

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 October 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Trade Union Update - Implementation of Welsh Health Circular WHC (2024) 017
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling, Executive Director of Workforce & Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Anna Bird, Assistant Director of Business, Partnerships, and Inclusion

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The attached report provides an update on the progress which is being made to implement the non-pay elements of the collective agreement for 2022-2024 for Agenda for Change (AfC) staff, as required by Welsh Health Circular WHC (2024) 017.

The People, Organisational Development and Culture Committee (PODCC) is asked to note for assurance this paper, and the attached update report (Appendix 1). In order for the Health Board to comply with Welsh Government reporting timescales it should be noted that this report was submitted on 27 September 2024.

Cefndir / Background

The Welsh Health Circular (2024) 017 provides a framework for delivery in partnership on progress in a number of key areas. Each Health Board is required to submit an update to Welsh Government in this regard at regular intervals throughout the year (May 2024, July 2024, September 2024 and January 2025).

The September 2024 update requested a summary of progress of specific actions as well as progress updates against action plans provided as part of the July 2024 update.

In addition to the sharing of the Welsh Government submission, this paper also includes an overview of the progress of four associated workstreams which are co-delivered with Staff Partnership Forum members. Staff Partnership Forum established four workstreams in December 2023 following a scoping exercise of the key issues arising from the non-pay deal in relation to:

- Flexible working – to include flexible rostering practice and rosters.
- Agency reduction – with links to incentivising pay, contracts and general Terms and Conditions.
- Retention – to include retire and return.

- Sickness absence – to include parity between support for mental health and physical health.

Asesiad / Assessment

Appended to this document is the update which was submitted to Welsh Government on 27 September 2024 against the key actions set out in WHC (2024) 17. The majority of these actions are on-track, but two actions were Red, Amber, Green (RAG) rated as Amber, as follows:

- **Pension Flexibilities** – the Health Board is awaiting the final publication of the all-Wales policy in order to progress this action.
- **Nursing for the Future Workforce Plan** – this plan has not yet been published by Health Education Improvement Wales (HEIW).

In addition to the report to Welsh Government, a summary of the progress to date in relation to the four Staff Partnership Forum workstreams and the broader non-pay elements is summarised below.

Flexible working

The Task and Finish group are scheduled to meet on a monthly basis and a number of meetings have already taken place. Key actions undertaken since the last update include:

- Working with the Senior Workforce Manager (People Effectiveness) to develop a new session for delivery on the Health Board's LEAP Development Programme, with a focus on fostering a leadership culture which promotes flexible working at team level.
- Scoping a flexible working maturity assessment pilot project from a quality improvement perspective, looking at our OD Relationship Managers adding an assessment of flexible working maturity into their exploration phase when working with services/teams.

As this work also aligns with the Health Board's wider retention programme, updates continue to be shared with the specific retention groups as necessary, including Nursing, Medical and Allied Health Professional (AHP); the latter group is scheduled to begin shortly. Additionally, links continue with the Health Board's Rostering Group and a member of the Flexible Working Group is also a member of the Rostering Group.

Agency Reduction

The Task and Finish group is well established and continues to meet regularly to discuss elements within the National Workplan. The reduction of nursing agency also forms part of the Variable Pay Expenditure Reduction & Efficiency Group which meets weekly.

Although the Health Board's agency expenditure showed promising signs of decrease in June 2024, a sustained decrease through to August 2024 has only been seen for nursing:

Agency Spend February 2024	Agency Spend June 2024	Agency Spend August 2024
Nursing £1.8m	Nursing £1.1m	Nursing £1.06m
Medical £407k	Medical £321k	Medical £485k
Allied Health Professions and Health Scientists £54k	Allied Health Professions and Health Scientists £48k	Allied Health Professions and Health Scientists £85k

Health Care Support Worker £48k	Health Care Support Worker £4k	Health Care Support Worker £15k
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Due to continued pressures around waiting list initiatives additional agency usage for AHP's has been authorised through the Financial Control Group with an exit plan linked to recruitment. Further work is ongoing to identify these opportunities with significant lessons being learnt around the ability to hire into this speciality.

Exit plans exist to reduce agency use across all staff groups to zero by the 1st of November, these plans will be supported by quality impact assessments to mitigate any risk of adverse outcomes for patient care. A further update will be provided on these increased controls prior to the 1st of November through the Value and Sustainability group along with support from the Variable Pay Reduction and Efficiency group.

Retention to include Retire and Return

The Task and Finish group are scheduled to meet on a monthly basis and a number of meetings have already taken place. Progress achieved so far is as follows:

- A SharePoint page has been developed to provide a one stop resource for staff who wish to find out more about either retirement or flexible retirement.
[Retirement and Flexible Retirement \(sharepoint.com\)](#), this includes "what do I do if I retire" and "what do I do if I want to retire flexibly information".
- A poster to promote the new SharePoint page has been distributed via the Partnership Forum.
- A video has been developed (and is currently being edited and Welsh subtitles attached) as a training resource for both managers and staff to showcase how a coaching conversation can take place on the subject of flexible retirement.
- OD, Operational Workforce and Trade Union representatives continue to highlight/advertise/educate the flexible retirement agenda and provide support to managers and staff where needed. The strap line is "*have a conversation rather than saying no*".
- The revised all-Wales Retirement Policy has not yet been issued, and this may have an impact on the current flexible retirement offering; FAQs are also being developed which will be placed on the SharePoint page once available.

Some of the key barriers to changing hearts and minds on flexible retirement have been identified as:

- lack of knowledge on the part of managers.
- lack of understanding of what is possible.
- service pressure, e.g. easier occasionally to accommodate reduction in hours, but not offer fixed days.
- the incorrect assumptions that the manager will have to offer a flexible approach to all staff that request it i.e. "if I give to one, I have to give to all".

Action to be carried forward:

The view of the group is that the project has achieved what it set out to do and while further meetings are planned, the main actions going forward are to:

- advertise/educate/inform what is currently available.
- share the Retirement Policy and video across engagement groups to educate and inform, in an effort to nudge hearts and minds as above.

Sickness / Wellbeing

The Task and Finish group are scheduled to meet every two weeks, and several meetings have already taken place. Actions undertaken since the last update include:

- Review of the All Wales Managing Attendance at Work online training provision to ensure it is accessible to all and fit for purpose, ensuring that the training link is visible and embedded within the Policy addendums.
- Review of “audit programme” carried out by the Workforce teams and how they add value – WF teams to move away from audit and focus on deep dives into prevalent high sickness areas with focus on long term sickness and action plans devised to support those.
- Individual support/training to be offered to new managers or areas requiring additional support as per action plans.
- Regular sickness absence advice and support updates (from Workforce, Occupational Health and Staff Wellbeing teams) to be communicated in Directorate meetings and Partnership Forum.
- Ensure all training to support reasonable adjustments/redeployments is sign posted e.g. Access to Microsoft training.
- Workforce, Occupational Health (OH) and Staff Wellbeing teams to signpost managers to guidance on ESR for wellbeing conversations.
- Reasonable adjustments - signposted advice and support for managers via OH SharePoint pages and via OH referrals.
- Same day call back for managers from Occupational Health.
- Determine the key issues as highlighted by staff going through the menopause and identify reasonable adjustments that can be put in place to support. OH support and recommendations regarding reasonable adjustments provided on an ongoing basis. Guidance on symptoms and potential solutions highlighted on OH SharePoint pages. Menopause Café and resources available online.
- Senior Leadership Teams to engage in flu programme – Occupational Health have lobbied the Nursing Senior Leadership group for sponsors and role models, with numerous volunteers “recruited” as peer vaccinators following recruitment campaign, regular communications and Flu campaign video.
- Expand the Wellbeing Champion Network – global advert and successfully recruited 100+ wellbeing champions.
- Analysis of Mental Health sickness statistic to determine any meaningful correlations.

Action to be carried forward:

The main actions going forward are:

- Bite size 5/10 minutes training sessions to be developed to complement and enhance the All Wales Attendance at Work training e.g. ‘how to’ guide to implement reasonable adjustments and tailored adjustments.
- Training to upskill managers and reporting requirements on ESR to ensure more meaningful data collection.
- Compassionate Leadership training - follow up sessions on the pledge given by managers around making a change.
- Devise guidance on temporary redeployment in line with All Wales Sickness Absence Policy.
- Ensure a skill training analysis is embedded in the redeployment/temporary redeployment process.

- Offer alternatives to digital resources to improve accessibility of services - Business cards / posters with QR code to advertise & gateway link to Staff Wellbeing and Occupational Health resources in development to link to both the internet and intranet.
- Embed links to SharePoint for Occupational Health and Staff Wellbeing resources and ensure they are included on sickness absence letters, once the QR gateway established.
- Working on improved guidance for managers - what constitutes a good management referral.
- Better understanding of reasonable adjustments – give positive case studies as part of training. Cultural work around how reasonable adjustments can benefit the team and working environment.
- “Passport” for reasonable adjustments to be adopted by the Health Board to ensure improved communications for managers regarding individuals’ requirements.
- Staff Psychological and Wellbeing Service survey/feedback - analyse outcomes to focus on improvements and initiatives.
- Key metrics and statistics to be developed/assessed to determine if any meaningful correlations e.g. how many people return to work within a 12-week window, breakdown of top 5 reasons for sickness, short term v long term sickness, repeat patterns of sickness.
- To improve data collection on ESR and identification of work related stress.

Argymhelliad / Recommendation

The Committee is requested to:

- **NOTE** the final version of the update report (attached) which was submitted to Welsh Government on 27 September 2024 in line with the requirements of Welsh Health Circular (2024) 017.
- **NOTE** updates provided on the collaborative workstream activity on other areas of the non-pay deal.

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 Hywel Dda University Health Board (the Health Board) is recognised as a leader in this field. 2.2 To provide assurance to the Board on the implementation of the UHB’s Workforce and OD Strategy, and the all-Wales Health & Social Care Workforce Strategy, ensuring these are consistent with the Board’s overall strategic direction and with any requirements and standards set for NHS bodies in Wales.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality	Not Applicable

Quality and Engagement Act (sharepoint.com)	
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	2. Culture and valuing people
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 4. The best health and wellbeing for our individuals, families and communities
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 5. Offer a diverse range of employment opportunities which support people to fulfill their potential

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Welsh Health Circular (2024) 017 - Implementation of the Non-pay Elements of the 2022-4 Collective Agreement.
Rhestr Termiau: Glossary of Terms:	Not Applicable.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	The contents of the submission to Welsh Government were shared with Trade Union Representatives and signed off by the Chair of Staff partnership Forum.

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None arising from this paper.
Ansawdd / Gofal Claf: Quality / Patient Care:	None arising from this paper.

Gweithlu: Workforce:	None arising from this paper.
Risg: Risk:	Delivery on the Welsh Health Circular must be reported to Welsh Government at specified intervals. Failure to comply may impact our relationship with Welsh Government and our local and national trade unions.
Cyfreithiol: Legal:	None arising from this paper.
Enw Da: Reputational:	Reputational risks may arise from a failure to implement all aspects of the Welsh Health Circular within our control.
Gyfrinachedd: Privacy:	None arising from this paper.
Cydraddoldeb: Equality:	None arising from this paper.

Hywel Dda University Health Board - Non Pay Elements of the collective pay deal 2022/23 and 2023/24 - September 2024 Update

IMMEDIATE ASSURANCE - provide an assurance report by the end of May 2024 confirming that the relevant measures are in place						
WHC Action	Deadline	Delivered Y/N	Evidence	Reasons off track / Plan to get back to Green	Supporting Documents (if applicable)	If No - Rate confidence on ability to get back to green by next reporting period. (H/M/L)
Confirm implementation of the all-Wales Pensions Flexibilities Policy on retire and return.	30/05/2024	N	Final version of the policy currently is with Welsh Partnership Forum and M&D Business Group for approval with deadline set of 13 September 2024. Agreement reached in DEWODs on 11.9.24 to issue the policy in English only once approved to enable HBs to progress through internal governance structures as early as possible whilst we await the translation. Staff Partnership Response: Agreed		N/A	High
Confirm that staff have access to drinking water (freely available within the workplace) and that this is enabled not prevented by Infection Prevention and Control through risk assessments and with clear local guidance, taking the environment and patient risk groups into consideration.	30/05/2024	Y	All areas have access to drinking water. Wards and departments continue to be encouraged to have a 'hydration station' away from the 'nursing station' but with easy access. Posters advertising "hydration stations/areas" are available promoting the need to keep hydrated. For complete assurance around ease of access, a fill scoping exercise has been completed and feedback is embedded for information. A multi professional Task & Finish Group will be established to meet in October 2024 to take this forward, linking closely with the water safety group. Staff Partnership Response: The Trade Unions are content that the vast majority of staff now have easy access, or know how to access drinking water during working hours. We therefore consider this action met, however note the HB's commitment to enhance access.			
REQUIRED ASSURANCE - Baseline Assurance Report by 30/05/24 - develop action plan by end of July 2024; monitoring/progress report by end of Sept 2024: Completion report by Jan 25						
WHC Action	Deadline	Delivered Y/N	Update on Progress	Reasons off track / Plan to get back to Green	Supporting Documents	If No - Rate confidence on ability to get back to green by next reporting period. (H/M/L)
Review how Unsociable Hours Allowance is implemented to ensure fairness, industrial injuries are properly recognised, and that staff are not discriminated against in line with the Equalities Act 2010.	29/09/2024	Y	Updated Action Plan attached. Consultation has now closed, with one further amendment being made to the draft policy. The amended policy will now allow for a decision making panel, inclusive of the individual's manager as well as colleagues from Occupational Health and Workforce. A Trade Union Representative will also be invited to join the virtual panel. We believe this strengthens our approach to working in social partnership with TU colleagues. The revised policy will be submitted to Staff Partnership Forum on 1.10.24 for onward consideration by our People Committee on 29.10.24. The new ER Case Management System build is currently on pause and a new date has been set in the plan. This does not delay the implementation of a revised policy. Staff Partnership Response: Agreed. TU's pleased to see expansion on social partnership working.			
Review the use of radiography on-call standby in out of hour's arrangements to ensure that the frequency of on-call standby does not negatively impact an individual's work-life balance consistent with the twelve principles set out in Table 22, Annex 29 of the NHS Terms and Conditions of Service Handbook.	29/09/2024	Y	The Health Board continues to monitor the situation to take action to develop sustainable workforce options to meet the standards set out in Table 22 of Annex 29 of the NHS Terms and Conditions Handbook, particularly in relation to frequency of on-calls (principle 3). Challenges around sickness, recruitment issues and increasing demand remain, however developments to identify opportunities for a 7 day, complete shift system (inc. overnight cover) has progressed, with Prince Philip Hospital identified as a potential pilot site. However, this is subject to financial investment, Executive approval and organisational change processes (OCP), and requires further consideration in respect of potential service configuration at PPH as part of targeted intervention/escalation processes. This will continue to prioritised, to enable ongoing progress to develop standardised on-call arrangements across the service. Workforce and OD teams continue to support Radiography to develop a long-term sustainable service model, building on the operational workforce plans, and the Health Board is continuing to engage and collaborate with colleagues nationally (e.g. ARCH, HEIW and the National Imaging Academy) as this is a national workforce shortage. The service will continue efforts to proactively recruit, which includes recent recruitment of x4 new graduates, who, when competent, will join the on-call rota which may alleviate current pressures and will contribute to the requirements set out in principle 3. Regional opportunities will continue to be explored which includes development of demand & capacity mapping (as per ARCH workstream) as well as continued engagement and development of the services operational workforce plan, to agree actions to develop sustainable options to mitigate known risks. This work will align with continuing development of the Clinical Services Plan, in light of the identified option (option 3), to understand the implications for workforce and on-call arrangements as a result of potential service reconfiguration. Staff Partnership Response: Noted.			
REQUIRED ASSURANCE - Local Partnership Forum agree local priority areas and an action plan, developed in partnerships, appropriate to local circumstances, with details provided by the end of July 2024. Update/progress report by end of September 2024 and Outcomes report by end of January 2025.						
WHC Action	Deadline	Delivered Y/N	Update on Progress	Reasons off track / Plan to get back to Green	Supporting Documents	If No - Rate confidence on ability to get back to green by next reporting period. (H/M/L)
Implementing and monitoring of the HEIW Nursing for the Future Workforce Plan	20/09/2024	N	The HEIW Nursing Workforce Plan has consultation recently closed and a thematic analysis has been undertaken. We engaged with the consultation process and have subsequently reviewed the actions in the plan. We have assessed our readiness to implement when the final plan is issued by HEIW. Staff Partnership Response: Agreed.	Plan yet to be finalised and published.		High
Implement and monitoring of the Nurse Retention Plan	30/07/2024	Y	Our retention work to support the NRP (Nurse Retention Plan) continues to progress well. Recent developments have included progression on the last update, where we were beginning to capture staff stories of best practice and 'centres of excellence' across the HB. These positive, empowering stories hold significant learning value, and thereby act as an important means of increasing energy and motivation around how we scale and spread some of these transformational changes. To follow are just some examples of these stories and additional areas of work in relation to the action plan: Supporting International Staff Sharing and promoting a 'good news' story of one of our international nurses (joined the HB as part of cohort four), who has recently been promoted to a Band 6 position in one of our A&E departments. Contributing to the All-Wales IEN app which will be used to support the onboarding of our IEN's once released. Development and Career Planning Progressing the 'Day in the Life' stories, where we collect experiences of nursing staff from a demographically wide selection to understand their unique individual experiences and highlight areas of good practice. This will also help to showcase different ways of obtaining qualifications and entering nursing roles within the HB, which will hopefully support internal movement within the organisation. Shaping Organisational Culture In July/August 2024, three members of WOD staff attended the HEIW, Compassionate Leadership Train the Trainer two-day course, with the aim of embedding and delivering the principles of compassionate leadership into OD interventions and leadership and wellbeing training. Flexible Retirement Working in partnership with our TU colleagues, a task and finish group has been established, consisting of managers and staff who have experienced the retire and return process. Key actions undertaken to date include creating a video resource to enable and educate staff in relation to the process and creating a SharePoint page to capture all information pertaining to retire and return. Our Nurse Retention Group continues to meet on a 4-weekly basis. We recently invited members to review the Group's progress, with feedback including it being useful for key nursing colleagues to have the opportunity to be sighted on important developments across the organisation, share best practice, generate ideas, access key resources and offer peer-to-peer support in improving retention across the HB. A future focus of the Group will include external speakers and occasionally inviting operational nurses to attend to foster wider engagement. All Wales Retention Community of Practice continue to meet on a regular basis, where we are seeking HEIW support with an All-Wales approach to flexible working campaigns, local induction resources and support with staff survey actions. Our current Nursing turnover figures are as follows: <ul style="list-style-type: none"> July FTE turnover rates (12m) Nursing and Midwifery, a reduction from 6.23% to 5.19%, equating to a change of -1.04%. August FTE turnover rates (12m) Nursing and Midwifery, no change from 5.51% in August 2023. Staff Partnership Response: Agreed.			

Implement and monitoring of the Birthrate Plus report	30/07/2024	Y	<p>Birthrate Plus supports the Health Board to understand the needs of the service and helps to ensure that staffing ratios are correct to provide safe and effective care. Hywel Dda University Health Board has a challenging geographical landscape and offers obstetric led services in both Bronglais and Glangwili General Hospital. The Health Board also provides a supportive homebirth service and community midwifery care delivered across Carmarthenshire, Pembrokeshire and Ceredigion.</p> <p>The midwifery and associated health support worker roles are defined by Birthrate Plus and these form the foundations of the workforce establishments. The workforce establishments are reviewed by the service weekly, the review confirms that the Birthrate Plus report has been implemented in its entirety and that staffing (both midwifery and support worker roles) align to the requirements as set out in the Birthrate Plus report for Glangwili Hospital and Withybush Hospital.</p> <p>For Community Midwifery across HDUHB there is 0.8 WTE midwifery vacancy which is due to be advertised shortly. There is an additional 0.8 WTE fixed term contract (backfill due to maternity leave) which it has been advertised but there have been no applicants, likely due to the temporary nature of the role. For Bronglais Hospital there is a shortfall of 1.21 WTE, a 1 WTE vacancy is due to be advertised imminently. Once appointed both community midwifery and Bronglais will be fully compliant with Birthrate Plus.</p> <p>Any shortfall is covered by variable rate pay to ensure that minimum staffing numbers are always achieved in line with Birthrate plus. The maternity service does not utilise external agency.</p> <p>Monitoring of the Birthrate Plus report is achieved by utilising an approved acuity tool, with a clear pathway in place for escalation utilising senior midwifery managers to support the achievement of safe staffing when acuity is escalated.</p> <p>Staff Partnership Response: Agreed.</p>													
Implement and monitoring of other professional group retention strategies	30/07/2024	Y	<p>Our Medical Retention Group continues to meet on a 6-weekly basis. The current main areas of focus are career progression and development, including the portfolio pathway (CESR) and education surrounding this.</p> <p>Future focus of the Group will include more scrutiny of the data we hold and actions and outcomes relating to the action plan.</p> <p>Our current FTE turnover rates (12m) for Medical and Dental are a reduction from 12.71% in August 2023 to 11.10% in August 2024, equating to a change of -1.61%.</p> <p>Exploration work and research continues to be reviewed to inform our AHP retention action plan, with the aim of establishing our AHP Retention Group in Autumn 2024. Our HB Retention Lead will be presenting at the National Imagine Conference in November 2024, where we will be sharing our cultural progression work and plans in relation to AHP retention.</p> <p>Staff Partnership Response: Agreed.</p>													
Implement appropriate to local circumstances the HEIW "Staff health and Wellbeing best practice guide" (incorporating nutrition and rest aspects of the staff welfare project).	30/07/2024	Y	<table border="1" data-bbox="566 562 1032 842"> <thead> <tr> <th data-bbox="566 562 795 583">Action Plan Commitments</th> <th data-bbox="795 562 1032 583">Progress Update</th> </tr> </thead> <tbody> <tr> <td data-bbox="566 583 795 625">A Communication Plan has been implemented.</td> <td data-bbox="795 583 1032 625">The Communication Plan has been implemented with a few final meetings planned for Sept/Oct</td> </tr> <tr> <td data-bbox="566 625 795 709">Work is underway in the OD Relationship Team to update the toolkits relating to the 7 themes and as this is done, the HEIW Best Practice Guide will be used as a reference resource to cross check for gaps or new evidence-based practice to incorporate.</td> <td data-bbox="795 625 1032 709">The toolkits are under review, one per month using the Guide to cross check for new evidence and gaps. The revised toolkits are published on SharePoint.</td> </tr> <tr> <td data-bbox="566 709 795 762">The Staff Psychological Wellbeing Service will use the HEIW Best Practice Guide as an ongoing resource in the development and improvement of the range of services offered.</td> <td data-bbox="795 709 1032 762">The Guide will remain a resource for service improvement</td> </tr> <tr> <td data-bbox="566 762 795 842">The establishment of a Health and Wellbeing Steering Group will provide an appropriate forum for the ongoing review of the use of the guide, as well as to collate any case studies that can be contributed to the guide as part of its development.</td> <td data-bbox="795 762 1032 842">New terms of reference for the group are being drafted pending an initial meeting and agreement of the lead.</td> </tr> </tbody> </table> <p>Staff Partnership Response: Agreed.</p>	Action Plan Commitments	Progress Update	A Communication Plan has been implemented.	The Communication Plan has been implemented with a few final meetings planned for Sept/Oct	Work is underway in the OD Relationship Team to update the toolkits relating to the 7 themes and as this is done, the HEIW Best Practice Guide will be used as a reference resource to cross check for gaps or new evidence-based practice to incorporate.	The toolkits are under review, one per month using the Guide to cross check for new evidence and gaps. The revised toolkits are published on SharePoint.	The Staff Psychological Wellbeing Service will use the HEIW Best Practice Guide as an ongoing resource in the development and improvement of the range of services offered.	The Guide will remain a resource for service improvement	The establishment of a Health and Wellbeing Steering Group will provide an appropriate forum for the ongoing review of the use of the guide, as well as to collate any case studies that can be contributed to the guide as part of its development.	New terms of reference for the group are being drafted pending an initial meeting and agreement of the lead.			
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Implement appropriate to local circumstances the HEIW Continuing Professional Development Strategy. Have the long-term goal for all staff protected time as parity with medics but set specific steps to achieving that which are realistic and achievable.	30/07/2024	Y	<p>This action is considered to be on track with good progress being made. The action plan, inclusive of progress updates against each individual action is attached for info.</p> <p>Staff Partnership Response: Agreed.</p>													