



**PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD
PEOPLE PLANNING AND PERFORMANCE ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 October 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Workforce Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling, Director of Workforce & OD
SWYDDOG ADRODD: REPORTING OFFICER:	Lisa Gostling, Director of Workforce & OD

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 Workforce Team has been working closely with service managers to identify the workforce requirements to meet COVID-19 demand as per the Welsh Government (WG) requirement to support the delivery of essential services as per the National Framework and also to manage the requirement for usual additional demand linked to winter pressures.

Cefndir / Background

A number of factors have impacted on the Workforce Plan during 2020-21. The Workforce Plan is normally developed by assessing the current workforce, the workforce required in the future (as we are linked in an annual plan in 12 months time) and actions which need to be taken to secure longer term workforce sustainability.

This paper attempts to highlight the factors which have contributed to this year's workforce plan and to highlight the worst case scenario which is linked to delivering on all demands and planning for the additional 501 beds required to support 613 COVID-19 inpatients.

In addition to this planning requirement, Hywel Dda University Health Board (HDdUHB) is also tracking impact based on the Swansea University COVID-19 model which indicates the worst case scenario for the HDdUHB being the need for an additional 180 beds.

Asesiad / Assessment

This report highlights the three staffing areas where the greatest workforce deficits are known, although work is still underway to completely understand the Allied Health Professions and Medical workforce deficits and this will be reported on as patient acuity models are agreed for field hospitals.

This plan therefore assesses the impact of filling 501 beds and 180 surge beds and outlines the actions which will be taken at each step.

Workforce Demand linked to requirement to fill all vacancies, support social distancing and 501 field hospital beds

Workforce Demand Breakdown:	RN	HCSW	Hotel Facilities
COVID-19 Additionality & New Services Demand	-85.00	-129.97	-222.14
<i>Test Trace & Protect (Command & Testing - Demand only)</i>	39.70	26.90	0.00
<i>Immunisation (Nominal)</i>	31.00	30.00	0.00
<i>Other local demands (PPE, Community, FH Management)</i>	14.30	73.07	0.00
Surge Beds (Field Hospitals excludes Cardigan) 501 beds 1:10/1:5)	-267.11	-535.02	-103.00
Social Distancing Additionally	-30.07	-115.76	N/A
Establishment Gap (Acute & Community Sites: Excludes W&C SC & MH)	-298.28	-81.52	-89.12
THE GAP (without other services)	-680.46	-862.27	-414.26

This workforce demand, however, seeks actions to be taken to not only provide a workforce for additional beds but also fill all recruitment gaps some of which have been present for a number of years. The operationalisation of this plan therefore has been undertaken within the following parameters:

1. The plan will only look to recruit/deploy staff into new service areas only and not shore up existing shortfall.
2. Sites will be expected to manage their current vacancies by utilisation of bank, overtime, additional hours and agency as they have been doing to the levels currently deemed safe.
3. No investment will be made as part of this plan unless there is clear evidence that workforce released will be deployed into additional beds and not utilised to improve fill rates.
4. As social distancing measures have already been completed within the acute hospital sites, no additional workforce will be planned to support this, as staff will already be working in any new areas.

Revised workforce requirement for 501 additional surge beds

Workforce Demand Breakdown:	RN	HCSW	Hotel Facilities
COVID-19 additionality & New Services Demand			-222.14
<i>Test Trace & Protect (Command & Testing - Demand only)</i>	-39.70	-26.90	0.00
Surge Beds (Field Hospitals excludes Cardigan) 501 beds 1:10/1:5)	-267.11	-535.02	-103.00
THE GAP (without other services)	-306.81	-561.92	-325.14

Workforce requirement field hospital, surge beds and TTP only (180 beds)

Workforce Plan - All Phases & Surge, TTP & Immunisation				Oct	Nov	Dec	Jan	Feb	Mar						
				Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Recovery						
Surge Activity & Beds			Surge @90%	98	103	141	153	143	125						
Sites/Beds	Worst/Total beds	Planned													
TTP	Sustainability	Various Sites		All	All	All	All	All	All						
Acute Sites	Towy (20) & Cleddau (10)			30											
Selwyn Samuel	64	60		25	11	24									
Bluestone	70	70		28	14	14	14								
Plas Crug	35	20				20									
Parc Y Scarlets (Barn)	172	0													
Cardigan	29	0													
Immunisation	New Service	Various Sites				17 Dec Start	Develop	Develop	Sustain						
Bed Totals	370	150		83	83	108	25	166	58	180	14		10	18	
Workforce Plan - All Phases & Surge, TTP & Immunisation (WTE)															
	Snr RN	RN	HCSW	A&C Pharmacy	Facilities	RN	HCSW	RN	HCSW	RN	HCSW	RN	HCSW	RN	HCSW
Workforce Surge		92	182	15											
Workforce TTP		8.4	26.6												
Workforce Immunisation (Nomi)		0	0	6	6										
Additional Workforce - Surge Tot		-91.26	-182.66			-42.08	-84.23	-12.68	-25.37	-29.41	-58.86	-7.10	-14.21	-5.07	-10.15
Reduction Workforce- Surge Tot		-14.20	-28.41											-86.19	-76.04
Total Additional W	0	-100.40	-208.60	21.00	6.00	-160.00									

Actions to be Taken To Reduce Gap

The tables above demonstrate 4 levels to the workforce plan:

1. Staff to full rate levels for all staff groups.
2. Staff 501 surge beds to full fill rate levels, however recognising the need for stretch and no headroom built into establishment on the basis all new staff would be appointed on bank/agency contracts.
3. Staff 180 surge beds to full rate levels, however recognising the need for stretch and no headroom built into establishment on the basis all new staff would be appointed on bank/agency contracts.
4. Depending on patient acuity for surge beds, the workforce numbers could reduce further for registered nurses and this will be known within a couple of weeks.

As HDdUHB is tracking the Swansea University COVID-19 model, the first part of the Workforce Plan will be to ensure we can safely staff the additional 180 beds. By removing headroom, introducing Band 4 administrative staff to release nursing time (which must be deployed to surge beds), current recruitment activity and stretching the workforce, the following adjustment to staffing numbers is noted.

Action	RN	HCSW	A&C	Pharmacy	Facilities
26.9 Reduction	27.00	49.00			
Band 4 Admin 30% 50 Band	15.00				
Recruitment		92.80			216.95
Workforce Stretch 1:15	15.00	- 36.00			
	-34.26	-102.80	0.00	0.00	56.95

To support the stretch in the registered nurse workforce, the Health Care Support Worker numbers would be required to increase.

All Health Care Support Workers and facilities staff have been employed on bank contracts therefore the only financial implication until such time as we open beds and require staff will be induction, training and shadow shifts.

A number of options are available and are currently being calculated to now enact the following:

- Scope all other registered Practitioners who are in specialist roles to determine impact upon patient care if they were to be deployed to support surge requirements.
- Scope all registered staff in managerial roles to determine ability to deploy to surge areas.
- Scope all registered staff in corporate functions to determine impact on organisational performance to establish how many could be deployed to support surge capacity.
- Some registered practitioners, who were previously shielding, have been deployed to the Command Centre. Work is underway to establish the work being undertaken as it would be more prudent to use them in a professional capacity if this is not currently the case and backfill with appropriate workforce.
- Scope all corporate and support functions to determine impact if any areas were suspended to support administrative workforce requirements linked to the Plan (Command Centre, TTP, Band 4 ward roles or even if appropriate Health Care Support Worker/ancillary roles).

If roles and services could be suspended, there would be no additional cost to delivering the above deployments. The major risk to the success of this would be upscaling of training to support individuals to work in new or changes roles.

Whilst it is straight forward to develop a month by month plan for surge capacity, it is more difficult to then add in Command Centre requirements and the potential impact of a COVID-19 vaccine becoming available. To support these potentially conflicting priorities, clear criteria is being developed to support when facilities open, when new demands become effective and it may be that staff are trained for several eventualities and depending on the priorities developed could be deployed to different areas at different times. As this is more developed it will be discussed in the People, Planning and Performance Assurance Committee (PPPAC).

Additional Considerations

The impact of COVID-19 on our workforce also needs to be considered as part of the Plan. Highlighted below is the potential impact of sickness absence.

Until final patient acuity levels are agreed for surge beds, it has been difficult to fully identify workforce shortfalls for other staff groups and in particular our medical workforce. This will be the next area for further focused work.

WORKFORCE PLANS - WTE	Actual as @ 30/09/20	Absence @ 5%	Absence @ 6%	Absence @ 8%	Absence @ 10%	Absence @ 12%
Establishment & Bank Additional Hours						
ADMINISTRATIVE & CLERICAL	1,723.1	86.16	103.39	137.85	172.31	206.78
MEDICAL AND DENTAL	637.7	31.89	38.26	51.02	63.77	76.53
NURSING AND MIDWIFERY REGISTERED	2,851.7	142.59	171.10	228.14	285.17	342.21
ADD PROF SCIENTIFIC AND TECHNICAL	314.0	15.70	18.84	25.12	31.40	37.68
ADDITIONAL CLINICAL SERVICES	2,182.9	109.14	130.97	174.63	218.29	261.94
ALLIED HEALTH PROFESSIONALS	573.0	28.65	34.38	45.84	57.30	68.76
HEALTHCARE SCIENTISTS	188.2	9.41	11.29	15.06	18.82	22.58
ESTATES AND ANCLLIARY	1,010.6	50.53	60.64	80.85	101.06	121.27
Total Establishment & Bank Additional Hours	9,481.3	474.1	568.88	758.50	948.13	1,137.75

Absence will be closely monitored and revisions to the workforce plan made depending upon any change in current rates.

The Finance and Workforce Planning Teams are meeting on Tuesday 27th October 2020 to ensure that financial planning assumptions are made, linked to the workforce assumptions with regards to additional cost and scaling and phasing of the plan.

Argymhelliad / Recommendation

- For discussion – this paper is presented as work in progress with regards to the risks currently facing HDdUHB if COVID-19 reaches the levels predicted in the WG planning guidance. It also gives some assurance that a series of measures are currently in place to reduce the level of risk and that there are a series of discussions and actions being progressed to ensure that HDdUHB can respond to the challenge in a planned way.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.1 Consider the implications for workforce planning arising from the development of HDdUHB's strategies and plans or those of its stakeholders and partners, including those arising from joint (sub) committees of the Board.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	5. Deliver, as a minimum requirement, outcome and delivery framework work targets and specifically eliminate the need for unnecessary travel & waiting

	times, as well as return the organisation to a sound financial footing over the lifetime of this plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2019-20	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termiau: Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cynllunio Pobl a Sicrwydd Perfformiad: Parties / Committees consulted prior to People Planning and Performance Assurance Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	
Ansawdd / Gofal Claf: Quality / Patient Care:	
Gweithlu: Workforce:	
Risg: Risk:	

Cyfreithiol: Legal:	
Enw Da: Reputational:	
Gyfrinachedd: Privacy:	
Cydraddoldeb: Equality:	