

**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	Page Number
Overall staff engagement score – scale score method	Head of Culture and Workforce Experience	2
Agency spend as a % of total pay bill	Senior Workforce Manager – Workforce Efficiency	3
Variable pay (Agency, Locum, Bank & Overtime: monthly position)	Senior Workforce Manager – Workforce Efficiency	3
HEIW Planning Objective 3.B: Deliver requirements of regulators – a) Submit Education and Commissioning template to HEIW aligned to IMTP submission on an annual basis	Head of Strategic Workforce Planning and Transformation	4
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Percentage of sickness absence rate of staff	Head of Workforce	6
Qualitative report providing evidence of provided learning and development in line with the Good Work – Dementia Learning and Development Framework	Learning & Development Manager	7
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Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation.	Learning & Development Manager	8
Percentage of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (exc Drs and Dentists in training)	Head of Culture and Workforce Experience	9
Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job	Head of Culture and Workforce Experience	9
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**KEY: 8 Statements of Intent Contained within the 10 Year Workforce, Organisational Development(OD) and Education Strategy**

- 1 - Delivering Collective and Compassionate Leadership
- 2 - Recruiting and Retaining Great People
- 3 - Engaging our Staff
- 4 - Delivering a Workforce Fit for the Future
- 5 - Enabling Our People to Release Their Potential
- 6 - Developing High Performing Teams
- 7 - Delivering Innovation, System Learning and Change Agility
- 8 - Developing Workforce Efficiency and Effectiveness

Staff Engagement Score Year on Year

Year Of Survey	Sent to	Number Completed	Response Rate	Engagement Score
2016 NHS Wales Staff Survey	4535	1550	34%	74%
2018 NHS Wales Staff Survey	9484	2401	25%	77%
2020 NHS Wales Staff Survey	10533	1759	17%	76%
2021 Sample in December	1171	266	23%	76%
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2022 Sample in June	1163	216	19%	74%
2022 Sample in July	1169	184	16%	76%
2022 Sample in August	1170	199	17%	73%

Engagement Score by Staff Group

Role	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22
Administrative and Clerical	80%	77%	77%	79%	75%	74%	79%	80%	77%
Allied Health Professionals	79%	78%	78%	79%	71%	78%	72%	74%	73%
Estates, Facilities & Support Services	73%	71%	71%	79%	76%				65%
Healthcare Scientists	78%			75%	72%	65%	75%		78%
Medical and Dental	73%	74%	74%	58%	71%	76%	71%	78%	71%
None of these	80%	77%	77%	81%	84%	75%	87%	76%	69%
Nursing and Midwifery	70%	78%	78%	75%	73%	73%	69%	74%	71%
Other Clinical Services	74%	82%	82%	77%		82%			86%
Other Scientific and Technical	82%			81%	89%	77%			80%
Bank/Agency									57%

Note -  
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Current Performance

The Staff Engagement score of 73% in August is lower than previous Hywel Dda\NHS Wales surveys

Performance Against Trend

The response rates for June, July and August have dropped compared to previous months, with August's response rate standing at 17% which equals the 2020 NHS Wales Staff Survey.

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We are looking at various new methods to capture and report staff views in easy and accessible ways. This survey will continue to be sent to a random sample of employees every month to keep an ongoing measure of staff experience.

In Dec 2022 we will be reviewing the first years results and focusing on new ways to to reach areas with relatively low response rates as well as looking to provide performance data beyond the directorate level currently being reported.

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Operational Delivery Lead: Senior Workforce Manager – Workforce Efficiency

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### Current Performance

The Health Board are not meeting the 12 month reduction trend for agency spend as percentage of the total pay bill.

### Performance Against Trend

2022/23 agency spend as a percentage of the total pay bill has reduced compared to the same period in 2012/22.

Agency spend as a percentage of the total pay bill during the period April to August 2022 ranged between 6.12% and 6.94%. During the same period in 2021/22, agency spend ranged between 6.84% and 7.95%.

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A workforce efficiency plan has been developed, identifying a number of Health Boardwide schemes that could deliver results in workforce efficiency and effectiveness.

A number of these schemes relate specifically to agency spend for medical, AHP / HSS and nursing staff groups.

Each scheme has been assessed and 12 schemes which have the potential for a high financial return have been identified as priorities for 22/23.

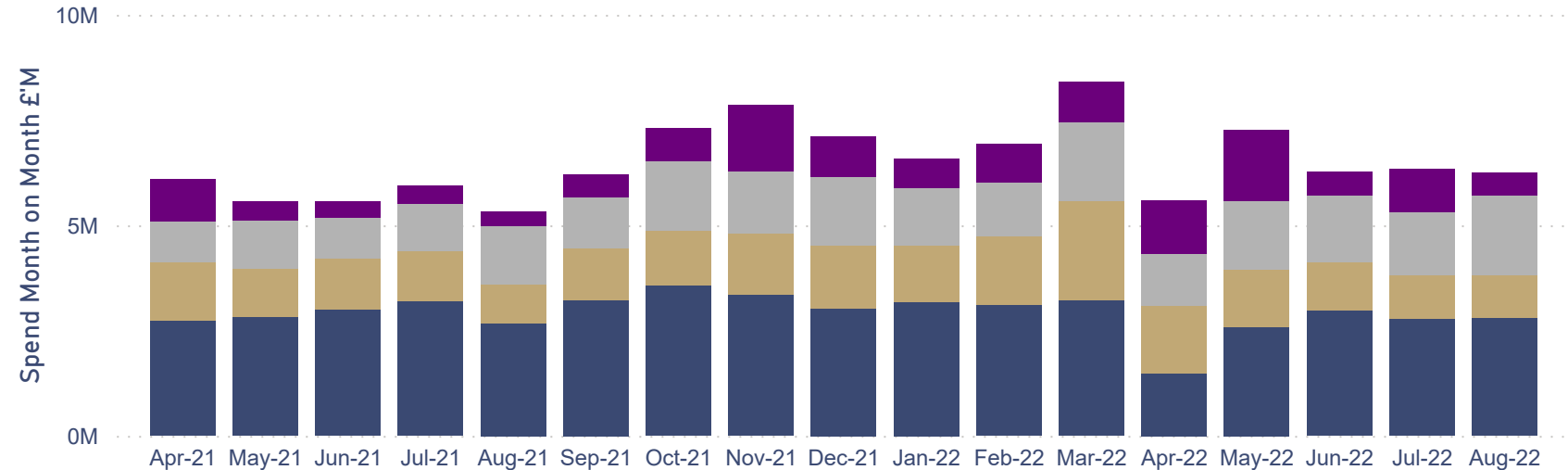
Work has started to map efficiencies / opportunities for each scheme

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

Month Name	2020/2021	2021/2022	2022/2023
April	3.36%	6.84%	6.46%
May	3.19%	7.04%	6.12%
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October	5.84%	8.33%	
November	6.23%	7.77%	
December	6.07%	7.18%	
January	6.92%	7.15%	
February	3.98%	7.08%	
March	3.12%	5.13%	

### Variable Pay Month on Month

● Sum of Agency ● Sum of Bank ● Sum of Locum ● Sum of 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: Director of Workforce & Organisational Development.

Operational Delivery Lead: Head of Strategic Workforce Planning and Transformation

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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#### Current Performance

Submitted in January 2021 by the HEIW deadline

#### Performance Against Trend

Two ongoing queries to resolve over longer term Physician Associates and WAST Advanced Paramedic Practitioners Pipeline discussions.

#### Future Positive Actions

▲  
Process: Lessons learnt activity from 2022/23 commissioning to be undertaken and recommendations implemented for next year. An outcomes based Workforce Interventions Performance Dashboard will be developed to align to this work to track the whole pathway from education & commissioning requirements to placement capacity and recruitment streamlining on an annual basis. Plans developing to create and inform for IMTP/E&C cycle 2022/23 to cover 2023-2026.



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



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Performance Against Trend

HDUHB data significantly lower than the “All Wales comparison”, this is attributed to data reporting issues in previous years and also lack of structure to collect and record data.

We are still awaiting 2020 All Wales data.



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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: Deputy Director of Workforce & Organisational Development Operational Delivery Lead: : Head of Workforce

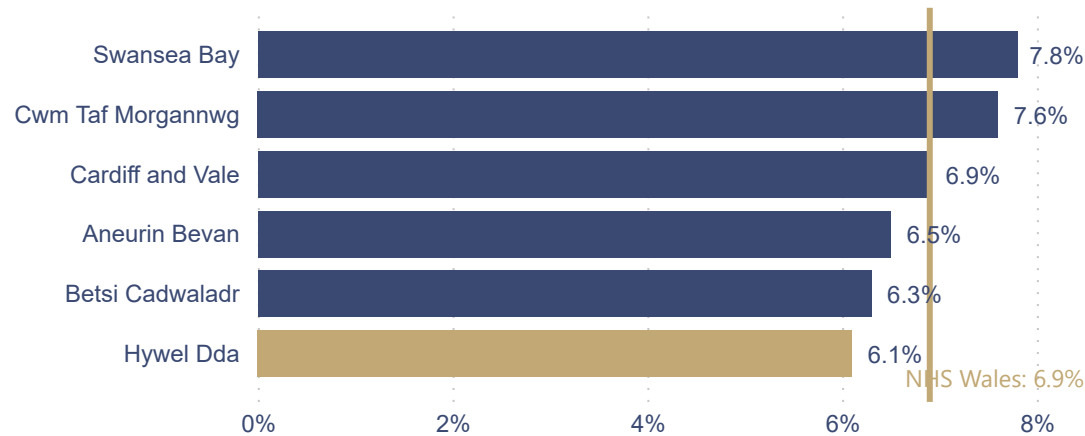
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3 - Engaging our Staff



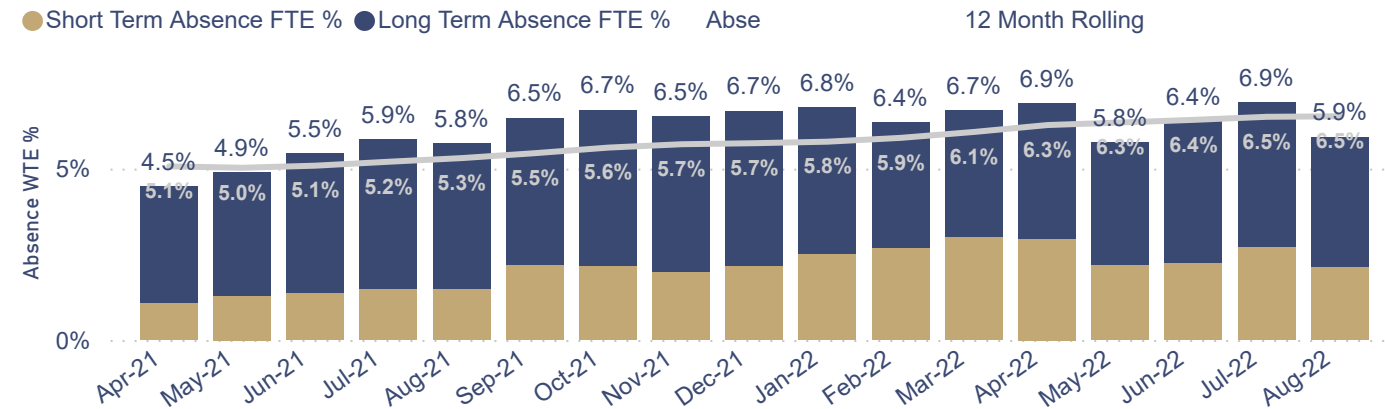
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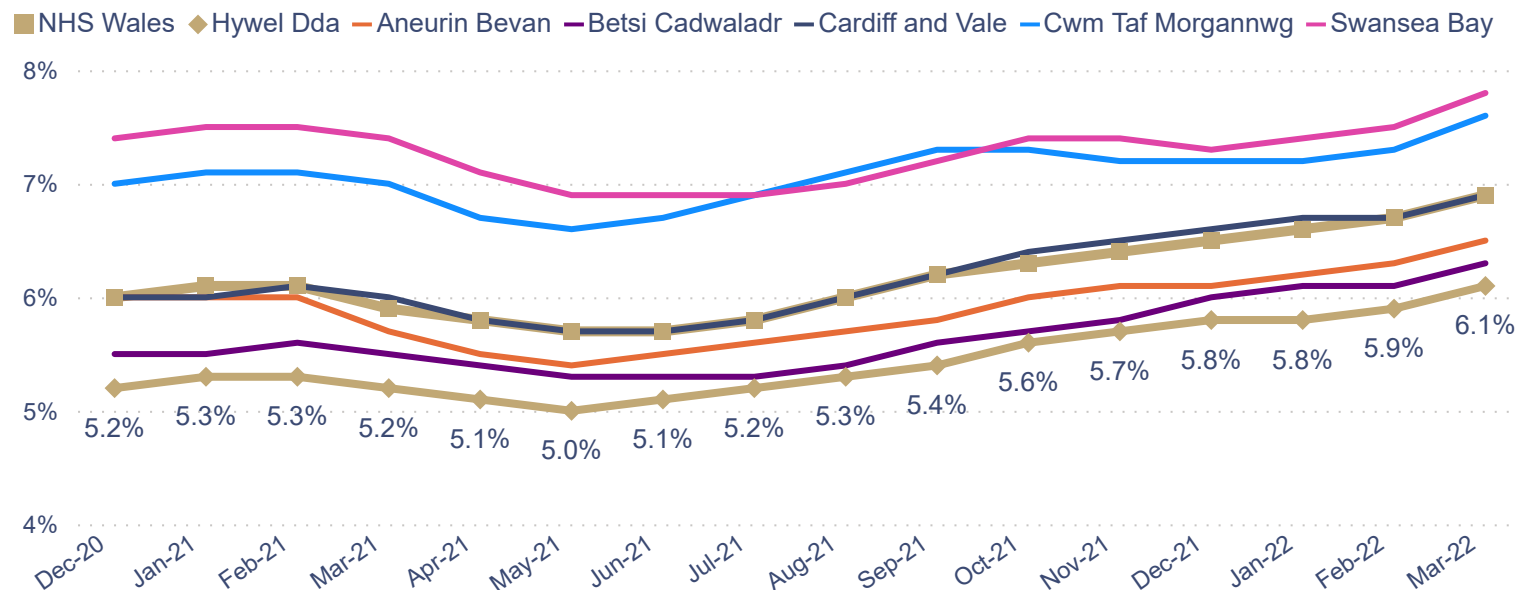
### 12 month rolling sickness absence rates (UHBs only) to March 2022



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



### Rolling 12-month sickness absence rates, Dec '20 to Mar'22



#### Current Performance

In the rolling 12 month period, we have seen an increase in overall HB absence rates (up to 6.54% in August 2022).

Only Acute Services have seen a decrease in August, from 6.63% last month. All areas other than Primary Care & Meds Man are higher than the overall HB rate in August.

#### Performance Against Trend

HUHB data remains lower than any of the other UHBs in Wales based on the latest data set (March 2022). The average NHS Wales rolling 12 month figure being 6.9%.

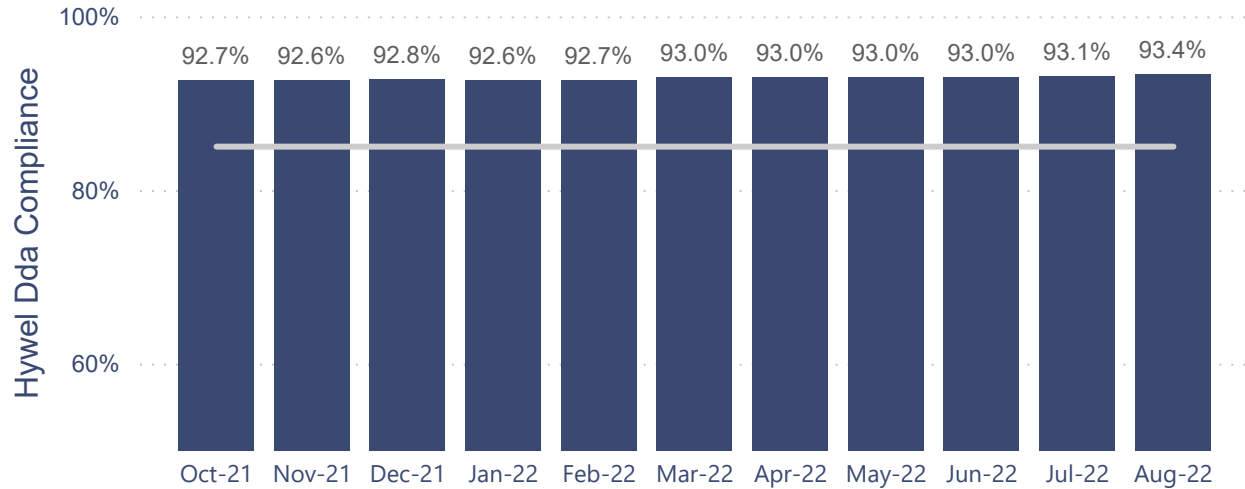
#### Future Positive Actions

Workforce will continue to offer support and advice to managers in the management of both short and long term sickness absence. These include supporting managers with undertaking sickness reviews, providing training to managers and conducting sickness audits. We additionally offer a suite of interventions to support staff psychological wellbeing and signposting these resources. An enhanced level of support will be offered to those areas where a significant rise in absence rates has been seen in more recent months.



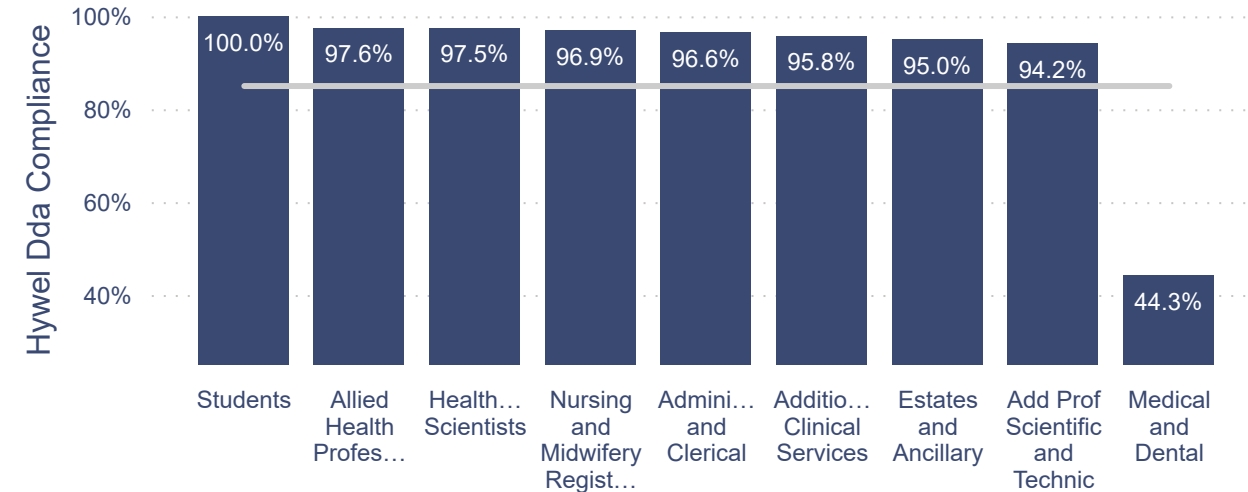
## Percentage of Staff completing Dementia Training at an Informed Level

● Hywel Dda Compliance — Target 85%



## Percentage of Staff completing Dementia Training at an Informed Level

● Hywel Dda Compliance — Target 85%



### Current Performance

Compliance is currently set at 93.4% as at September 2022.

Qualitative report submitted September 2022

### Performance Against Trend

There remains little progress resulting from the joint work carried out as part of the West Wales Care Partnership due to conflicting priorities and covid-19 recovery.

This is well above the 85% target and this is a stable picture, being over 92% for the last 12 months

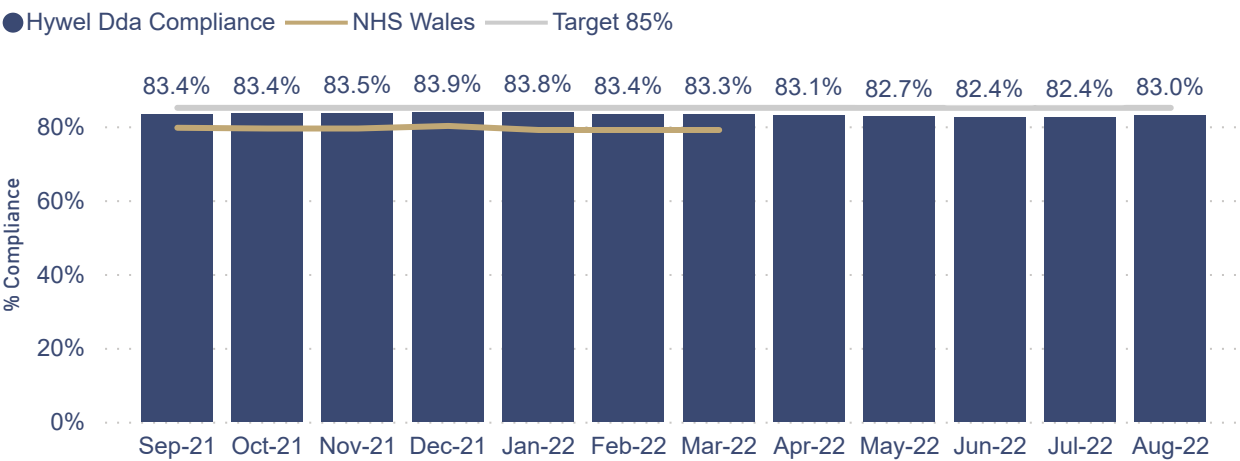
### Future Positive Actions

Continue to promote training and monitor compliance as will all other training monitoring processes.

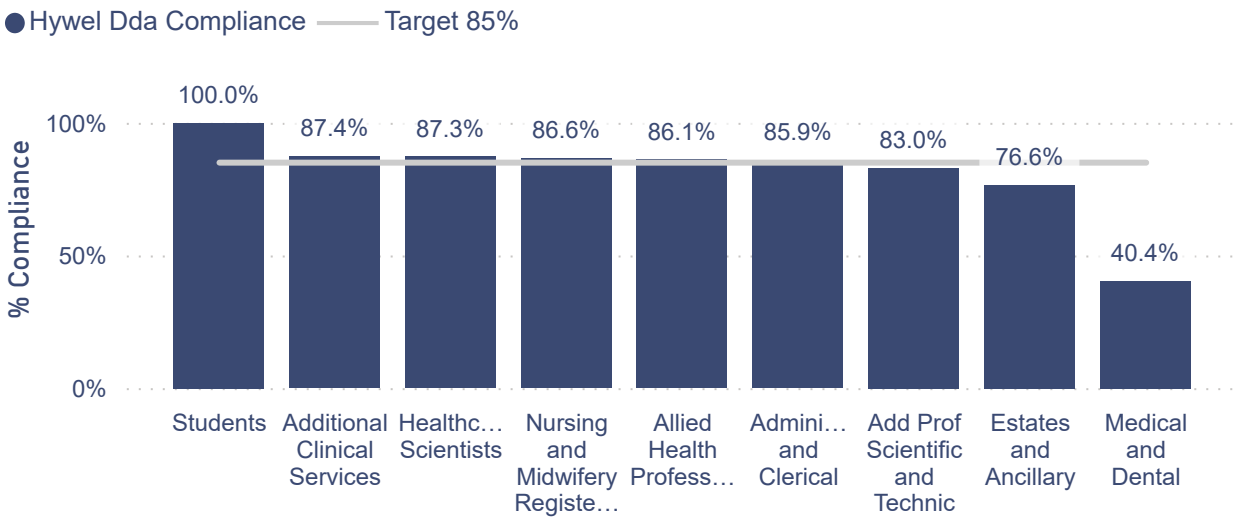
New representation agreed for the Regional Working Group & set up of an internal Dementia Working group within Hywel Dda Health Board to drive agenda, feeding into the strategic education structure. Meeting planned for November 2022.



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**

Whilst HDD performance is above the Wales average, engagement with eLearning continues to be an area of focus.

A data analysis exercise has been undertaken identifying certain staff groups and services, with very low compliance levels which is likely to impact overall HB %.

There is anecdotal evidence of digital exclusion amongst some staffing groups such as those who do not ordinarily have access to computers in work.

We are anticipating overall performance to be affected next quarter due to increased prevalence of leave and service pressures associated.

**Performance Against Trend**

The L&D Team has:

- improved access to competencies on individual ESR dashboards which make it easier for staff to complete modules
- provided extra eLearning sessions to overseas nurses
- provide a dedicated information and advice service to staff requiring support with eLearning
- delivered 20 minute online sessions with over 500 line managers to discuss corporate induction, reminding line managers to provide protected time to complete eLearning modules.

A combination of these activities has seen a gradual increase in compliance in all modules.

**Future Positive Actions**

The L&D Team will:

- continue to liaise with services regarding trends within their own areas
- continue to deliver the online sessions to managers promoting CSTF
- source access to devices to support staff who do not ordinarily have access to devices in work
- promote training sessions that are available as an alternative to eLearning modules which satisfy CSTF
- continue to reach out to Medical & Dental teams to improve engagement



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

Operational Delivery Lead: Head of Culture and Workforce Experience

This target aligns to the following statement of intent:

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



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

#### Current Performance

Managing Performance training sessions are still run on a weekly basis to allow all staff to attend. July 2022 has seen a further 55 staff complete the training, with 145 staff booked onto future sessions. Course feedback has been excellent with the team following up attendees after 3 months to gain more intelligence on sustained learning - 92% of respondents claimed they knew how to write SMART objectives. 90% believed they were making positive contributions to promote an employee led performance management culture. 81% believed they knew the distinction between performance management and PADR. 67% thought that the training had changed their thoughts around performance management and PADRs.

#### Performance Against Trend

The Board Outcome Survey was implemented in December 2021, which asks a question that measures the impact of a PADR conversation. For the period Apr-June 2022 the survey showed that 62% of respondents strongly agreed or agreed that the PADR completed in last 12 months had been meaningful. This has dropped by 4% from previous quarters result.

Apr-22

63.64%

May-22

60.47%

Jun-22

61.11%

Jul-22

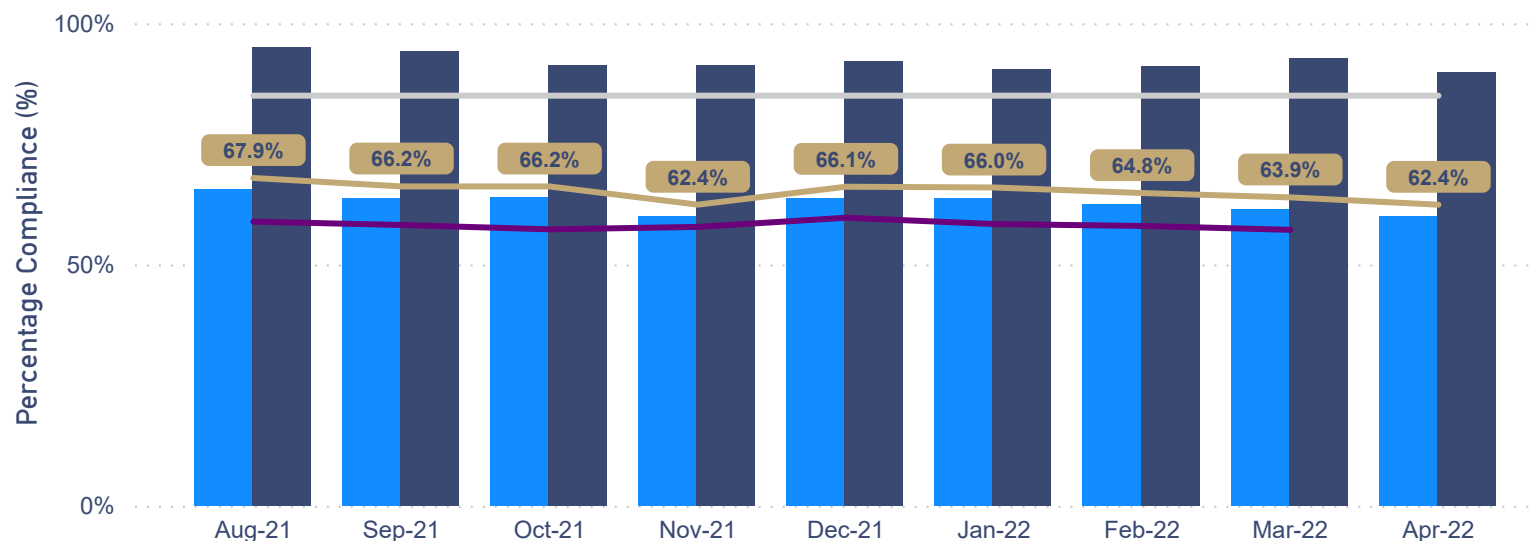
65.22%

Aug-22

64.82%

### PADR Compliance to NHS Wales Performance and Target of 85%

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



#### Future Positive Actions

The pilot to reproduce the values PADR in ESR is continuing with Informatics completing two drafts for review. There are some questions on whether the form will pre-populate fields such as name, title and dates and this is being clarified with the Welsh ESR team. The new PADR form will hopefully support engagement by being a live document that is easier to complete and will provide more valid compliance figures across the organisation.

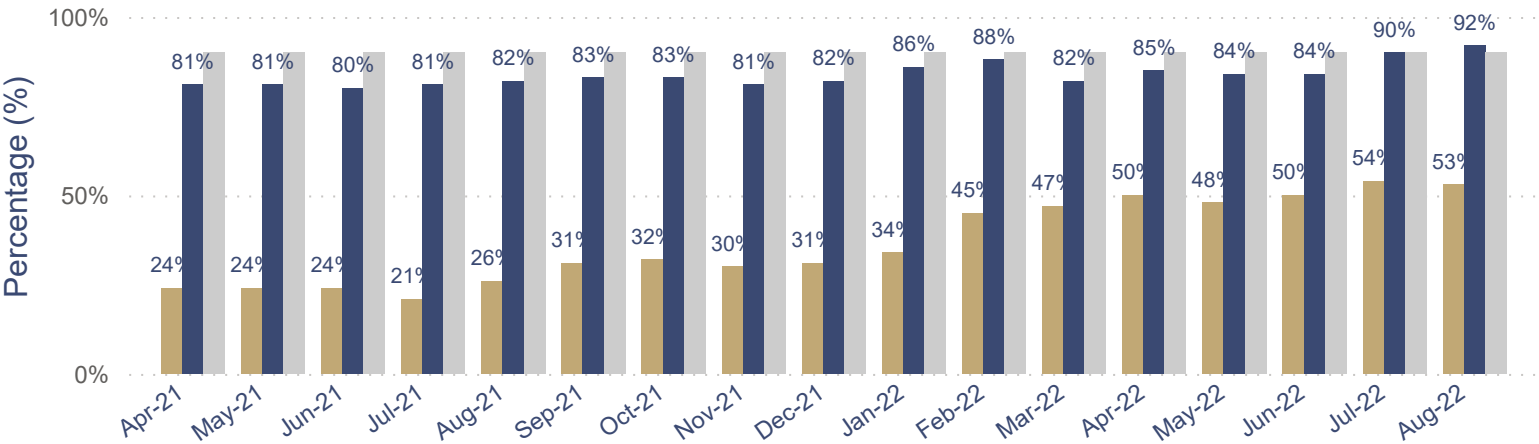
October 2022 will also see the introduction of the All Wales Pay Progression Policy. Communications to raise awareness of the policy have been agreed and shared across the organisation. A toolkit and posters to support successful completion of the pay progression process has been developed and have been uploaded to the intranet.

NHS delivery framework target: 5.A.i - Percentage of staff who have had a medical appraisal in the previous 12 months (exc Drs and Dentists in training) and Consultant/SAS doctors with a job plan & Consultants/SAS doctors with an up to date job plan (reviewed with the last 12 months).  
Strategic Delivery Lead: Medical Director & Deputy CEO Operational Delivery Lead: Head of Medical Education & Professional Standards  
This target aligns to the following statement of intent:  
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Consultants/SAS doctors with a Job Plan (Current is within 12 Months)

Current Job Plan Job Plan 90% Target

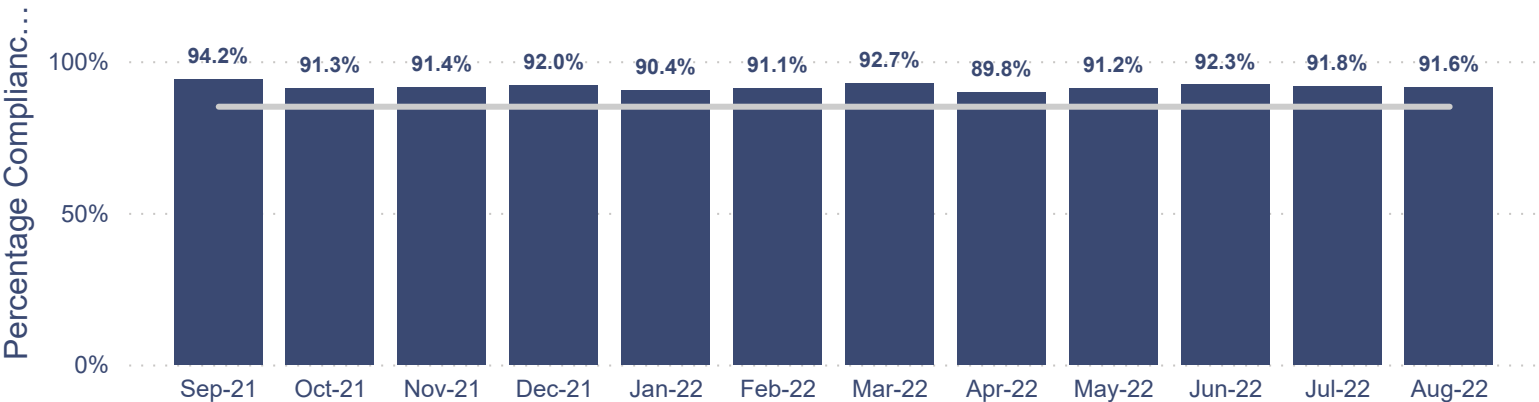


Current Performance

Above 90% target for Consultant/SAS doctors with a job plan

Medical Appraisal Compliance Performance against Target of 85%

M&D Appraisal Compliance Target 85%



Performance Against Trend

Steady Improvement

Future Positive Actions

Work continues on a monthly basis with Heads of Service and Service Delivery Manager to improve overall job plans. Monthly report issued to services.

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 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



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DBS Checks Processed

Axis	Adult Barred Lists	Child Barred Lists	Overseas Doctors	% Compliance
Jul-21	119	123	6	100%
Aug-21	134	132	8	100%
Sep-21	180	181	3	100%
Oct-21	151	154	4	100%
Nov-21	143	143	6	100%
Dec-21	84	83	6	100%
Jan-22	176	169	3	100%
Feb-22	128	126	1	100%
Mar-22	149	147	7	100%
Apr-22	130	128	3	100%
May-22	150	148	1	100%
Jun-22	149	148	7	100%
Jul-22	108	108	6	100%
Aug-22	124	126	4	100%

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.

Current Performance

Monthly reporting confirms HDUHB compliance consistently at 100% for staff appointed via Trac into positions where a child barred list check is required or an adult barred list check is required.

Performance Against Trend

Performance is Consistently 100%

Future Positive Actions

No further actions required as performance is 100%

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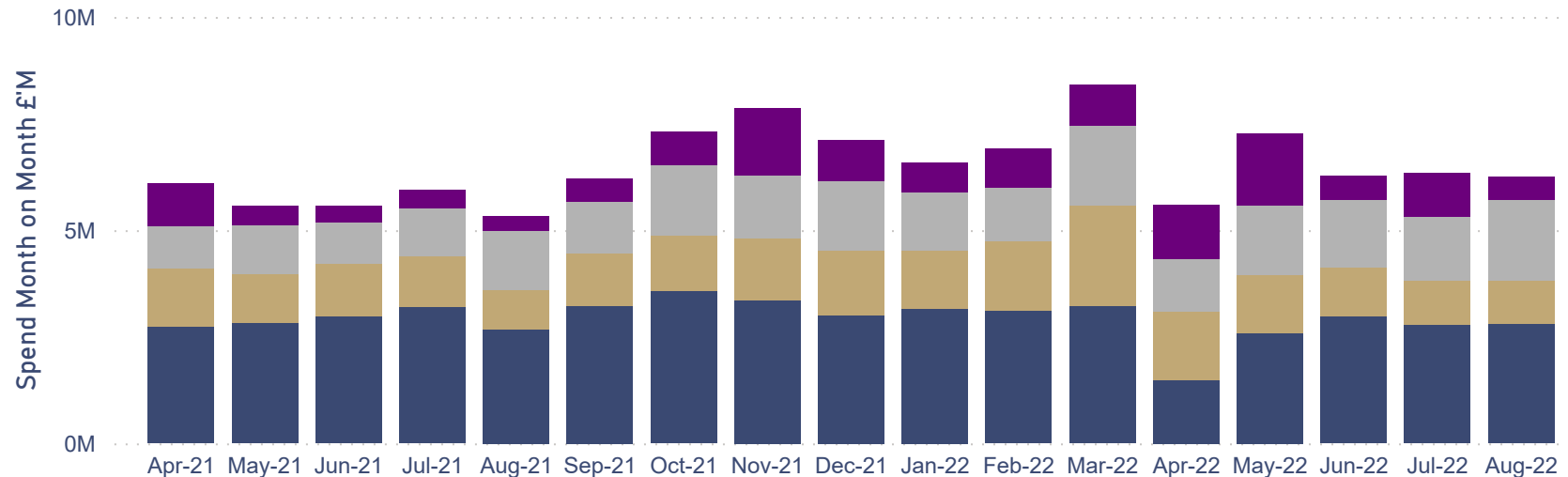
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July	3.89%	7.95%	6.42%
August	4.58%	7.01%	6.46%
September	5.07%	6.79%	
October	5.84%	8.33%	
November	6.23%	7.77%	
December	6.07%	7.18%	
January	6.92%	7.15%	
February	3.98%	7.08%	
March	3.12%	5.13%	

### Variable Pay Month on Month

● Sum of Agency ● Sum of Bank ● Sum of Locum ● Sum of 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: Director of Workforce & Organisational Development.

Operational Delivery Lead: Head of Strategic Workforce Planning and Transformation

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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#### Current Performance

Submitted in January 2021 by the HEIW deadline

#### Performance Against Trend

Two ongoing queries to resolve over longer term Physician Associates and WAST Advanced Paramedic Practitioners Pipeline discussions.

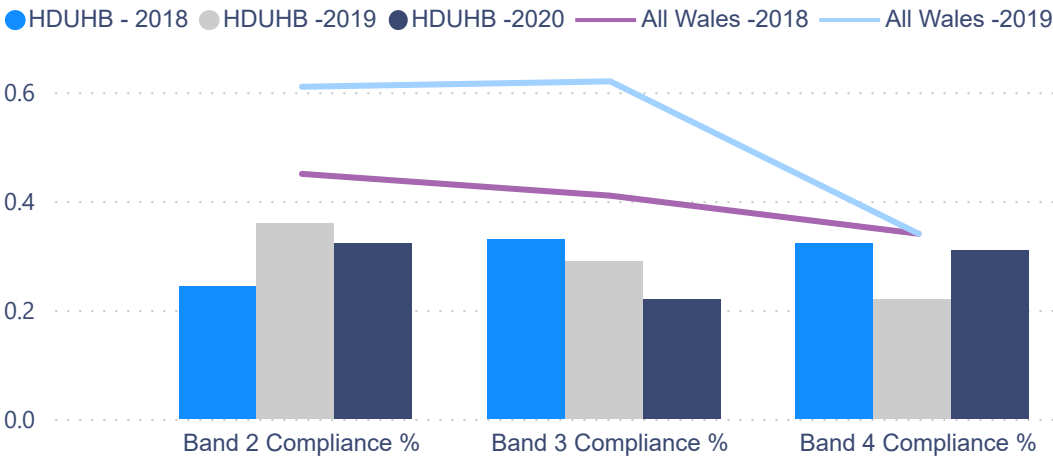
#### Future Positive Actions

▲  
Process: Lessons learnt activity from 2022/23 commissioning to be undertaken and recommendations implemented for next year. An outcomes based Workforce Interventions Performance Dashboard will be developed to align to this work to track the whole pathway from education & commissioning requirements to placement capacity and recruitment streamlining on an annual basis. Plans developing to create and inform for IMTP/E&C cycle 2022/23 to cover 2023-2026.





Career Framework Data



Current Performance

HDUHB annual performance fluctuates considerably due to Covid-19 mass recruitment and changes in system reporting. The data recording mechanism used is now through ESR, providing accuracy for future data collection.

The ESR reporting was a pilot for HEIW, with only two Health Boards having reached this milestone.

Performance Against Trend

HDUHB data significantly lower than the “All Wales comparison”, this is attributed to data reporting issues in previous years and also lack of structure to collect and record data.

We are still awaiting 2020 All Wales data.

Future Positive Actions

L&D continue to cleanse data and input all qualifications towards the framework in ESR, creating one source of truth. A dedicated role is now in place to support services to reach compliance.

Qualifications are being developed to allow for Band 4 achievement.

Attendance at senior management meetings for services to promote All Wales Compliance against Target.

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

Profession	% Level 2	% Level 3	% Level 4
Bank Staff (on Bank only contracts)	2.1%	8.8%	37.5%
CAMHS	0.0%	58.3%	100.0%
Dietetics	0.0%	0.0%	0.0%
Nursing & Midwifery	25.7%	33.3%	43.2%
Occupational Therapy	0.0%	36.4%	28.6%
Other Allied Health Discipline	0.0%	0.0%	58.3%
Physiotherapy	0.0%	39.1%	57.9%
Podiatry	0.0%	0.0%	0.0%
Radiology	0.0%	14.3%	0.0%
Speech and Language service	0.0%	100.0%	17.6%

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 Staff (on Bank only contracts)	676	14	57	5	8	3
CAMHS	0	0	12	7	2	2
Dietetics	0	0	6	0	1	0
Nursing & Midwifery	1076	277	655	218	95	41
Occupational Therapy	0	0	11	4	49	14
Other Allied Health Discipline	1	0	2	0	12	7
Physiotherapy	4	0	46	18	38	22
Podiatry	0	0	2	0	2	0
Radiology	1	0	28	4	7	0
Speech and Language service	0	0	3	3	17	3
Total	1758	291	822	259	231	92

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: Deputy Director of Workforce & Organisational Development Operational Delivery Lead: : Head of Workforce

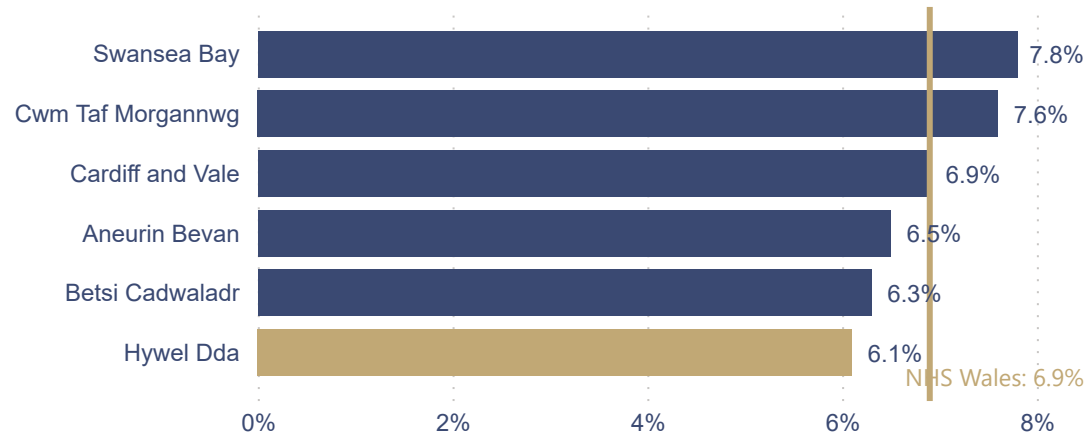
This target aligns to the following statement of intent:  
3 - Engaging our Staff



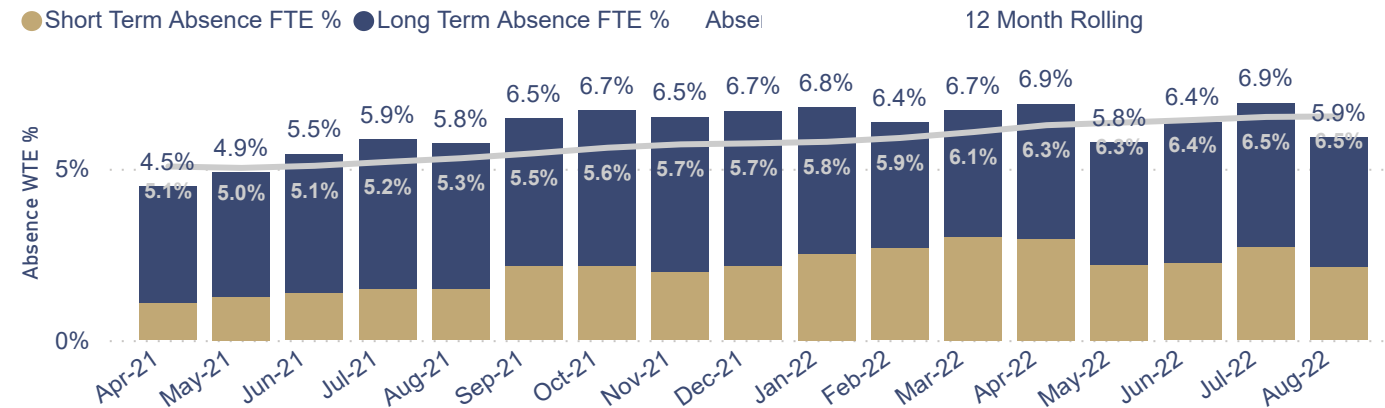
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

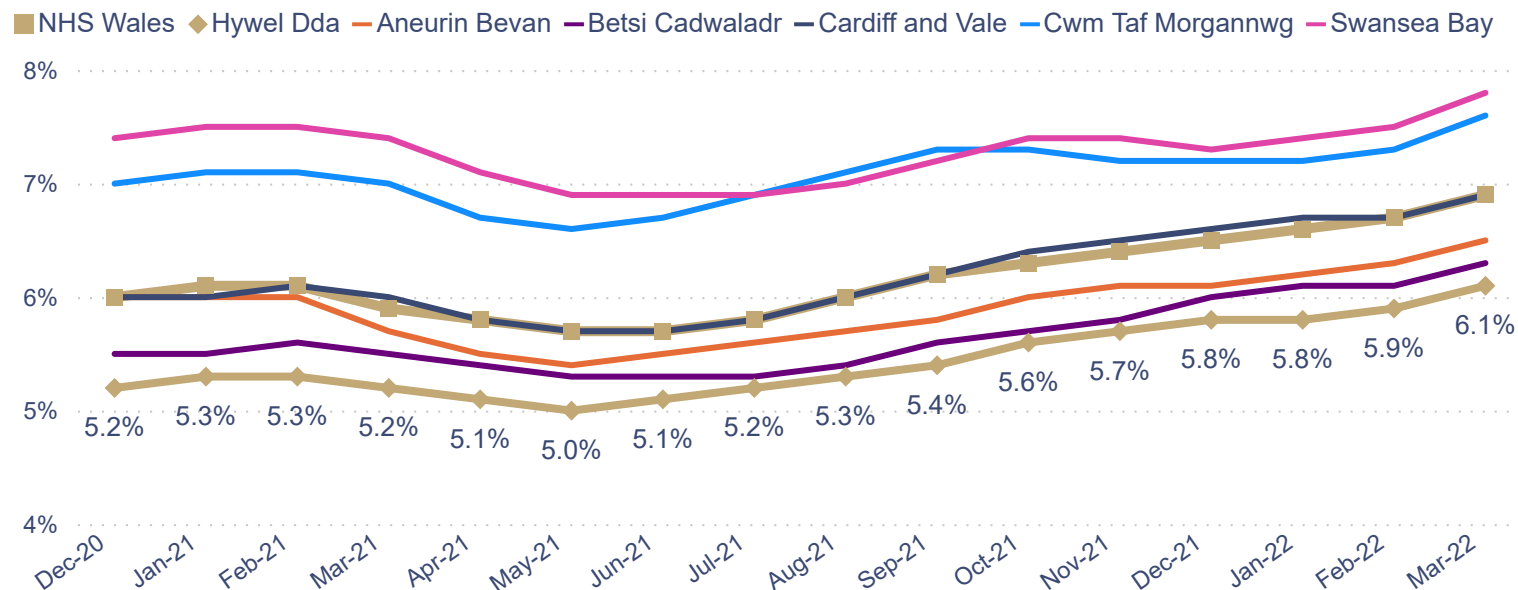
12 month rolling sickness absence rates (UHBs only) to March 2022



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



Rolling 12-month sickness absence rates, Dec '20 to Mar '22



#### Current Performance

In the rolling 12 month period, we have seen an increase in overall HB absence rates (up to 6.54% in August 2022).

Only Acute Services have seen a decrease in August, from 6.63% last month. All areas other than Primary Care & Meds Man are higher than the overall HB rate in August.

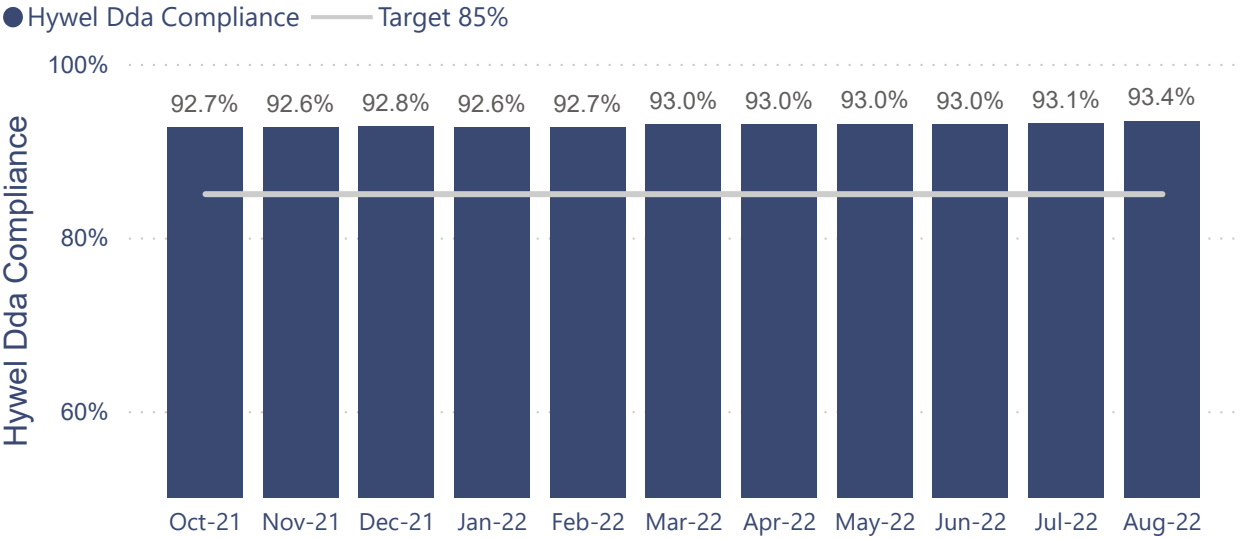
#### Performance Against Trend

HUHB data remains lower than any of the other UHBs in Wales based on the latest data set (March 2022). The average NHS Wales rolling 12 month figure being 6.9%.

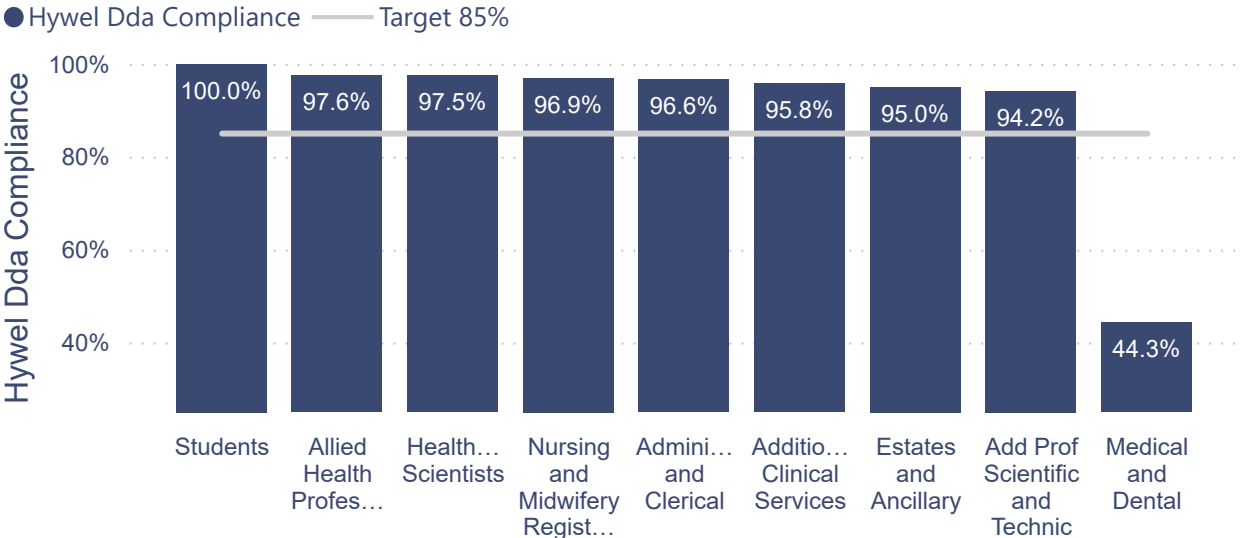
#### Future Positive Actions

Workforce will continue to offer support and advice to managers in the management of both short and long term sickness absence. These include supporting managers with undertaking sickness reviews, providing training to managers and conducting sickness audits. We additionally offer a suite of interventions to support staff psychological wellbeing and signposting these resources. An enhanced level of support will be offered to those areas where a significant rise in absence rates has been seen in more recent months.

Percentage of Staff completing Dementia Training at an Informed Level



Percentage of Staff completing Dementia Training at an Informed Level



Current Performance

Compliance is currently set at 93.4% as at September 2022.  
Qualitative report submitted September 2022

Performance Against Trend

There remains little progress resulting from the joint work carried out as part of the West Wales Care Partnership due to conflicting priorities and covid-19 recovery.  
This is well above the 85% target and this is a stable picture, being over 92% for the last 12 months

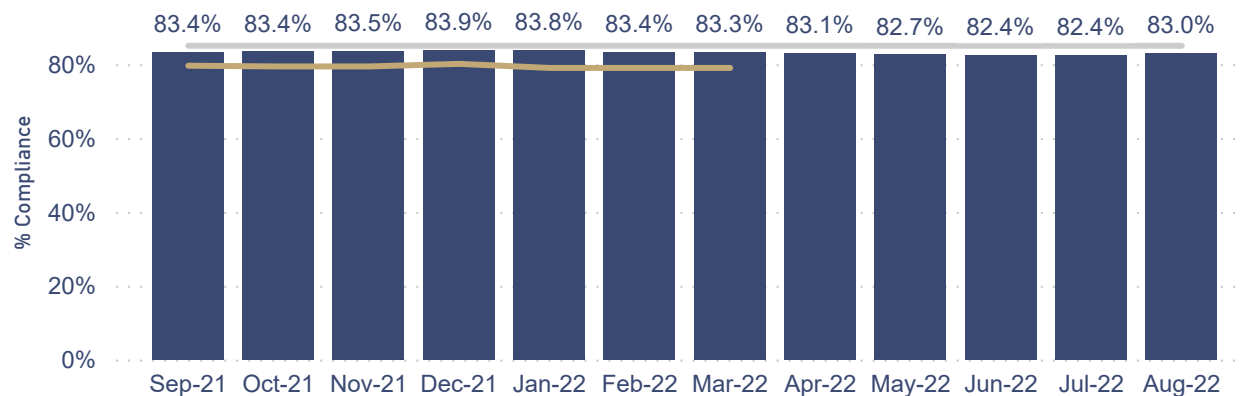
Future Positive Actions

Continue to promote training and monitor compliance as will all other training monitoring processes.  
New representation agreed for the Regional Working Group & set up of an internal Dementia Working group within Hywel Dda Health Board to drive agenda, feeding into the strategic education structure. Meeting planned for November 2022.



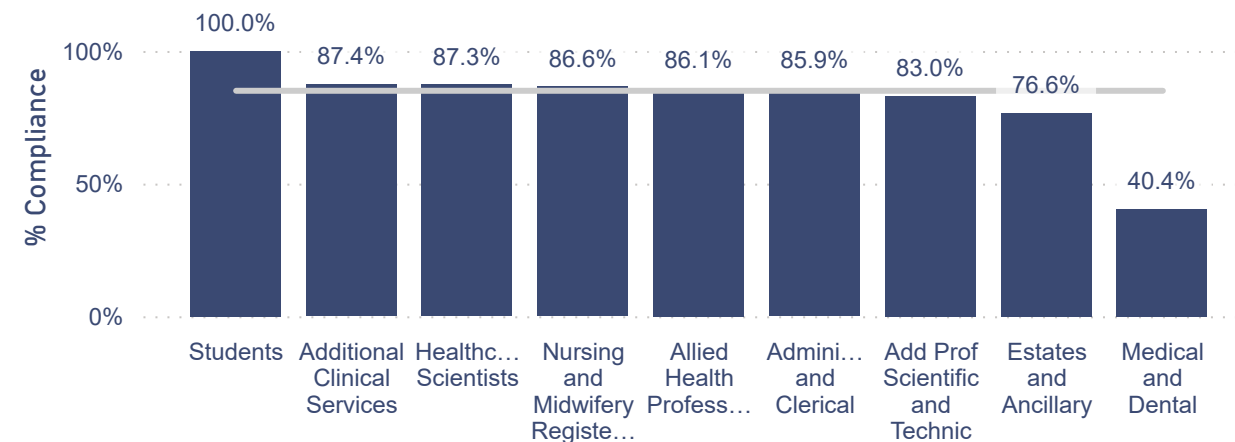
## Core Skills Training Framework (CSTF) compared to NHS Wales Performance and Target of 85%

● Hywel Dda Compliance — NHS Wales — Target 85%



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

● Hywel Dda Compliance — Target 85%



### Current Performance

Whilst HDD performance is above the Wales average, engagement with eLearning continues to be an area of focus.

A data analysis exercise has been undertaken identifying certain staff groups and services, with very low compliance levels which is likely to impact overall HB %.

There is anecdotal evidence of digital exclusion amongst some staffing groups such as those who do not ordinarily have access to computers in work.

We are anticipating overall performance to be affected next quarter due to increased prevalence of leave and service pressures associated.

### Performance Against Trend

The L&D Team has:

- improved access to competencies on individual ESR dashboards which make it easier for staff to complete modules
- provided extra eLearning sessions to overseas nurses
- provide a dedicated information and advice service to staff requiring support with eLearning
- delivered 20 minute online sessions with over 500 line managers to discuss corporate induction, reminding line managers to provide protected time to complete eLearning modules.

A combination of these activities has seen a gradual increase in compliance in all modules.

### Future Positive Actions

The L&D Team will:

- continue to liaise with services regarding trends within their own areas
- continue to deliver the online sessions to managers promoting CSTF
- source access to devices to support staff who do not ordinarily have access to devices in work
- promote training sessions that are available as an alternative to eLearning modules which satisfy CSTF
- continue to reach out to Medical & Dental teams to improve engagement

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

Operational Delivery Lead: Head of Culture and Workforce Experience

This target aligns to the following statement of intent:

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



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

Apr-22

63.64%

May-22

60.47%

Jun-22

61.11%

Jul-22

65.22%

Aug-22

64.82%

#### Current Performance

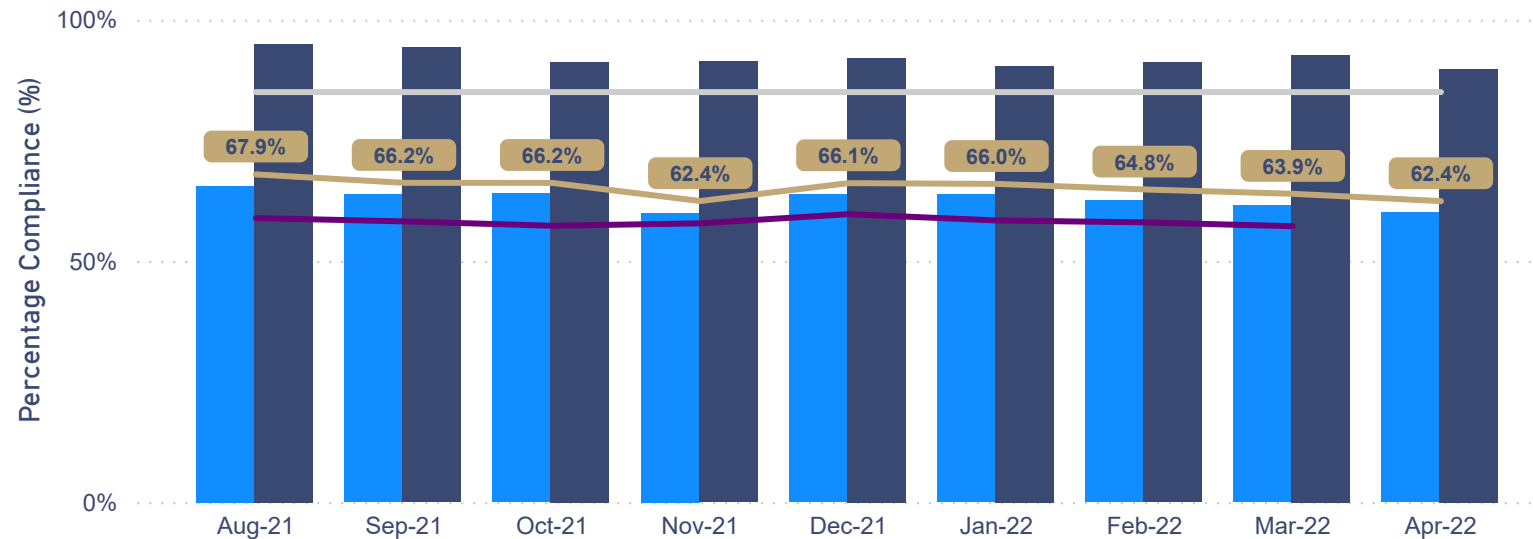
Managing Performance training sessions are still run on a weekly basis to allow all staff to attend. July 2022 has seen a further 55 staff complete the training, with 145 staff booked onto future sessions. Course feedback has been excellent with the team following up attendees after 3 months to gain more intelligence on sustained learning - 92% of respondents claimed they knew how to write SMART objectives. 90% believed they were making positive contributions to promote an employee led performance management culture. 81% believed they knew the distinction between performance management and PADR. 67% thought that the training had changed their thoughts around performance management and PADRs.

#### Performance Against Trend

The Board Outcome Survey was implemented in December 2021, which asks a question that measures the impact of a PADR conversation. For the period Apr-June 2022 the survey showed that 62% of respondents strongly agreed or agreed that the PADR completed in last 12 months had been meaningful. This has dropped by 4% from previous quarters result.

#### PADR Compliance to NHS Wales Performance and Target of 85%

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



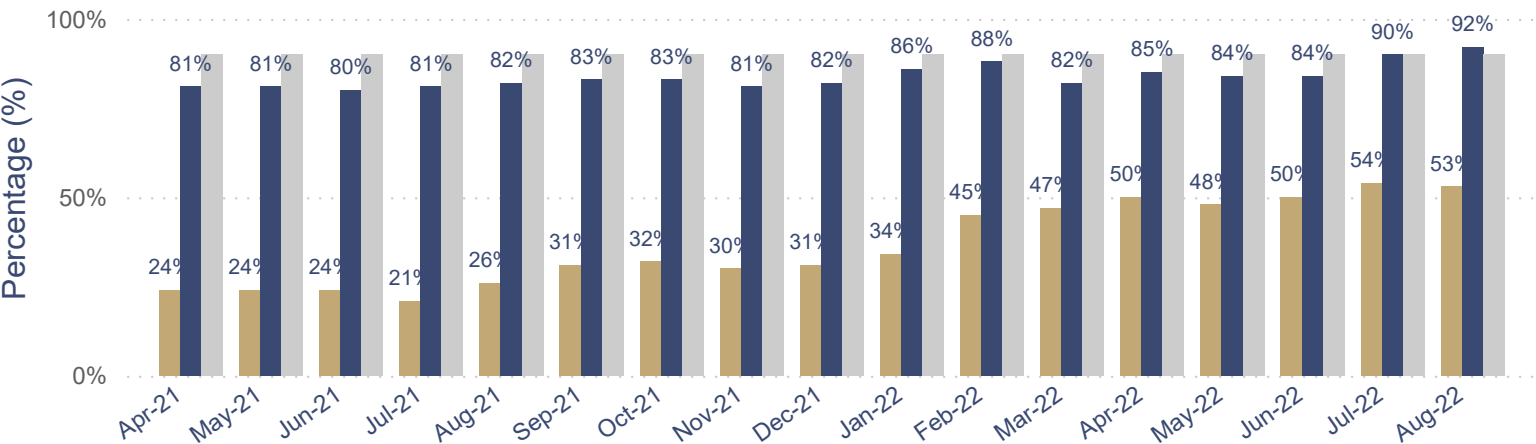
#### Future Positive Actions

The pilot to reproduce the values PADR in ESR is continuing with Informatics completing two drafts for review. There are some questions on whether the form will pre-populate fields such as name, title and dates and this is being clarified with the Welsh ESR team. The new PADR form will hopefully support engagement by being a live document that is easier to complete and will provide more valid compliance figures across the organisation.

October 2022 will also see the introduction of the All Wales Pay Progression Policy. Communications to raise awareness of the policy have been agreed and shared across the organisation. A toolkit and posters to support successful completion of the pay progression process has been developed and have been uploaded to the intranet.

Consultants/SAS doctors with a Job Plan (Current is within 12 Months)

Current Job Plan Job Plan 90% Target



Current Performance

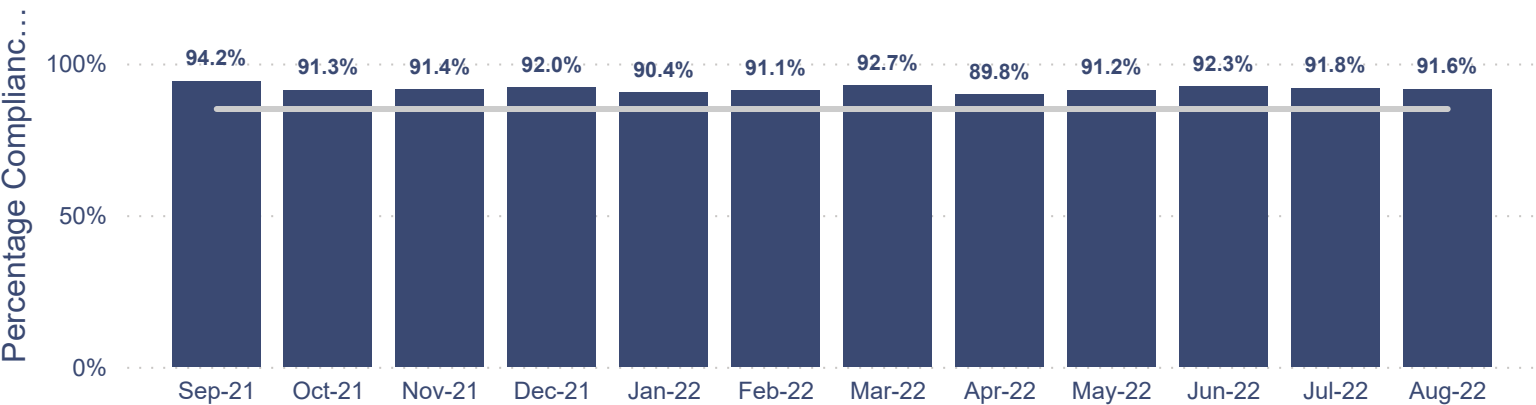
Above 90% target for Consultant/SAS doctors with a job plan

Performance Against Trend

Steady Improvement

Medical Appraisal Compliance Performance against Target of 85%

M&D Appraisal Compliance Target 85%



Future Positive Actions

Work continues on a monthly basis with Heads of Service and Service Delivery Manager to improve overall job plans. Monthly report issued to services.



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 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



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DBS Checks Processed

Axis	Adult Barred Lists	Child Barred Lists	Overseas Doctors	% Compliance
Jul-21	119	123	6	100%
Aug-21	134	132	8	100%
Sep-21	180	181	3	100%
Oct-21	151	154	4	100%
Nov-21	143	143	6	100%
Dec-21	84	83	6	100%
Jan-22	176	169	3	100%
Feb-22	128	126	1	100%
Mar-22	149	147	7	100%
Apr-22	130	128	3	100%
May-22	150	148	1	100%
Jun-22	149	148	7	100%
Jul-22	108	108	6	100%
Aug-22	124	126	4	100%

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.

Current Performance

Monthly reporting confirms HDUHB compliance consistently at 100% for staff appointed via Trac into positions where a child barred list check is required or an adult barred list check is required.

Performance Against Trend

Performance is Consistently 100%

Future Positive Actions

No further actions required as performance is 100%





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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 October 2022
<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 at 31st August 2022.

##### Cefndir / Background

PODCC is required to provide assurance to the Board on best practice around the workforce and OD agenda. This report provides assurance of delivery against national delivery framework targets.

##### Asesiad / Assessment

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

- Overall staff engagement score – scale score method
- Agency spend as a % of total pay bill
- Variable pay (agency, locum, bank & overtime: monthly position)
- 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
- Percentage of sickness absence rate of staff;

- o Sickness for Apr-22 to Jul-22 on average has been 1.3% higher than respective months in 2021. In August 2022 we are seeing a reduction of in month absence in line with last year's level
- Qualitative report providing evidence of provided learning and development in line with the Good Work – Dementia Learning and Development Framework
- Percentage of employed National Health Service (NHS) staff completing dementia training at an informed level;
  - o Overall the Health Board is over the target of 85% and has steadily been increasing compliance, currently performing at 93.4%.
  - o All staff groups with the exception of Medical and Dental are above the 85% target. Medical & Dental staff group have a low rate of 44.4%.
- Percentage Compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation
  - o Our performance has been steady over the last 12 months from Sep-21 to Aug-22. Although our current performance is down marginally from our peak compliance rate of 83.9% in December, we have improved from 82.4% in Jul-22 to 83% in August. We are slightly below our 85% target.
  - o We have 3 staff groups that are below the 85% target; Add Prof scientific & technical (83%), Estates & Ancillary (76.6%) and Medical & Dental (40.4%). L&D are continuing to reach out to Medical & Dental teams to improve engagement; this is the staff group that has the lowest compliance by a significant margin.
- Percentage of headcount by organisation who have had a Performance Appraisal Development Review (PADR)/medical appraisal in the previous 12 months (excluding doctors and dentists in training)
- Percentage of staff who have had a performance appraisal who agree it helps them improve how they do their job
- Percentage of staff who have had a medical appraisal in the previous 12 months (exc 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)
- 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.

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 as assurance of performance in key areas of the Workforce and OD agenda.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
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
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7.1 Workforce 7. Staff and Resources
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	1A NHS Delivery Framework targets
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

<b>Gwybodaeth Ychwanegol:</b> <b>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.
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.

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
Ariannol / Gwerth am Arian: Financial / Service:	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.