10. WORKFORCE UPDATES AND ACTIONS

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

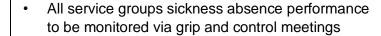
Description Current Performance Trend Actions planned for next period The Covid 19 pandemic has meant that much of our Staff % of full time equivalent (FTE) The latest confirmed in month absence performance, (March days lost to sickness absence operational HR resources being utilised in different sickness 21) saw an improvement of (12 month rolling) ways, meaning that focus was diverted away from rates-0.60% on the previous month providing support to "normal" activity such as sickness Percentage of 11% to 5.81%. Compared to the sickness management support. Resources were diverted into 10% previous March, this is an absence rate 9% areas supporting Covid recruitment and on-boarding improvement of 1.17%. 8% of staff activity and workforce planning activities to support the 7% • The 12-month rolling 6% response to the pandemic and to the setting up of a HR 5% performance to the end of specific helpline to deal with Covid related queries from February 21 was 7.38%, an 3% staff and managers alike. improvement of 0.12% This 2% represents an overall decline In addition much of our OH and Wellbeing resources in cumulative performance of has been focussed on providing specific support to our 1.09% in the 12 months to end staff affected by the Covid pandemic, including February 21 % sickness rate (in-month) • At the peak of the first wave of Supporting the Covid-19 staff vaccination plan the Covid 19 pandemic in April and ensuring via the Staff Vaccine Coordinator 20, 2.68% of the monthly that sufficient staff peer vaccinators have been absence was attributable to trained. Covid reasons. This reduced Development of a Post-Covid Staff Wellbeing to a low of 0.35% by August Strategy that includes a review of the evidence 20 but throughout the base, consultation with a wide range of preceding months increased stakeholders. to a peak in the second wave Development of Occupational Health and Staff of 3.55% by December 20. Wellbeing Service Improvement Plans. We have now seen a decrease in these rates in the 'Winter Wellbeing/Resilience' presentation first quarter of 2021 and in developed, introduced by Mark Hackett, to March 21 Covid related communicate support for staff during continued absence stood at 0.77%, a Covid pandemic. reduction of 0.43% on the previous month. If we

discount Covid related reasons from March's overall absence performance we see an absence percentage of 5.04% for the month. Compared to March 20 this would represent an improvement of 1.94%

- Developing a staff suicide awareness and prevention campaign.
- Supporting Health Board wide virtual Wellbeing/resilience days with Senior Nursing colleagues
- Conversion of Mindful & Meaningful Living course (a mindfulness & ACT based resilience based course for staff) to remote delivery, enabling increased capacity and conversion of Managing Your Wellbeing self-management course to remote delivery
- Promotion of & support in the delivery of Taking Care Giving Care Mini-rounds across the Health Board (as developed by mental health colleagues) -
- Continuing to develop the network of 400+ Wellbeing Champions, supported by a regular programme of workshops.
- Developing workshops regarding Moral Injury, to be delivered remotely.
- Implementation of Taking Care Giving Care (TCGC) Mini Rounds
- Delivery of TriM (Trauma Risk Management)

As the impact of the second wave of Covid 19 subsides, we have commenced a review of previous and current plans and will adapt these to ensure that our focus continues to be in the correct areas. Initial actions include:

 A focus on the reduction of LTS and STS with an expectation that sickness reduces below 6%



- All service groups to have a rolling 5 hot spot area with targeted approach to improvement
- Corporate group stress related sickness to be further explored ready for next WOD committee
- A full action plan to be drafted for Estates & Facilities where sickness absence remains higher than other groups.

This however remains a fluid situation and should we face a further surge of Covid cases affecting our hospitals we may once again need to re assign some of our resources to support the response to best utilise resources in the situation.

Description | Current Performance

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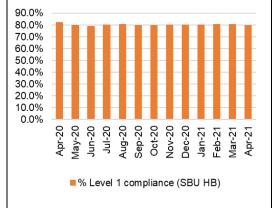
Trend

Actions planned for next period

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

- Since the last performance report, compliance against the 13 core competencies has changed slightly from 80.67% to 80.20%. This is a 0.47% decrease.
- This takes into account both current employees who are maintaining their compliance as well as those who are new to the Health Board.
- Medical & Dental are currently the lowest performing area, which stands at 45.49% compliance, which is an

% of compliance with Core Skills and Training Framework



- E-learning drop in sessions are not running due to the current situation, however, individual one to one via Teams are being offered as and when required.
- A follow up meeting was held for early 2021 to discuss the recording of face to face Mandatory training. The issue was agreed to be held at a senior level between Kathryn Jones and Nicola Edwards
- Most relevant Subject Matter Experts are continuing to examine the current Mandatory Training Framework to ensure it is fit for purpose and to comment on any changes required.
- Identification of essential training within pilot areas is planned that will identify essential training required above the corporate requirements. This

- increase of 1.66% on the last reported figure.
- Allied Health Professionals remain the highest performing area, which stands at 89.09%. This is a decrease on the last reported figure by 0.36%
- The core competency with the highest compliance is: NHS|MAND|Social Services and Well Being Act Wales Awareness (2014) - No Specified Renewal| This stands at 87.91%
- The core competency with the lowest compliance is: NHS|CSTF|Moving and Handling - Level 1 - 2 Years. This stands at 71.60%

- will also reduce the number of active position numbers within ESR currently over 7000. Pilot areas identified are Midwifery, Radiology, Physiotherapy and Speech & Language together with the ESR Team
- Meetings are being held via Shared Services regarding the working of IAT for Mandatory training which transfers training records when staff change from one NHS organisation to another and will reduce the need to complete Mandatory training unnecessarily.

Description | Current Performance

Trend

Actions planned for next period

Vacancies Medical and Nursing and Midwifery

- Covid specific measures in terms of recruitment have ended and normal levels of local and corporate recruitment are being reestablished.
- Focus of recruitment to Imms programme is still a priority in a very fluid workforce plan. That plan now looking at service extending beyond September 2021.All newly qualified registered staff have been deployed as required.

Vacancies as at /Feb/Mar/Apr 2021.

Grade - Medical & Dental	Feb-21	Mar-21	Apr-21
21000-Consultant (M&D)	-34.05	-32.89	-39.96
21100-Locum Consultant (M&D)	-1.35	2.65	2.15
22110-Associate Specialist (M&D)	-8.42	-7.70	-7.70
22250-Specialist Dental Officer	0.80	0.20	0.00
22260-Senior Dental Officer	-0.40	-0.40	-0.40
22270-Dental Officer	-1.36	-1.36	-1.36
22310-Speciality Doctor (M&D)	-18.95	-19.85	-19.25
22320-Locum Speciality Doctor (M&D)	-1.10	-1.10	-0.10
23100-Specialty Registrar (M&D)	-114.68	-127.92	-145.71
23105-SLE- Specialty Registrar (M&D)			-1.00
23120-Locum Specialty Registrar (M&D)	-0.30	-0.30	2.70
23200-Specialist Registrar (M&D)	-4.00	-4.00	-4.00
24100-F2 foundation year 2 (M&D)	-1.51	-2.51	-2.51
24110-Locum F2 Foundation year 2 (M&D)	1.00	1.00	1.00
24400-F1 foundation year 1 (M&D)	-56.20	-55.40	-58.40
24410-Locum F1 Foundation year 1 (M&D)			1.00
24900-Dental Trainees in Hosp Post	9.37	9.37	9.37
25000-Clinical Assistant (M&D)	-0.09	-0.09	-0.09
25100-Senior Lecturer (M&D)	-2.00	-2.00	-2.00
25300-G.P.Sessions / Staff Fund	44.04	45.65	48.78
Total	-189.20	-196.65	-217.47

- Currently exploring further options of nurses from Dubai and India. We are in the process of preparing a mini tendering exercise which will be aimed at suppliers who are able to provide overseas qualified nurses who already have the requisite English language requirements as this has been the time delay to date in our recruitment timeline.
- Work is underway to develop a medical recruitment strategy in partnership with the Medical Director/ Deputy Medical Director team. The initial plans were presented to the Workforce and OD committee in February. This is due for discussion at the May Local Nursing Committee (LNC).
- Work has moved on and as part of our People Plan to support the Annual plan a 100 day plan has been

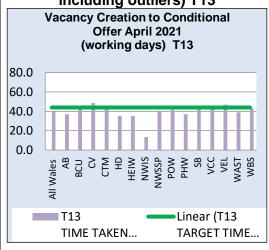
	Grade - Nursing & Midwifery	Feb-21	Mar-21	Apr-21	developed to try to recruit to every vacant post and
	2A182-Nurse Consultant Band 8B	0.20	0.00	0.00	
	2A281-Nurse Manager Band 8A	2.85	3.41	6.28	to devised creative schemes to make us an
	2A282-Nurse Manager Band 8B	-1.56	0.28	0.63	attractive employer . Overseas nurse recruitment
	2A283-Nurse Manager Band 8C	3.20	4.76	-1.84	
	2A284-Nurse Manager Band 8D	-3.00	0.00	2.00	continues.
	2A297-Nurse Manager (above Band 9)	1.00	0.30	0.00	
	2A451-Registered Nurse Band 5	-242.52	0.00	-244.34	
	2A461-Registered Nurse Band 6	-26.77	-242.17	-0.85	
	2A471-Registered Nurse Band 7	-22.06	-9.97	-26.16	
	2A481-Registered Nurse Band 8A	-4.13	-13.34	-2.04	
	2A482-Registered Nurse Band 8B	0.00	-1.13	-1.00	
	Total	-292.79	-257.87	-267.32	
	Grade - Health Care Support Workers	Feb-21	Mar-21	Apr-21	
	2AA21-Nursing HCA/HCSW Band 2	-58.78	-53.67	-87.50	
	2AA31-Nursing HCA/HCSW Band 3	41.81	39.08	18.50	
	2AA41-Nursing HCA/HCSW Band 4	15.07	14.27	15.37	
	Total	-1.90	-0.32	-53.63	

Description Current Performance	Trend	Actions planned for next period



 Swansea Bay UHB overall performance continues to match the target level for NHS Wales when excluding outlier data.

Vacancy Creation to Unconditional Offer April 2021 (working days: including outliers) T13



- Through the Covid Pandemic HR Ops worked more closely with units using reports to target and review recruitment activity.
- For doctors we continue to recruit overseas on a post by post basis.
- We provide hotel accommodation for the 10 days quarantine period on a full board basis. HB has approved the business case to recruit 60 nurses from overseas in the next financial year. They will have the same hotel accommodation package as the doctors.

Turnover % turnover by occupational group

- Turnover is distorted due to Medical staff movement.
- In comparison with the calendar year 2021 there is relatively little real change.

Period Turnover Rate – Jun 2021

Staff Group	FTE	Headco unt	2020 position headcount
Add Prof Scientific and Technic	9.66%	10.30%	^
Additional Clinical Services	7.15%	7.87%	•
Administrative and Clerical	8.47%	9.00%	^
Allied Health Professionals	8.48%	8.71%	•
Estates and Ancillary	11.95 %	12.67%	^
Healthcare Scientists	9.50%	9.76%	^
Medical and Dental	13.61 %	13.79%	•
Nursing and Midwifery Registered	7.98%	8.56%	•
Overall Rate	FTE	Headco	

•

Exit interview project on hold due to Covid.

Description | Current Performance

Overall Rate 9.48% 10.04% **Trend**

Actions planned for next period

PADR % staff who have a current PADR review recorded

- Staff who have had a Personal Appraisal and Development Review (PADR) as of April 2021 stands at 56.63%.
- Estates and Ancillaries are currently the lowest performing at 26.74%
- The Allied Health Professionals is currently the highest performing area at 79.34%

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



- PADR Training has been re-established through the Managers Pathway and through open course dates.
 This has been live since the start of May
- Assistance from L&OD has been provided to Estates and Facilities in order to improve current PADR compliance rates. A plan has been formulated in the way of Group PADR's and is in the process of starting.
- Further information is being waited for in regards to the Pay Progression Policy, which will affect the release of the updated PADR Policy.

Description | Current Performance

Trend

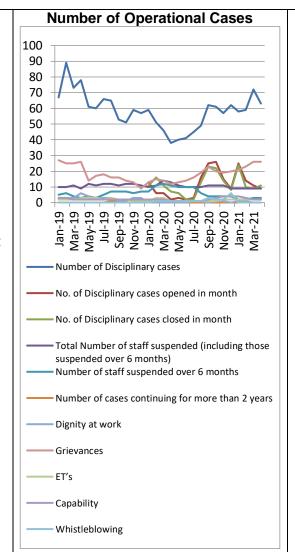
Actions planned for next period

Operational Casework Number of current

operational

cases.

- The break in processing of Operational Casework between March 2020 and September 2020 due to the COVID pandemic continues to distort case numbers for that period and should be taken into account
- Number of suspensions remain equal to the lowest recorded (Apr 2019)
- Disciplinaries saw a spike in March, which has now reduced in line with levels at end 2020/start 2021
- Number of Grievances remains elevated in comparison to 2 year figures, but still significantly lower than the pattern pre-May 2019
- Whistleblowing and Dignity at Work cases are now all closed
- Capability cases have reduced and sit in line with the long term average



- Continue managing current and incoming caseload in line with restrictions and additional workload dictated by the pandemic
- Guardians service continues to be available to staff throughout this period