

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



		Agenda Item	2.5 (iv)
Freedom of Information Status		Open	
Reporting Committee	Workforce and OD Committee		
Author	Claire Mulcahy, Corporate Governance Manager		
Chaired by	Tom Crick, Independent Me	mber	
Lead Executive Director (s)	Kathryn Jones, Interim Director of Workforce and Organisational Development		
Date of last meeting	10 December 2020		

Summary of key matters considered by the committee and any related decisions made.

#### • COVID Working from Home, Agile Working and Wellbeing Survey Highlights

Members were informed of the update to the Home Working Policy, issued in September 2020 and the Agile Working Framework. The report also aimed to provide assurance on how the information gained from the Wellbeing Survey had informed and would inform a change in the ways of working going forward. Overall, comments from staff were positive and many expressing the organisation to support flexible working going forward. Although, it was important to note that some staff found home working socially isolating and it affected their mental health. Members agreed that a blended approach to home working would be more beneficial to staff.

#### Key risks and issues/matters of concern of which the board needs to be made aware:

#### • Attendance Management

Members were advised that monthly absence had increased to a peak of 9.72% in April 2020 but had been improving month on month with September's position 6.23%. Stress related absence was becoming the biggest concern with 38% absences relating to this in September 2020. It had been recognised that significant focus is needed in this area and a number of measures were in place including the Winter Resilience initiative, TRIM training and the Staff Trauma Pathway. There had been a significant increase in referrals to the Wellbeing Service and the expectation was that this would increase in the new year due to the impacts of the 2<sup>nd</sup> wave. Members highlighted the need for preparation for quarters one and two and consideration of both the short term and long terms effects on staff.

#### • COVID-19 Workforce Update

A presentation was provided to committee on the key areas of work being undertaken within Workforce during the pandemic. A key risk for the health board was maintaining staff levels and staff resilience in both the short and long term. The health board had been heavily reliant on the deployment of staff to cover sickness. Recruitment was continually taking place but this was a not a quick solution and maintaining quality of staff was a priority. It was highlighted that there was significant pressures on workforce within both Morriston and Singleton hospitals. Nursing workforce was fragile and staffing levels were low with approximately 40% to 50% of staff unavailable a number of areas. A revised staffing model would need to be looked to ensure that nursing workforce was sustainable. Pressures were also being seen in the medical workforce

due to staff sickness and staff were fatigued. It was important to ensure staff were kept safe and well.

## • Nurse Staffing Act (Wales) 2016 Levels – Annual Assurance Report and Presentation

The report demonstrated the significant challenge this year had been and continued to be with the impact of COVID-19 on nurse staffing levels across the organisation. The first wave demonstrated varying levels across the board but challenges had differed in the 2<sup>nd</sup> wave where staff availability had been the key challenge. A number of mitigating actions had been put in place with re-establishment of the silver cell to monitor and manage risk, the redeployment of staff and adapted models of care and daily meetings at a corporate level to record and monitor. The risk register had been updated and the risk had been increased from 20 to 25. The acknowledgement of the risk in this area was important as significant pressures were being faced currently. Assurance was given that the health board were monitoring the factors of harm, and patient and staff experience very closely.

#### Delegated action by the committee:

- The committee endorsed the revised All Wales Medical Appraisal Policy.
- The committee approved the Workforce and OD Committee Annual Report for 2019/20 (appendix 1)

#### Main sources of information received:

The following reports were received with no significant issues raised:

- Medacs Managed Contract
- Workforce Risk Register
- Medical Agency Cap

#### Highlights from sub-groups reporting into this committee:

None identified.

Matters referred to other committees

None identified.

Date of next meeting

09 February 2021





# Workforce and OD Committee Annual Report 2019-20



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#### 1. Introduction

The Workforce and Organisational Development (OD) Committee was established in 2009 and its principle focus is on 'all aspects of workforce as a resource aimed at ensuring the strategic and operational workforce agenda, priorities and work plan enables the delivery of the health board's objectives and supports quality and safety of healthcare and employment practice'.

During 2018-19, the committee met its responsibility by fulfilling its role as outlined in its terms of reference, and through the delivery of its work programme. The annual report summarises this.

#### 2. Committee Structure

The membership of the Workforce and OD Committee during 2019-20 comprised:

#### **Independent Members**

- Tom Crick, Independent Member (Chair)
- Emma Woollett, Interim Chair (until July 2019)
- Jackie Davis, Independent Member
- Reena Owen, Independent Member (until....
- Nuria Zolle, Independent Member (from March 2020)

#### **Executive Directors**

- Hazel Robinson, Director of Workforce and OD;
- Gareth Howells, Director of Nursing and Patient Experience;
- Richard Evans, Medical Director
- Chris White, Chief Operating Officer/Director of Therapies and Health Science

Committee support in terms of the circulation of the meeting papers and minute taking was undertaken by the corporate governance function to ensure continuity with other board committees. The secretary to the committee was Liz Stauber, Corporate Governance Manager and Claire Mulcahy, Corporate Governance Officer.

At the start of 2019-20, the terms of reference required the committee to meet on a monthly basis; however, in August 2019 members agreed to decrease the frequency of meetings to bi-monthly.

#### 3. Reports Received

In March 2019, the committee agreed its work programme for the coming year which was separated in the following areas;

- Workforce Performance;
- Performance Deep Dives;
- Workforce Strategies;
- Organisation Development;
- Risk, Controls and Governance.

The committee has a number of sub-groups for which regular reports outlining the discussions of each meeting were received. These comprised:

- Workforce and OD Forum;
- Nursing and Midwifery Board;
- Medical Workforce Board;
- Vacancy Control Panel

#### Workforce Performance

Workforce Metrics

A regular report was received outlining performance against a number of key workforce metrics, such as sickness absence and compliance with mandatory and statutory training.

#### Medical Agency Cap

The committee received a regular report outlining the health board's performance against compliance with the medical agency cap. The report focused mainly on the metrics in the followings areas; *total hours booked for agency, locum hour and internal locums* and also *the percentage of assignments paid at or below the cap.* Performance fluctuated throughout the year in both compliance and expenditure.

Members were also updated on the progress of the implementation of the locum on duty system, which would digitalise the booking system and collate all the figures in one place. In February 2020, members heard that the data was now available from the system and there were 700 doctors registered on the medical bank.

#### • High Value Opportunities Update

On a quarterly basis, members considered the high value workforce opportunities in relation to nursing, therapies and health science and medical staff and noted progress was being made across all work streams.

• Director of Therapies and Health Science Workforce Update

The committee received an update on this particular workforce group in which it was noted recruitment was a recognised challenge for a number of services resulting in significant vacancies. As such, a plan was in development for each profession.

• Integrated Medium Term Plan (IMTP- three year plan) commissioning figures and workforce templates

In February 2019, members received an outline explanation of the work undertaken to determine the workforce commissioning figures and workforce templates for the workforce chapter of the integrated medium term plan (IMTP – three-year plan). Heads of profession, clinical and education leads and heads of service reviewed the education commissioning requirements for the existing workforce in addition to future requirements for graduates, taking into account areas such as current vacancies, age profile and turnover rates. A whole systems approach was taken this year, into which workforce was incorporated, and the units were asked to input into the workforce and finance chapters to triangulate the information. Feedback was awaited from Health Education and Improvement Wales and a workshop was taking place on 1<sup>st</sup> March 2020 to look at commissioning intentions.

#### Performance Deep Dives

• Personal Appraisal and Development Review (PADR)

In April 2019, a deep dive into compliance with personal appraisal and development review (PADR) was undertaken. In comparison with other health boards, Swansea Bay University Health Board was 2% below average in terms of compliance. However, when broken down, every staffing group except Estates and Hotel Services was above average. Morriston Hospital had a compliance of 65% and the others more than 70%. Members expressed concern and stated that if the health board was serious about its values framework, compliance with PADRs was core.

Due to their compliance figures, updates were required from both Hotel Services and Estates. Within Hotel services, work was underway to improve compliance but members heard of the challenges due to its diverse portfolio and staff group. A report was submitted to the Executive Board outlining the associated risks and potential opportunities from investment. Within Estates, there had been a significant improvement in compliance due to a dedicated resource for managing and supporting staff in these areas, discussions were underway to ensure this was sustainable. Members heard there were still challenges with the capacity to be able to release staff to carry out training and also with access to IT equipment.

#### Deep Dive: Statutory and Mandatory Training

In June 2019, the committee received an update on statutory and mandatory training compliance performance during the period April 2018 to April 2019. It was noted that there had been an increase; this brought the rate up to 75%, the highest it had been. There were three challenges which needed to be addressed in order to improve compliance; improved completion within estates and facilities; determining what modules medical and dental clinical staff should already be compliant with based on their medical training and uploading classroom data quickly.

Deep Dive: Electronic Staff Record System

A demonstration of the electronic staff record (ESR) and the way in which it should be used for access to statutory and mandatory training was received.

• Extended Roles – Consultant Physiotherapist and Consultant Nurse Minor Injuries Unit (MIU)

The committee agreed that it would receive quarterly presentations of extended jobs roles to see the benefits of having such posts. Two were received during 2019-20l consultant physiotherapist and consultant nurse for the minor injury unit at Neath Port Talbot Hospital.

#### Occupational Health

Members heard that significant improvements had been made within the service and the workforce model re-engineered to be based around allied health professionals working to the top of licence so doctors only saw the cases that needed input. It was noted that the external funding supporting the service was to cease in March 2020 and this was a significant risk.

#### • <u>Safeguarding Training Update</u>

Following the introduction of the NHS Wales safeguarding training framework (2019), the safeguarding team was undertaking a training needs analysis to map the requirements. Members were disappointed by the level of compliance with training within the units. Included within the report was a request for level two training to be mandatory. As this was not within the committee's remit to agree, it was requested that a report be submitted to the senior leadership team.

#### Workforce Strategies

#### <u>Strategic Workforce and OD Framework 2019-2022</u>

Updates were received on the progress against the Workforce and OD Framework within its six domains of; Leadership, Culture and Staff Development, Workforce Resourcing; Workforce Efficiency, Shape of the workforce, Pay and Reward and Workforce and OD Function. In August 2019, it was agreed that it would become a standing agenda item for the committee.

#### • Medical Recruitment Strategy

A regular update on progress against of the medical recruitment strategy was received. Members were updated on the recruitment work to fill medical workforce vacancies which would improve compliance with the medical agency cap compliance in the longer term as well as make clinical rotas more robust.

#### **Organisational Development**

#### Annual Equality Report and Strategic Equality Objectives 2020-24

Members supported the submission of the strategic equality objectives to the health board. The annual equality report and employment information was endorsed for publication on the health board external website; however, concerns were raised in terms of the low engagement with the production of the report.

#### **Risks Controls and Governance**

#### • Workforce Risk Register

A regular report was received on the health board's risks related to workforce. Throughout the period, members were advised that the capacity of the workforce function remained the biggest risk and a business case for resources had been submitted. Members felt that this needed a board discussion in order to develop the plan for the next five years. In December 2019, members were informed that the support of investment had been agreed and the process was being progressed in readiness for April 2020.

#### • Nurse Staffing Levels (Wales) Act

The committee received a regular report regarding the implementation and compliance with the Act. Members noted the positive progress made throughout the year. An Annual Report was received in June 2019 that set out the reasonable steps that health board had taken to comply with the Nurse Staffing Levels (Wales) Act 2016. Members were advised that pressure ulcers and falls were reducing on wards that were compliant with the act.

#### <u>Terms of Reference and Annual Report 2018-19</u>

The committee approved its Terms of Reference and Annual Report for 2018-19 in April 2019.

#### • Healthcare Inspectorate Wales (HIW) KW Report

In October 2019, a report providing an update as to the progress against the workforce elements of the KW HIW (Healthcare Inspectorate Wales) action plan was received. Members were advised that the majority of the action plan was now green and good progress had been made. The one red area related to disclosure and barring service (DBS) checks and work was ongoing nationally to this regard.

#### • Kendall Bluck Report

Members received an update with regards to the Kendall Bluck report which had been commissioned in August 2018. A review had taken place of the emergency medicine workforce for Morriston and Neath Port Talbot hospitals as well as junior doctors rotas. Kendall Bluck had proposed some workforce transformation models, which would also address agency spend and they had also created heat maps of challenging areas.

#### • Maternity Services Action Plan

In August 2019, the committee received a report providing an update as to progress against the workforce elements of the maternity services action plan following an external review at Cwm Taf Morgannwg University Health Board. Members were informed that the Quality and Safety Committee was taking forward the monitoring of the action plan but there were some workforce components. There had been good progress against the action plan and at that point there were no red actions, eight ambers and 54 green. Positive feedback had been received from a recent Healthcare Inspectorate Wales visit to the service.

#### • Lapsed Nursing Registration

In June 2019, the committee received a report as partnership colleagues had raised concerns as to the lack of consistency around the management of lapsed registration both internally and in comparison with other health boards. A benchmarking exercise was undertaken of the approaches across Wales and the results shared with the health board's nursing and midwifery board at which there was full agreement to support the current processes in place.

#### Items Received In-Committee

Throughout the course of the year, the following items were discussed in-committee:

- A review of all staff suspensions (Board responsibility but is devolved to Workforce and OD Committee);
- An update on sensitive employee relation cases;
- An update on workforce issues that place the Health Board at significant risk.

#### 4. Conclusion

This report demonstrates that the committee fulfilled its responsibilities through the reports it had received during the year from various services and sources.