

## 10. WORKFORCE UPDATES AND ACTIONS

This section of the report provides further detail on key workforce measures.

<p><b>Staff sickness rates- Percentage of sickness absence rate of staff</b></p>	<p style="text-align: center;"><b>% of full time equivalent (FTE) days lost to sickness absence</b></p> <p style="text-align: right;"> <span style="color: orange;">—</span> % sickness rate (12 month rolling)  <span style="color: orange;">-◆-</span> % sickness rate (in-month)         </p>
<p><b>Current Performance</b></p>	
<ul style="list-style-type: none"> <li>• Health Board totals for November reduced to 6.88%, which is the lowest in month position during the last rolling 12 month period.</li> <li>• Anxiety/stress related absence remained the highest reason for absence, with cold/cough/influenza second and gastrointestinal problems the third.</li> <li>• All service group in month sickness absences rates declined for the third month in a row.</li> <li>• Mental Health and Learning Disabilities remained the service group with the highest in month percentage absence in November at 7.48%, however this is the lowest in month position during the last rolling 12 month period. NPTS is next at 7.03%, followed by MH at 6.60% and PCT at 6.37%.</li> <li>• Short-term sickness for November 22 was 2.68%, a reduction on October 2.82%. Long-term sickness also decreased from 4.76% to 4.20% between October and November.</li> <li>• In November, COVID absence reduced from 1.07% in October to 0.63% in October 2022.</li> </ul>	
<p><b>Actions for Next Period</b></p>	
<p><b>General</b></p> <ul style="list-style-type: none"> <li>• Monthly meetings implemented between HR Operations, HRBP's and Occ health/Well-being to discuss the barriers to improving employee attendance at work and how they can collaboratively work together to try and overcome some of the issues within the services.</li> <li>• Time to Change Wales (TTCW) is a national campaign to end the stigma and discrimination faced by people with mental health problems. Further training dates rolled out from January to April 23.</li> <li>• React and Suicide awareness training for managers/colleagues rolled out from September 22.</li> <li>• Meet the Guardian service virtual events being rolled out from Jan 23.</li> </ul>	

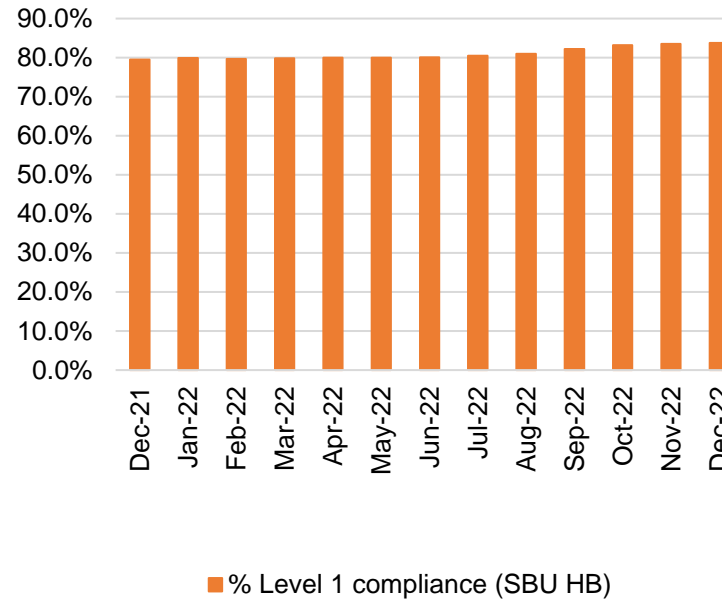
- Implementation of the AMSR transitional plan on-going. Jan 23

**Staff Health and Wellbeing**

- Occupational Health supporting the autumn rollout of the co-administered Covid-19 vaccine and flu vaccine to reduce the risk of sickness absence. 6799 staff vaccinated against Covid-19 (50.7% % of frontline staff) and 5574 staff have received the flu vaccine (42.2%)% of frontline staff) as 20/1/23. Plan to review the campaign to inform 23/24 campaign – March 23
- Promotion of TRiM and REACTMH training to support the management of trauma across the HB via the 560+ Wellbeing Champion network and Continued delivery of Post-Covid Staff Wellbeing Strategy that includes evidence based support for trauma, mental health and muscle-skeletal issues. Health Board wide Staff Wellbeing Forum developed with aim of sharing best practice and widening awareness of support for staff – to inform WF&OD Development Forum Feb/March 23
- Continue supporting staff experiencing Long Covid with self-management approaches/return to work advice utilising fixed term Welsh Government funding – over 219 referrals to date. To inform the new LTC rehab model to include staff pathway, given WG confirmation to fund the service on recurrent basis – March/April 23
- Developing Comms with support from CEO to increase awareness of LM training, tailored adjustments and support available to aid reducing sickness absence – March/April 23

**Mandatory & Statutory Training-**  
*Percentage compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation*

**% of compliance with Core Skills and Training Framework**



### Current Performance

- Since the last performance report, compliance against the 13 core competencies has increased slightly from 83.98% to 84.46% This is an increase of 0.48%.
- The Staff Group Medical & Dental continue to be the lowest performing area, standing at 52.47% compliance, which is an increase of less than 0.5% on the last reported figure.
- Staff Group Allied Health Professionals remain the highest performing area, which stands at 92.83%. with Additional Professional, Scientific and Technical staff just behind at 89.97%
- Morriston Service Group is the lowest performing service group which stands at 78.38%, which is an increase less than 1% from the last reported figure.
- NPTS Service Group has remained steady at 85.19%.
- MH & LD Service Group shows a less than 1% change from the last reported figure with a slight drop to 87.84%.
- Primary Care, Community and Therapies is the highest performing service group at 91.53%.
- Estates and Facilities compliance has improved. Estates are showing at 86.13% with Facilities at 79.15%
  
- **[Ongoing]** There have been significant changes to directorate and corporate area structures, as there will continue to be in line with proposed structure changes that will be taking place across the health board for a significant period to come. It has also been highlighted by key individuals from directorates and corporate areas that on closer inspection of staff in post structures, work needs to be carried out at a local level to ensure accuracy as some structure changes have not been reflected in their staff in post lists.

### Actions for Next Period

- **[Ongoing]** The project of identifying essential training for all staff has been paused due to ongoing national work and advice that has been given nationally. No timescale has been provided regarding the national work that will form a 'Once for Wales' approach. The Health Board will need to address inconsistencies and high volume of position numbers, with conversations currently ongoing as to how this can best be addressed.

#### By HB L5, the Service Group figures are:

- **MH&LD** - Clinical Directors to continue to focus on improvement of mandatory training for Medical staff currently in an improved position at 64.45%
- **NPTS** - The Service Group is using the Divisional Medical Workforce Boards as a forum to understand how it can work with this staff group to improve compliance with mandatory training although the Service Group are currently above the 85% compliance rate.
- **PCCT** –The Service Group is currently compliant as they are over the 85% compliance rate.
- **Morriston** - The divisions have devised action plans to achieve their targets regarding M&S, and the ASDs request updates from their teams regularly in relation to progress. On a monthly basis the divisions are required to provide updates on their progress to management board in the performance reviews
- **Estates and Facilities** - On-going support is being provided to Estates and Facilities staff who are finding it difficult to complete the training. i.e., allocating time and resources.

**Vacancies**  
Medical and  
Nursing and  
Midwifery

**Vacancies Oct to Dec 2022**

Grade - Medical & Dental	Oct-22	Nov-22	Dec-22	
21000-Consultant (M&D)	-45.12	-38.55	-39.44	↑
21100-Locum Consultant (M&D)	25.15	25.95	26.45	↑
22110-Associate Specialist (M&D)	-12.31	-12.31	-13.31	↑
22210-Specialist Grade (M&D)		1.00	2.00	↑
22250-Specialist Dental Officer	0.00	0.00	0.00	→
22260-Senior Dental Officer	-0.80	-0.80	-0.80	→
22270-Dental Officer	-0.90	-0.90	-1.30	↑
22310-Speciality Doctor (M&D)	-8.05	-9.75	-10.85	↑
22320-Locum Speciality Doctor (M&D)	-0.10	-0.10	0.90	↑
23100-Specialty Registrar (M&D)	-284.30	-276.80	-275.60	↓
23105-SLE- Specialty Registrar (M&D)	-32.03	-37.03	-37.03	→
23120-Locum Specialty Registrar (M&D)	-2.00	-3.00	-1.50	↓
23200-Specialist Registrar (M&D)	-4.00	-4.00	-4.00	→
24100-F2 foundation year 2 (M&D)	-38.00	-38.00	-38.00	→
24105-SLE -F2 Foundation year (M&D)	-1.00	-1.00	-1.00	→
24110-Locum F2 Foundation year 2 (M&D)	-2.00	-2.00	-2.00	→
24400-F1 foundation year 1 (M&D)	-54.50	-54.50	-54.50	→
24405-SLE - F1 Foundation year (M&D)	-0.50	-0.50	-0.50	→
24900-Dental Trainees in Hosp Post	-2.88	-1.88	0.12	↓
24925-SLE – Dental Core Trainees	-5.00	-5.00	-5.00	→
25000-Clinical Assistant (M&D)	-0.09	-0.09	-0.09	→
25100-Senior Lecturer (M&D)	-3.00	-3.00	-3.00	→
25300-G.P.Sessions / Staff Fund	-0.49	-0.05	0.51	↑
<b>Total</b>	<b>-471.92</b>	<b>-462.30</b>	<b>-457.94</b>	

Grade - Nursing & Midwifery	Oct-22	Nov-22	Dec-22	
2A182-Nurse Consultant Band 8B	-0.40	-0.40	-0.40	→
2A281-Nurse Manager Band 8A	8.09	8.21	10.61	↑
2A282-Nurse Manager Band 8B	0.25	1.25	-2.75	↑
2A283-Nurse Manager Band 8C	1.60	0.60	-0.40	↓
2A284-Nurse Manager Band 8D	2.00	2.00	1.00	↓
2A451-Registered Nurse Band 5	-257.16	-234.09	-286.98	↑
2A461-Registered Nurse Band 6	-48.84	-45.94	-61.20	↑
2A471-Registered Nurse Band 7	-8.37	-4.09	-9.16	↑
2A481-Registered Nurse Band 8A	-3.23	-5.32	-7.10	↑
2A482-Registered Nurse Band 8B	-1.00	-1.00	-1.00	→
<b>Total</b>	<b>-307.06</b>	<b>-278.79</b>	<b>-357.37</b>	

**Current Performance**

- Covid specific measures in terms of recruitment have ended and normal levels of local and corporate recruitment are now re-established.
- Focus of recruitment to Imms programme is still being closely monitored in a very fluid workforce plan.
- Overseas nurse recruitment continues and to date circa 160 have been recruited against a plan to recruit 350 nurses this financial year.

**Actions for Next Period**

- Further overseas nurse interviews will continue throughout the next period the in country overseas nurse recruitment event to India Resulted in circa 110 offers being made to Indian nurses. These will arrive in our cohorts planned over the next 4-5 months.
- Our next cohort of circa 30 overseas nurses is due to arrive at the end February. The Ukraine situation has delayed significant numbers of visa's in previous cohorts resulting in reduced numbers of arrivals being processed. This still remains an issue
- We have committed to also work with NSSWP to collaborate over some elements of oversea nurse recruitment.
- A business case is being prepared to source a further 350 overseas nurse next year.
- We are scoping with WG if overseas recruitment is necessary for medical staff.

## Recruitment

Metrics provided by NWSSP. Comparison with all-Wales benchmarking



## Current Performance

- Swansea Bay UHB overall performance has improved and is below target this period, for the first time in several months.
- The central Resourcing team continue to focus efforts on the recruitment of acute ward based HCSW's and Band 5 nurses as well as providing support to specific difficult to recruit to posts.

## Actions for Next Period

- HRBP's have been asked to discuss with Service Groups with a view to reducing the lag between the date termination of posts are being requested versus date a TRAC entry was initiated. Attention to be focused on older open vacancies with a view to closing the vacancy and resolving delays.
- For doctors we continue to recruit overseas on a post by post basis.
- The central resourcing team will continue focussing on the recruitment of B5 nurses, B2 ward based HCSW's and assisting in overseas nurse recruitment. In addition they are assisting in the recruitment of newly qualified nurses, via the all Wales Student Streamlining process. As well as specific identified hard to recruit to posts. The dedicated focus on recruitment to posts within the theatres expansion programme will continue.

Turnover % turnover by occupational group	Period Turnover Rate – 01 Jan 2022 - 31 Dec 2022 – Excludes Bank, Locum, Honorary & Widow/Widower, Junior M&D staff				
	Staff Group	FTE	Last Period Headcount	Current Period Headcount	
	Add Prof Scientific and Technic	10.76%	11.78%	11.45%	↓
	Additional Clinical Services	9.69%	9.83%	9.93%	↑
	Administrative and Clerical	11.03%	12.80%	12.09%	↓
	Allied Health Professionals	11.21%	11.69%	11.81%	↑
	Estates and Ancillary	8.36%	8.03%	8.78%	↑
	Healthcare Scientists	9.53%	8.60%	9.55%	↑
	Medical and Dental	8.25%	9.22%	8.90%	↓
	Nursing and Midwifery Registered	9.40%	10.54%	9.90%	↓
	<b>Overall Rate</b>				
	Overall Rate	9.82%	10.62%	10.38%	↓

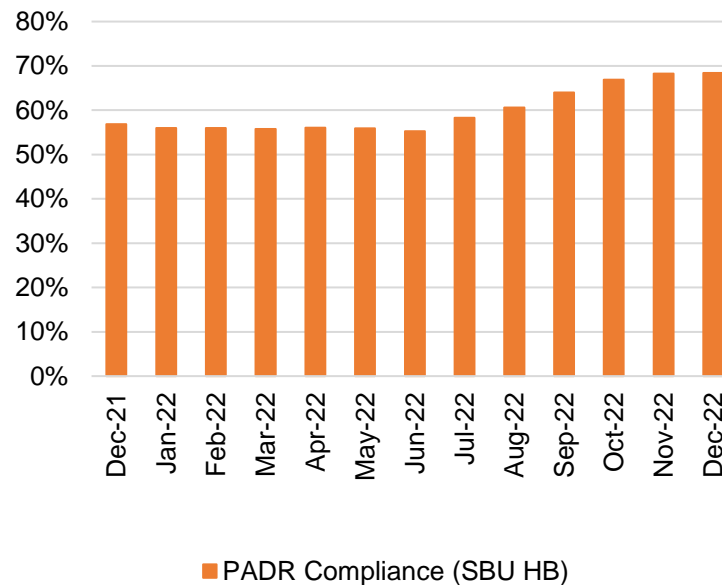
Current Performance	
<ul style="list-style-type: none"> <li>Analysis to explore the recent elevated turnover is completed, and the results have been shared in a number of HB forums to date, including the Recruitment and Retention Group.</li> <li>The reduction seen above is consistent with patterns identified in the analysis where turnover often reduces over the winter period. The rolling 12 month period shown above incorporates several months of higher than average rates between March and August 2022, however, September and October of 2021 were also higher than average, and the reduction in overall turnover seen here would indicate that this trend has not continued in 2022.</li> </ul>	

Actions for Next Period	
<ul style="list-style-type: none"> <li>Present findings from Turnover Analysis to WF&amp;OD Committee and publish full report. (completed)</li> <li>Include recommendations for consideration to address increased turnover seen in recent months. (completed)</li> <li>Continue sharing Turnover findings with stakeholder groups.</li> <li>Commence exploration of recommendations and requirements for implementation.</li> <li>A Retention plan is being progressed by the Recruitment and Retention Development Group. From on the findings from the recent Turnover Analysis report the group have identified four specific areas of focus that they will develop retention actions for.</li> </ul>	

**PADR**  
*% staff who have a current PADR review recorded*

**% of staff who have had a PADR in previous 12 months**



**Current Performance**

- Staff who have had a Personal Appraisal and Development Review (PADR) at the end of this time period stands at 68.42% which is an increase since the last reports figure of 66.89%.

**Service Group figures:**

- Primary Care, Community and Therapies 82.5% compliance, Mental Health and Learning Disabilities 72.75% compliance, Neath Port Talbot Singleton 65.57% compliance, Morriston 63.31% compliance, Estates and Facilities. Estates has compliance of 43.94% with Facilities showing 73.4%.
- It is important to note that establishment figures used to reflect these percentages include staff who have been employed on short term contracts, with a high proportion who are due to cease employment in over coming months, or have limited time left on their contract.
- **[Ongoing]** There have been significant changes to directorate and corporate area structures, as there will continue to be in line with proposed structure changes that will be taking place across the health board for a significant period to come. It has also been highlighted by key individuals from directorates and corporate areas that on closer inspection of staff in post structures, work needs to be carried out at a local level to ensure accuracy as some structure changes have not been reflected in their staff in post lists.

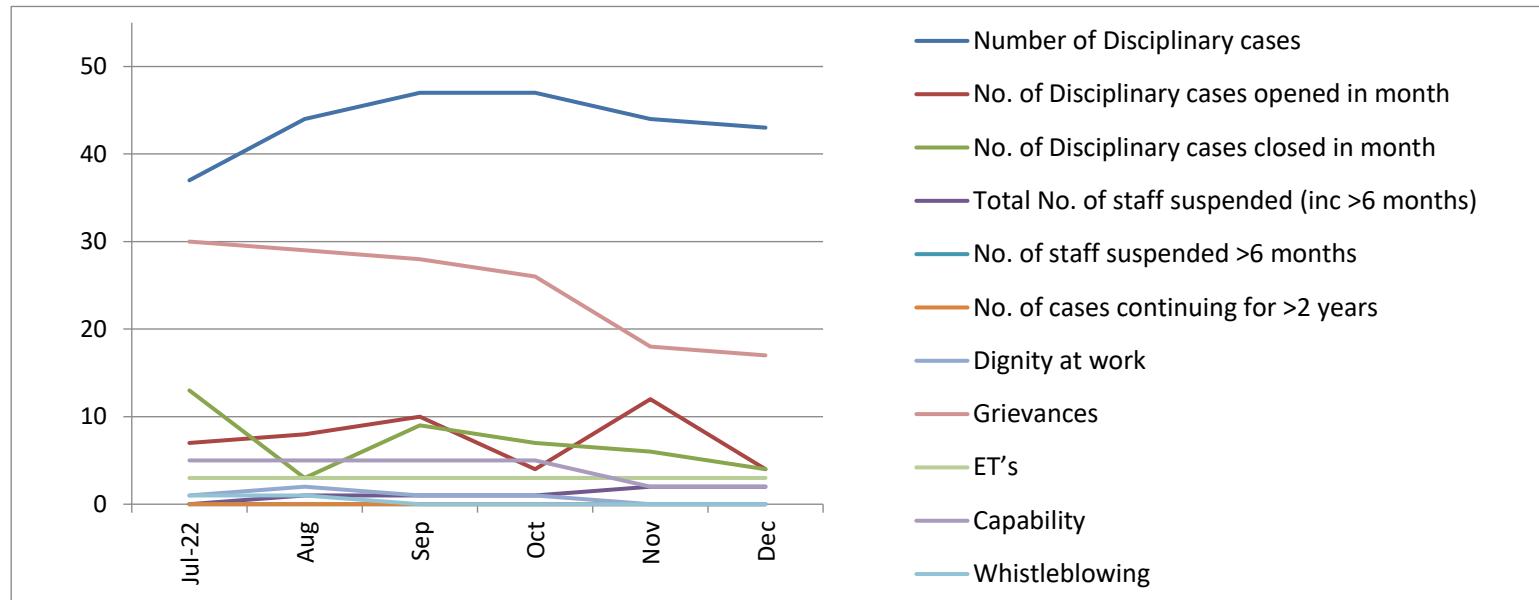
### Actions Planned for Next Period

- **MH&LD** - Plans to be put in place to identify dedicated time to meet with all staff for objectives and development and to prioritise the 390 staff that have not received a PADR and ensure ESR records are updated. A focus on administrative staff is required which is at 65.31%.
- **NPTS** – The Service Group need to see an improvement across most Divisions – there are particularly low compliance rates within the Healthcare Scientists and Additional Clinical Services staff groups. There is a risk in Medicine that their rate could further decline during the AMSR change process. Management teams in the NPTS Service Group are provided with detailed PADR performance information to help support improved PADR rates (e.g., a report that shows them how many PADRs will go out of compliance each month so they can plan and schedule in advance). The monthly Divisional workforce groups remain key forums to review PADR compliance and to understand how performance can be improved. These same forums are being used to support managers to ensure compliance with the Pay Progression Policy (to ensure that PADRs are up to date and recorded on ESR), with assistance from the HR Business Partner team.
- **PCCT** - The group have requested that PADR performance needs to achieve compliance as a minimum (85%), and Workforce has contacted Leads within areas of non-compliance to agree and draw up a recovery trajectory.
- **Morrison** - Each division is mapping a planned trajectory to show monthly increases that will achieve the 85% target as well as putting in place targeted plans where areas have been identified as having low compliance. Data is being cleansed as a number of anomalies have been found that are against the wrong cost centres so have not been picked up within the reporting that is sent to the divisions, this is in the process of being rectified.
- **Facilities** - Following the adoption of the Group PADR approach compliance has improved significantly within Facilities to 69.18% with an increase of 7.14% since September. Monthly board meetings are used to monitor hotspots, identify barriers and agree solutions.
- **Estates** - Compliance has improved within Estates to 55.30%. Estates Senior Team are dedicating time out to focus on PADR's. Monthly Estates Board meetings are used to monitor hotspots, identify barriers and agree solutions. Adoption of the group PADR approach is also to be implemented and training already held.



**Operational Casework**

*Number of current operational cases.*



**Current Performance**

- No. of open Disciplinary cases as at end of January remains at 42. This includes cases that have closed and new cases opened during the period
- Number of Grievances has reduced to 17.
- There are no live Dignity at Work cases .
- Capability has reduced to 2 cases.
- ET's remain at 3, still very low in comparison to the number of employees.
- 1 whistleblowing case remains open.

**Actions for Next Period**

- Guardians service continues to be available to staff throughout this period
- Data currently only collected at the formal stages of the Respect and Resolution policy, difficult to capture any issues resolved informally
- Consider challenging formal submissions to check whether informal resolution has been sought in line with the ethos of the policy Utilising the decision tree when providing advice to managers
- ER dashboard rolled out to Service Groups to create transparency and enhance awareness
- Work to ensure E&D data is recorded on ER tracker and updating the system to reflect changes to policies
- Investigating Officer team continuing to hold a high caseload which includes Injury Benefit and Respect & Resolution investigations