



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	29 October 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Performance Assurance & Workforce Metrics
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce and Organisation Development (OD)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Michelle James, Head of Resourcing and Utilisation

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA**

**SBAR REPORT**

Sefyllfa / Situation

A purpose of the People, Organisational Development & Culture Committee (PODCC) is to provide assurance to the Board on best practice around the Workforce and Organisational Development (OD) agenda.

This report provides assurance of delivery against national delivery framework targets. The dataset presented is accurate as of 31 August 2024 (unless stated otherwise 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 dashboard in Appendix 1 is produced bi-monthly with the full range of metrics and Key Performance Indicators (KPI's) presented on a six-monthly basis to PODCC in February and August.

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 started to increase from the beginning of 2023 where we were at 10% and is now at 17% in August 2024. Ways to increase participation are continually being explored.

- More detailed methods of reporting are being explored with the focus on maintaining anonymity.
- 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.
  - All nursing areas, excluding Unscheduled Care, Bronglais Hospital (BGH), will be required to transition into a non-agency position by the 1 November 2024.
- 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.
  - Following the refresh of data in January 2024 an action plan will be developed to drive compliance.
- Percentage of sickness absence rate of staff:
  - The rolling rate has consistently been above the Health Board target of 4.79%. In August 2024 it stands at 6.60%.
  - Whilst there was a significant spike in July's in month absence rate, August is the lowest seen in the last 12 months at 6.13%.
  - Anxiety, stress and depression continues to account for the highest reasons for absence across the majority of our directorates.
- 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.
- 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 two staff groups that are below the 85% target: Estates and Ancillary (77.5%) and Medical and Dental (49.3%). These rates continue to steadily increase.
- 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 rising month on month, currently sitting at 82.4%.

- Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job:
  - Whilst the rate steadily increased from 63.5% in April 2023 to 71.3% February 2024, we have subsequently seen a fluctuation from March to August between 65.9% and 70.8%.
- 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 and Consultants/SAS doctors with an up-to-date job plan (reviewed with the last 12 months). Percentage of compliance for staff appointed into new roles where a child barred list check is required:
  - Continued progress and clear improvements are seen.
- Percentage of compliance for staff appointed into new roles where an adult or child barred list check is required:
  - The last 12 months have constantly stayed at 100%.

We have included statistical process chart (SPC) in relation to staff engagement, agency spend as a percentage of total pay bill, percentage sickness absence rate and the percentage of staff who have had an appraisal in the last 12 months.

The targets are presented in a format which will allow PODCC to assess the alignment between the key performance indicator and the intentions as set out in the 10-year Workforce, Organisational Development & Education Strategy.

### Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to:

- NOTE the content of the report.
- RECEIVE 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 Hywel Dda University Health Board (the Health Board) is recognised as a leader in this field.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	3. Effective
Galluogywyr Ansawdd:	3. Data to knowledge

Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	
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	
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
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.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Not Applicable

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Not Applicable
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Performance reported in a number of the key performance indicators will have an impact on the quality of patient care.
<b>Gweithlu: Workforce:</b>	All metrics and performance indicators contained in the report have direct relevance to the workforce agenda

<b>Risg: Risk:</b>	Not Applicable
<b>Cyfreithiol: Legal:</b>	Not Applicable
<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	All data presented is anonymous
<b>Cydraddoldeb: Equality:</b>	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.**



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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.A.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 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%
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%

### Engagement Score by Staff Group

Role	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24
Administrative and Clerical	75%	76%	76%	74%	77%	75%	69%	75%	72%	73%	70%	76%
Allied Health Professionals	72%	77%	77%	78%	69%	75%	69%	76%	70%	78%	71%	70%
Estates, Facilities & Support Services						79%				73%	81%	
Healthcare Scientists										67%	46%	83%
Medical and Dental	66%	73%	73%	69%	73%		60%	78%	58%	59%	72%	67%
Nursing and Midwifery	75%	71%	71%	70%	72%	75%	72%	77%	72%	67%	75%	72%
Other Clinical Services	76%	83%	83%	70%				83%	70%		64%	66%
Other Scientific and Technical										77%		
Other				62%							71%	

**Note -**

Any area with less than 5 responses will not be reported on so as not to identify anyone and respect confidentiality

#### Current Performance

We saw a dip in March 2024 engagement score to 70% the lowest figure reported since the inception of the Board Outcome Survey, whilst this rose in April back to 75% it has remained low in the following months to date.

#### Performance Against Trend

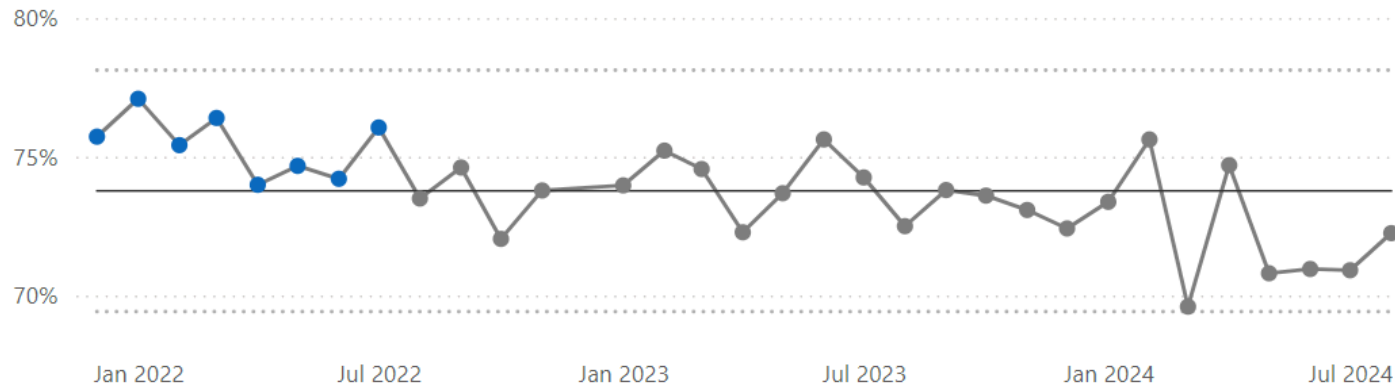
The response rate has started to increase steadily from 10% seen in February 2024 back to 17% in August.

#### Future Positive Actions

The Board Outcome Survey is being rebranded and relaunched in summer 2024 with the aim being to increase participation.

# SPC taken from IPAR system measures.

Our overall score for staff engagement (Hywel Dda survey)



This indicator is showing expected (common cause) variation.  
 Expected performance is between 69.4% and 78.1%

**Key**

- Upper and lower limits
- Mean
- - - Target
- ◆ Ambition

**Variation - how are we doing over time**

- ◆ Improving variation
- Usual variation
- Concerning variation

**Assurance - performance against target**

- ▣ Always hitting target
- ▣ Hit and miss target
- ▣ Always missing target

**Trajectory - performance against our ambition**

- ◆ Trajectory met
- ◆ Within 5% of trajectory
- ◆ More than 5% off trajectory

Latest period	National target	Target aim	Latest actual	Variation	Assurance	Trajectory
Aug 2024		Higher	72.25%	●	N/a	

NHS delivery framework target: 1.A.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: Head of Resourcing & Utilisation

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

The current performance highlights the use of 25 agency workers currently in place (as of 19th Sept 2024). This has reduced significantly in comparison to 12 months ago.

Allied Health Professionals and Health Sciences

The current performance highlights the use of 25 Allied Healthcare and Health Sciences agency workers currently in place (as of 19th Sept 2024). This has reduced significantly in comparison to 12 months ago.

Nursing

As of August 24, agency use was 163.47 WTE. This continues the trend of reducing nursing agency use in line with the Nursing Stabilisation Plans.

Performance Against Trend

Agency spend has remained below 5% of the total pay bill since November 2023. Historically, January, February, and March are the highest months for variable pay usage. This trend is likely to continue into 2025, however, will be at a lower rate. Agency use continues to reduce across all staffing groups. Risks remain in the use of additional hours, overtime, and bank staff, including bank locums for medical staff.

Future Positive Actions

Medical

There is currently an open programme of work to reduce medical agency use to zero by the 1st November 2024. The support provided to the services includes Quality Impact Assessments and Exit Plans to support individual help services to become less reliant on agency usage. Any areas that require agency use after the 1st of November 2024 will require a step-down plan, with key dates and actions to eliminate agency use.

Allied Health Professionals and Health Sciences

There is currently an open programme of work to reduce agency use to zero by the 1st November 2024. The support provided to the services includes Quality Impact Assessments and Exit Plans to support help services to eliminate agency usage. Any areas that require agency use after the 1st November 2024 will require need a step-down plan, with key dates and actions to eliminate agency use.

Nursing

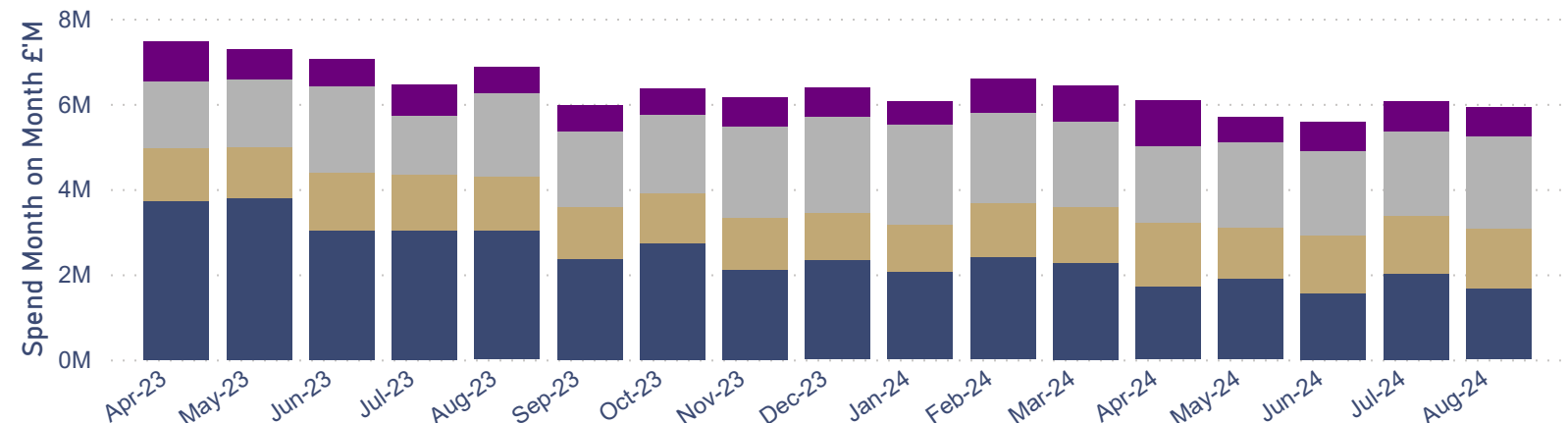
All nursing areas, excluding Unscheduled Care, Bronllais General Hospital (BGH), will be required to transition into a non-agency position by the 1st November 2024. Services have been contacted with stabilisation plans which include Internationally Educated Nurses, Central Recruitment, and Newly Registered Nurses. It is anticipated that Unscheduled Care, BGH, will go live in the first quarter of 2025, given that their stabilisation programme runs until the end of March 2025.

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

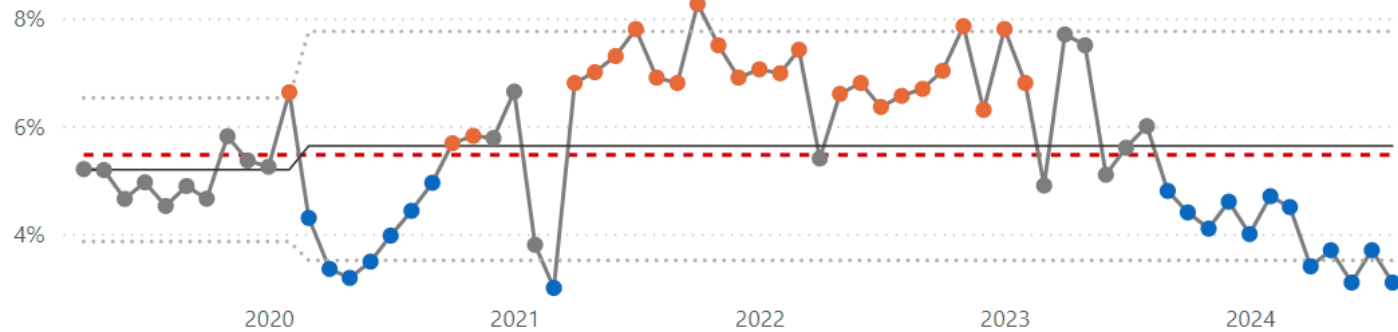
Month Name	2022/2023	2023/2024	2024/2025
April	6.46%	7.82%	3.40%
May	6.12%	7.62%	3.78%
June	6.94%	5.09%	3.08%
July	5.62%	5.62%	3.94%
August	6.46%	6.05%	3.29%
September	6.52%	4.81%	
October	6.94%	5.25%	
November	9.27%	4.19%	
December	6.23%	4.64%	
January	7.83%	4.04%	
February	6.89%	4.71%	
March	5.17%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

Variable Pay Month on Month

● Agency ● Bank ● Locum ● Overtime



Agency spend as a % total pay bill



The latest data is showing improvement. However, improvement actions need to be identified and successfully embedded for the target to be consistently met.

Expected performance is between 3.5% and 7.8%

**Key**

- Upper and lower limits
- Mean
- - - Target
- ◆ Ambition

**Variation - how are we doing over time**

- Improving variation
- Usual variation
- Concerning variation

**Assurance - performance against target**

- ▣ Always hitting target
- ▣ Hit and miss target
- ▣ Always missing target

**Trajectory - performance against our ambition**

- ◆ Trajectory met
- ◆ Within 5% of trajectory
- ◆ More than 5% off trajectory

Latest period	National target	Target aim	Latest actual	Variation	Assurance	Trajectory
Aug 2024	5.47%	Lower	3.10%	●	▣	

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: Director of Workforce & Organisational Development/Interim CEO. 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



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Plan	Education Commissioning	Status
2020/21	Out turn c2023	
2021/22	Out turn c2024	
2022/23	Out turn c2025	
2023/24	Out turn c2026	
2024/25	Out turn c2027	
2025/26	Out turn c2028	

Key	
	Output known
	Completed
	In Progress

### Current Performance

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

We are planning to commence the 2025/26 round of education commissioning for out turn of students in 2028.

To note we have yet to have details of the HEIW Dashboard as noted in last submission. In addition, we are aware that the education commissioning process may go “Online” via HEIW this year. We are working to understand the implications of this for our approach and to ensure a robust governance process.

### 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.

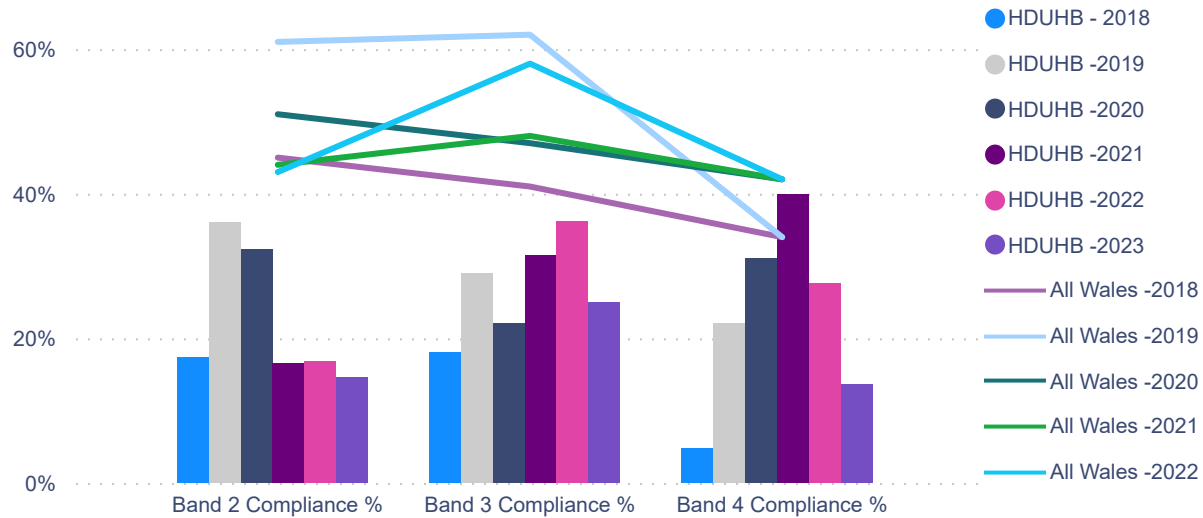
To note alternative workforce roles noted under APP, PA and CAAP have nominal figures included until a defined “future establishment” can be defined that includes a fuller model for development and expansion in the workforce.

### 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.

**NHS delivery framework target: 3.B: Deliver requirements of regulators – b) Submit data in relation to HCSW framework on annual basis and related requirements for funding.** Strategic Delivery Lead: Assistant Director of People Development  
 Operational Delivery Lead : Learning & Development Manager  
 This target aligns to the following statement of intent:  
 2 - Recruiting and Retaining Great People , 4 - Delivering a Workforce Fit for the Future

**Career Framework Data**



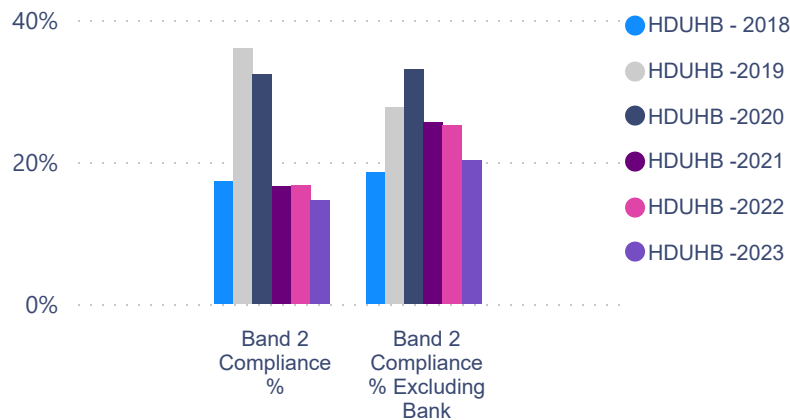
*January - December 2023*

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

Profession	% Level 2	% Level 3	% Level 4
Bank / Temporary Staff (on Bank only contracts)	6.0%	17.6%	11.8%
Dietetics			7.7%
Maternity	13.8%	33.3%	0.0%
Nursing Adult	20.1%	26.4%	17.1%
Nursing Child	25.9%	20.0%	50.0%
Nursing Community	29.1%	33.0%	27.3%
Nursing Learning Disability		23.1%	0.0%
Nursing Mental Health	16.3%	31.6%	8.6%
Occupational Therapy		0.0%	4.7%
Operating Theatres	26.2%	25.7%	60.0%
Physiotherapy	0.0%	13.7%	0.0%
Radiology	0.0%	9.4%	0.0%
Speech and Language service		0.0%	4.3%

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

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



**Current Performance**

HDdUHB annual performance fluctuates considerably with greater cleansing of data through ESR.  
  
 As at December 2022 all Wales data 43% of HCSW across Wales hold at least a level 2 qualification.

**Future Positive Actions**

The Strategic People Planning and Education Group (SPPEG) will have oversight of the data relating to the AWCF and oversee improvement. Following refresh of the data in January 2024, a deep-dive will be carried out, along with an action plan to drive compliance.  
 The deep-dive has been included on the agenda for SPPEG November 2024 meeting; due to August cancellation which will outline challenges, risks and include an action plan to drive improvement of the data.

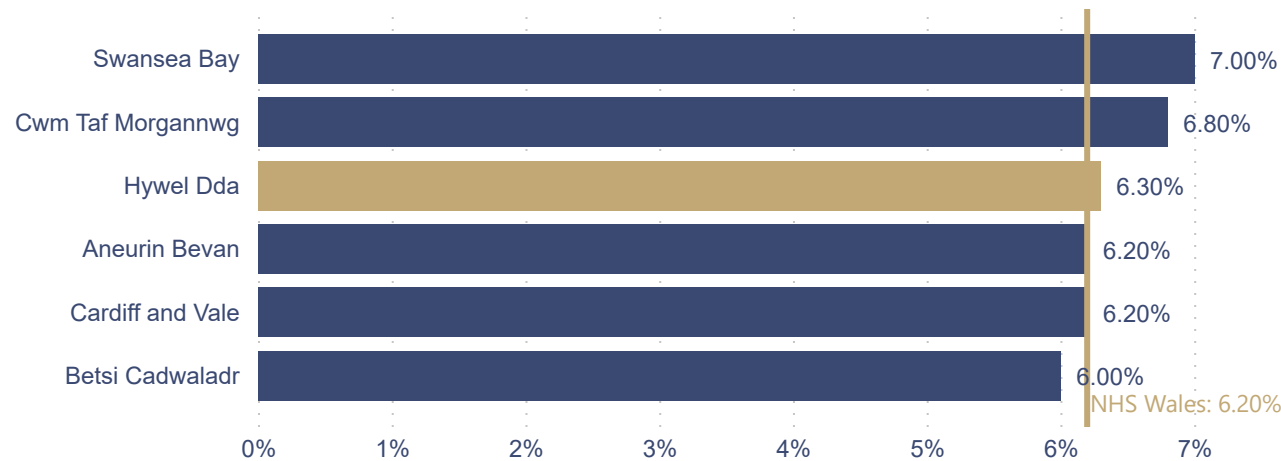
**Performance Against Trend**

HDdUHB data is significantly lower than the 'All Wales' comparison. The December 2023 data shows a decline in performance, matching the decline in non-registered workforce accessing qualifications due to challenges around backfill and recognising financial constraints on services.

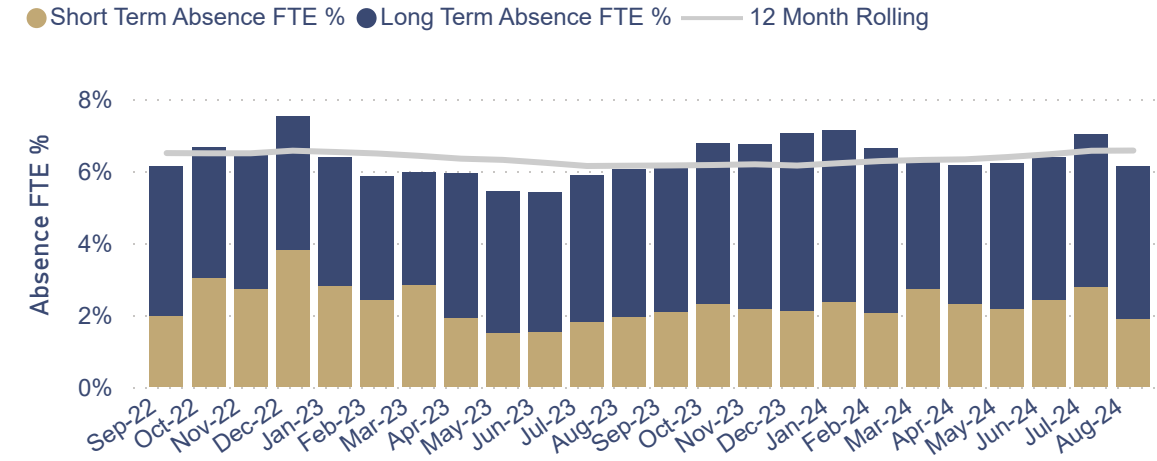
**Headcount**

Profession	Headcount B2	Number at L2	Headcount B3	Number at L3	Headcount B4	Number at L4
Bank / Temporary Staff (on Bank only contracts)	810	49	108	19	17	2
Dietetics	0		0		13	1
Maternity	65	9	6	2	1	
Nursing Adult	938	189	284	75	111	19
Nursing Child	27	7	10	2	20	10
Nursing Community	55	16	185	61	33	9
Nursing Learning Disability	0		39	9	19	
Nursing Mental Health	80	13	133	42	35	3
Occupational Therapy	0		2		43	2
Operating Theatres	42	11	35	9	10	6
Physiotherapy	2		51	7	43	
Radiology	1		64	6	20	
Speech and Language service	0		4		23	1
<b>Total</b>	<b>2020</b>	<b>294</b>	<b>921</b>	<b>232</b>	<b>388</b>	<b>53</b>

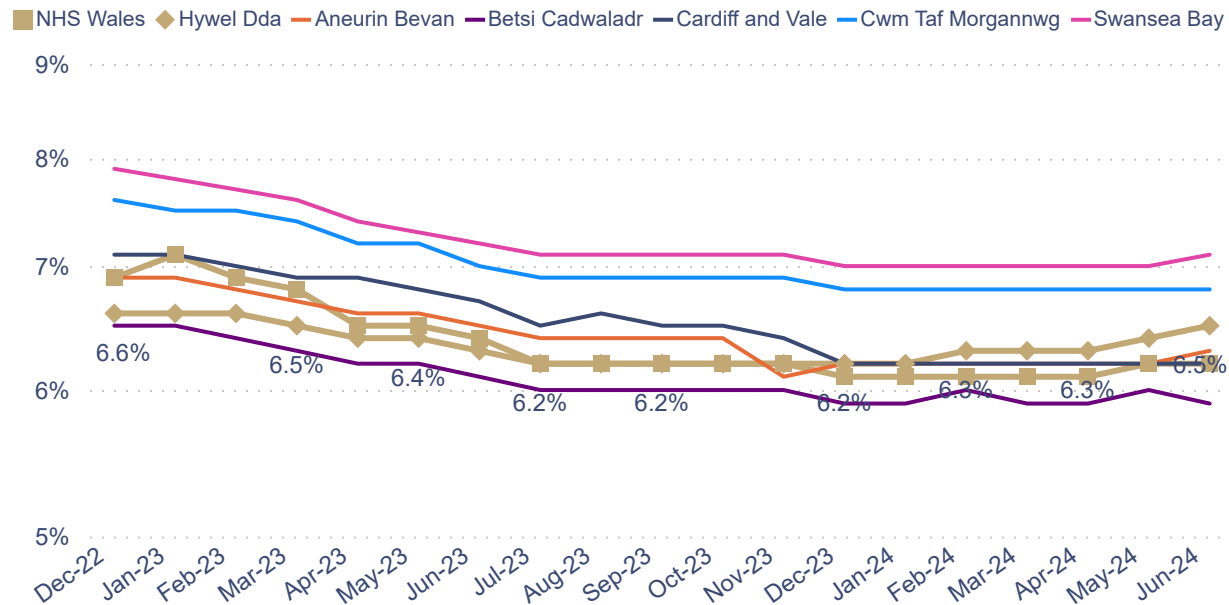
### 12 month rolling sickness absence rates (UHBs only) to June 2024



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



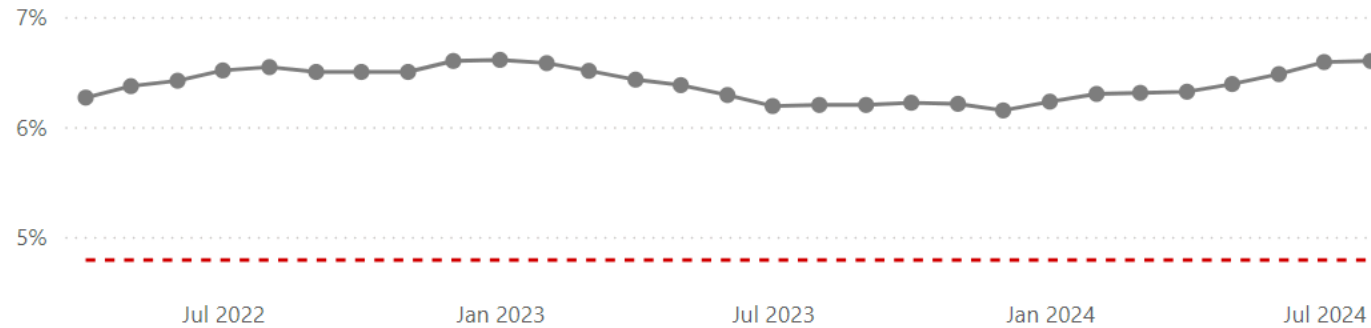
### Rolling 12-month sickness absence rates, Dec'22 to Jun'24



<p><b>Performance Against Trend</b></p> <p>Some significant progress has been made in the time taken by services to enter sickness absence. Delays here impact the ability of W&amp;OD colleagues to provide positive interventions at an early stage.</p>	<p><b>Future Positive Actions</b></p> <ul style="list-style-type: none"> <li>Sickness audits for Estates &amp; Facilities have been completed. A review has subsequently been undertaken by the Workforce Team of the effectiveness of sickness audits on reducing sickness absence. A decision has been taken to pause further audits (unless part of targeted activity) so that resource can be diverted to front line support for managers in managing long term sickness.</li> <li>Guidance being developed for early mental health check-ins by managers and using stress risk assessments in a more preventative way i.e. before the individual goes off on sick.</li> <li>Reviewing sickness absence training to ensure it remains fit for purpose. Training will focus on reasonable adjustments and tailored adjustments. Passport for reasonable adjustments to be rolled out.</li> <li>Temporary redeployment guidance being developed and system put in place to support staff before they become too unwell to undertake their current role but would remain fit to do other work</li> <li>Return to Work Interview Form: applied the 'HR Disrupted' approach as part of encouraging better uptake/completion rates by managers due to the positive impact such interviews can have on reducing absence levels. New shortened form now available for use via Sharepoint.</li> <li>Bitesize Training Sessions being developed which will each focus on just one element of the absence management process. The first one is a 5 minute session on how to conduct effective Return to Work Interviews.</li> </ul>
<p><b>Current Performance</b></p> <p>We continue to see higher levels of absence than seen prior to the pandemic even though some services have made significant improvements in their absence rates over the past 12 months. Anxiety, stress and depression continues to account for the highest reasons for absence across the majority of our directorates.</p>	

# SPC taken from IPAR system measures.

% sickness absence rate of staff



National target 12m reduction. Live data subject to change.

Performance for August 2024 was 6.60%

**Key**

- Upper and lower limits
- Mean
- - Target
- ◆ Ambition

**Variation - how are we doing over time**

- Improving variation
- Usual variation
- Concerning variation

**Assurance - performance against target**

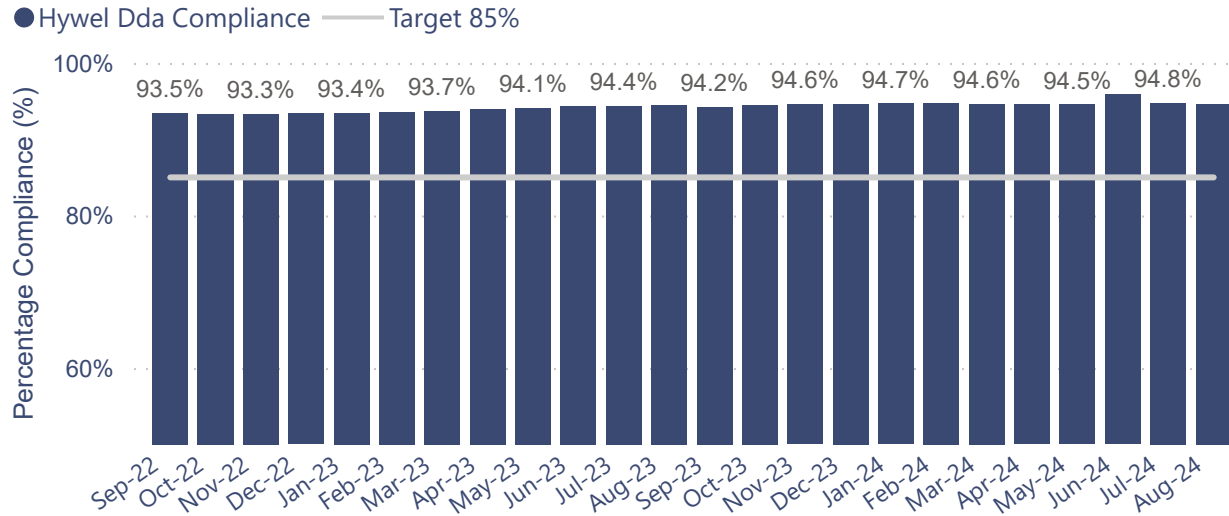
- ▣ Always hitting target
- ▣ Hit and miss target
- ▣ Always missing target

**Trajectory - performance against our ambition**

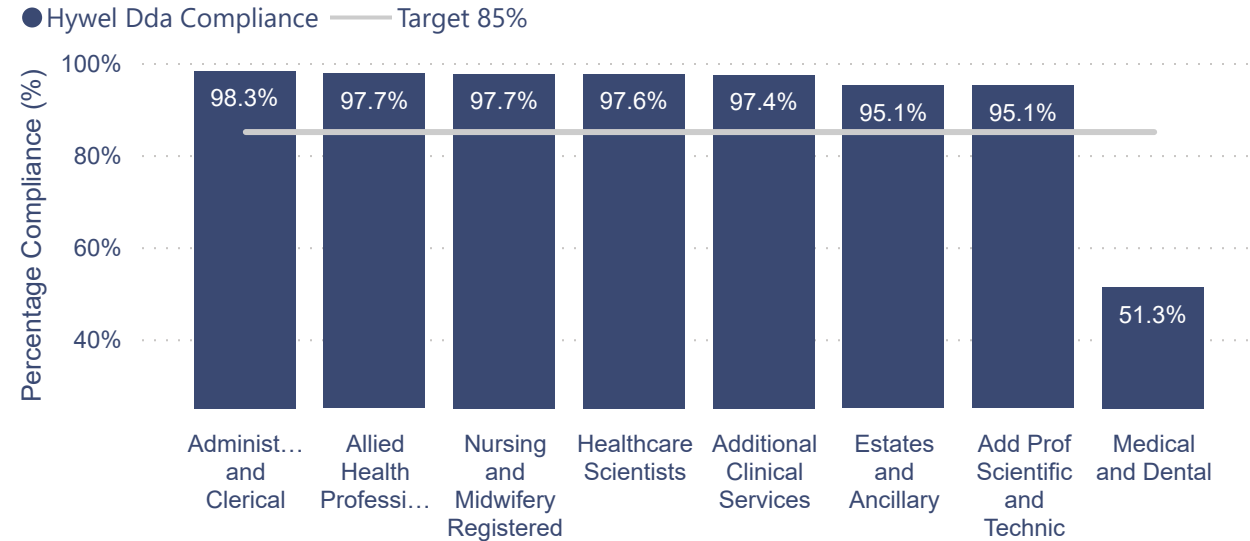
- ◆ Trajectory met
- ◆ Within 5% of trajectory
- ◆ More than 5% off trajectory

Latest period	National target	Target aim	Latest actual	Variation	Assurance	Trajectory
Aug 2024	4.79%	Lower	6.60%	N/a	N/a	

### 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

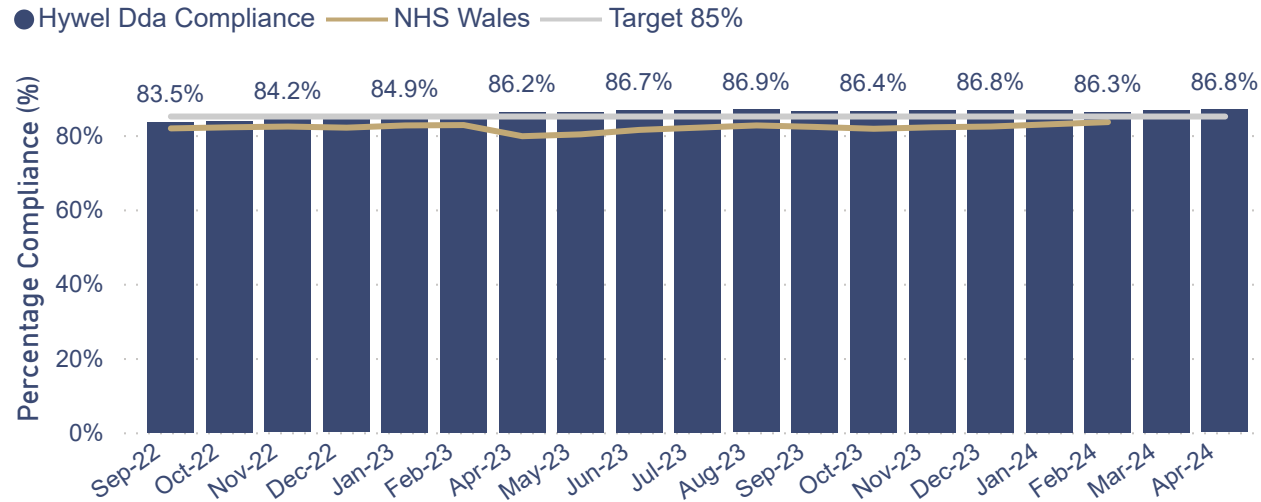
West Wales Care Partnership with Hywel Dda and other partners have developed a draft Dementia L&D framework to support new training for the Good Work framework, however the Framework is in draft and is yet to be published.

#### Future Positive Actions

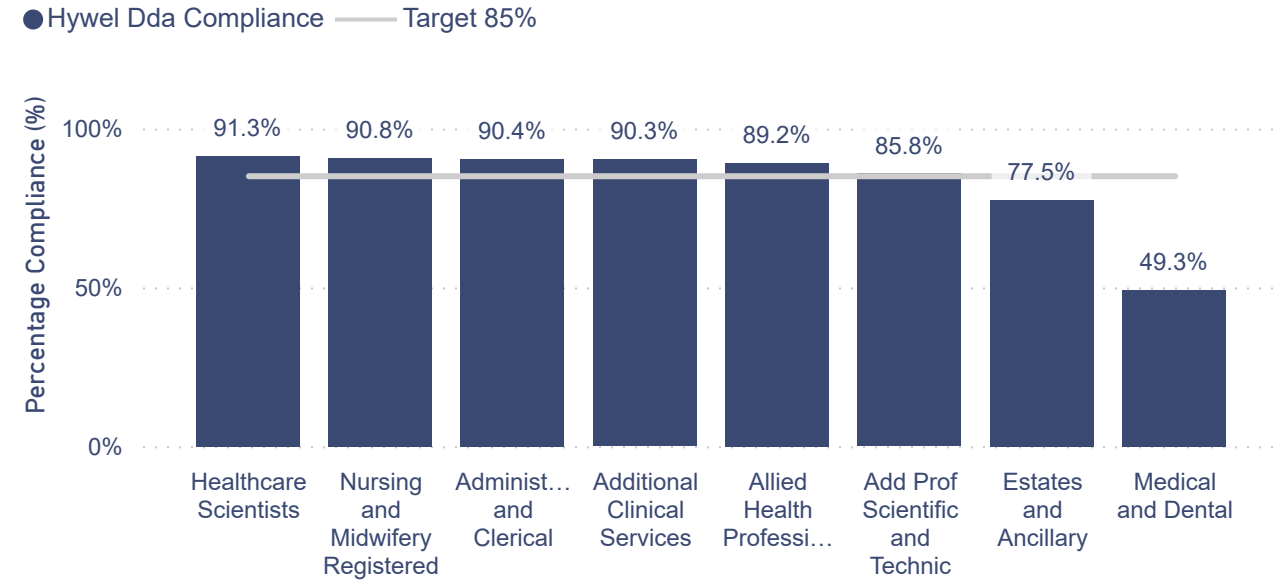
A new Hywel Dda working group has been set up to review the training recommendations and resources in the draft Dementia L&D framework. They have begun to identify if any new training resources should be delivered to target groups and also explore options for suitable Agored module units meet the framework.

The Strategic People Planning and Education Group (SPPEG) is monitoring compliance towards Dementia awareness with actions being driven through this group. This is standing agenda item.

### 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

The Health Board has increased performance above benchmark.

#### Performance Against Trend

The Health Board continues to remain above the NHS Wales average and 85% compliance requirements.

#### Future Positive Actions

We continue to work with Medical and Dental to improve performance in this area.

The Mandatory training group has been re-established meeting bi-monthly which will feed into the Strategic People Planning and Education Group (SPPEG). As a standing agenda item all professions who fall below benchmark will be supported through an action plan.

SPPEG is monitoring compliance towards CSTF with actions

NHS delivery framework target: 5.A.i - Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job & Percentage of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (exc Drs and Dentists in training)

Operational Delivery Lead: Head of Culture and Workforce Experience

This target aligns to the following statement of intent:

2 - Recruiting and Retaining Great People, 3 - Engaging our Staff, 4 - Delivering a Workforce Fit for the Future, 5 - Enabling Our People to Release Their Potential & 6 - Developing High Performing Teams



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

Mar-24  
64.2%

Apr-24  
68.2%

May-24  
65.9%

Jun-24  
70.1%

Jul-24  
70.8%

Aug-24  
70.7%

**Current Performance**

PADR rates continue to be maintained during extreme pressure in the system. Hywel Dda is the second top performing health board across Wales for PADR.

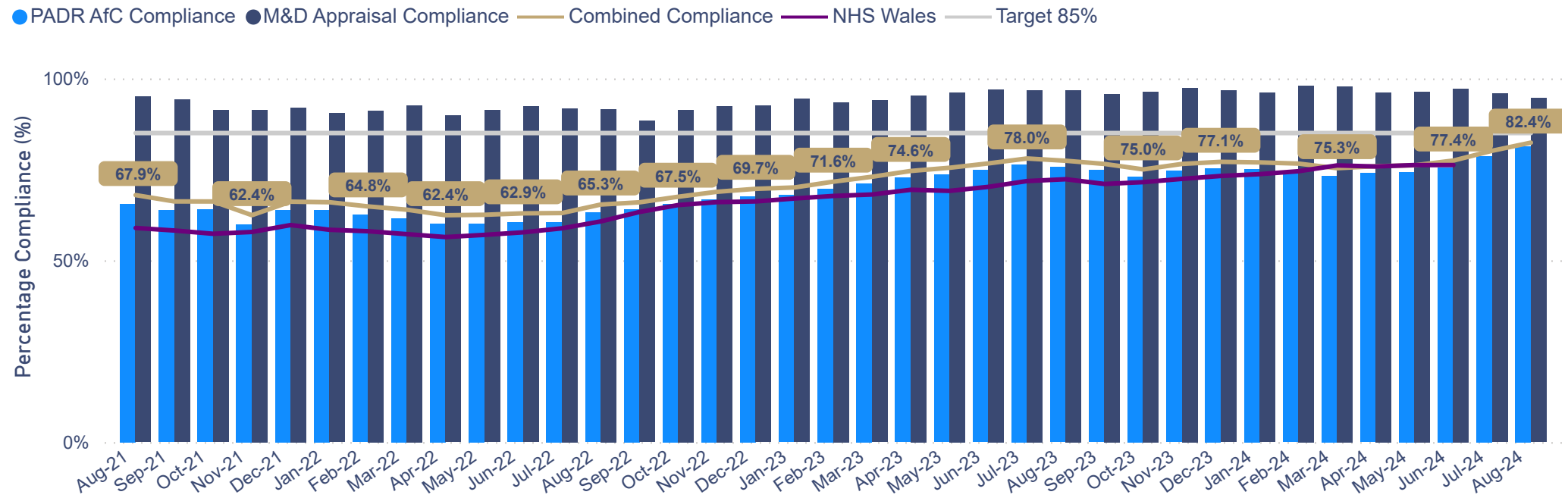
**Performance Against Trend**

There is a continued development for both employees and leaders in establishing an employee led performance culture.

**Future Positive Actions**

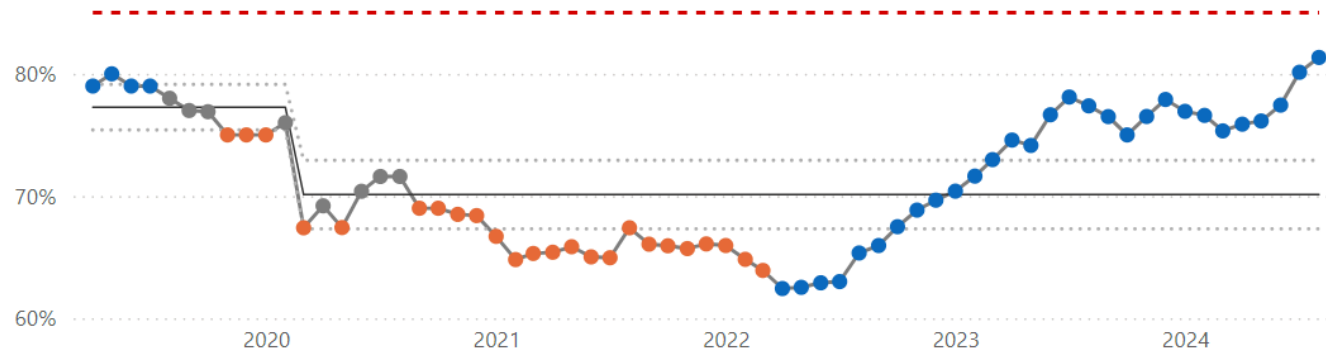
These development sessions will increase in the next few months due to vacancies within the team being filled.

PADR Compliance to NHS Wales Performance and Target of 85%



# SPC taken from IPAR system measures.

% staff who have had an appraisal in the previous 12 months



The latest data is showing improvement. However, improvement actions need to be identified and successfully embedded for the target to be met.

Expected performance is between 67.3% and 72.9%

**Key**

- Upper and lower limits
- Mean
- - - Target
- ◆ Ambition

**Variation - how are we doing over time**

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- Concerning variation

**Assurance - performance against target**

- ▣ Always hitting target
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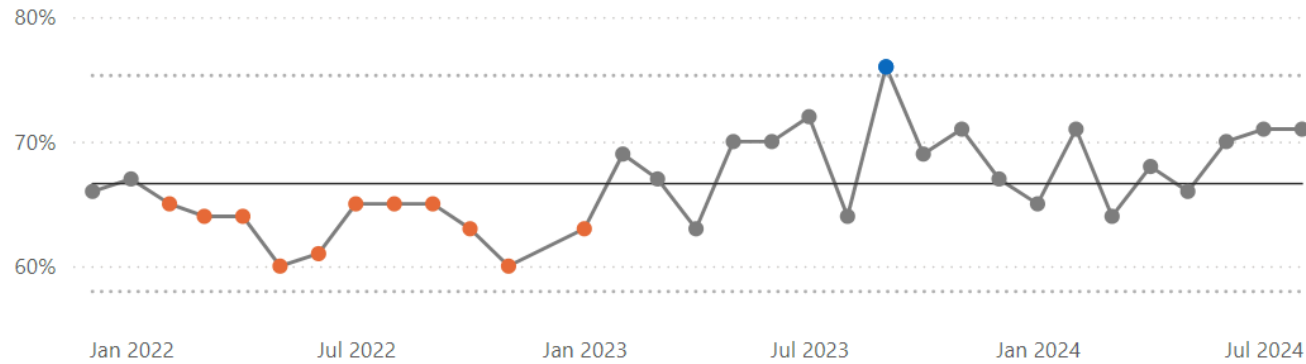
**Trajectory - performance against our ambition**

- ◆ Trajectory met
- ◆ Within 5% of trajectory
- ◆ More than 5% off trajectory

Latest period	National target	Target aim	Latest actual	Variation	Assurance	Trajectory
Aug 2024	85.00%	Higher	81.34%	●		

# SPC taken from IPAR system measures.

I have had a PADR in the last 12 months that has supported my development and provided me with clear objectives aligned to team and organisation goals



This indicator is showing expected (common cause) variation.

Expected performance is between 58.0% and 75.3%

**Key**

- Upper and lower limits
- Mean
- - - Target
- ◆ Ambition

**Variation - how are we doing over time**

- ◆ Improving variation
- Usual variation
- Concerning variation

**Assurance - performance against target**

- ▣ Always hitting target
- ▣ Hit and miss target
- ▣ Always missing target

**Trajectory - performance against our ambition**

- ◆ Trajectory met
- ◆ Within 5% of trajectory
- ◆ More than 5% off trajectory

Latest period	National target	Target aim	Latest actual	Variation	Assurance	Trajectory
Aug 2024		Higher	71.00%	●	N/a	

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

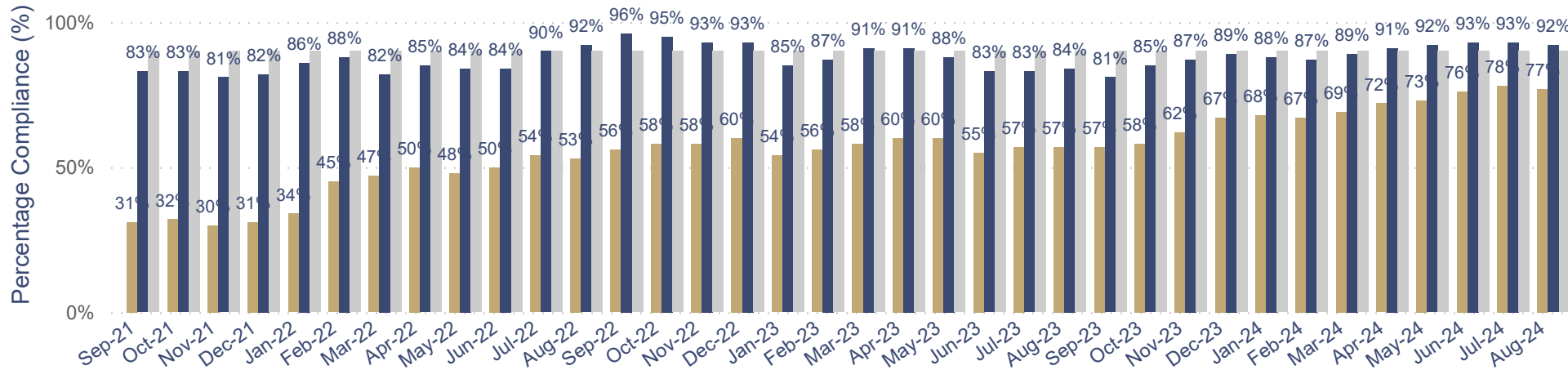
This target aligns to the following statement of intent:

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

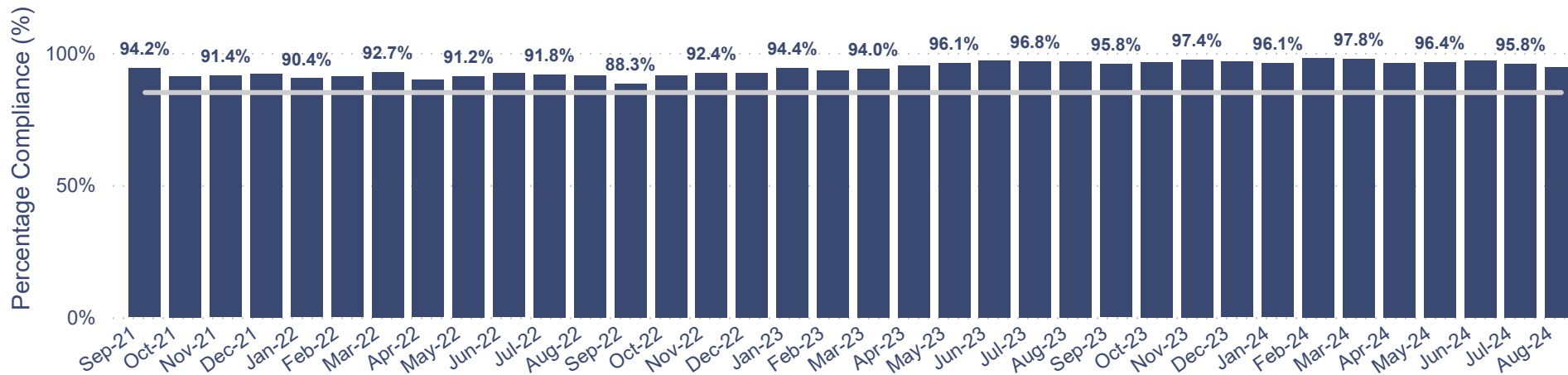


**Current Performance**  
 ▲  
 The Health Board continue to promote the sign off of job plans, the decrease in compliance was due to a number of job plans expiring and new doctors being added to the system.

**Performance Against Trend**  
 ▼  
 Continuing to make progress, clear improvement on previous years.

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

● M&D Appraisal Compliance — Target 85%



**Future Positive Actions**  
 ▼  
 We have processes in place for chasing up all doctors awaiting sign off and escalation letter where the chasers fail. We continue to deliver training and provide guidance to new Service Delivery Managers(SDM) for using the Allocate system. We work with the SDM's to highlight priority work needed month on month. Escalation meetings to be organised for Services below target.

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: Head of Resourcing & Utilisation

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

Monthly reporting confirms risk assessment undertaken for an Apprentice to start prior to DBS being returned. This was to ensure Apprentices could start on employment and educational pathway. Low risk as supervised.

### Performance Against Trend

July 23 a small dip in compliance from 100% to 99.2% as one employee commencing prior to their DBS being completed; a risk assessment was completed after starting. A DBS has now been received which contained no information.

### Future Positive Actions

Continue to perform at a high standard.

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.

### DBS Checks Processed

Axis	Adult Barred Lists	Child Barred Lists	New Starters - Overseas	% Compliance
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%
May-23	153	146	3	100.0%
Jun-23	103	102	3	100.0%
Jul-23	120	120	3	99.2%
Aug-23	119	115	7	100.0%
Sep-23	170	171	5	100.0%
Oct-23	207	200	6	100.0%
Nov-23	180	174	6	100.0%
Dec-23	111	107	10	100.0%
Jan-24	147	144	6	100.0%
Feb-24	121	118	7	100.0%
Mar-24	103	100	11	100.0%
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%