

TABLE OF ACTIONS FROM  
HEALTH BOARD MEETING IN PUBLIC  
HELD ON 30 MARCH 2023

MINUTE REFERENCE	ACTION	LEAD	TIMESCALE	PROGRESS
PM(23)50	<b>MATTERS ARISING &amp; TABLE OF ACTIONS FROM THE MEETINGS HELD ON 26 JANUARY 2023 AND 23 FEBRUARY 2023:</b> <ul style="list-style-type: none"> <li><b>PM(23)44</b> – To provide a progress update within the Table of Actions relating to development of the Primary Care Strategy</li> </ul>	JP	May 2023	The Strategy will now form a much greater piece of work over a longer period to allow time to meaningfully engage with patients; the public and communities; clinical staff and their teams working across NHS services; stakeholders from across health and social care and the Third Sector etc, in order to inform the future vision. In parallel, the Health Board will continue to develop and deliver local solutions where required (as part of the wider strategy) in response to service changes which need to be addressed. It is anticipated that a progress report will be available in September 2023, with a draft Strategy available in January 2024.
	<ul style="list-style-type: none"> <li><b>PM(23)13</b> – To provide a progress update within the Table of Actions regarding the inclusion of triangulated data in the Patient Experience report</li> </ul>	MR	May 2023	The Corporate Nursing team is working with the Head of Strategic Performance Improvement to explore business intelligence options to support triangulation of key metrics/data. In the meantime, the team will

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				continue to undertake manual scrutiny of the information available and work to improve the information provided through routine reports. It is expected that triangulation within reports will improve on an iterative basis throughout this coming year (23/24).
	<ul style="list-style-type: none"> <li><b>PM(23)04 (PM(22)205)</b> – To keep the Chair of QSEC informed regarding the date cancer service audit findings will be reported to QSEC</li> </ul>	MR	May 2023	The Lead Nurse has advised that the initial audit findings will be available by the end of Q1 2023 and some additional monitoring of cancer standards will also be undertaken. Initial findings will be shared at QSEC in June 2023.
	<ul style="list-style-type: none"> <li><b>PM(23)16</b> – To provide the next update to QSEC on the Llwynhendy TB Outbreak Review action plans at the June 2023 meeting</li> </ul>	PK	June 2023	Forward planned for June 2023 QSEC meeting.
<b>PM(23)51</b>	<b>REPORT OF THE CHAIR:</b> <ul style="list-style-type: none"> <li>To feed back to the team the need to ensure that the new Diabetes Prevention Programme targets the Learning Disabilities population</li> </ul>	JP	May 2023	Completed.
	<ul style="list-style-type: none"> <li>For the Communications and Engagement Director to explore the potential for publicising examples of long service externally, via local media</li> </ul>	AHM	May 2023	Currently working with Workforce and Organisational Development colleagues to identify potential stories for sharing externally (identifying interesting individual stories and collective opportunities).

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	<ul style="list-style-type: none"> <li>To present to PODCC a report on the various processes/initiatives to capture staff feedback and learning</li> </ul>	LG	June 2023	Forward planned for June 2023 PODCC meeting.
PM(23)52	<b>REPORT OF THE CHIEF EXECUTIVE:</b> <ul style="list-style-type: none"> <li>To check with regard to the repeated use of 'may' in the SWSN Memorandum of Understanding</li> </ul>	AC	May 2023	Following comments at the March 2023 Board, the Health Board sought clarification on the use of the word "may" in the briefing paper (not the MoU itself) to clarify if this had an impact on the Health Board. On 2 May 2023, the SWSN Operational Manager advised that the use of the word "may" was to in relation to the spinal unit at the Grange (which is not 24/7) and therefore does not impact on the Health Board's position. On that basis, it has been agreed that the CE will sign the MoU on behalf of the Health Board to allow for this to be completed.
	<ul style="list-style-type: none"> <li>To circulate the National Nosocomial COVID-19 Programme Interim National Learning Report</li> </ul>	JW	May 2023	Completed. Circulated via email on 30 March 2023
PM(23)53	<b>REPORT OF THE AUDIT &amp; RISK ASSURANCE COMMITTEE:</b> <ul style="list-style-type: none"> <li>To explore the potential for transferable information from the Bluestone Governance Review to the COVID-19 Public Inquiry</li> </ul>	JW	May 2023	Completed. The Bluestone Governance Review has been included within the evidence for the Public Inquiry. This has been incorporated within the timeline, organisational learning and within the archive.

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PM(23)54	<b>REPORT OF THE QUALITY, SAFETY &amp; EXPERIENCE COMMITTEE:</b> <ul style="list-style-type: none"> <li>To provide via the Table of Actions an update regarding staff retirement/closure of Neurology and Tertiary Pathway service</li> </ul>	AC	May 2023	<p>The Women and Children's Directorate is working in close collaboration with WHSSC and colleagues across the South Wales Corridor to ensure any interim changes to the neurology pathway are safely implemented. The Directorate is also working closely with the Health Board Commissioning team to develop a revised service specification that identifies any gaps in the current provision of Neurology services.</p> <p>Cardiff and Vale has successfully appointed 4 Paediatric Neurologists to support the tertiary pathway, with 2 vacancies outstanding. A CNS post has been advertised to provide regional support. WHSSC are supporting the appointment of a tertiary clinician to support with Hywel Dda tertiary activity within the HB footprint.</p> <p>The secondary care service in SBUHB is also under pressure, with concerns it cannot meet current demand. There is a meeting planned for 22 May 2022 to discuss a deep dive of the patient cohort HD refers to the SBUHB service via its LTA arrangements.</p>

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PM(23)56	<b>UPDATE ON ANNUAL PLAN 2023/24:</b> <ul style="list-style-type: none"> <li>To begin the process of Board consideration of the financial roadmap for recovery at the June 2023 Board Seminar, with this presented to Public Board in September 2023</li> </ul>	HT	June 2023	Forward planned for June 2023 Board Seminar and September 2023 Public Board meeting.
	<ul style="list-style-type: none"> <li>To seek assurance from the Director of Finance and scheme leads at the May Board meeting on the governance and delivery of the savings scheme, to ensure the £19.5 million savings target would be achieved.</li> </ul>	HT	May 2023	This is referenced in the Finance Report for Month 1 2023/24.
	<ul style="list-style-type: none"> <li>To write an Accountable Officer letter to Welsh Government</li> </ul>	SM	May 2023	Completed.
PM(23)57	<b>IMPLEMENTING THE 'A HEALTHIER MID AND WEST WALES' STRATEGY:</b> <ul style="list-style-type: none"> <li>To issue a letter regarding the Clinical Strategy Review to Welsh Government and share this with all Board members, and to provide an update to the May 2023 Board meeting</li> </ul>	LD	May 2023	Completed. Letter has been shared with Board members. Update Report on agenda.
PM(23)58	<b>IMPROVING PATIENT EXPERIENCE REPORT:</b> <ul style="list-style-type: none"> <li>To providing additional detail regarding progress with the switchboard modernisation</li> </ul>	HT	May 2023	<p>The underlying switchboard infrastructure has been replaced and has been successfully tested and is now in an operational live state.</p> <p>The next phase of the project is the improve how patients can navigate the telephony system, with the introduction of the interactive voice response approach (IVR). Interactive Voice Response (IVR) is an automated phone system technology that allows incoming callers to access</p>

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				information via a voice response system of pre-recorded messages without having to speak to an agent, as well as to utilise menu options via touch tone keypad selection or speech recognition to have their call routed to specific departments. A well designed IVR software system can help increase call rates particularly during times of high call volume, However, patients will always have the opportunity to speak to a switchboard operator if they wish.
	<ul style="list-style-type: none"> <li>To provide further detail regarding the extent and availability of the Admiral Nurse service across the Health Board</li> </ul>	MR	May 2023	Completed. Information has been shared with Board members.
	<ul style="list-style-type: none"> <li>To discuss further with the team training in Mental Capacity Legislation and, for example, whether an 'aide memoire' tool could be developed</li> </ul>	MR	May 2023	Contact has been made with the DoLs team and a request made to review the information available to staff to support compliance and improvements in practice. The team has been asked to provide an update by the end of May 2023.
	<ul style="list-style-type: none"> <li>To clarify further to what extent the additional parking at GGH would be managed</li> </ul>	AC	May 2023	Completed. As part of the operational procedure, any staff who sign up to utilise the Gwili Railway car park will be added to the ANPR 'list' for the GGH site. This will result in a Parking Charge Notice being issued to should they park on the GGH site as opposed to the Gwili Railway car park. This will not apply on

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				<p>those days where the Gwili Railway car park is not available (weekends).</p> <p>This has been made clear in all communications with those who have volunteered to use the site so far.</p> <p>Staff will be able to contact the Central Transport Unit to request an exemption from the ANPR enforcement, should they need to access the site as a patient.</p> <p>A total of 282 staff have volunteered to use the Gwili Railway car park. 170 have been shortlisted to use it when it opens, with the remainder added to a reserve list.</p> <p>Once the number of staff parking on site has been reduced, more stringent control of the Outpatients car park will be possible, to ensure it is used exclusively for patients only.</p> <p>The Gwili Railway car park is just one improvement scheme underway currently. An additional 45 parking spaces are expected to become available in early June 2023, where the W&amp;C Phase 2 constructor's compound is currently located.</p>
	<ul style="list-style-type: none"> <li>To establish whether there are any further developments in terms of Red Cross provision/contracts</li> </ul>	AC	May 2023	There continues to be a British Red Cross (BRC) Service provided in Pembrokeshire, linked to the successful PIVOT service.

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				There is also a contract for a service at Glangwili Hospital supporting the Emergency Department. Carmarthenshire and Ceredigion Counties have both decommissioned their BRC Services. Carmarthenshire is out to tender for low level care provision as part of the care at home framework, which is something the BRC could submit a response to.
	<ul style="list-style-type: none"> <li>To check whether the 'maternity passport' is in place</li> </ul>	MR	May 2023	The Maternity Passport is for women with communication/ understanding difficulties. This has been to the L&D Team and Easy Read Group and has recently been translated into Welsh. The Passport is going to the Guideline Committee this month for final approval, which will include an identification sticker for hospital notes. The plan is to go live from 1 June 2023.
PM(23)60	<b>FINANCIAL REPORT:</b>			
	<ul style="list-style-type: none"> <li>To corrected errors in headings on page 6 of Appendix 2 and transposition of information and reissue the reports</li> </ul>	HT	May 2023	Completed. Revised report published on web.
	<ul style="list-style-type: none"> <li>To provide during the In-Committee Board session an explanation around the scoring of two providers in the MHLTD tendering process</li> </ul>	HT	March 2023	Completed.

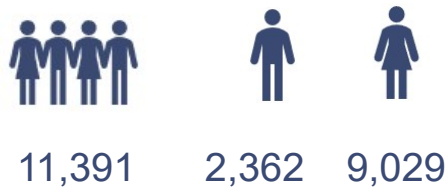


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PM(23)61	<b>INTEGRATED PERFORMANCE ASSURANCE REPORT:</b> <ul style="list-style-type: none"> <li>To share with the Board the Workforce metrics report which is presented to PODCC</li> </ul>	LG	May 2023	Completed. Attached at Appendix 1.
PM(23)62	<b>OPERATIONAL UPDATE:</b> <ul style="list-style-type: none"> <li>To include in census data regarding Delayed Pathways of Care a percentage column</li> </ul>	AC	May 2023	Completed. Reflected in the current version of the report.
PM(23)63	<b>CLINICAL SERVICES PLAN:</b> <ul style="list-style-type: none"> <li>To incorporate information on development of the Primary Care Strategy into future reports on this topic</li> </ul>	JP	May 2023	Completed/noted.
PM(23)64	<b>EMERGENCY GENERAL SURGERY:</b> <ul style="list-style-type: none"> <li>To discuss the Communications approach with the Communications and Engagement Director</li> </ul>	AC	May 2023	Draft communications plan for General Emergency Services prepared including local staff communications and reactive handling plan. Broader Clinical Services Plan communications and engagement plan will be developed to support the Clinical Services Plan.
PM(23)65	<b>MANAGED PRACTICE STRATEGY:</b> <ul style="list-style-type: none"> <li>To incorporate a session to consider risks and fragilities in Primary Care into the Board Seminar forward plan</li> </ul>	JW/JP	May 2023	Date to be confirmed.
PM(23)66	<b>CARE HOME CAPACITY AND FRAGILITY REPORT:</b> <ul style="list-style-type: none"> <li>To present the findings of a review of the governance of statutory bodies to the July 2023 Board meeting</li> </ul>	JP/AC/ JW	July 2023	Forward planned for July 2023 Public Board meeting.

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PM(23)68	<b>ELECTRONIC PATIENT FLOW AND ELECTRONIC OBSERVATIONS OUTLINE BUSINESS CASE:</b> <ul style="list-style-type: none"> <li>To ensure stakeholder engagement at an early stage</li> </ul>	HT	May 2023	A stakeholder engagement plan has been developed to ensure that all opinions are considered whilst drafting the system specification and the finalised business case for consideration by the Board.

# Workforce Profile as at December 2022

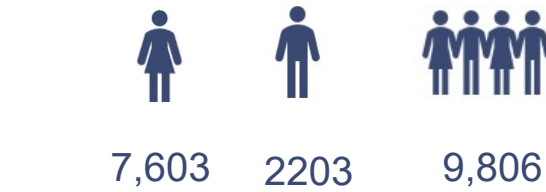
Headcount - Excludes Locum & Bank



Workforce Profile comparing Full time and Part time working as a percentage.  
Left shows % by headcount and Right shows % by FTE Excluding Locum & Bank

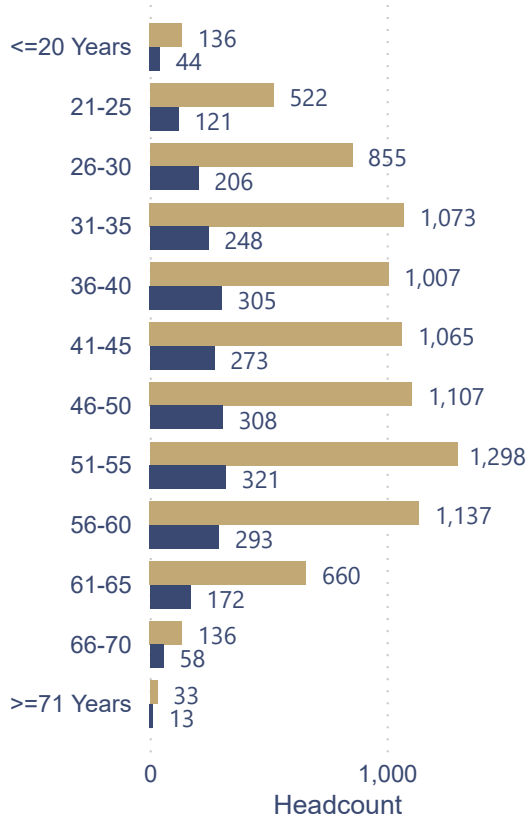


FTE Excludes Locum & Bank



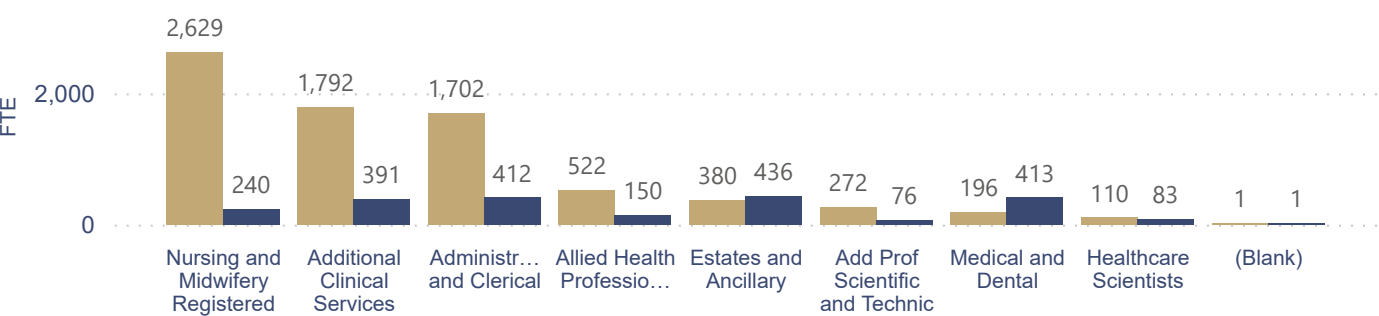
## Age & Gender Profile by Headcount

Female Headcount Male Headcount



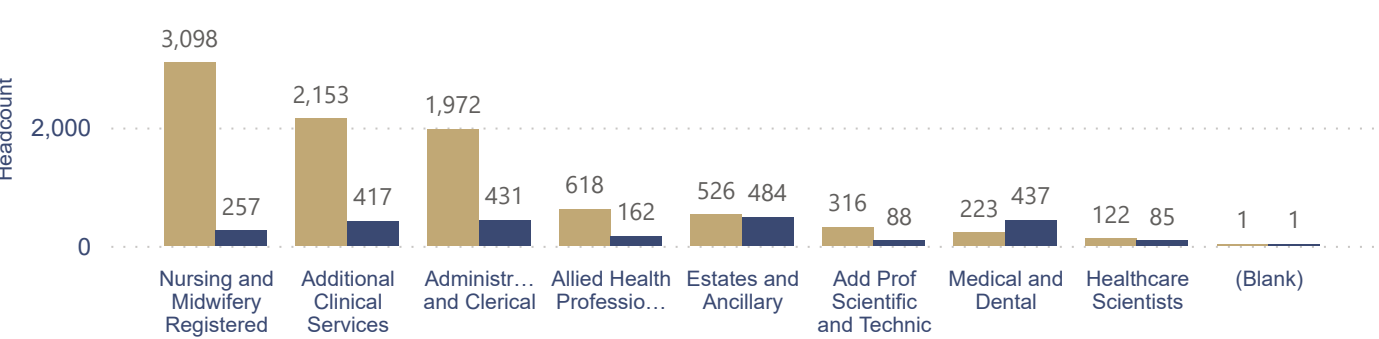
## Gender Profile by Staff Group & FTE

Female FTE Male FTE



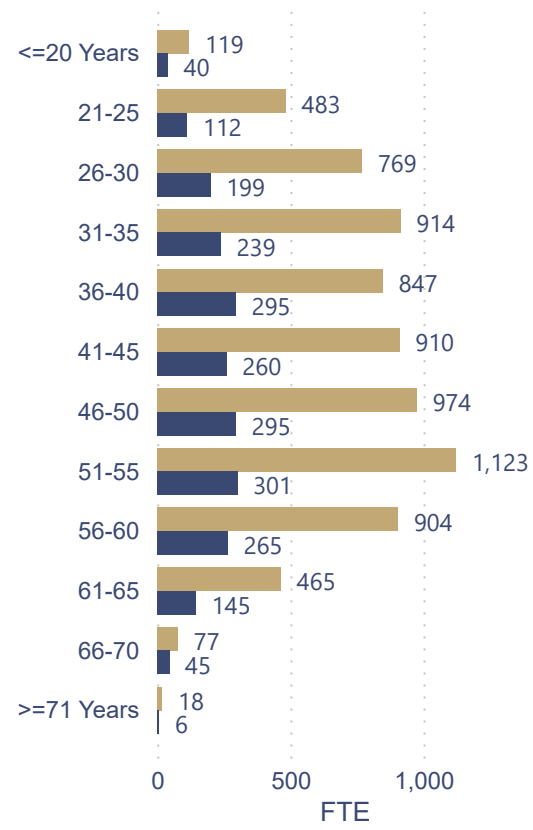
## Gender Profile by Staff Group & Headcount

Female Headcount Male Headcount



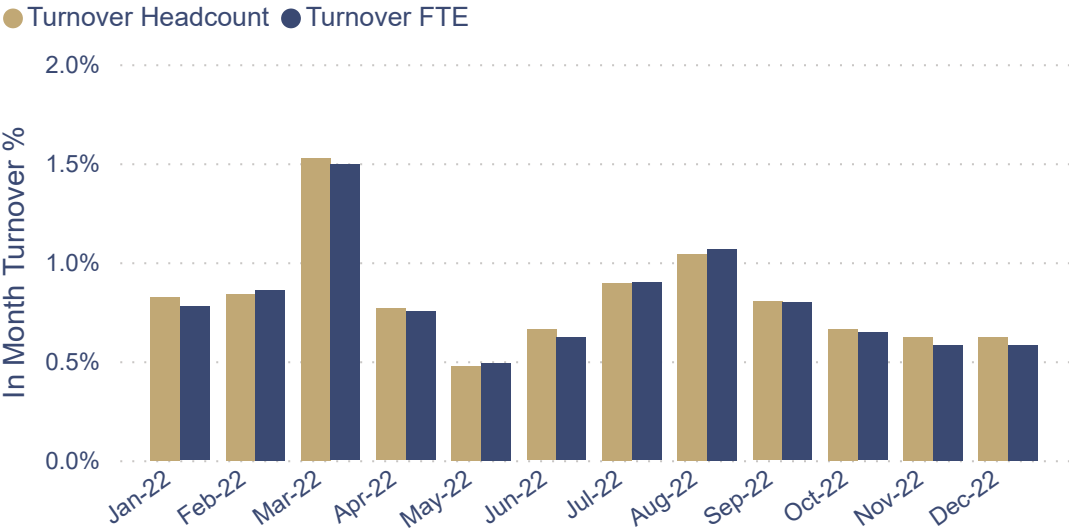
## Age & Gender Profile by FTE

Female FTE Male FTE

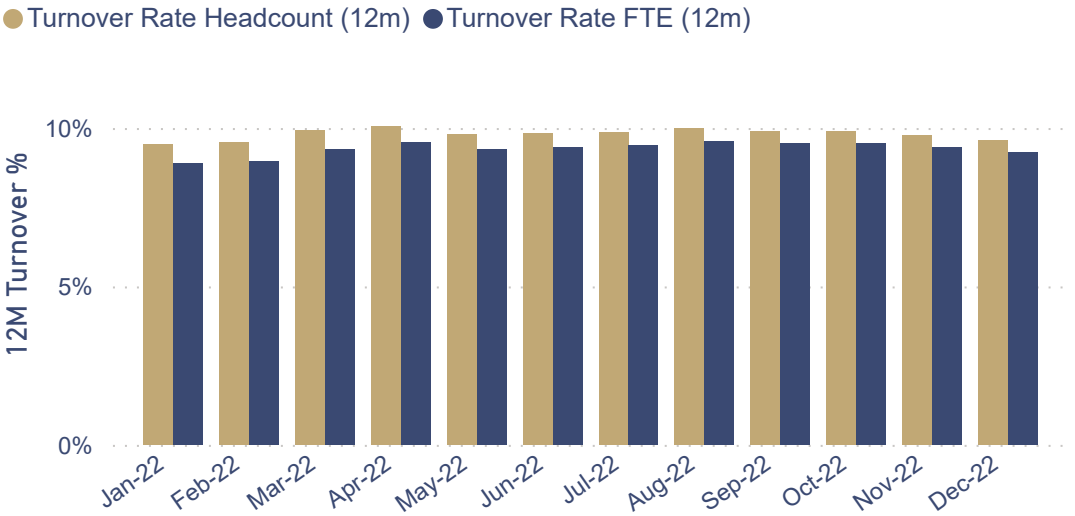


# Starters, Leavers & Turnover as at December 2022

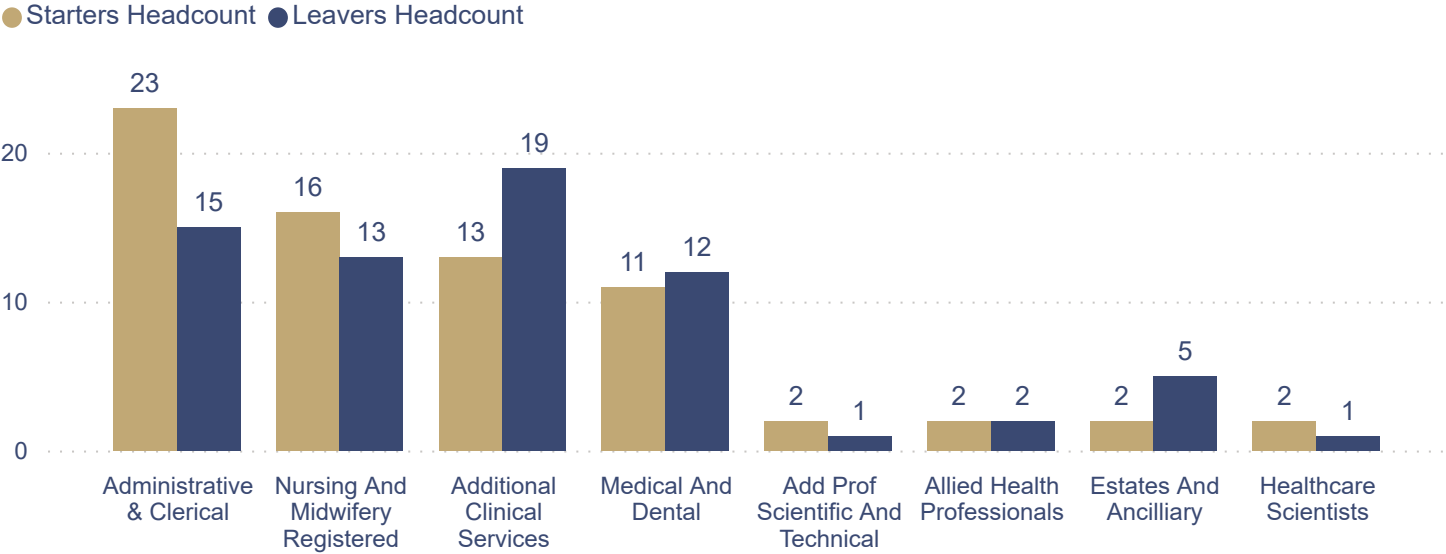
In Month Turnover Rate by Headcount & FTE



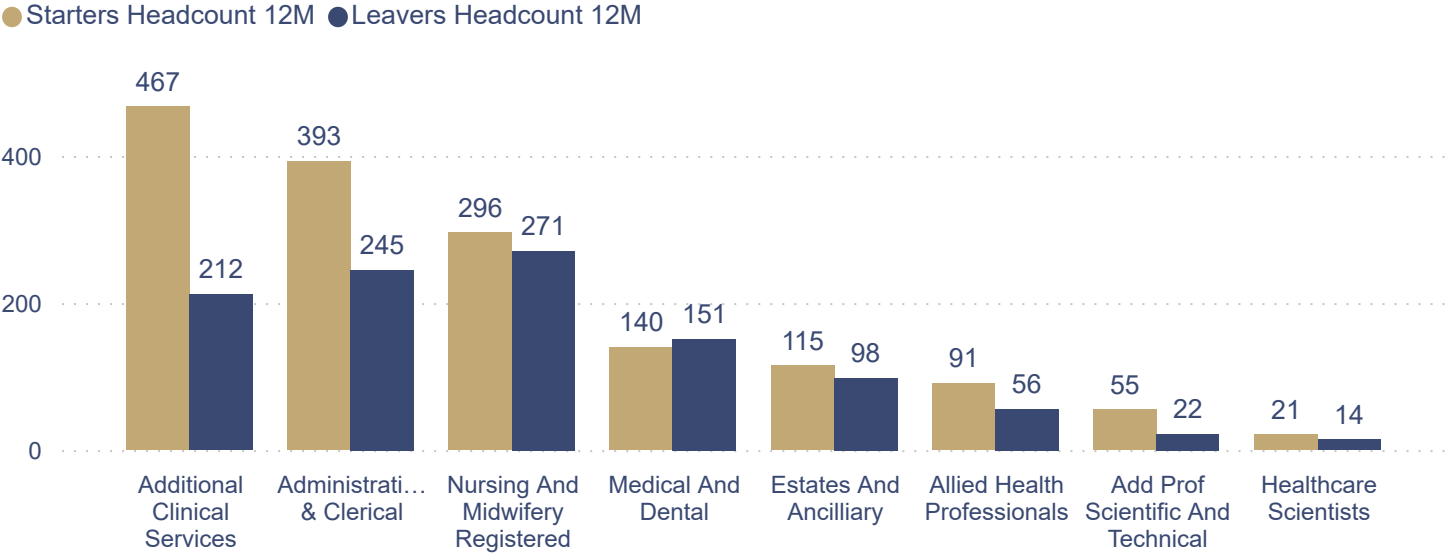
12M Turnover Rate by Headcount & FTE



Starters and Leavers Headcount by Staff Group



Starters and Leavers Headcount by Staff Group in the last 12 Months



Starters, Leavers & Turnover as at December 2022

Leavers in Month by Reason

Leaving Reason	Leavers Headcount
Voluntary Resignation - Other/Not Known	20
Retirement Age	18
Voluntary Resignation - Relocation	10
Voluntary Resignation - Work Life Balance	5
End of Fixed Term Contract	4
Has Not Worked	2
Voluntary Resignation - Better Reward Package	2
Voluntary Resignation - Health	2
Dismissal - Capability	1
Dismissal - Conduct	1
Dismissal - Some Other Substantial Reason	1
End of Fixed Term Contract - Other	1
Voluntary Resignation - Child Dependants	1
Voluntary Resignation - Incompatible Working Relationships	1
Voluntary Resignation - Promotion	1
Voluntary Resignation - To undertake further education or training	1

Retired & Returned in the last 12 months

200

WTE prior to Retiring

174.19

WTE after returning

99.82

Leavers in the last 12 Months by Reason

Leaving Reason	Leavers Headcount 12M
Retirement Age	313
Voluntary Resignation - Other/Not Known	284
Voluntary Resignation - Relocation	98
Voluntary Resignation - Work Life Balance	84
End of Fixed Term Contract	65
Voluntary Early Retirement - with Actuarial Reduction	28
Voluntary Resignation - Promotion	28
Voluntary Resignation - Better Reward Package	26
Voluntary Resignation - Health	26
End of Fixed Term Contract - External Rotation	22
Retirement - Ill Health	16
Dismissal - Capability	14
Voluntary Resignation - Child Dependants	12
Voluntary Resignation - To undertake further education or training	12
Employee Transfer	9
Voluntary Resignation - Lack of Opportunities	8
Death in Service	7
Voluntary Resignation - Incompatible Working Relationships	6
End of Fixed Term Contract - Other	5
Has Not Worked	5
Bank Staff not fulfilled minimum work requirement	4
Dismissal - Conduct	4
Voluntary Resignation - Adult Dependants	4
Dismissal - Some Other Substantial Reason	3
Redundancy - Voluntary	2
Voluntary Early Retirement - no Actuarial Reduction	2
End of Fixed Term Contract - Completion of Training Scheme	1
End of Fixed Term Contract - End of Work Requirement	1

# Turnover Benchmarking as at October 2022

NHS Wales figure only includes people who have left NHS Wales. Therefore, staff movement between organisations ("churn") is excluded. In some case NHS Wales' turnover will be lower than all organisations for this reason.

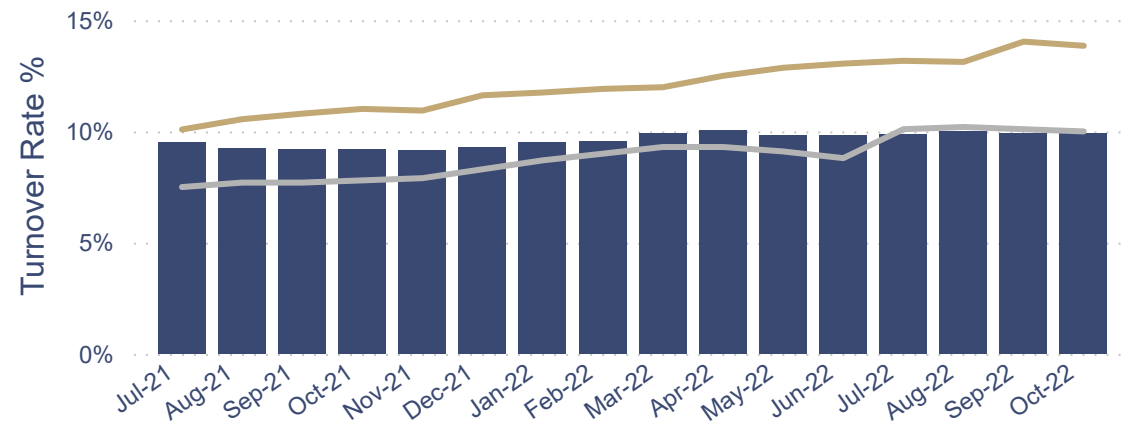
To provide more comparable benchmarking, We have calculated an average per month of the other health boards to benchmark against so that it is more comparable and include the normal 'churn' of staff moving between health boards in NHS Wales. The other Health Boards are:

Aneurin Bevan UHB (AB), Betsi Cadwaladr UHB (BCU), Cardiff & Vale UHB (C&V), Cwm Taff Morgannwg UHB (CTM), Swansea Bay UHB (SB), Powys TLHB (Powys), Public Health Wales (PHW) and Welsh Ambulance Service Trust (WAST).

As NWIS staff left Velindre in March 2021, the turnover percentages are very high for Velindre as a result and as such they have been excluded from this comparison and any averages taken from health boards as to not skew the data we compare our performance against

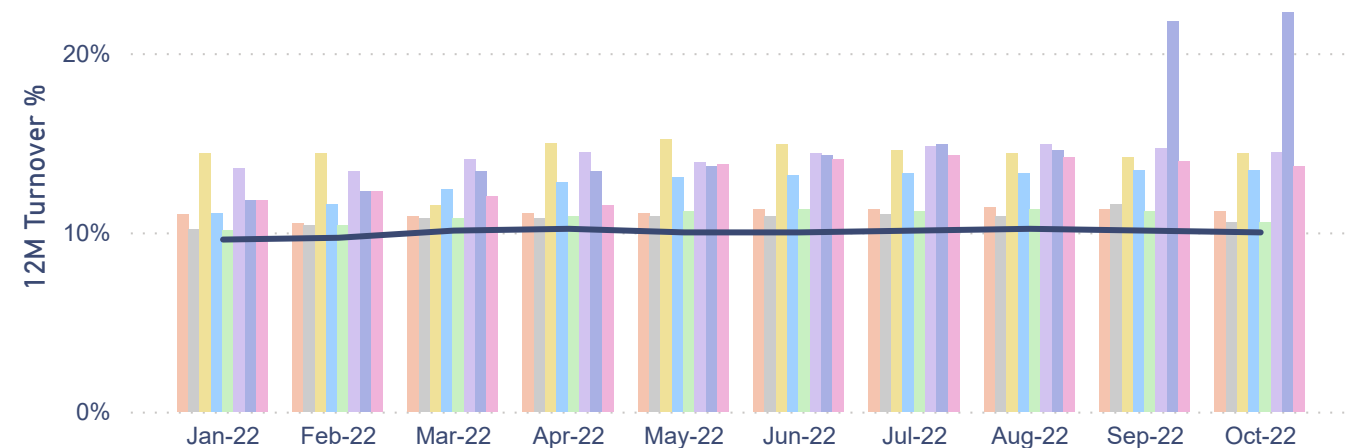
## 12M Turnover Rate compared to NHS Wales (Exc 'churn') and Average of other health boards (Inc 'Churn')

● Turnover Rate 12M (Headcount) — NHS Wales (exc 'churn') — Average (Exc VEL)



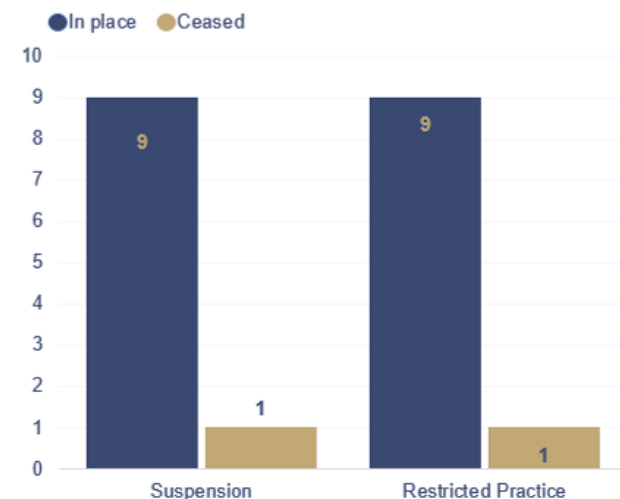
## 12M Turnover Rate compared to other Health Boards

● AB ● BCU ● C&V ● CTM ● SB ● Powys ● PHW ● WAST — HDUHB



# Employee Relations Activity

## Suspension / Restricted Practice



## Employee Relations Activity - Case Load

Description	New Cases (Dec 22)	Closed Cases (Year to Date)	Ongoing Cases (including new)	Ongoing Cases (including new)	Appeals
Disciplinary (All Wales and UPSW)	6	63	0	29	0
Respect & Resolution	1	44	6	9	4
Other types of ER cases	7	1	4	3	0
<b>Total</b>	<b>14</b>	<b>108</b>	<b>10</b>	<b>41</b>	<b>4</b>

Disciplinary (All Wales and UPSW) - working with the information governance updated guidance has been issued to staff on the importance of confidentiality and the consequences of any breaches.

Respect & Resolution - The above data includes issues raised as either a grievance or a dignity and respect at work issue.

Other types of ER cases e.g. capability, whistleblowing etc. - This metric includes both performance at work and other types of ER casework not described elsewhere.

Please note that the analysis can be found in more detail in the Workforce item later on the agenda

## Employment Tribunal Cases

Date Commenced	Stage	Outcome				Date closed
		Withdrawn	Settled	Dismissed	Upheld	
Aug-2020	Hearing			✓ - 2 claims		Jun-2022
Aug-2020	Hearing			✓ - 1 claim		Dec-2022
Sep-2020	Hearing			✓		Jun-2022
Mar-2021	Post ET3	✓				Jan-2022
Jun-2021	Post ET3	✓				Feb-2022
Oct-2021	Hearing			✓		May-2022
Jul-2021	Hearing					
Apr-2022	Preliminary Hearing					
Apr-2022	Hearing					
May-2022	Hearing					
May-2022	Hearing					
Jun-2022	Hearing					
Jun-2022	Preliminary Hearing					
Jun-2022	ET3					

## Policy Review - Local

April 2022 to March 2023	Number of Policies	Completion / Progression Rate
Completed & Approved	14	39%
Work in Progress/Due for Approval	9	25%
Working groups to be established/complete reviews	13	
<b>Total</b>	<b>36</b>	
Forecasted Completion Rate as at March 2023		64%

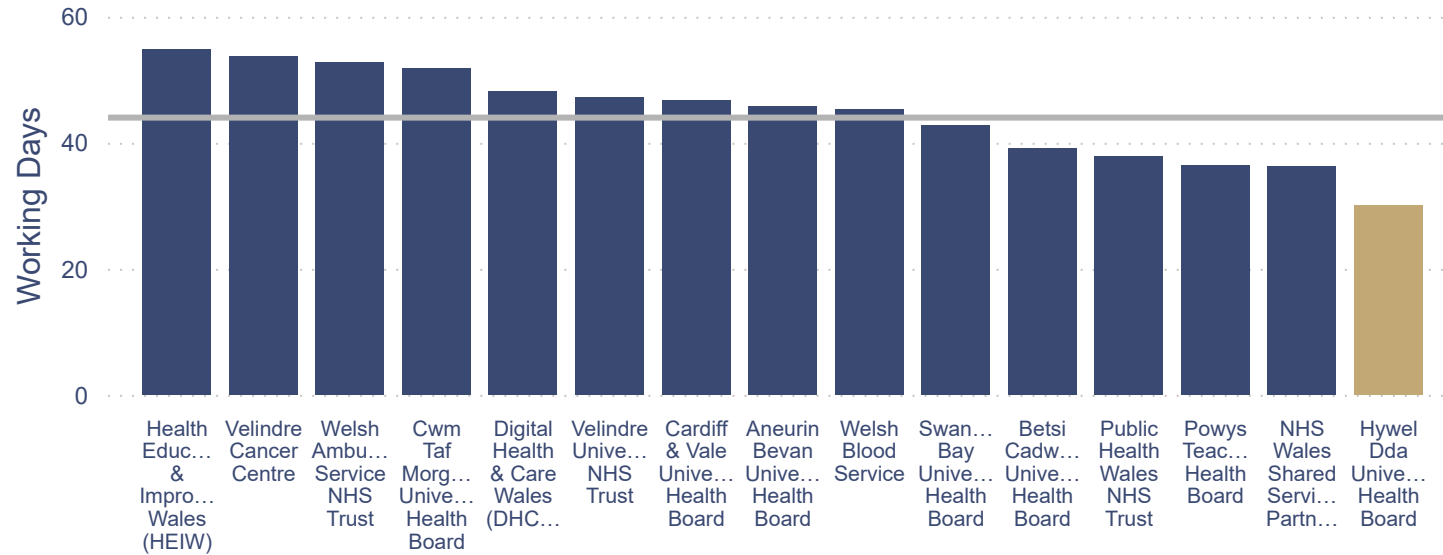
# Recruitment Activity as at December 2022



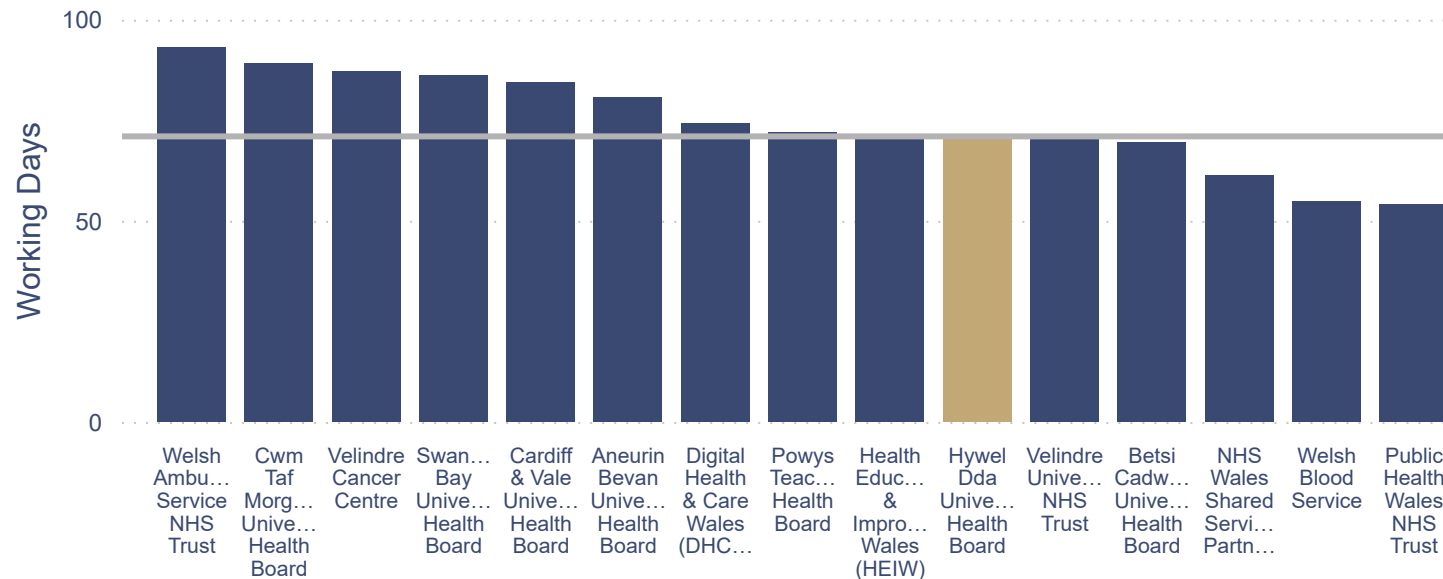
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Vacancy Creation to conditional offer compared to other Orgs and Target of 44 days



## Vacancy Creation to unconditional offer compared to other Orgs and Target of 71 days



## DBS Checks Processed

Month	Adult Barred Lists	Child Barred Lists	Overseas Doctors	% Compliance
Jul-21	119	123	6	100.0%
Aug-21	134	132	8	100.0%
Sep-21	180	181	3	100.0%
Oct-21	151	154	4	100.0%
Nov-21	143	143	6	100.0%
Dec-21	84	83	6	100.0%
Jan-22	176	169	3	100.0%
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%

October - Health & Social care apprentice started prior to DBS being returned. This was to ensure Apprentice could start on employment and educational pathway; a risk assessment was undertaken.

## Time to Hire by Staff Group

Staff Group	Hywel Dda University Health Board	Cardiff & Vale University Health Board	Swansea Bay University Health Board	Betsi Cadwaladr University Health Board
A&C	65.7	74.1	88.9	59.2
ACS	71.1	82.8	75.1	70.6
AHP	78.4	81.3	84.8	85.1
APST	71.0	94.1	73.0	72.9
EA	65.4	65.5	93.5	75.7
HS		79.2	107.2	95.3
M&D				
NMR	76.4	95.4	83.2	73.0



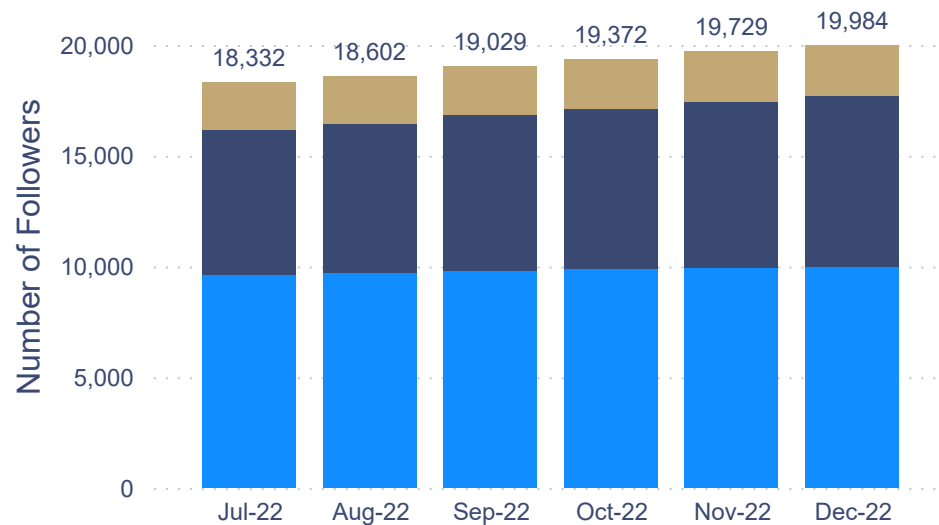
## International Recruitment Performance - Target to Recruit 100 Registered Nurses.

100%

International RN Recruitment  
Phase 1

## Followers on Social Media

● Facebook ● LinkedIn ● Twitter



## Recruitment Checks by Health Board

Org	Time to approve vacancy request	Time to advertise	Duration of advertising	Time to move to shortlisting	Time to Shortlist	Time to update interview outcomes
NHS Wales Shared Services Partnership	7.6	1.4	8.0	0.9	7.5	5.2
Powys Teaching Health Board	11.3	1.9	9.3	0.9	19.6	3.3
Welsh Blood Service	5.0	1.8	7.9	0.9	2.8	4.7
Betsi Cadwaladr University Health Board	3.4	1.9	9.8	1.0	7.1	2.7
Cwm Taf Morgannwg University Health Board	17.2	1.7	8.6	1.0	7.8	3.1
Health Education & Improvement Wales (HEIW)	2.5	1.4	11.9	1.0	3.6	3.5
Hywel Dda University Health Board	5.7	1.6	9.5	1.0	3.0	2.5
Swansea Bay University Health Board	8.2	1.7	13.9	1.0	6.0	4.4
Velindre University NHS Trust	4.7	1.7	9.3	1.0	8.1	5.5
Welsh Ambulance Service NHS Trust	11.7	1.5	9.2	1.0	7.3	4.7
Aneurin Bevan University Health Board	9.5	1.7	9.0	1.1	6.3	3.8
Cardiff & Vale University Health Board	12.4	1.8	9.0	1.1	6.5	3.2
Digital Health & Care Wales (DHCW)	1.1	1.5	10.5	1.1	5.8	1.5
Public Health Wales NHS Trust	3.0	1.6	8.9	1.1	9.3	1.9
Velindre Cancer Centre	6.6	1.6	7.9	1.1	13.0	3.9
Target	10.0	2.0	10.0	2.0	3.0	3.0

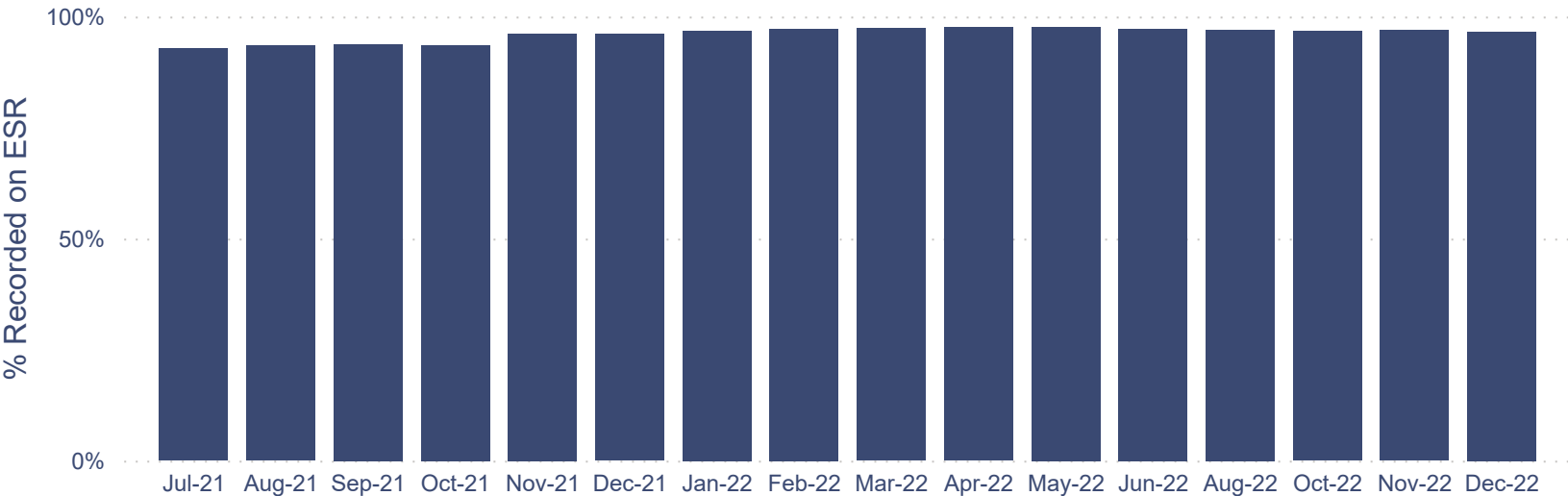
## Medical Recruitment Dec 22

Trac Recruitment Health Check	Target	Month	Time to Target
Time from Notice to Authorisation Start Date	5	13.30	8.3
Time from Vacancy Created to Conditional Offer Letter Issued	44	38.70	-5.3
Time to approve references	2	7.00	5.0
Time to Approve Vacancies	10	2.50	-7.5
Time to notify Recruitment of Interview Outcome	3	1.40	-1.6
Time to Shortlist	3	4.80	1.8

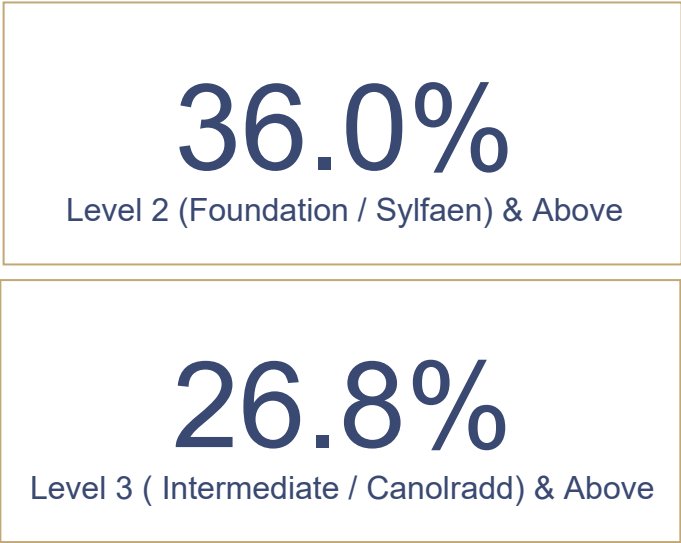
## Month on Month Recruitment Volumes

Axis	Number of FTE advertised	Number of posts advertised
Oct-22	457.3	351
Nov-22	480.9	360
Dec-22	302.1	261
<b>Total</b>	<b>1240.4</b>	<b>972</b>

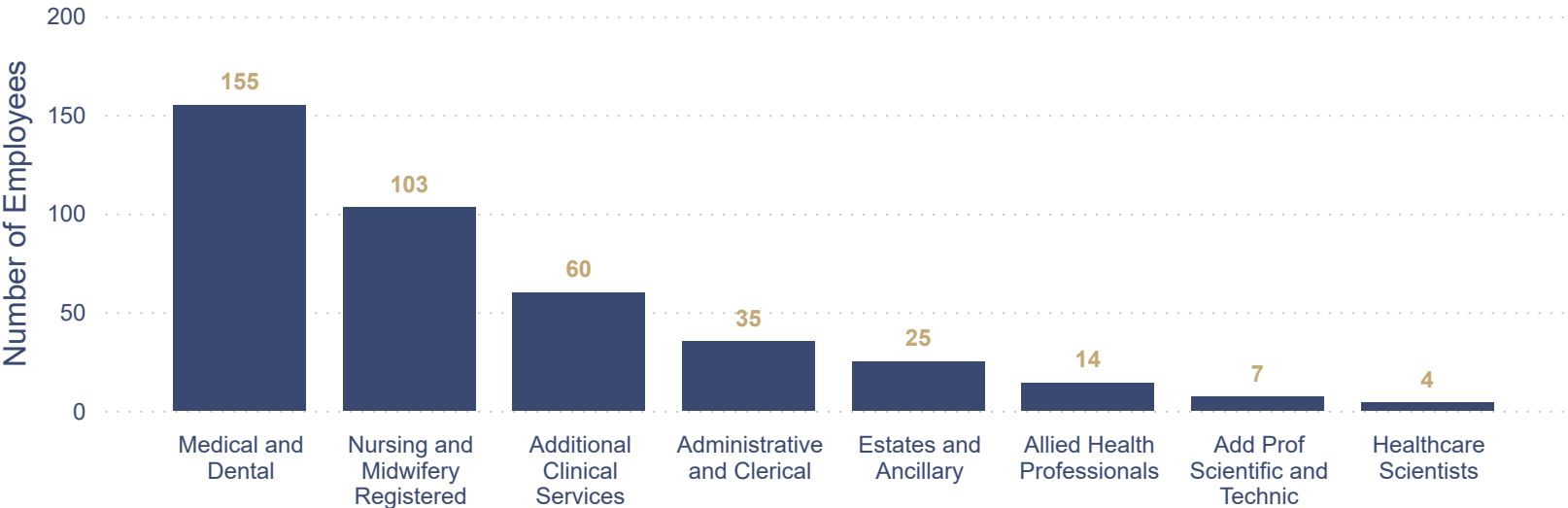
Welsh Language Skills Recorded on ESR



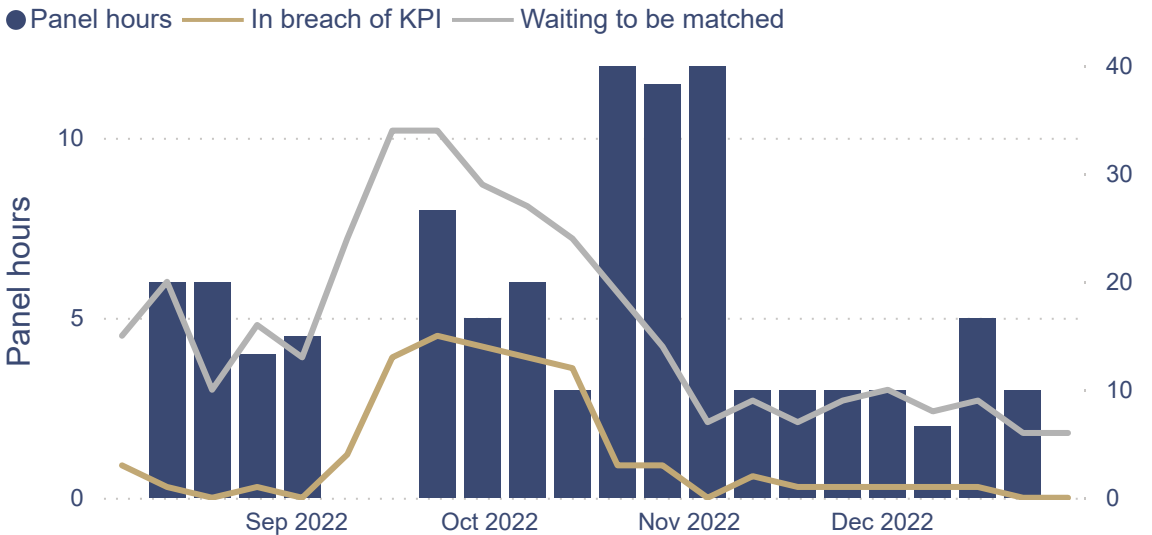
Welsh Language Skills recorded on ESR



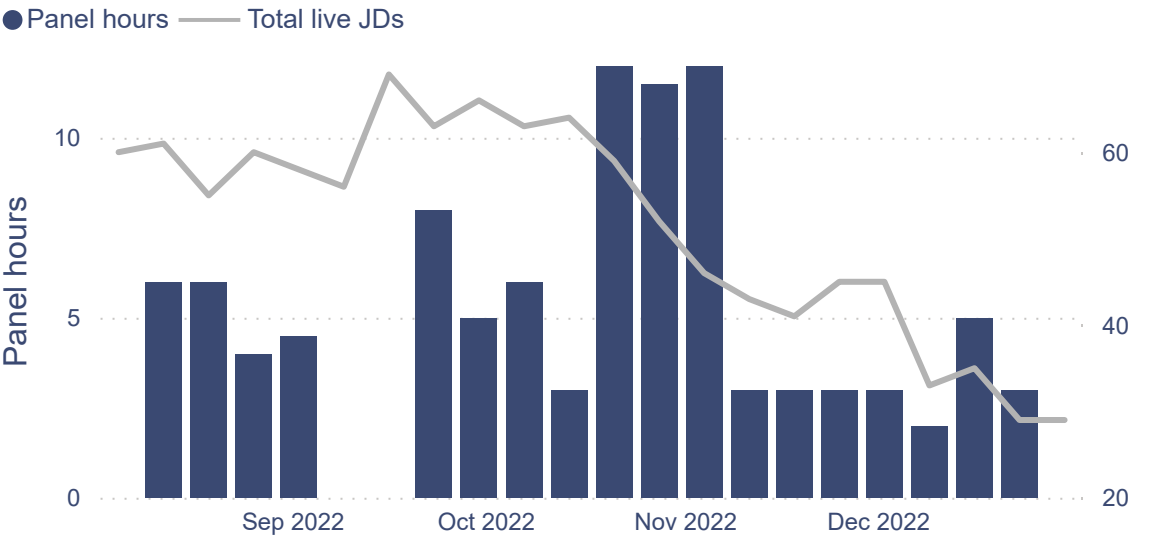
Number of employees by Staff Group that have not recorded Welsh Language Skills on ESR



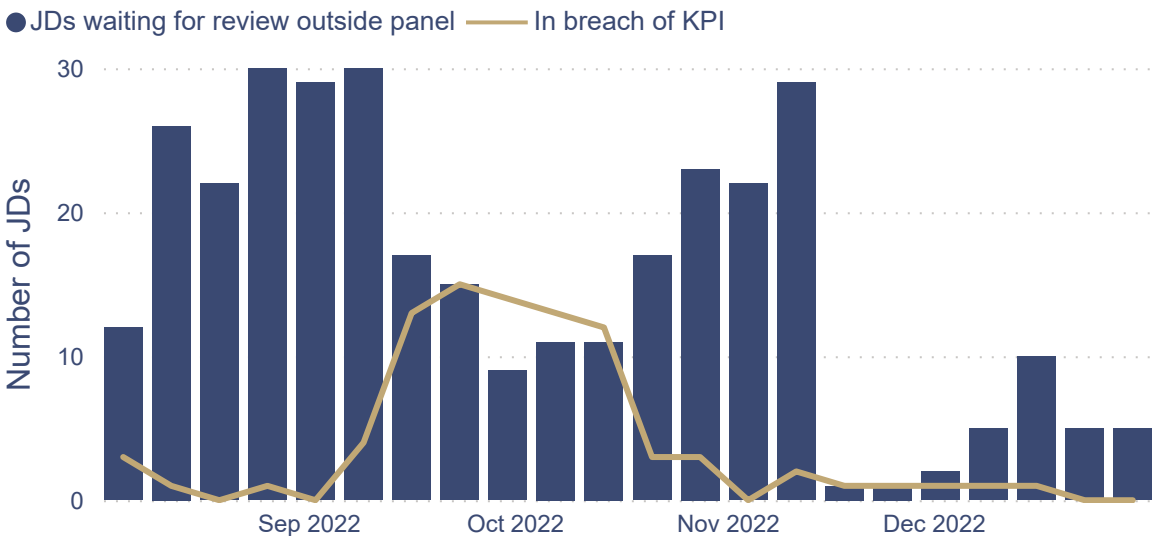
Activity - Waiting to be Matched and KPI breaches by Week



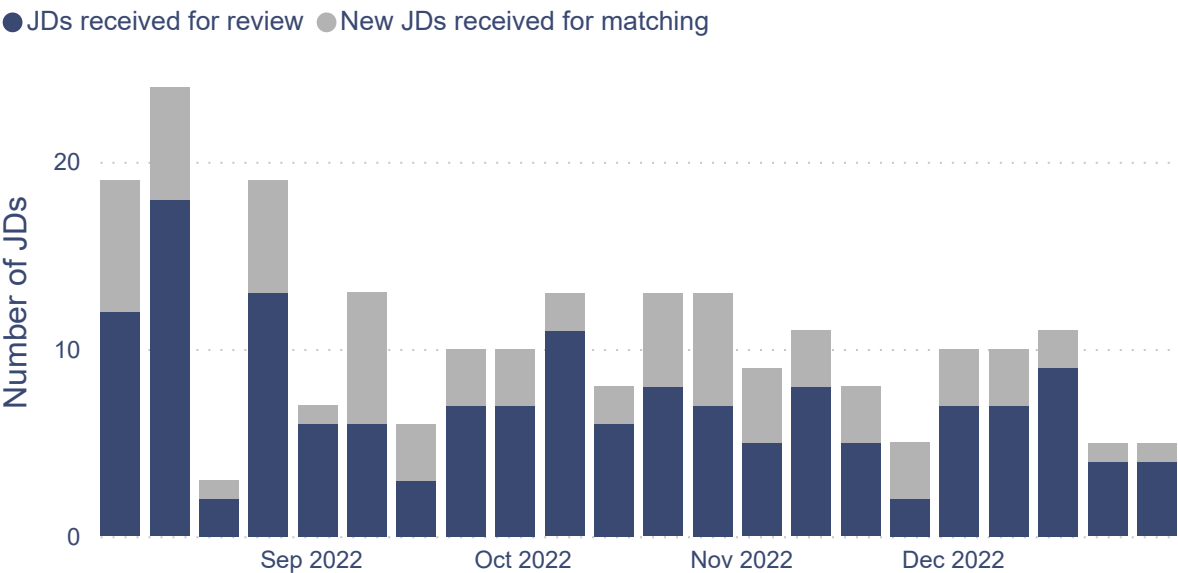
Total live JDs compared to Panel Hours - by Week



Activity - for Review Outside Panel and KPI breaches by Week



Volume - New and for Review by Week



# PADR, Staff Engagement & Consultant/SAS Job Planning Activity as at December 2022



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Staff Engagement Year on Year / Month on Month

Year Of Survey	Sent to	Number completed	Response Rate	Engagement Score
2022 Sample in January	1172	269	23.0%	77.0%
2022 Sample in February	1172	237	20.0%	75.0%
2022 Sample in March	1169	242	20.7%	76.0%
2022 Sample in April	1164	242	20.8%	74.0%
2022 Sample in May	1164	215	18.5%	75.0%
2022 Sample in June	1163	216	18.6%	74.0%
2022 Sample in July	1169	184	16.0%	76.0%
2022 Sample in August	1170	199	17.0%	73.0%
2022 Sample in September	1129	201	17.8%	75.0%
2023 Sample in October	940	168	17.9%	72.0%
2022 Sample in November	1305	97	7.4%	74.0%

Percentage of Staff from the engagement survey who strongly agree or agree that their PADR helps improve how they do their job.

Aug-22

64.8%

Sep-22

67.2%

Oct-22

63.1%

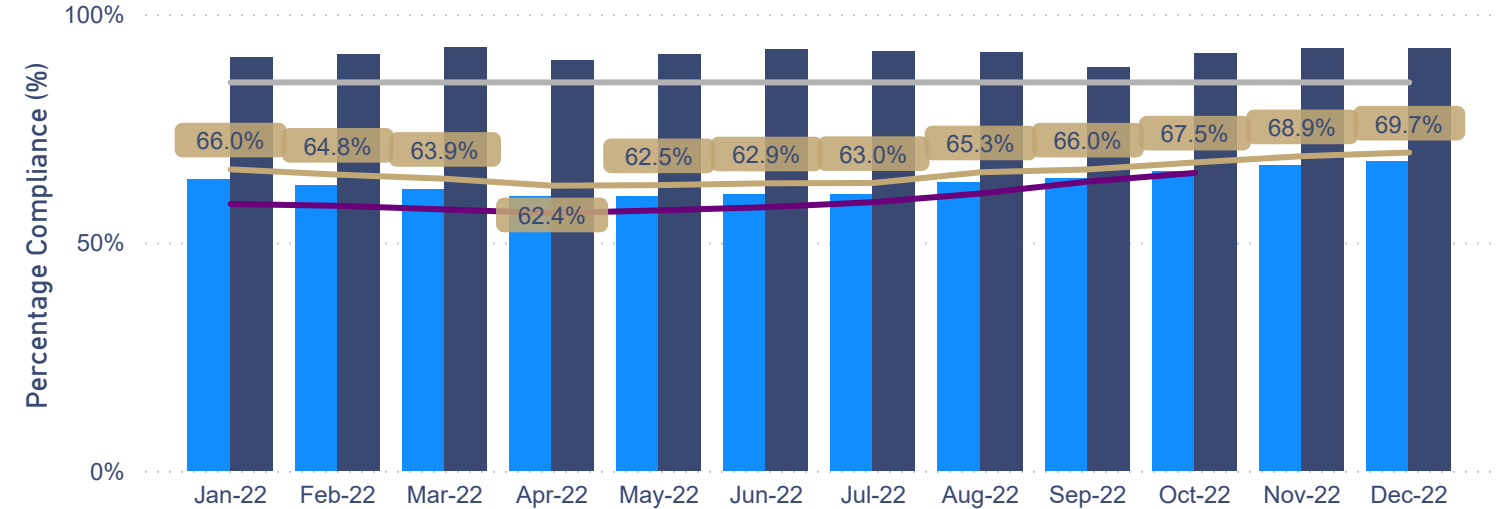
Nov-22

59.8%

Please Note: Board Outcome Survey (BOS) did not run in December 2022; It is starting anew in January 2023 running from the 1st to the 28th of the month.

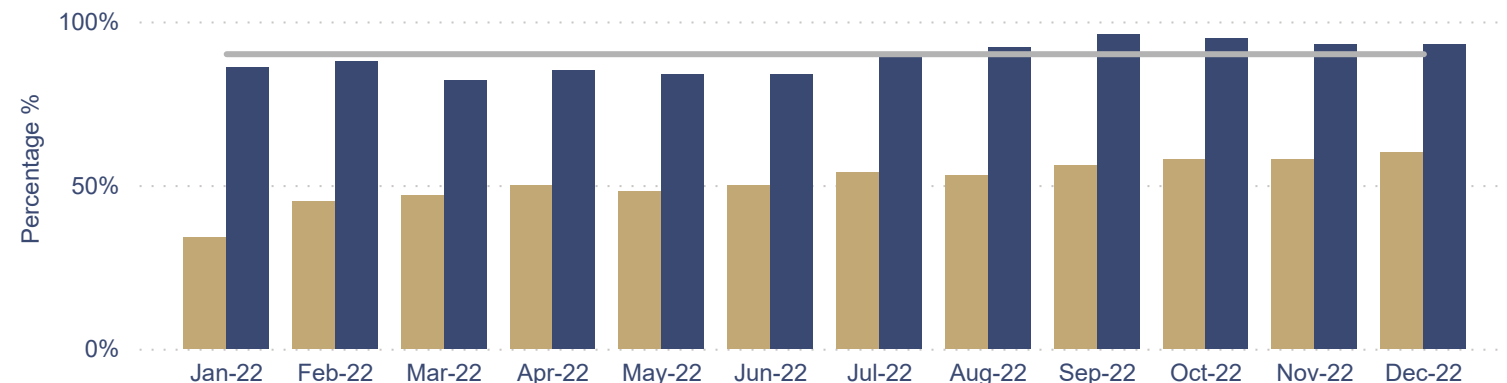
## PADR & Medical Appraisal Compliance to NHS Wales Performance and 85% Target

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



## Consultant/SAS doctors with a Job Plan (Current is within 12 Months) against 90% Target

● Current Job Plan ● Job Plan — Target

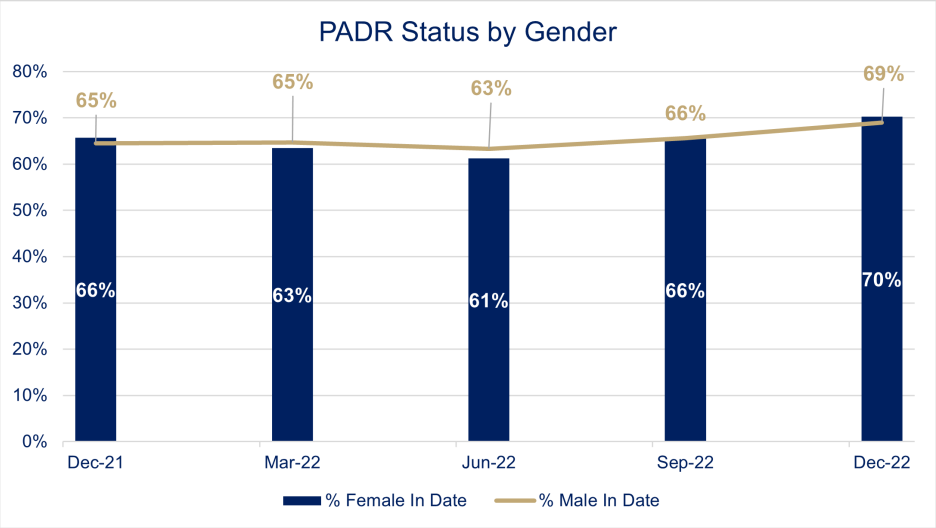
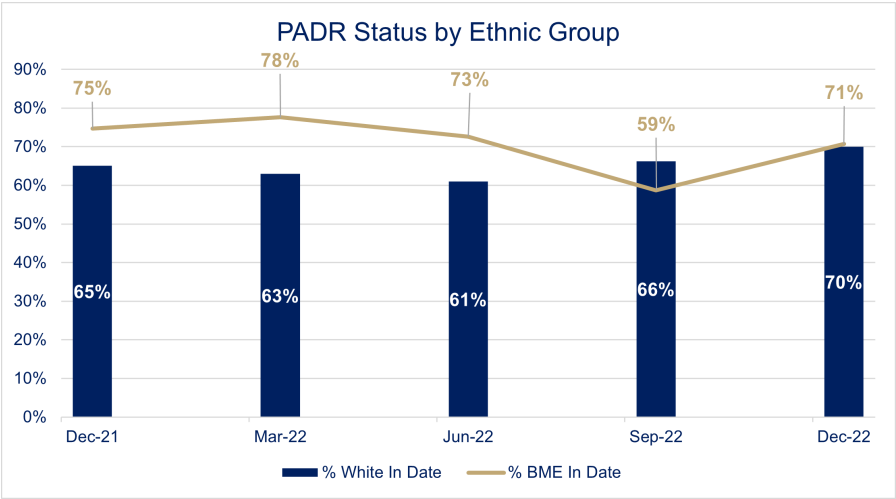


# PADR Status by Protected Characteristics

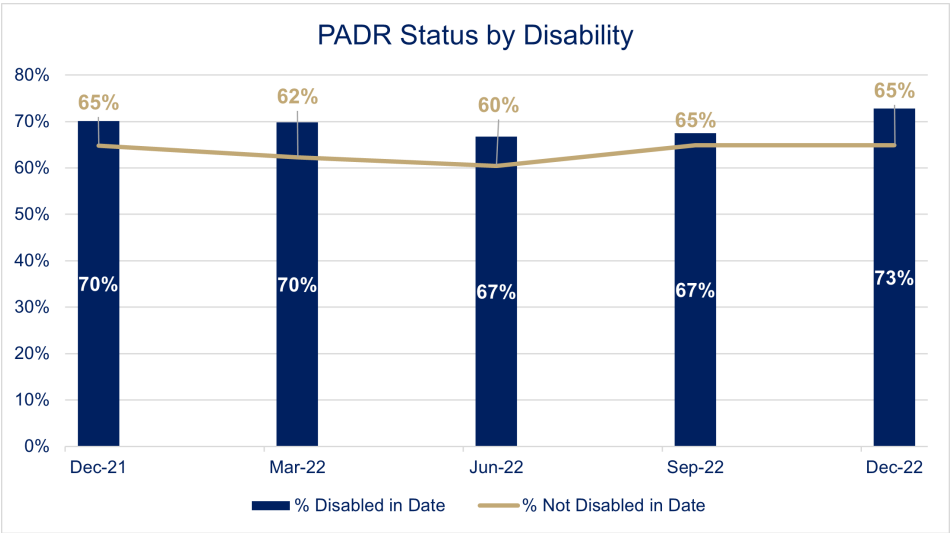


GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board



BME staff “PADR In Date” rate fell below the rate of those classified as “White” in September with a gap of 7%.



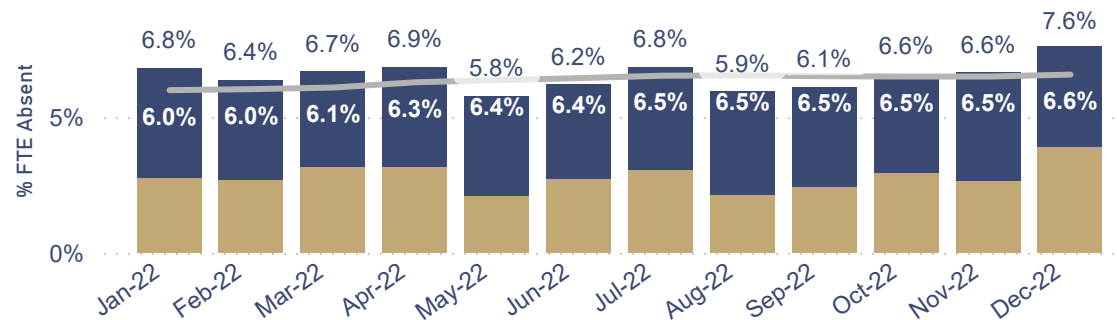
Male staff “PADR in Date” fell below the female staff rate in both December 2021 & December 2022 by 1%.

Staff registered as Disabled had either a higher or equivalent “PADR In Date” rate than those staff not registered as Disabled

## Sickness levels as at December 2022

### % FTE Absent In month & Rolling 12M

● % FTE ST Absent 
 ● % FTE LT Absent 
 — Rolling 12M % FTE



% FTE Absent in Month compared to previous month and the same period last year

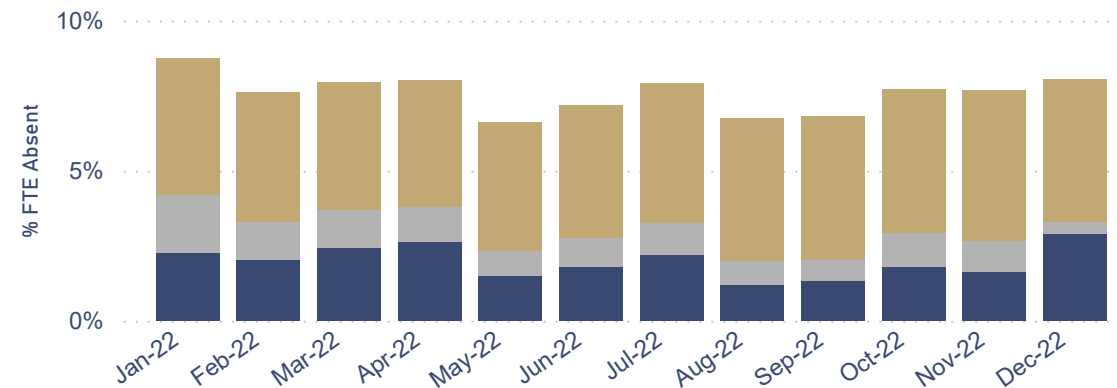
% FTE Absent	Increase/Decrease from Prior Month	Increase/Decrease from Same Period Last Year
7.6%	1.0% ↑	1.1% ↑

### Absence Reason where Absent FTE % > 0.5%

Absence Reason	Oct-22	Nov-22	Dec-22
S10 Anxiety/stress/depression/other psychiatric illnesses	1.7%	1.9%	1.7%
S13 Cold, Cough, Flu - Influenza	0.7%	0.6%	1.5%
S15 Chest & respiratory problems	0.5%	0.5%	0.8%
S27 Infectious diseases	0.6%	0.5%	0.6%

### % FTE Absent Split by COVID, Isolating & Other Sickness

● % FTE COVID Absent 
 ● % FTE Isolating 
 ● % FTE Other Absent

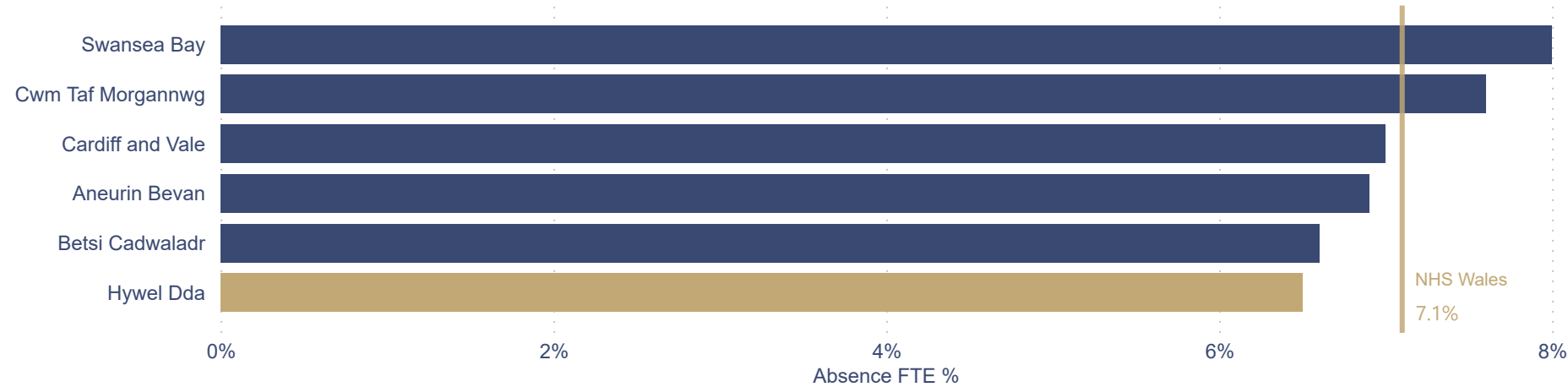


Staff Group	Dec-22 % FTE Absent	Headcount
Nursing and Midwifery Registered	2.5%	1,619
Additional Clinical Services	2.4%	643
Administrative and Clerical	1.1%	1,061
Estates and Ancillary	0.8%	1,312
Allied Health Professionals	0.4%	1,321
Add Prof Scientific and Technic	0.2%	180
Medical and Dental	0.1%	1,415
Healthcare Scientists	0.1%	1,338

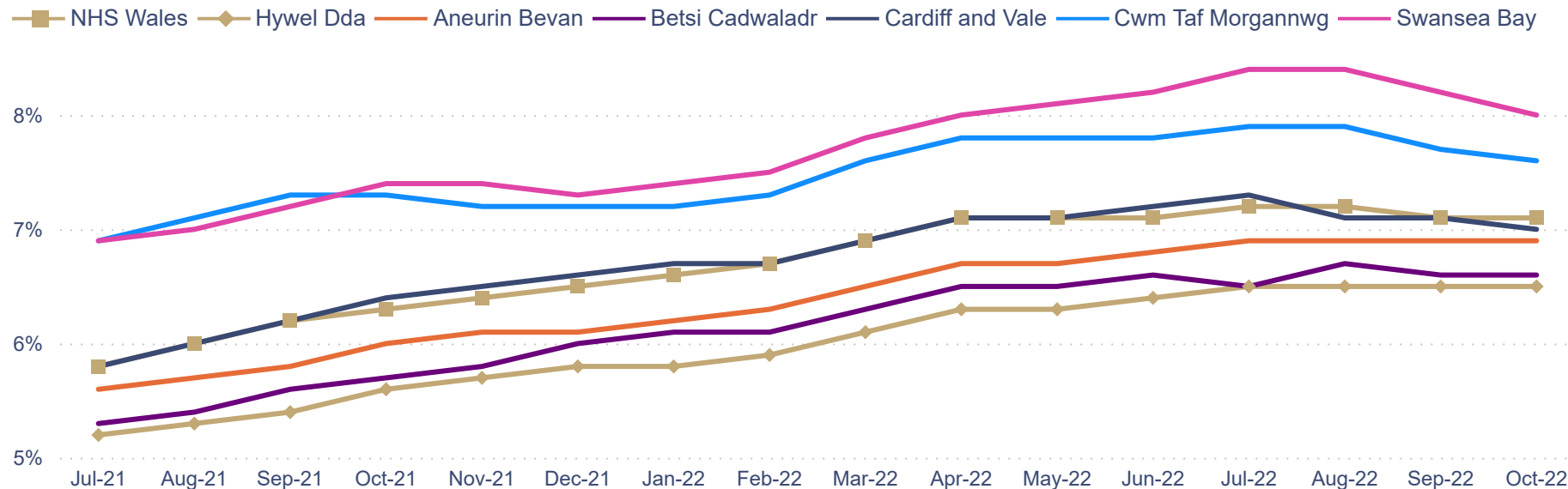
# Sickness benchmarking as at October 2022

Please note that NHS Wales Benchmarking figures are currently only up to October 2022 as such the Hywel Dda figures on this page are also as at October 2022.

## Sickness absence FTE % October 22 performance compared to other Health Boards and NHS Wales



## Rolling 12M sickness absence rates Jul '21 - Oct '22



205

Immunisations given

Clearances	Target (Working days)	Performance	Dec-22	Compliance
Occupational Health clearance	5	0-5 Days	184	65%
		5-10 Days	75	27%
		11 Days +	9	3%
Not Cleared Awaiting response			14	

3

Waiting Times - Nurse  
(Weeks)

1560

Action point calls received

Management Referrals	Target (Working days)	Performance	Dec-22	Compliance
Receipt to triage	2	0-5 Days	107	79%
		5-10 Days	22	16%
		11 Days +	3	2%
Not yet triaged			3	
Receipt to first offered appointment	20	0-5 Days	38	28%
		5-10 Days	59	44%
		11 Days +	11	8%
Not yet triaged			3	
Awaiting Appointment			24	

Diary Full

Vacancy as at 27/1/23

Waiting Times - Physiotherapist  
(Weeks)

925

Telephone Requests for  
advice

282

Pre-employment questionnaire  
clearance requests

Self Referrals	Target (Working days)	Performance	Dec-22	Compliance
Receipt to first offered appointment	30	0-5 Days	5	23%
		5-10 Days	1	5%
		11 Days +	16	73%

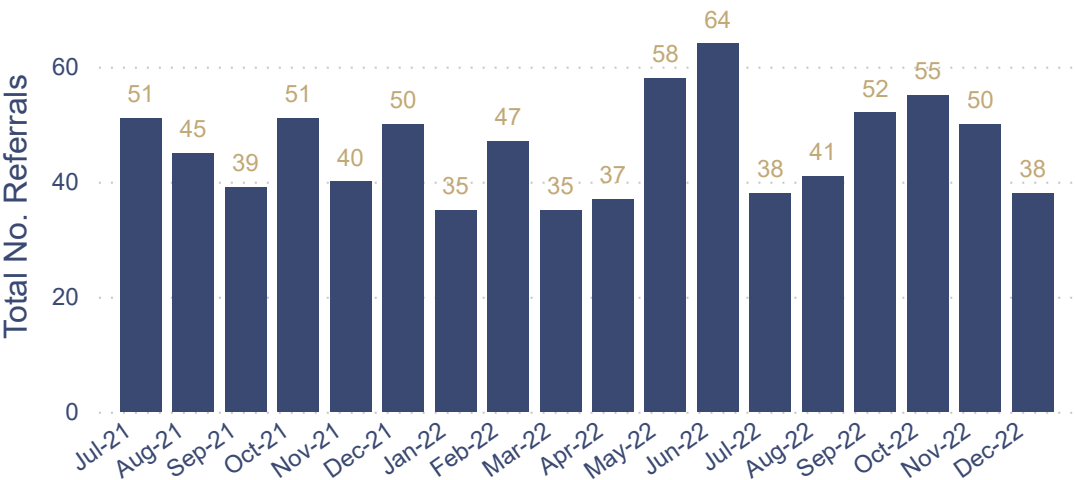
6

Waiting Times - Doctor  
(Weeks)

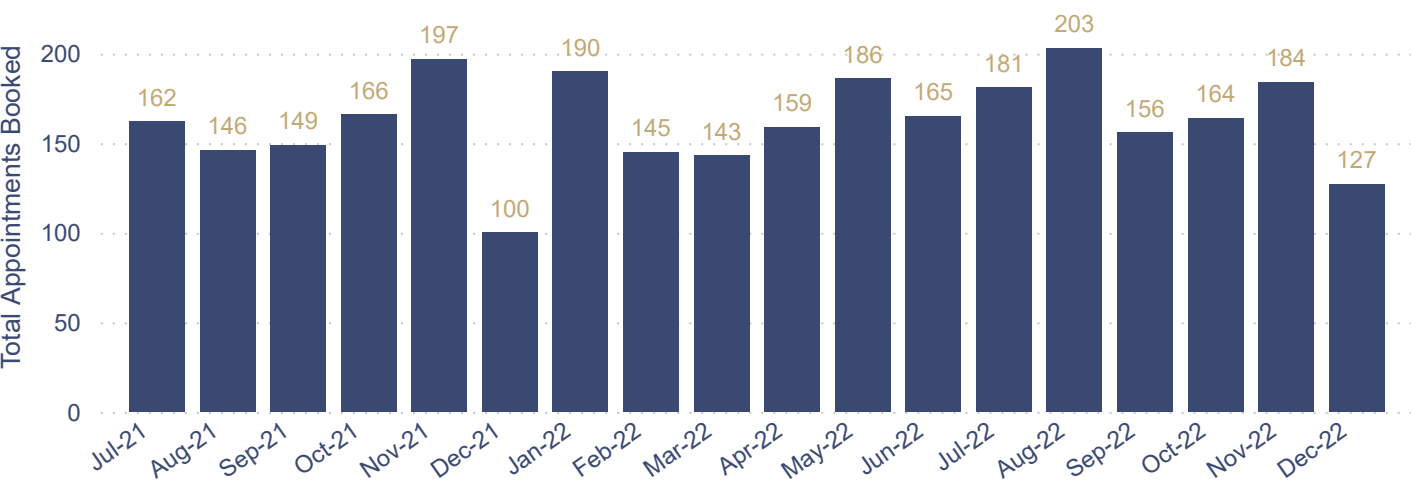




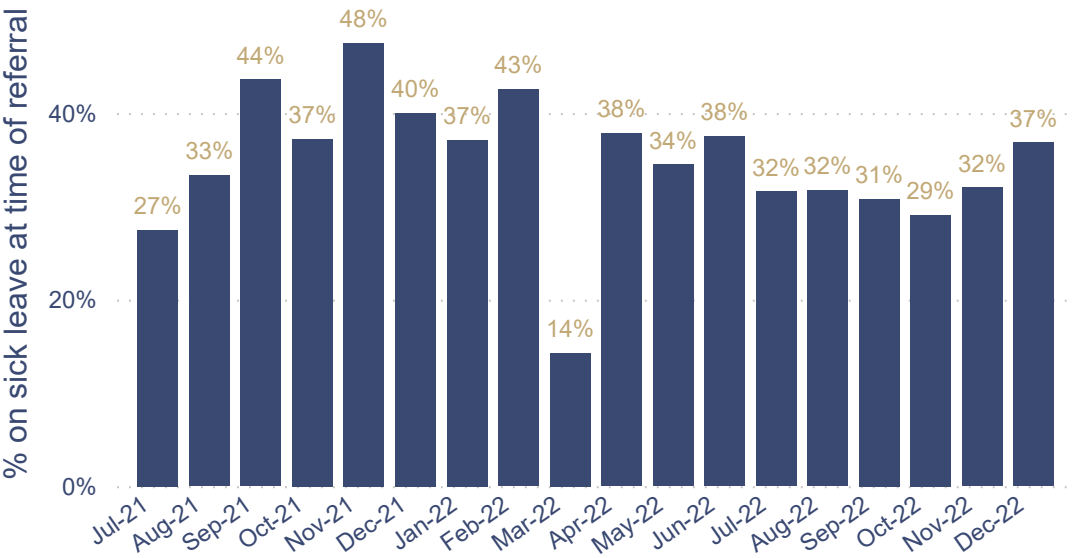
Total No. Referrals



SPWBS Total Appointments Booked



% on sick leave at time of referral



Maximum Waiting Time (Weeks)

Month Name	2021/ 2022	2022/ 2023
April		3
May		4
June		4.5
July	2	4.5
August	3	4.5
September	3	5
October	2.5	6
November	3	7
December	5	7.5
January	4	
February	5	
March	5	

Unique  
SharePoint  
Viewers

Sep-22
122
Oct-22
125
Nov-22
152
Dec-22
445

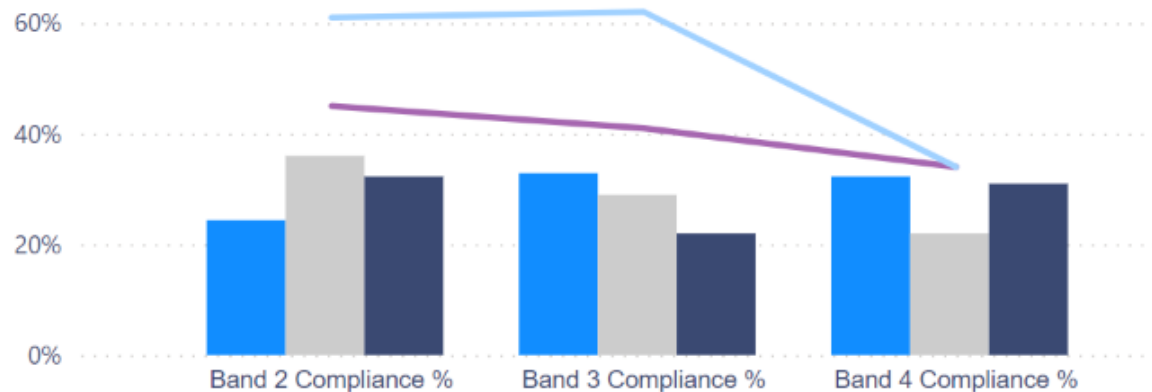
Care First Appointments (data sent Quarterly)

Month Name	2021/ 2022	2022/ 2023
April		0
May		3
June		1
July	7	3
August	4	2
September	3	1
October	5	4
November	7	9
December	2	2
January	2	
February	3	
March	4	



## Career Framework Data

● HDUHB - 2018 ● HDUHB -2019 ● HDUHB -2020 — All Wales -2018 — All Wales -2019



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.

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.

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. Learning & Development attend operational meetings 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
<b>Total</b>	<b>1758</b>	<b>291</b>	<b>822</b>	<b>259</b>	<b>231</b>	<b>92</b>



Active Volunteers



288

New Volunteers  
being processed



90

Volunteer Enquiries

County	
Carmarthenshire	94
Ceredigion	71
Pembrokeshire	43

Work Experience -  
Applications being  
Processed



147

Work Experience -  
Placed



38



Valued Partnership Initiative

County	Valued Partner Schools				
Carmarthenshire	Ysgol Bro Myrddin	Ysgol Bryngwyn	Ysgol Glan y Mor	Ysgol Coedcae	Ysgol Strade
Ceredigion	Canolfan Aeron	Canolfan Y Eos	Ysgol Bro Pedr	Ysgol Bro Teifi	
Pembrokeshire	Ysgol Bro Gwaun	Ysgol Caer Elen			

Volunteer Interviews



88

Information  
Sessions



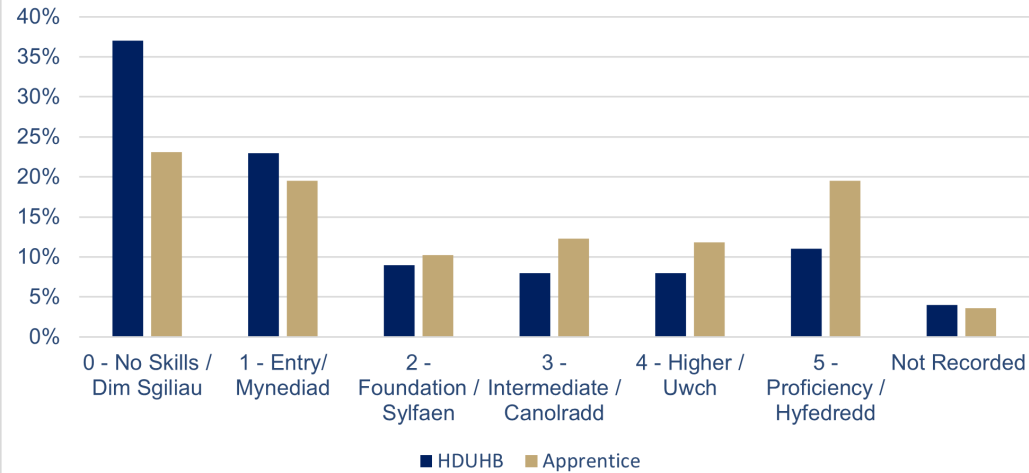
14

Number of Students  
Engaged

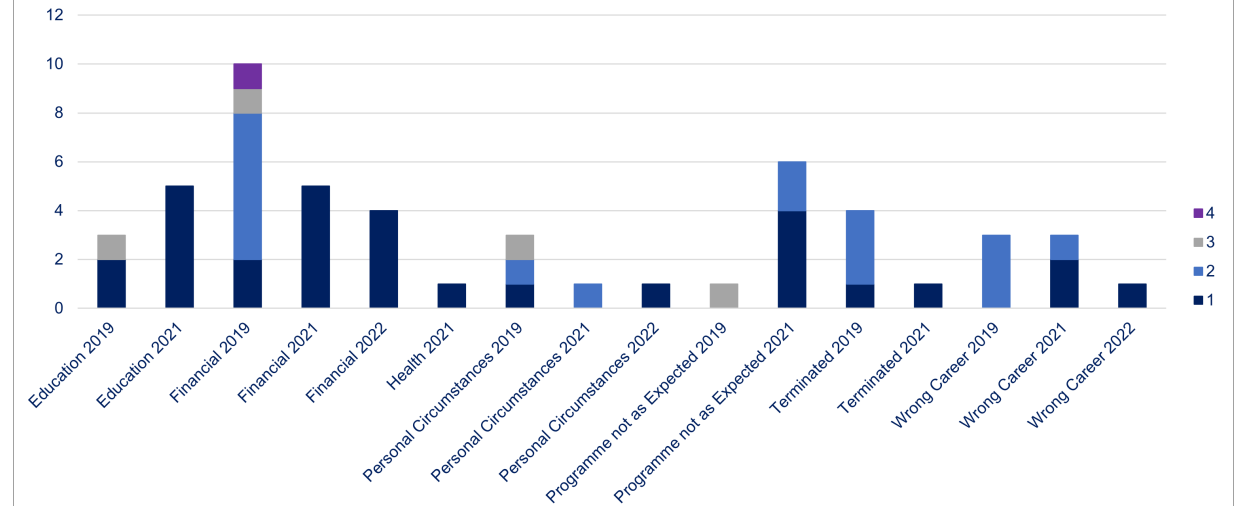


3751

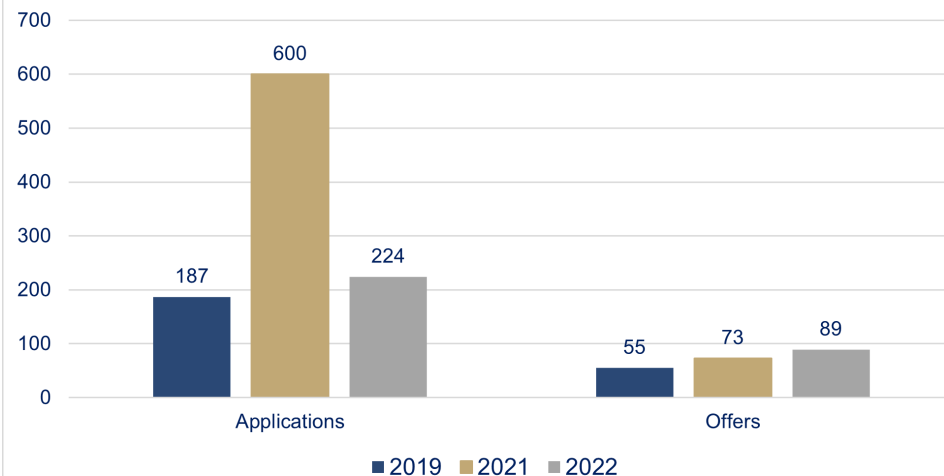
### Welsh Language Skills



### Leavers by Reason split by Cohort and the year of the program employees left



### Applications to Offers by Year



### Apprentice Retention Rate

Cohorts	Current Numbers	Number started	Overall Retention Rates
Healthcare 2019	28	51	55%
Healthcare 2021	35	55	64%
Healthcare 2022	83	89	93%
Patient Experience 2019	3	4	75%
Patient Experience 2021	3	5	60%
Workforce Development 2021	1	1	100%
Digital Services 2021	3	3	100%
Electrical Engineering	3	3	100%
Mechanical Engineering	3	3	100%
Plumbing	1	1	100%
Corporate Governance	2	2	100%

# Learning & Development April 2022 - December 2022 Higher Awards



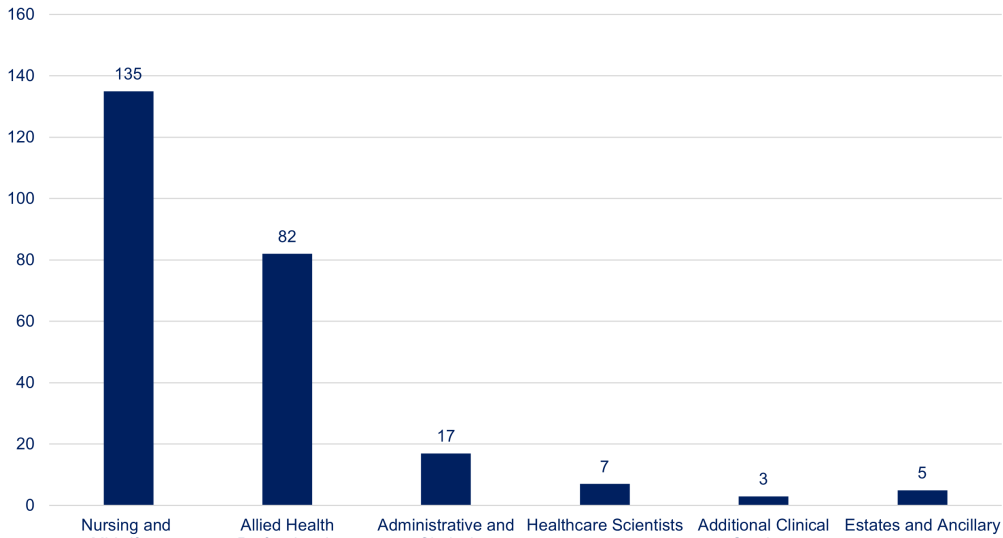
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

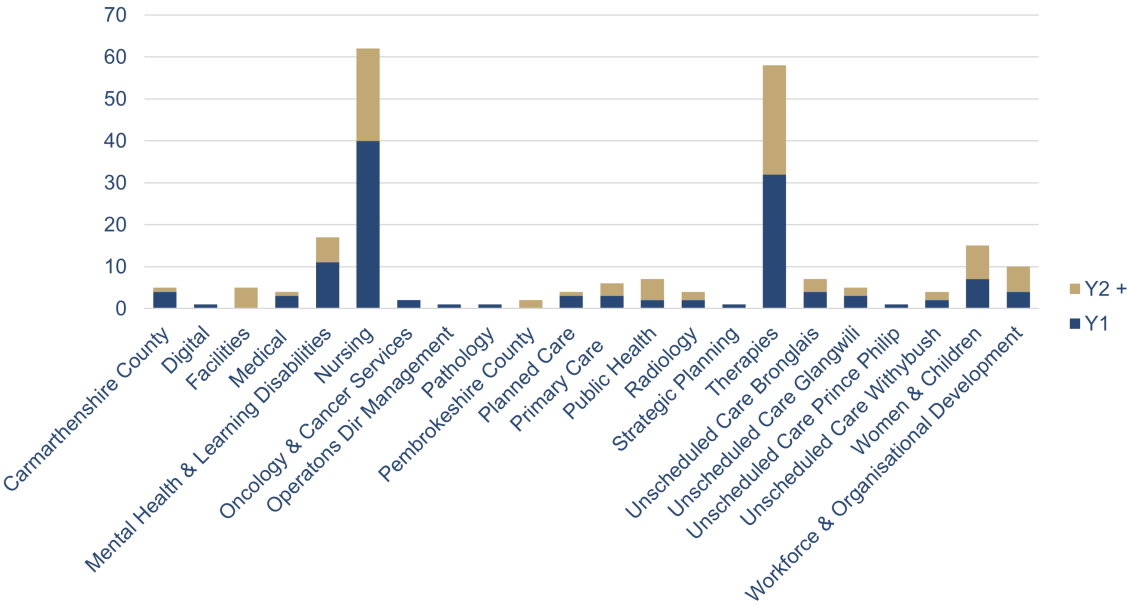
Panel Approved	Full Award Applications	Fees	Module Applications	Fees
Applications Approved	162	384,868	60	72,970
Withdrawn	22		5	
<b>Total</b>	<b>184</b>	<b>384,868</b>	<b>65</b>	<b>72,970</b>

Funding Source	Full Award Applications	Fees	Module Applications	Fees
HEIW	58	167,499	20	29,722
Department	29	74,840	14	20,511
Nursing	26	59,129	12	19,896
Study Leave	18	44,198	7	675
Charitable Funds	15	14,410	3	-
WEDSAM	11	5,632	2	-
Not Required	5	19,160	2	2,166
<b>Total</b>	<b>162</b>	<b>384,868</b>	<b>60</b>	<b>72,970</b>

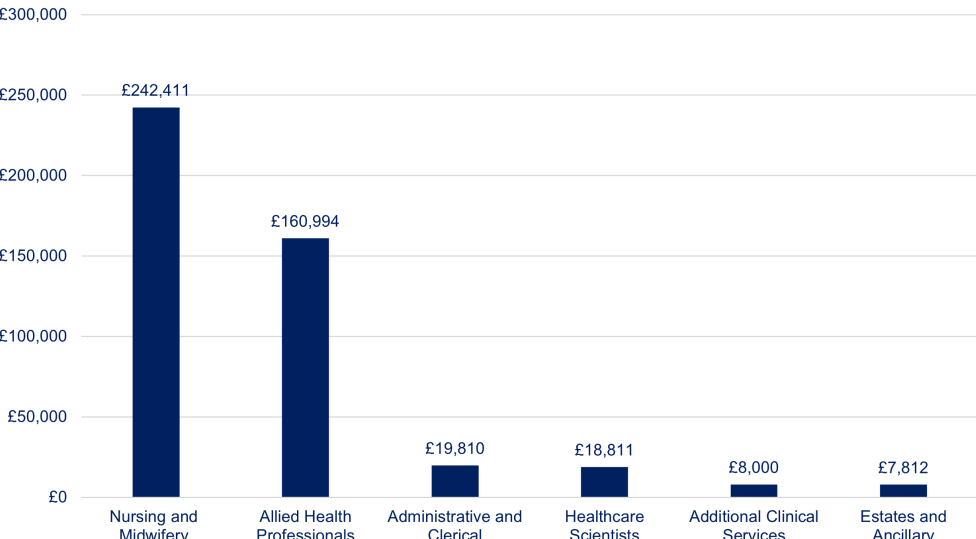
Applications by Staff Group



Approved Applications by Directorate and year of study



Fees by Staff Group



## Study Leave

**Fees**



Requested:  
£332,414

Approved:  
£87,977

**Applications**



Applied: 1078

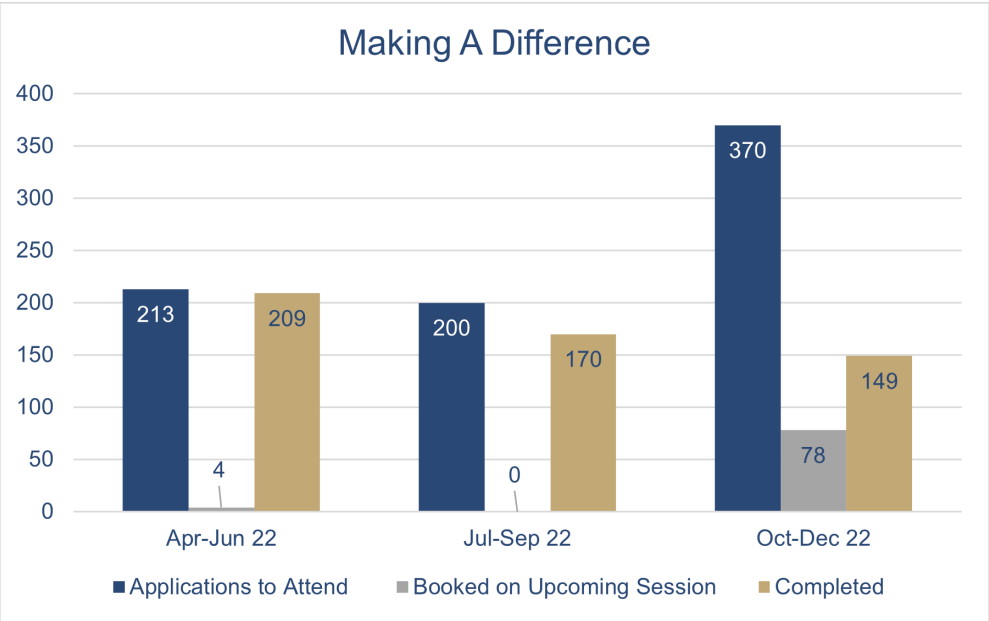
Approved: 761

**Hours**




Requested:  
46,619

Approved:  
26,294



## Lifelong Learning Fund


**Applications**



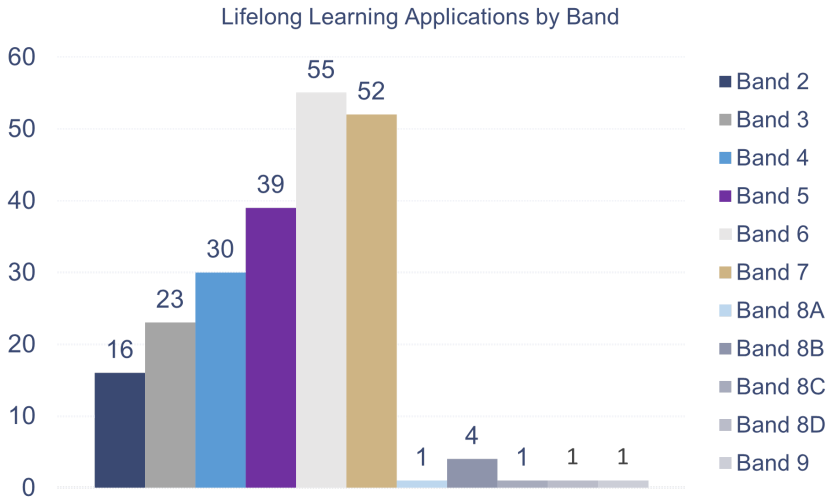
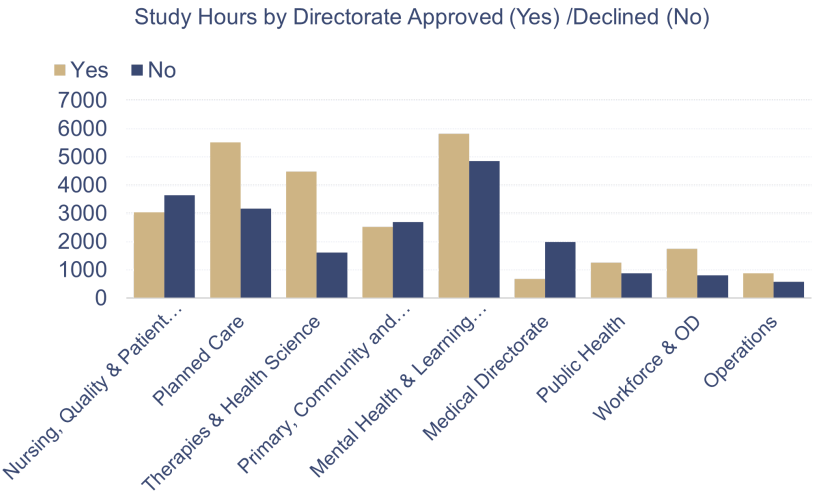
Applied: 241

Approved: 182

**Fees**



£16,195

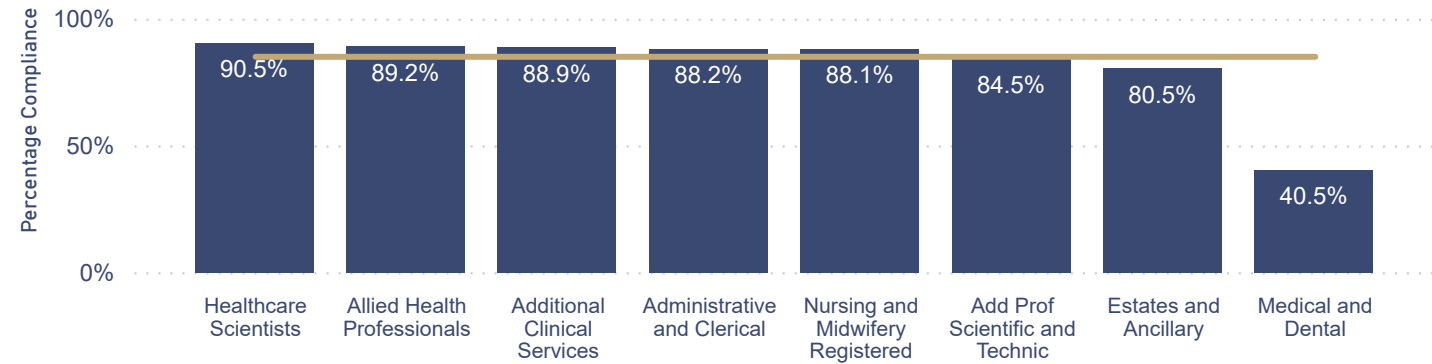


# Core Skill Training Framework as at December 2022

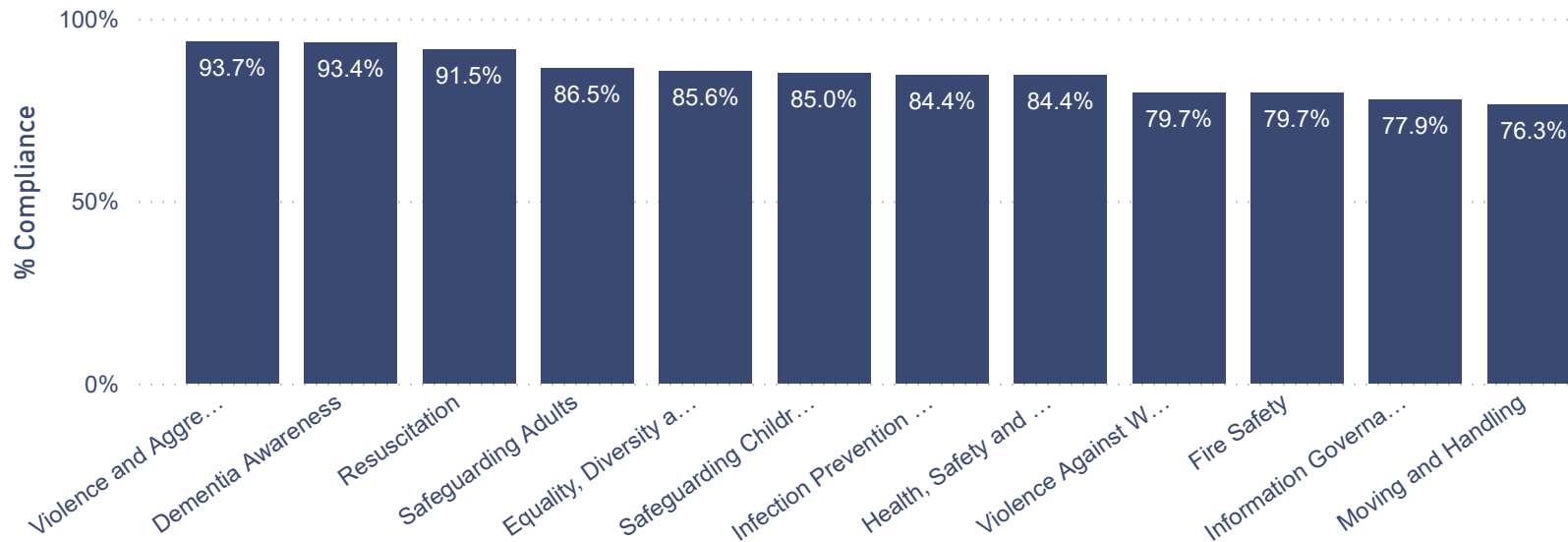
Compliance Name	Oct-22	Nov-22	Dec-22
Dementia Awareness	93.3%	93.3%	93.4%
Equality, Diversity and Human Rights	84.4%	85.2%	85.6%
Fire Safety	78.1%	79.3%	79.7%
Health, Safety and Welfare	83.4%	84.2%	84.4%
Infection Prevention and Control	84.7%	84.3%	84.4%
Information Governance	77.3%	77.8%	77.9%
Moving and Handling	74.9%	75.2%	76.3%
Resuscitation	91.0%	91.3%	91.5%
Safeguarding Adults	85.4%	86.2%	86.5%
Safeguarding Children Level 1	84.0%	84.8%	85.0%
Violence Against Women, Domestic Abuse and Sexual Violence	78.8%	79.4%	79.7%
Violence and Aggression Module A	93.8%	93.7%	93.7%
<b>Total</b>	<b>84.1%</b>	<b>84.6%</b>	<b>84.8%</b>

## CSTF compliance by Staff Group compared to 85% Target

● CSTF ● 85% Target



## CSTF compliance by competency name



Directorate with < 85% Compliance	Headcount	Compliance
L4: ASST DIR OPS QUALITY & NURSING	23	52.5%
L4: CARMARTHENSHIRE COUNTY	411	84.2%
L4: CHIEF EXECUTIVE	83	74.0%
L4: FACILITIES	1,004	80.5%
L4: ONCOLOGY & CANCER SERVICES	112	84.2%
L4: PLANNED CARE	1,327	79.6%
L4: PRIMARY CARE	198	81.1%
L4: PRIMARY CARE MANAGEMENT	96	84.4%
L4: RADIOLOGY	278	83.3%
L4: STRATEGIC PLANNING	36	79.4%
L4: UNSCHEDULED CARE BRONGLAIS	389	81.6%
L4: UNSCHEDULED CARE GLANGWILI	802	75.8%
L4: UNSCHEDULED CARE PRINCE PHILIP	556	84.8%
L4: UNSCHEDULED CARE WITHYBUSH	594	83.6%
L4: WOMEN & CHILDREN	759	81.6%



# Mandated Training assigned to all Employees as at December 2022



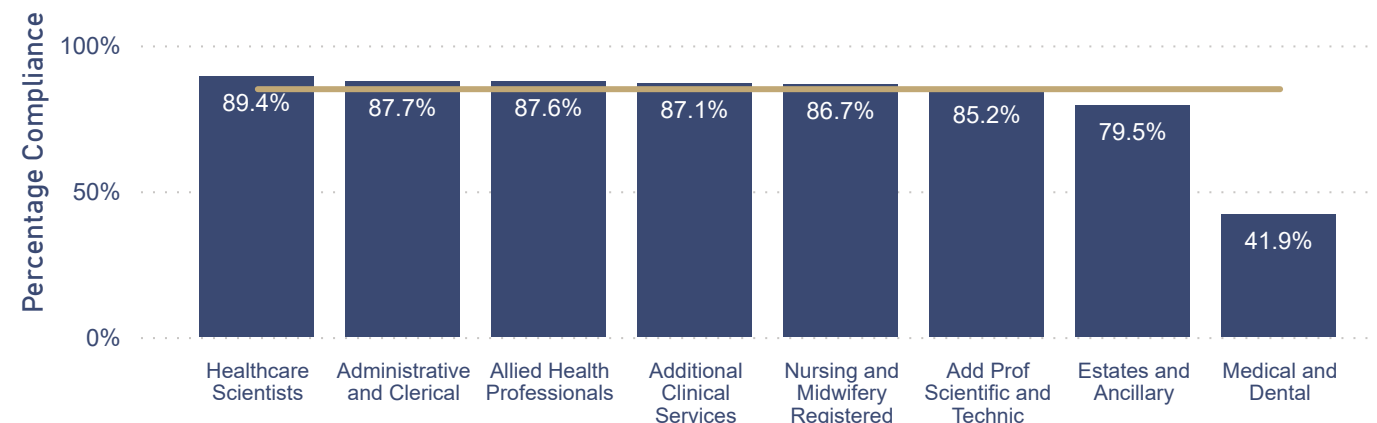
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

Competency	Oct-22	Nov-22	Dec-22
COVID Risk Assessment	65.4%	65.3%	65.2%
Dementia Awareness	93.3%	93.3%	93.4%
Equality, Diversity and Human Rights	84.4%	85.2%	85.6%
Fire Safety	78.1%	79.3%	79.7%
Fraud Awareness	64.3%	67.9%	69.8%
Health, Safety and Welfare	83.4%	84.2%	84.4%
Improving Qulaity Together	85.4%	85.1%	84.6%
Infection Prevention and Control	84.7%	84.3%	84.4%
Information Governance	77.3%	77.8%	77.9%
Listening/Speaking Welsh	96.8%	96.6%	96.6%
Mental Capacity Act	78.6%	79.8%	80.2%
Moving and Handling	74.9%	75.2%	76.3%
Paul Ridd Learning Disability	55.5%	61.0%	63.7%
Reading Welsh	96.4%	96.2%	96.3%
Resuscitation	91.0%	91.3%	91.5%
Safeguarding Adults	85.4%	86.2%	86.5%
Safeguarding Children Level 1	84.0%	84.8%	85.0%
Safeguarding Children Level 2	80.5%	81.2%	81.5%
Violence Against Women, Domestic Abuse and Sexual Violence	78.8%	79.4%	79.7%
Violence and Aggression Module A	93.8%	93.7%	93.7%
Violence and Aggression Module B	91.4%	91.6%	91.8%
Writing Welsh	96.0%	95.8%	95.8%
<b>Total</b>	<b>82.7%</b>	<b>83.4%</b>	<b>83.8%</b>

## Total compliance by Staff Group compared to 85% Target

● Compliance ● 85% Target



Directorate with < 85% Compliance	Headcount	Compliance
L4: ASST DIR OPS QUALITY & NURSING	23	56.7%
L4: CARMARTHENSHIRE COUNTY	411	82.6%
L4: CHIEF EXECUTIVE	83	74.7%
L4: FACILITIES	1,004	79.4%
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L4: PLANNED CARE	1,327	78.7%
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L4: UNSCHEDULED CARE BRONGLAIS	389	79.9%
L4: UNSCHEDULED CARE GLANGWILI	802	73.1%
L4: UNSCHEDULED CARE PRINCE PHILIP	556	82.7%
L4: UNSCHEDULED CARE WITHYBUSH	594	82.9%
L4: WOMEN & CHILDREN	759	80.0%



# Core Skills Training benchmarking as at October 2022

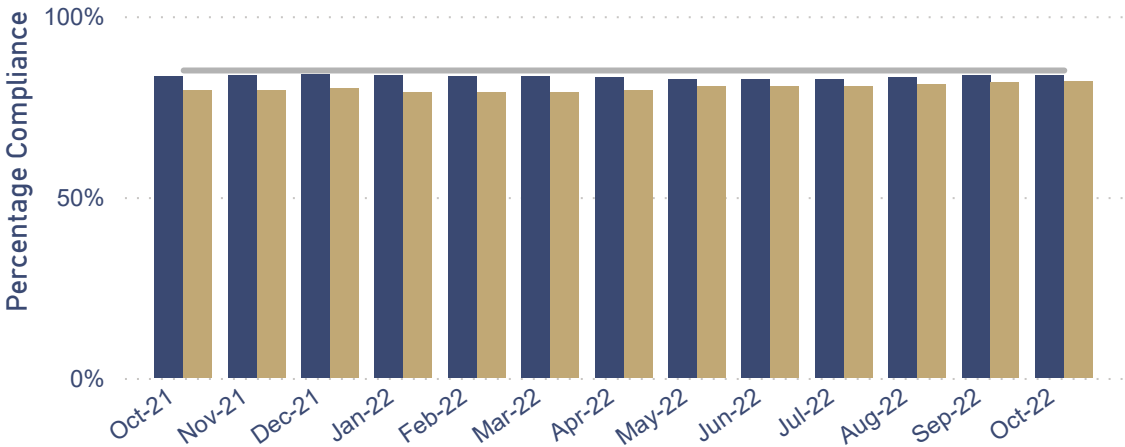
Please note that NHS Wales Benchmarking figures are currently only up to October 2022 as such the Hywel Dda figures on this page are also as at October 2022.

Competencies reported under Core Skills and Training Framework (CSTF) for benchmarking are:

- Equality, Diversity & Human Rights (Treat me Fairly)
- Fire Safety
- Health, Safety & Welfare
- Infection Prevention & Control
- Information Governance (Wales)
- Moving and Handling
- Resuscitation
- Safeguarding Adults
- Safeguarding Children
- Violence & Aggression (Wales)

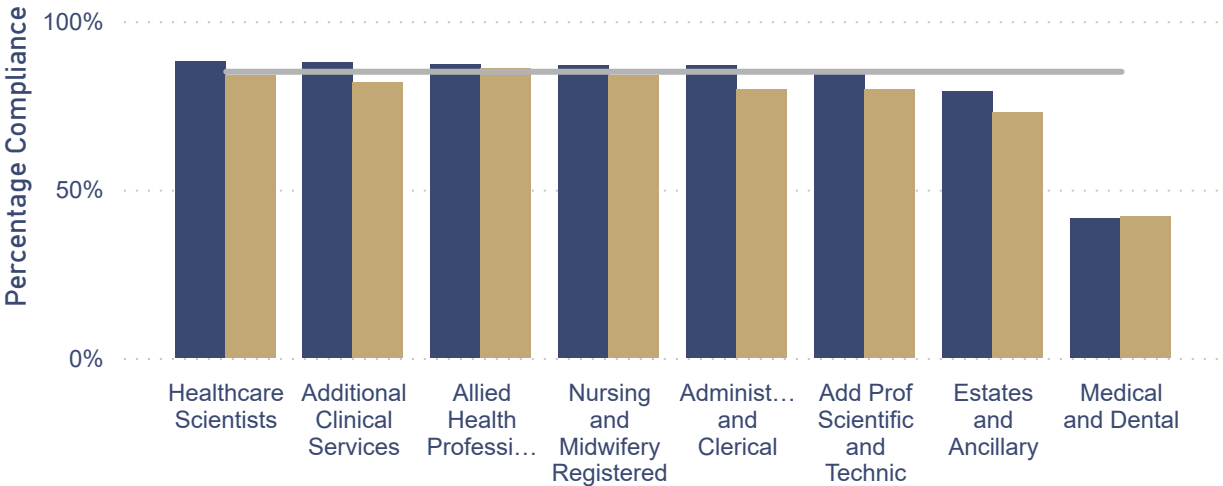
CSTF compliance month on month compared to NHS Wales and 85% Target

Hywel Dda NHS Wales 85% Target



CSTF compliance by Staff Group compared to NHS Wales and 85% Target

Hywel Dda NHS Wales 85% Target



# Annual Leave Balances as at December 2022



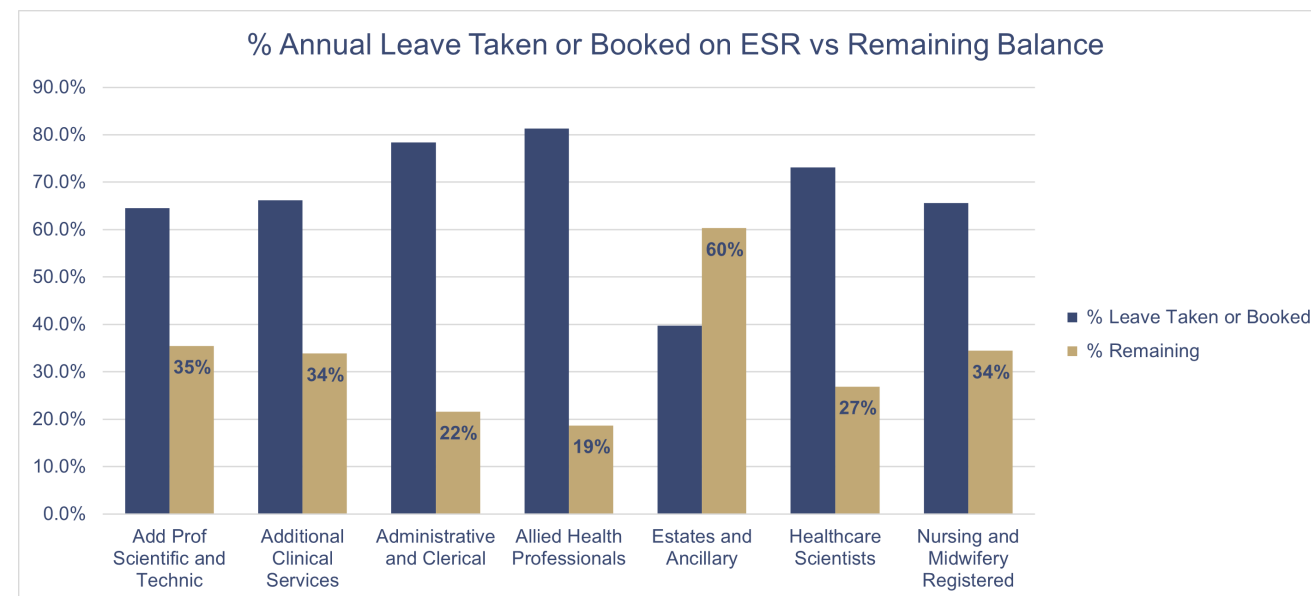
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

Directorates with less than 75% of leave taken or booked on ESR as at December 2022 (Excluding Medical and Dental)

## Directorates with Less than 75% of Leave Taken or Booked

Level 4 Directorate	% Leave Taken or Booked	% Remaining	Assignments in Area
L4: FACILITIES	39.5%	60.5%	1,097
L4: CEREDIGION COUNTY	48.4%	51.6%	218
L4: ASST DIR OPS QUALITY & NURSING	52.9%	47.1%	22
L4: UNSCHEDULED CARE BRONGLAIS	62.3%	37.7%	355
L4: UNSCHEDULED CARE GLANGWILI	62.9%	37.1%	724
L4: MEDICINES MANAGEMENT	63.0%	37.0%	282
L4: UNSCHEDULED CARE WITHTYBUSH	63.2%	36.8%	558
L4: FINANCE	64.0%	36.0%	103
L4: PEMBROKESHIRE COUNTY	64.5%	35.5%	316
L4: UNSCHEDULED CARE PRINCE PHILIP	65.4%	34.6%	527
L4: WOMEN & CHILDREN	66.2%	33.8%	695
L4: CARMARTHENSHIRE COUNTY	66.2%	33.8%	407
L4: PLANNED CARE	67.1%	32.9%	1,115
L4: PUBLIC HEALTH	67.8%	32.2%	491
L4: PATHOLOGY	68.8%	31.2%	258
L4: ONCOLOGY & CANCER SERVICES	71.8%	28.2%	113
L4: CHIEF EXECUTIVE	73.8%	26.2%	70



This information has been taken from Electronic Staff Record (ESR); this will include all leave recorded on ESR and the leave taken by staff on electronic rostering systems.

All leave should be recorded using the Electronic Staff Record (ESR) or E-Rosters system as appropriate to the area of work (staff on one of the E-Rostering systems; Rosterpro or Allocate will have their leave entered into the system by their manager).

Some staff groups may use other systems e.g Medical and Dental staff use Intrepid and some Facilities staff record manually.

Significant work has been undertaken between ESR, Payroll and Medical Workforce teams to populate ESR with accrual plans for permanent medical staff on our payroll; as intrepid does not interface into ESR, the team are working to manual update these balances with leave taken as recorded on Intrepid.

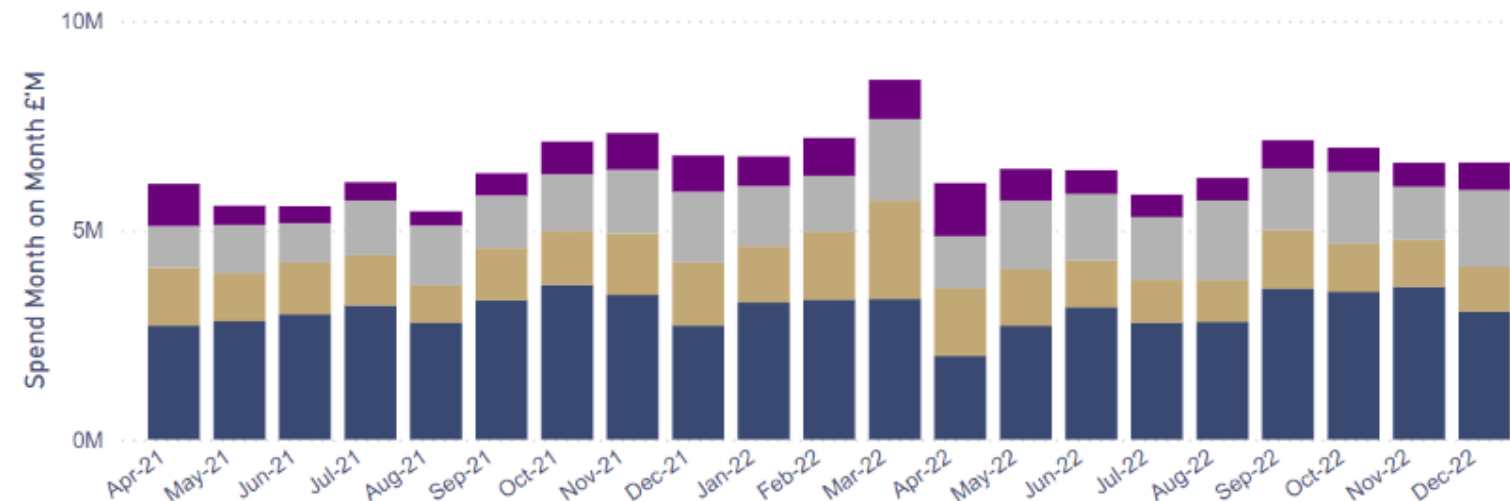


## Agency Spend as a percentage (%) of the total pay bill

Month Name	2020/2021	2021/2022	2022/2023
April	3.36%	6.84%	6.46%
May	3.19%	7.04%	6.12%
June	3.45%	7.47%	6.94%
July	3.89%	7.95%	6.42%
August	4.58%	7.01%	6.46%
September	5.07%	6.79%	6.52%
October	5.84%	8.33%	6.94%
November	6.23%	7.77%	9.27%
December	6.07%	7.18%	6.23%
January	6.92%	7.15%	
February	3.98%	7.08%	
March	3.12%	5.13%	

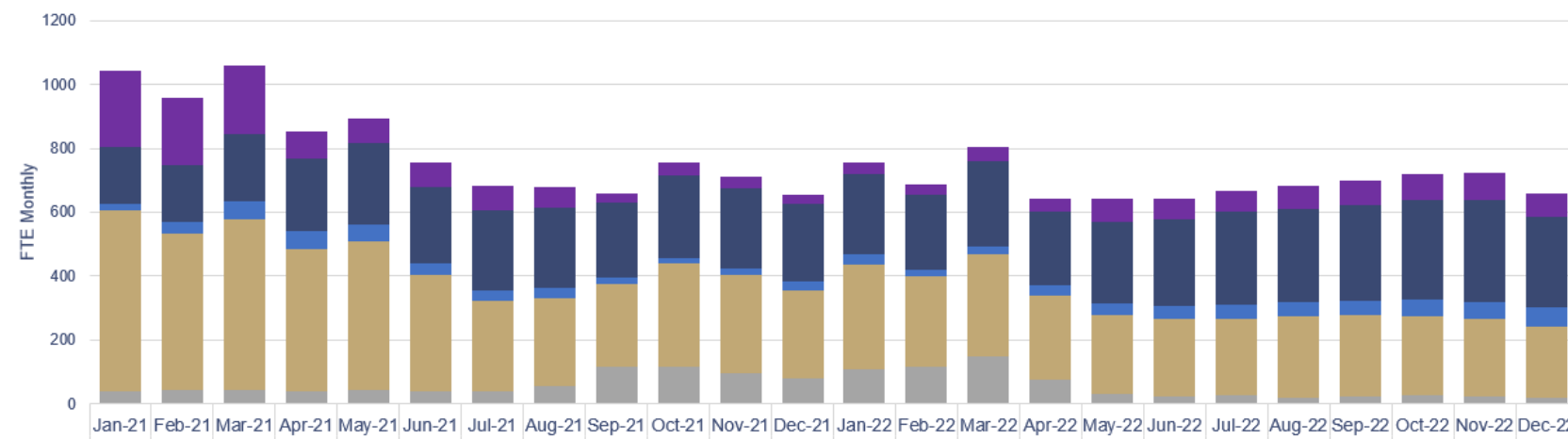
## Variable Pay Month on Month

● Agency ● Bank ● Locum ● Overtime

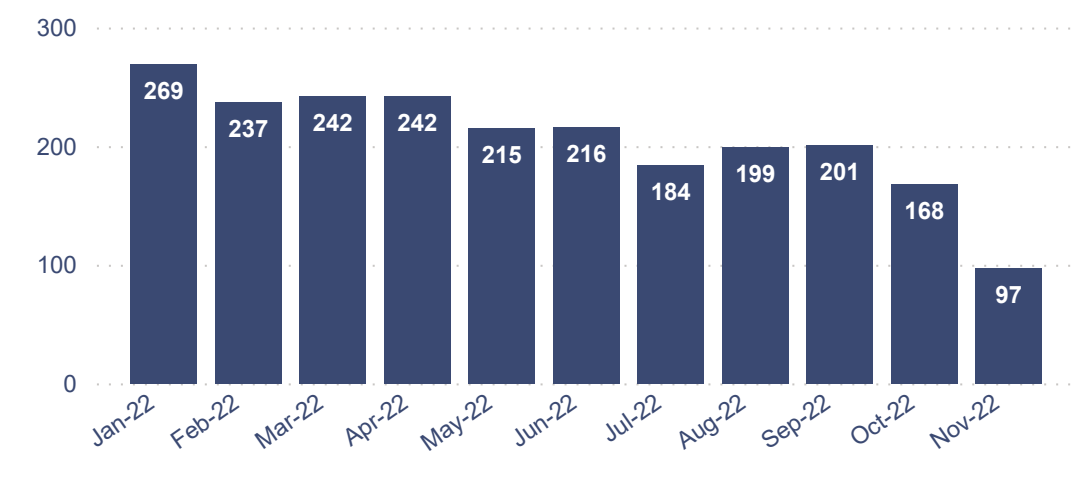


## Temporary Workforce Utilisation Month on Month

● Additional ● Bank ● Off Contract Agency ● On Contract Agency ● Overtime



Board Outcome Surveys Completed Month on Month



Please Note: Board Outcome Survey (BOS) did not run in December 2022; It is starting anew in January 2023 running from the 1st to the 28th of the month.

Retirement  
Letters



82 personal  
letters sent

Thinking of  
Leaving Survey



65 Responses

HAPI Benefits  
sign up



941 in Jul-Dec  
5003 to Date

Board Outcome  
Survey



Completed to  
Date: 2536

Spaces for  
Listening



Staff: 16  
Sessions: 2

Reflect & Act



Staff: 21  
Sessions: 3

Bespoke CWE  
Interventions



Staff: 273  
Sessions: 16

Values  
Awareness



Staff: 126  
Sessions: 8

Performance  
Management  
Training



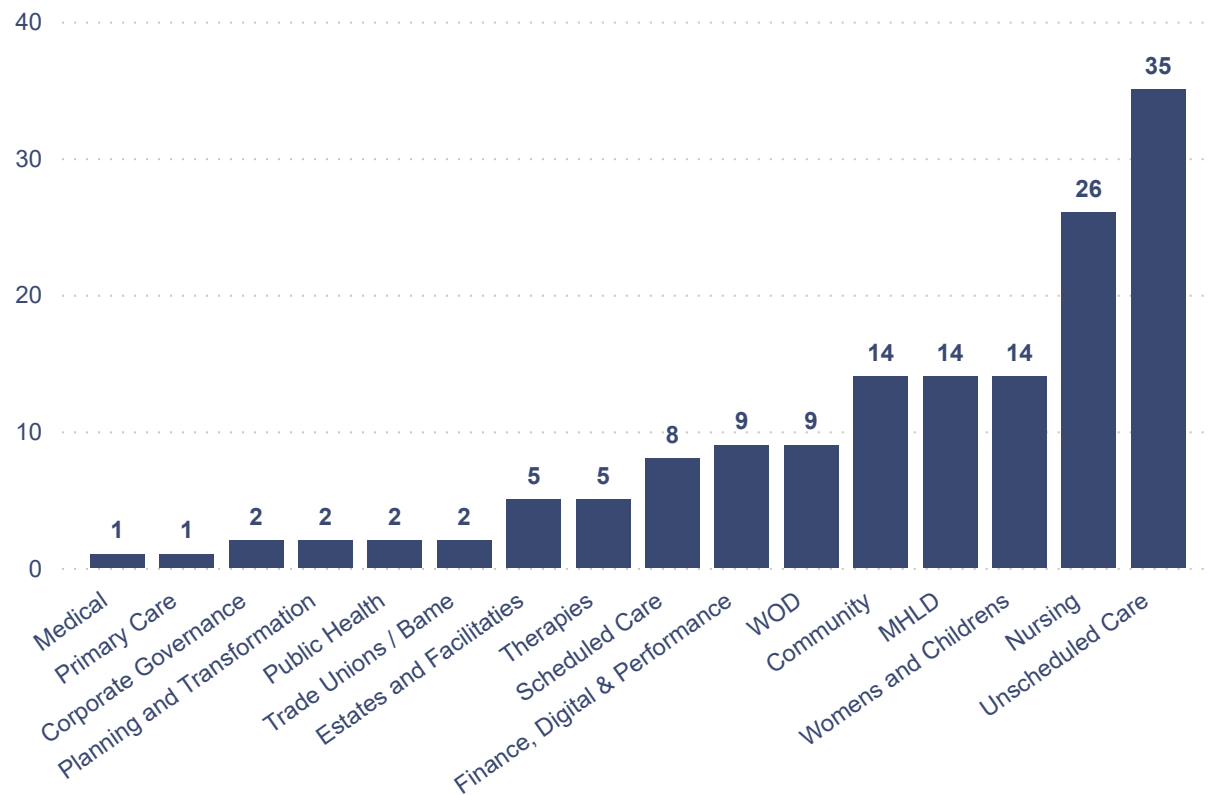
Staff: 325  
Sessions: 24

Exit Interviews/  
Questionnaires



Questionnaires:  
254

People and Organisational Effectiveness Teams Reached



We are embarking on a programme of culture change across Hywel Dda. Our new team of Organisation Development Relationship Managers will work as conduits to link our Workforce & Organisation Development teams and our services.

We will work with our services to create People Culture Plans to really drive the culture change from the ground.

Our focus is to build trusting relationships with our leaders, our staff side and our staff. The way we do this will be critical to its success, we are doing this to make every day have the potential to be a good day in work.

Total Teams  
Reached as at  
December 2022




149

Doctors	Participants
Peer Mentoring	31
New Consultant Development	17
Medical Leadership Forum	33
SAS Professional Forum	34

Executive Team & Board Development	
Executive Team Residentials	9
Board Development	22
All Wales Chief Executive	15


Leadership Development

Research Nurse Development



Participants: 6  
Cohorts: 1

Warwick Behavioural Insights



Participants: 24  
Cohorts: 1

