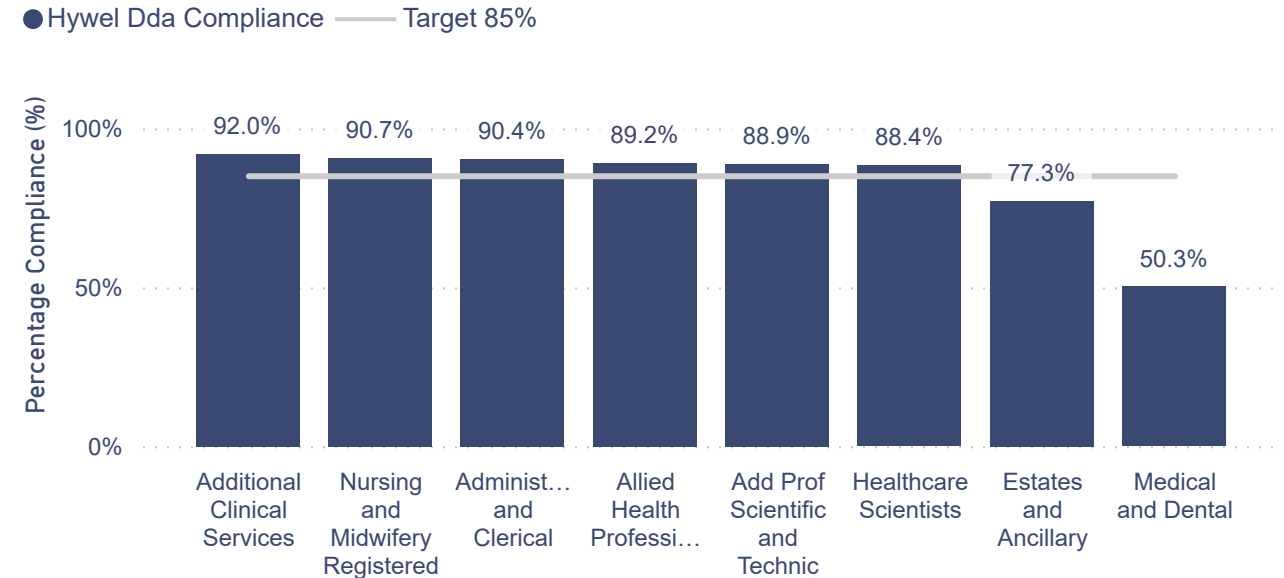
To sustain and further improve upon our current compliance with Dementia training, we will,

- * Continue to review progress made across areas that are not achieving compliance.
- * Look for opportunities to share good practice.
- * Continually 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.

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 2.1% above the target of 85% for compliance with the Core Skills Training Framework, and consistently higher than NHS Wales.

Furthermore, the majority of Staff Groups are performing above the 85% target by a minimum of 3.4%, with Additional Clinical Services achieving 7% above target. Medical and Dental and Estates and Facilities are not currently reaching 85% compliance and action plans have been put in place to support areas of low compliance.

Performance Against Trend

Overall, compliance has remained relatively steady, with slight increase in data of 0.3% being seen, moving from 86.8% in April 2024 to 87.1% in March 2025.

Future Positive Actions

The Learning and Development team are currently working closely with both Medical and Dental, and Estates and Facilities. Action plans have been developed and are currently being implemented and monitored collaboratively.

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.

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 83.7%, the highest achieved by the organisation and only just short of the Welsh Government target of 85%.

Performance Against Trend
 The trend has continued on an upwards trajectory.

Future Positive Actions
 OD have just 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.

Oct-24
77.3%

Nov-24
72.9%

Dec-24
77.0%

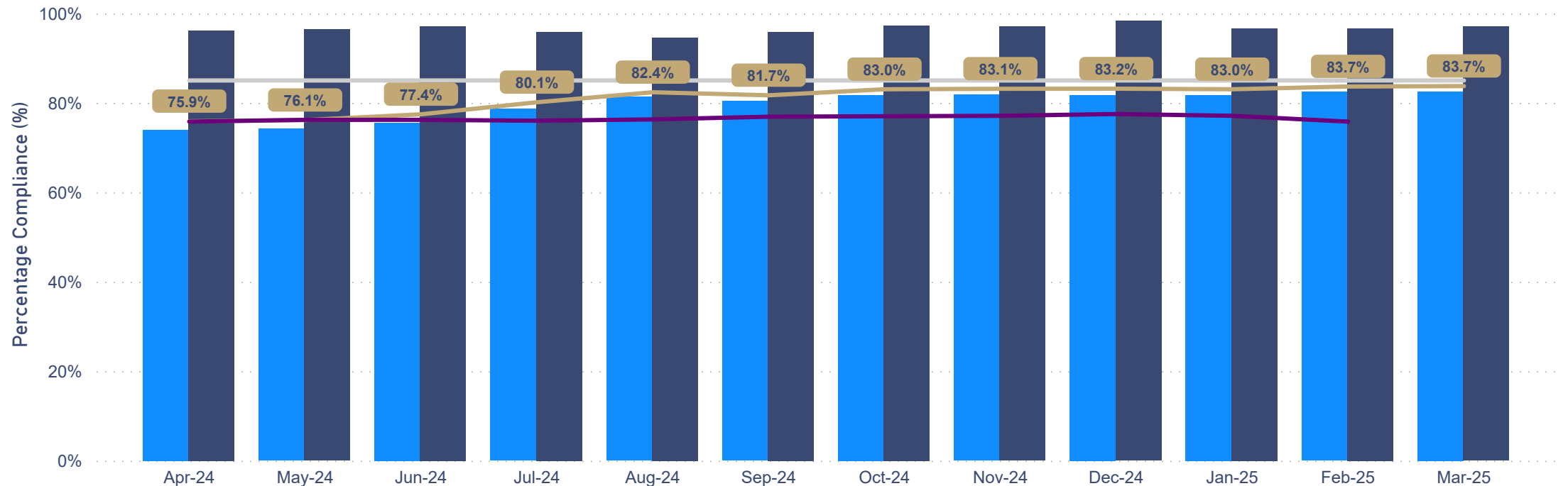
Jan-25
67.4%

Feb-25
74.5%

Mar-25
72.3%

PADR Compliance to NHS Wales Performance and Target of 85%

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

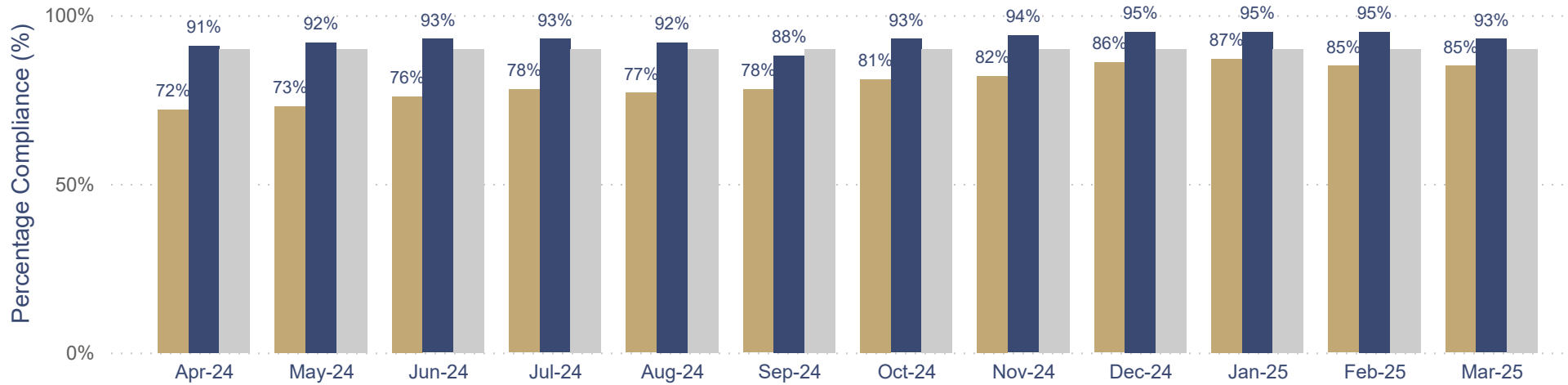
This target aligns to the following statement of intent:

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

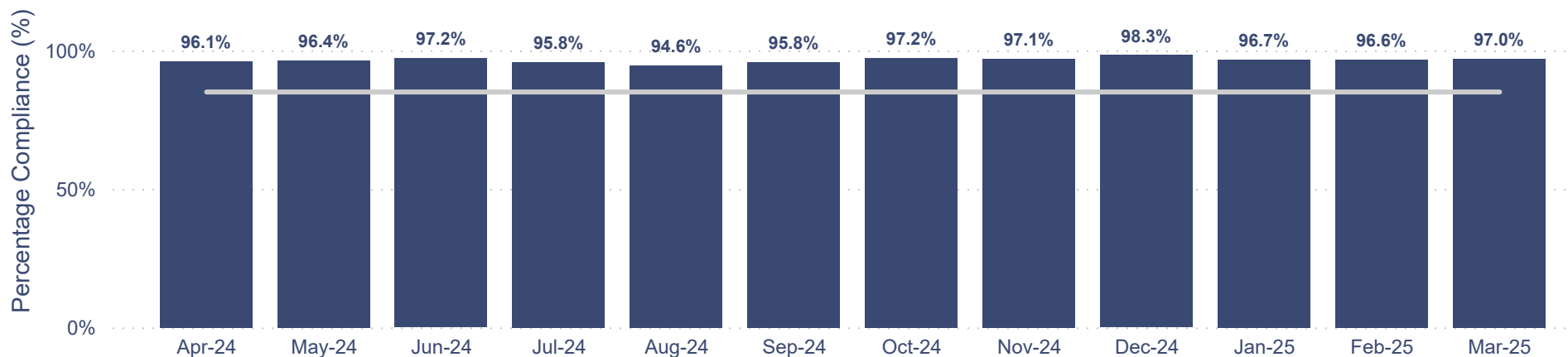


Current Performance
 ▲ There was a 2% decrease in compliance in January 2025 since then the compliance remains at 85%.

Performance Against Trend
 ▼ The trend remains the same steady improvement over time, target is 90%.

Medical Appraisal Compliance Performance against Target of 85%

● M&D Appraisal Compliance — Target 85%



Future Positive Actions
 ▼ Processes in place for chasing up all doctors to sign off their job plan. Escalation process in place, an escalation letter issued on behalf of the Responsible Officer where the chasers fail. Maintaining compliance, advise SDM's on highlight priority work needed monthly and next expiring job plans.

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%

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.