

POWYS TEACHING HEALTH BOARD

CONFIRMED

WORKFORCE AND CULTURE COMMITTEE MEETING HELD ON FRIDAY 15 MARCH 2022, 10:00 – 13:00 VIA MICROSOFT TEAMS

Present:

Ian Phillips	Independent Member (Chair)
Matthew Dorrance	Independent Member
Trish Buchan	Independent Member
Cathie Poynton	Independent Member

In Attendance:

Julie Rowles	Director of Workforce and Organisational Development
Pete Hopgood	Director of Finance and IT
Kate Wright	Medical Director
James Quance	Interim Board Secretary
Jamie Marchant	Director of Environment
Sarah Powell	Assistant Director Workforce and OD
Paula Walters	Associate Director of Corporate Business
James Field	Head of Communications and Engagement
Katelyn Falvey	Head of Organisational Design
Louise Richards	Workforce Planning Manager
Lucie Cornish	Assistant Director Therapies and Health Sciences

Observers:

Claire Powell	Business Manager CHC
Vivienne Harpwood	Chair, PTHB

Apologies for absence:

Ronnie Alexander	Independent Member
Carol Shillabeer	Chief Executive Officer
Hayley Thomas	Deputy Chief Executive and Director of Planning and Performance
Claire Madsen	Director of Therapies & Health Science

Committee Support:

Liz Patterson	Interim Head of Corporate Governance
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PRELIMINARY MATTERS	
W&C/21/23	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>The Chair welcomed everyone to the meeting and confirmed the meeting was quorate. Apologies for absence were noted as recorded above.</p>
W&C/21/24	<p>DECLARATIONS OF INTEREST</p> <p>No declarations of interest were received.</p>
W&C/21/25	<p>MINUTES FROM THE PREVIOUS MEETING, HELD 28 JANUARY 2022</p> <p>The Committee APPROVED the minutes of the meeting held 28 January 2022.</p>
W&C/21/26	<p>MATTERS ARISING FROM THE MINUTES OF THE PREVIOUS MEETING</p> <p>There were no matters arising</p>
W&C/21/27	<p>WORKFORCE AND CULTURE COMMITTEE ACTION LOG</p> <p>The Committee received the Action Log and raised the following queries:</p> <p>W&C/21/03 - The Committee requested evidence of best practice in employee engagement to support the already successful programme the health board have invested in. It was confirmed that any reporting on staff engagement would take into account best practice.</p> <p>W&C/21/15 - That the metrics provided to Committee include a measure of discretionary effort relating to Volunteers. The Powys Association of Voluntary Organisations (PAVO) had been asked if there was a method of reporting discretionary effort.</p> <p>All other actions relate to Work Programmes and the Interim Board Secretary confirmed that these items would not be lost during the preparation of Work Programmes.</p>
ITEMS FOR APPROVAL/RATIFICATION/DECISION	
There were no items for approval, ratification, or decision at this meeting.	
ITEMS FOR DISCUSSION	
W&C/21/28	<p>MEDICAL JOB PLANNING ANNUAL REPORT</p> <p>The Medical Director presented the report resulting from a previous audit report recommending that a review and</p>

	<p>monitoring of the job planning process for substantive medical staff was undertaken. Over the last year practice had been reviewed and guidance updated to ensure that job plans are up to date. Medical job planning is an annual process and is challenging for most health boards. In the Health Board it had only been kept up to date in the Mental Health team. The other teams (Children’s, Occupational Health and Old Age Medicine) were smaller and do not have a Clinical Lead to lead on job planning. The Medical Director confirmed that arrangements were now in place for all job plans to be undertaken. Benchmarking has taken place with other health boards and the British Medical Association, and all include supporting professional activities (SPA) in their job plans.</p> <p><i>Will Members be advised when the job planning process has been completed?</i></p> <p>The Medical Director confirmed that Members would be advised when the process had been completed.</p> <p><i>Will the absence of Clinical Leads in the Health Board mean job planning will continue to be difficult here?</i></p> <p>The Medical Director advised that the lack of Clinical Leads was a perceived barrier and whilst the Medical Director is unable to be involved in job planning, although can advise, the operational leads are now leading on this.</p> <p><i>When considering job planning is the Equality Act and the Well-being of Future Generations (Wales) Act considered, and if so, can this be evidenced in future reports?</i></p> <p>The Medical Director confirmed that consideration would be given to the best way of evidencing this in the next paper.</p> <p>The Committee NOTED the Medical Job Planning Annual Report.</p>
W&C/21/29	<p>WORKFORCE PERFORMANCE REPORT</p> <p>The Director of Workforce and OD presented the report which provided an update on key performance indicators across the organisation highlighting areas of high performance, areas where improvement was required and current trends in workforce data. It should be noted that the team was working to pre-pandemic establishment arrangements but that a paper would be taken to Executive Committee regarding the establishment which would result in changes to the performance data. Attention was drawn to a number of areas:</p> <ul style="list-style-type: none"> • current Performance Appraisal and Personal Development Plan (PADR) compliance is at 73% and a focussed piece of work is planned so this increases to 80%;

- sickness rates for Quarter 3 were 5.36% which was not unexpected in light of covid-19. Whilst rates fluctuate there is an overall downward trend;
- recruitment data showed the time from vacancy creation to unconditional offer of 75.6 days in the Health Board compared to an all-Wales average of 85.2 days. There was an opportunity to reduce this by targeting the shortlisting time;
- six nurses have been secured through the national overseas recruitment programme and are due to arrive in May 2022. A further 17 nurses have joined the Aspiring Nurses programme. However, there are continuing issues in medical vacancies, particularly in Mental Health Services; and
- two Employment Tribunal Cases were reported, one of which has now concluded with a positive outcome for the Health Board.

When the Health Board has previously recruited from abroad not all those that sign up come. Is it expected that these nurses will arrive?

The Director of Workforce and OD advised that previously overseas recruitment had been arranged locally by individual health boards. This time the overseas recruitment had been organised on an all-Wales basis. It was noted that overseas recruitment was usually a temporary arrangement as staff did not always stay for a long period.

What is the cost of recruiting overseas staff?

The Director of Workforce and OD advised that the cost of recruiting overseas staff was approximately £10k per post. For this tranche Welsh Government were funding the initial costs. However, the Health Board would be responsible for support costs in helping the new staff settle in Powys.

In some areas the vacancy rates are showing as 30%. Are the training places available adequate and what more can be done to attract staff to Powys? Could additional incentives be offered to attract staff?

The Director of Workforce and OD advised that the issue regarding training would be covered later in the meeting in the section on Workforce Planning. With regard to recruitment, at the beginning of the year a recruitment campaign had been run which received no response. It is believed that the issue is there are no nurses to recruit rather than the Health Board is an unattractive place to work. There is a method by which health boards can apply to pay a recruitment and retention premium. This is for a limited period, and it is unlikely that it would be given to the Health Board as nurse vacancies is a national issue.

	<p><i>Consideration should be given to applying for consent to offer this premium as the cost of living is demonstrably higher in the county.</i></p> <p>The Director of Workforce and OD confirmed that a relocation package was offered to support staff moving to the county and it was acknowledged that the cost of living in Powys did mean the Health Board was in a different position to other areas. The focus was now on trying to find new sources for staff such as through military resettlement.</p> <p><i>Does the Health Board offer flexibility to undertake research or sabbaticals?</i></p> <p>The Director of Workforce and OD confirmed that current arrangements did allow for an opportunity to undertake a sabbatical. Further training was also available through the Aspiring Nurses programme.</p> <p>The Independent Member (Trade Union) drew attention to the Union position which was against incentivising certain sectors of staff.</p> <p><i>Are joint appointments with other health boards under consideration?</i></p> <p>The Medical Director confirmed that all opportunities are under consideration. It is acknowledged that some junior staff prefer to work in hospitals and conversations are taking place with other Medical Directors regarding the potential to offer rotations. A regional approach to recruitment would be beneficial to all. Recruitment was an ongoing issue, but the real focus should be on retention.</p> <p>The Committee DISCUSSED and NOTED the Workforce Performance Report.</p>
W&C/21/30	<p>WORKFORCE FUTURES STRATEGIC FRAMEWORK UPDATE, INCLUDING HEALTH & CARE ACADEMY UPDATE</p> <p>The Workforce Planning Manager gave a presentation outlining the joint work that was being undertaken with Powys County Council (PCC), the Powys Association of Voluntary Organisations (PAVO), and the Health Board to deliver the 2019 Health and Care Strategy.</p> <p>The Workforce Strategic Framework spans the following 5 themes:</p> <ul style="list-style-type: none"> • designing, planning, and attracting the workforce; • leading the workforce; • engagement and wellbeing; • education, training, and development; and • partnership and citizenship.

There has been considerable investment in the Basil Webb building at Bronllys as the hub for the Health Care Academy and an adjacent adaptive living space which will be completed in April 2022 allowing learning in a home setting. The Health Board are pioneering this approach.

The focus is now on developing a digital learning management system and piloting continuing professional development through the four Academy schools (School of Professional and Clinical Education and Training; Schools of Research, Development, and Innovation; School of Leadership; and School of Volunteers and Carers.

An outdoor space is planned for Bronllys and a commitment to developing the spokes across the area has been given. The specification for the Newtown spoke has been prepared and discussions are taking place with colleagues for the capital required over the next 18 months for other spoke sites.

A mapping exercise has been undertaken as part of the mid project horizon point and high-level plans for 2022-25 were outlined within the report.

Funding has been received from a number of sources including in-kind investment from partners. Whilst this work sits within the partnership arena and Integrated Care Funding (ICF) has been available there will be a longer term need to move this project to core business.

The progression of this project is welcomed as is the high-level priority 'Building on our sound Partnership and Citizenship model that continues to embed resilience within our communities in Powys'. What does community resilience mean here?

The Workforce Planning Manager outlined that from an Academy perspective this was enabling citizens to be part of the social care sector which as a volunteer would provide a return on investment, benefit the volunteer, and strengthen the community. The Director of Workforce and OD confirmed that whilst the Health Board were not experts in community resilience there was an opportunity to contribute to it.

The importance of culture, behaviours and shared decision-making was noted. It will be necessary to do things with people rather than to people.

The Workforce Planning Manager noted that this came under the wellbeing area and whilst there was no baseline data for this, consideration was being given to how people can have their voice heard.

	<p><i>What opportunities are there for implementing new models of care?</i></p> <p>The Workforce Planning Manager advised that the team worked closely with the North Powys Wellbeing Programme team and Workforce Futures was embedded in planning for the future.</p> <p>The Director of Workforce and OD drew attention to all the work that was undertaken during covid-19 which provided evidence for decisions taken now.</p> <p><i>What work is being undertaken in the area of arts therapy?</i></p> <p>The Workforce Planning Manager confirmed that many groups had indicated a desire to work with the project, but it was necessary to understand demand and capacity to see what needs to be provided before these links are made.</p> <p><i>Some work has been undertaken regarding Health Care Support Workers and Physician Associates. Is this still being pursued via the Academy?</i></p> <p>The Workforce Planning Manager confirmed that the Primary Care Learning Model was being scoped and it was intended to repatriate learning opportunities into the county from a range of providers. It was important that staff could see opportunities for career development which would help with retention. a career escalator.</p> <p>The Committee DISCUSSED and NOTED the Workforce Futures Strategic Update.</p>
W&C/21/31	<p>COMMUNICATIONS AND ENGAGEMENT – UPDATE</p> <p>The Associate Director of Corporate Business introduced the report outlining how in 2021-22 much of the focus had been in supporting the covid-19 response including with the local authority. Whilst there had been no face-to-face engagement, this had taken place via Teams including the Chief Executive briefings and staff recognition events. There had been an increase in public interactions via social media. However, staff engagement is heavily based on Powys Announcements and Facebook and there is a need to improve the focus of these. Current activity is under review to ensure greater alignment with the Integrated Medium-Term Plan.</p> <p>The Head of Communications and Engagement outlined the intent to develop a comprehensive Communication and Engagement Plan to support the organisation. The team has been reviewed to ascertain where the best value could be added. The team was limited in capacity and ability to hold face-to-face meetings and the whilst the use of Teams will decline it will still be used.</p>

	<p>A review of Powys Announcements is taking place and with the introduction of the new Intranet at the end of March there will be an opportunity for information to be accessible to all staff from any device.</p> <p><i>What activities are planned to reach those people who are harder to reach?</i></p> <p>The Head of Communications and Engagement advised that work had taken place with Powys County Council and PAVO to reach groups who it is not always possible to reach through existing channels. It is possible to effectively target groups using digital means. However, it was recognised that this does not reach everyone, and an appropriate mix of channels was required which will change from project to project.</p> <p><i>How is it intended to reach staff who do not have access to laptops? What improvements are planned to Powys Announcements?</i></p> <p>It is intended that more digital content will be used via the new Sharepoint intranet which is accessible through other devices rather than just via a staff laptop. With specific reference to Powys Announcements much of the detail will go onto the Sharepoint intranet which will allow Powys Announcements to focus on critical matters. The team is working with colleagues in other health boards who are further ahead to ascertain what works well.</p> <p><i>The improvements to Powys Announcements are welcomed. How does the organisation interact with groups such as LGBT, Women's and Disabled? An online platform has powerful tools that allows targeted messages, but this takes investment. Is the team adequately resourced?</i></p> <p>The Director of Finance and IT noted that flexibility was needed to allow people to use the method they were most comfortable with whilst ensuring that the key messages were maintained.</p> <p>The Head of Communications and Engagement noted there was no 'one size fits all' approach and that it was necessary to have a consistent approach to understand the objective and audience then plan the methods and channels to be used.</p> <p>The Communications and Engagement report was NOTED.</p>
W&C/21/32	<p>WORKFORCE PLANNING ARRANGEMENTS AND EDUCATION COMMISSIONING</p> <p>The Director of Workforce and OD introduced the Workforce Planning Manager who presented the report. Education commissioning requirements are submitted annually to Health</p>

Education and Improvement Wales (HEIW) based on expected need 3-4 years ahead.

The Workforce and OD Department co-ordinate this work based on commissioning of new registrants and education and training of current workforce. The requirement for new registrants was based on age profiling and predicted retirements which was a good baseline but insufficiently detailed. The previous methodology resulted in very high commissioned numbers in some areas which do not reflect reality and would be unmanageable.

HEIW now require health boards to demonstrate they have vacancies for the commissioned numbers. This resulted in services creating vacancies for students that did not arrive (for example in Therapies).

The new process bases submission numbers on the numbers of new staff that could be supported using more detailed data sets. However, this does not accurately reflect what the organisation will need in terms of future workforce requirements. It is now intended to use the All-Wales Workforce Planning Toolkit to expand the Grow Your Own scheme, and to develop workforce planning to include social care and the independent sector.

The Director of Workforce and OD noted that the Health Board do not receive all the staff that have been commissioned and, even if they had been available, it would not have been possible to support them. There appears to be a difficulty in recruiting recent graduates the Health Board and the Grow Your Own approach is expected to be more successful.

How reactive is HEIW to changes that occur within the three-year period that is worked to? It is likely that there will be more retirements imminently with the proposed pension changes.

It was confirmed that once the submission had been made there were no opportunities to change it.

The expansion of the Grow Your Own scheme is welcomed. What support is available for staff in this scheme?

HEIW do not offer an expanded scheme generally but have supported the Health Board with a Grow Your Own Radiographer as there is a recognised need. Support for learners is available including mentoring within the teams and via university supervisors. It is also intended to offer a Pastoral Café to enable students to meet with peers.

	<p><i>The development of the methodology is welcomed but if the Health Board did not receive all the staff it previously asked for and are now asking for a reduced number, what will happen if these staff are not forthcoming?</i></p> <p>The Workforce Planning Manager confirmed that this was an issue. The system is not designed so that staff are commissioned for a particular health board but rather that a number of training places are commissioned, and the student has a choice of where to apply for work. The Health Board will request that HEIW instruct the universities to recruit for placements into PTHB. The Health Board also wish to work with the English system to enable students trained across the border to be placed in PTHB.</p> <p>The Director of Workforce confirmed that it would be necessary to move to whole system commissioning arrangements to ensure that there are sufficient trained staff across all sectors.</p> <p>The Workforce Planning Arrangements and Education Commissioning Report was NOTED.</p>
W&C/21/33	<p>COMMITTEE BASED RISKS ON THE CORPORATE RISK REGISTER</p> <p>The Director of Workforce and OD confirmed two risks remain on the Risk Register:</p> <ul style="list-style-type: none"> • CRR 006 The Health Board is unable to sustain an adequate workforce • CRR 012 The Health Board does not comply with the Welsh Language Standards, as outlined in the compliance notice. <p>The Director of Workforce and OD noted in respect of CRR 006 that it might be possible to refine this to certain areas of the workforce and reduce it although it was expected it would remain a risk for some time. The meeting had earlier heard what actions were being taken to address this.</p> <p><i>CRR 006 outlines the risk for registered staff. What is the position in respect of staffing levels in other areas?</i></p> <p>It was confirmed that the risk was in relation to medical and clinical staff as the Health Board did not have a problem recruiting to porters, cleaners, and cooks.</p> <p>The Committee CONSIDERED the Corporate Risk Register.</p>
ITEMS FOR INFORMATION	

W&C/21/34	There were no items for inclusion in this section.
OTHER MATTERS	
W&C/21/35	ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES
W&C/21/36	ANY OTHER URGENT BUSINESS There was no other urgent business
W&C/21/37	DATE OF THE NEXT MEETING: 17 May 2022, via Microsoft Teams.