





Meeting Date	30 th October 20	019	Agenda Item 2.	1.1	
Report Title	PADR and Man	ndatory Training	- Estates Departn	nent	
Report Author	Des Keighan, Assistant Director of Operations (Estates)				
Report Sponsor	Chris White, Ch	nief Operating Off	icer		
Presented by	Des Keighan, A	ssistant Director o	of Operations (Est	ates)	
Freedom of Information	Open				
Purpose of the Report	To provide the Workforce and OD Committee with an update on the PADR and Mandatory Training compliance rates within the Estates Department. The report also provides a summary of key issues and the actions proposed to address the issues going forward.				
Key Issues	Based on an ESR report dated September 2019, the current compliance rates for both PADR and Mandatory Training for the Estates Department are as follows: PADR compliance is now showing 69.57%, against a figure of 35.71% for August 2019. Mandatory training compliance is now showing 59.40%, against a figure of 54.55% for August 2019. Actions have been developed to increase compliance rates for both PADR and Mandatory Training throughout the Estates Department as necessary and have started to have an impact.				
Specific Action	Information	Discussion	Assurance	Appro	val
Required			×		
(please choose one only)					
Recommendations	Members are asked to note the content of the report.				

1.0 INTRODUCTION

The Estates Department provides a wide range of Engineering, Building and Environmental Services throughout the Health Board. The Department comprises of 140 members of staff across a range of disciplines. Operationally the Department is structured from two main Estates Units based at Morriston and Singleton Hospitals.

Due to the diverse nature of the Estates staff group, there are different support required needed to meet their training needs.

2.0 BACKGROUND

PADR Compliance

The current overall compliance rate of PADRs, within the Estates Department has increased from 35.71% in August, to **69.57% in September**, as detailed below in Table 1, by discipline.

Org L8	Assignment Count	Reviews Completed	Reviews Completed %
130 7200 Morriston Estates Management	10	9	90.00
130 7211 Morriston Grounds & Gardens	7	1	14.29
130 7212 Morriston Building	11	10	90.91
130 7213 Morriston Engineering	34	24	70.59
130 7215 HVS 1B	4	2	50.00
130 7220 Singleton Grounds & Gardens	3	3	100.00
130 7221 Singleton Building	13	12	92.31
130 7222 Singleton Engineering	29	25	86.21
130 7223 Singleton Estates Management	10	7	70.00
130 7261 NPTH Engineering	1	0	0.00
130 7500 Waste Management & Incineration	6	3	50.00
130 7503 Support Services	4	0	0.00
130 7801 Estates Management Support	6	0	0.00
Grand Total	138	96	69.57

Table 1: PADR compliance rates for the Estates Department - September 2019.

It is understood that certain PADR's have been undertaken, however have not been upload onto the ESR system.

Mandatory Training Compliance

The current overall compliance rate of Mandatory Training within the Estates Department is **59.40%**, as detailed below in Table 2, by discipline.

Training Compliance Summary - Estates @ 30/09/2019

Assignment Count	Required	Achieved	Compliance %
140	1820	1081	59.40%

Org L8	Assignment Count	Required	Achieved	Compliance %
130 7200 Morriston Estates Management	10	130	85	65.38%
130 7211 Morriston Grounds & Gardens	7	91	40	43.96%
130 7212 Morriston Building	11	143	66	46.15%
130 7213 Morriston Engineering	34	442	158	35.75%
130 7215 HVS 1B	4	52	17	32.69%
130 7220 Singleton Grounds & Gardens	3	39	30	76.92%
130 7221 Singleton Building	14	182	128	70.33%
130 7222 Singleton Engineering	29	377	263	69.76%
130 7223 Singleton Estates Management	10	130	107	82.31%
130 7261 NPTH Engineering	1	13	1	7.69%
130 7500 Waste Management & Incineration	6	78	78	100.00%
130 7503 Support Services	4	52	38	73.08%
130 7801 Estates Management Support	7	91	70	76.92%

Table 2: Mandatory Training compliance rate for the Estates Department - September 2019.

Note: There is a variance on WTE/assignment count between PADR and Mandatory Training due to ESR classification, which excludes new starters from the PADR report.

Table 3 below provides a breakdown of the compliance rate per Competency.

Competence	Compliance August	Compliance September
	%	%
NHS CSTF Equality, Diversity and Human Rights - 3	35.92	49.29%
Years		
NHS CSTF Fire Safety - 2 Years	38.73	56.64%
NHS CSTF Health, Safety and Welfare - 3 Years	29.58	45.71%
NHS CSTF Infection Prevention and Control - Level 1 -	28.87	45.71%
3 Years		
NHS CSTF Information Governance (Wales) - 2 Years	61.27	77.86%
NHS CSTF Moving and Handling - Level 1 - 2 Years	19.01	37.86%

NHS CSTF Resuscitation - Level 1 - 3 Years	44.37	47.86%
NHS CSTF Safeguarding Adults - Level 1 - 3 Years	30.28	44.29%
NHS CSTF Safeguarding Children - Level 1 - 3 Years	30.99	45.71%
NHS CSTF Violence and Aggression (Wales) - Module	38.02	83.57%
A		
NHS MAND Dementia Awareness - No Renewal	71.83	89.29%
NHS MAND Social Services and Well Being Act Wales	76.76	91.43%
Awareness (2014)		
NHS MAND Violence Against Women, Domestic	46.48	53.57%
Abuse and Sexual Violence - 3 Years		

Table 3: Competence compliance rates - September 2019.

Many of the Estates staff have limited computer knowledge and literacy skills, which has contributed to the low compliance rates.

Historically, in 2016, a dedicated resource was allocated to facilitate the Mandatory Training within the Estates Department. However, this resource was subsequently removed.

Ongoing barriers to achieving the Mandatory Training include:

- Availability of PC's
- IT and literacy skills
- Password retention
- Difficulty in accessing ESR training for all levels of staff
- Impact to Service provision due to time away from role

3.0 ACTIONS

PADR

It is recognised that the compliance rate is not acceptable and immediate action will be undertaken for a speedy resolution. To increase overall performance, an urgent review is required by all Managers within Estates to identify realistic timescales for undertaking PADRs, identify any constrains and progress against agreed timescales. This action is to be visibly driven and supported by Senior Estates Management.

MANDATORY TRAINING

Short term, immediate cross department working and sharing successful practices to improve the overall compliance rates will be undertaken.

An appraisal for a permanent long-term solution identifying adequate resource will be undertaken and escalated for approval.

4.0 FINANCIAL IMPLICATIONS

Permanent additional resources required to support the facilitation of Mandatory Training within the Estates Department.

Governance and Assurance				
Link to	Supporting better health and wellbeing by actively	promoting and		
Enabling	empowering people to live well in resilient communities			
Objectives	Partnerships for Improving Health and Wellbeing			
(please choose)	Co-Production and Health Literacy			
	Digitally Enabled Health and Wellbeing			
	Deliver better care through excellent health and care serv	vices achieving		
	the outcomes that matter most to people			
	Best Value Outcomes and High Quality Care	\boxtimes		
	Partnerships for Care	\boxtimes		
	Excellent Staff	\boxtimes		
	Digitally Enabled Care			
	Outstanding Research, Innovation, Education and			
	Learning			
Health and Care	Standards			
(please choose)	Staying Healthy			
	Safe Care			
	Effective Care			
	Dignified Care			
	Timely Care			
	Individual Care			
	Staff and Resources	\boxtimes		
Quality, Safety a	Quality, Safety and Patient Experience			
The completion of annual PADR, and compliance with Mandatory Training are core values to which managers and staff at all levels within the Health Board have to comply with.				
Financial Implica	tions			
Additional resource required to re-instate dedicated role to facilitate the Mandatory				
Training.				
Legal Implication	s (including equality and diversity assessment)			
There are legal implications for not conducting Mandatory Training within the Department.				
Staffing Implicati	ons			
Adequate staffing levels within all services are essential				

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

Long term – acting now by managing and identifying training needs protects staff and patients.

Collaboration – the department will work collaboratively engaging with all to improve the training and education and well-being of those who work and use our services.

Report History	No previous report history to this committee.
Appendices	None