

POWYS TEACHING HEALTH BOARD

CONFIRMED

WORKFORCE AND CULTURE COMMITTEE MEETING HELD ON TUESDAY 20 SEPTEMBER 2022, 09:30 – 11:30 VIA MICROSOFT TEAMS

Present:

Ian Phillips	Independent Member (Chair)
Cathie Poynton	Independent Member
Rhobert Lewis	Independent Member

In Attendance:

Hayley Thomas	Deputy Chief Executive and Director of Primary, Community Care and MH
Claire Roche	Director of Nursing and Midwifery
Pete Hopgood	Director of Finance and IT
Stephen Powell	Director of Planning and Performance
Mark McIntyre	Deputy Director of Workforce and Organisational Development
Stephen Powell	Interim Director of Planning and Performance
Jamie Marchant	Director of Environment
Sarah Powell	Assistant Director of Workforce and Culture
Lucie Cornish	Assistant Director of Therapies and Health Sciences
James Quance	Interim Board Secretary

Apologies for absence:

Ronnie Alexander	Independent Member
Carol Shillabeer	Chief Executive Officer
Claire Madsen	Director of Therapies & Health Science

Committee Support:

Liz Patterson	Interim Head of Corporate Governance
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PRELIMINARY MATTERS

W&C/22/19	<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/22/20	<p>DECLARATIONS OF INTEREST</p> <p>No declarations of interest were received.</p>
W&C/22/21	<p>MINUTES FROM THE PREVIOUS MEETING, HELD 31 MAY 2022</p> <p>The Committee APPROVED the minutes of the meeting held 31 May 2022.</p>
W&C/22/22	<p>MATTERS ARISING FROM THE MINUTES OF THE PREVIOUS MEETING</p> <p>There were no matters arising from the previous minutes.</p>
W&C/22/23	<p>WORKFORCE AND CULTURE COMMITTEE ACTION LOG</p> <p>W&C/22/04 – Request for Single Point of Contact to be included on the work programme.</p> <p>The Director of Finance and IT advised that there had not been significant progress on this item, and it would be brought to a future meeting.</p> <p>W&C/22/11 - Investigate what is a reasonable wait time to see an Occupational Health Consultant/Specialist and inform the Committee.</p> <p>The Assistant Director of Workforce and OD advised that benchmarking had taken place against other health boards, and it had been found that no other health board had full time Occupational Health Physicians. Imminent retirements meant the services were facing particular difficulties.</p> <p>Waiting times in other health boards included Swansea Bay (6-8 months) and Cardiff and Vale (4 months) with waiting times in the health board around 3 months.</p> <p>Work was taking place to investigate the potential of providing a national shared service.</p> <p>The Deputy Director of Workforce and OD advised that a Counselling service had recently been contracted which was having a positive impact on timeliness of access, but it was too soon to see exactly what the impact would be.</p>

There should be a focus on appointing more Occupational Health Nurses to take the pressure of the Occupational Health Consultants/Specialists.

The Assistant Director of Workforce and OD advised that the service had been out to advert for an 8b post but had not been successful in appointing to the role. This role will be readvertised.

Might the potential development of an All Wales Service prevent people from applying to specific posts?

The Assistant Director of Workforce and OD considered that this may be the case until the preferred option had been confirmed.

It was noted this item is on the risk register and any potential escalation would be dependent on the ability to recruit to vacant roles.

As part of mitigation measures are the services assured that practitioners are not spending unnecessary time on cases?

The Assistant Director of Workforce and OD confirmed that communications were planned for managers to be clear as to what is an appropriate manager referral to the service. It was hoped this would result on less pressure on the service.

The Director of Primary, Community Care and Mental Health welcomed the benchmarking but noted the first appointment was still a considerable wait for the individual and for advice to be provided to the manager to help manage the situation. It will be necessary to track demand over the next few months.

This action was closed.

ITEMS FOR ASSURANCE

W&C/22/24

WORKFORCE PERFORMANCE REPORT

The Deputy Director of Workforce and OD presented the report which gave an update in relation to key performance indicators across the health board.

Attention was drawn to the workforce age profile, with the largest cohort aged 56 and over which is a significant workforce challenge. In addition there are a large number of fixed term contracts not all of which are in the mass vaccination teams.

PADR (Personal Appraisal and Developmental Review) compliance remains in the low 70% against a national target of 85%. Of the three highest performing areas two have small

numbers of staff resulting in a marginal effect on the overall figures.

Why do numbers change month by month?

The Assistant Director of Workforce and OD advised that PADR's are due annually on the anniversary of the start date for the employee and thus a number will become out of date every month unless the PADR takes place and is recorded.

Are there any lessons to be learnt from Directorates with excellent performance?

It requires a clear focus within a directorate and planning to ensure PADR's are completed to time.

The Interim Board Secretary drew attention to the 27% compliance within the CEO Office and advised that this was partly a data issue relating to the recording that a PADR had taken place and related to the quality and rigour of the process.

It is also the case that it is necessary to complete a PADR to be eligible for an increment.

The Assistant Director noted that this requirement had been paused during the pandemic and a cultural shift was necessary to reinstate this and ensure both managers and staff were not adversely affected by the pay progression linked to PADR.

Is there an impact on the quality of the PADR when targets are being chased?

The Director of Primary, Community Care and Mental Health noted the tools available to undertake a PADR were comprehensive, and the quality related to the conversations that took place between managers and staff. It was acknowledged that a large headcount sat in this directorate and that a conversation would take place with the Director of Environment to learn from their experience. Sickness can impact on compliance rates and some managers have a number of PADR's which are due concurrently which can also impact on compliance.

The Assistant Director of Workforce and OD gave updated figures for the following areas:

- CEO Office – was 27% now 67%
- Primary Care – was 33% now 52%
- Community Dental Service – was 54% now 78%

The question of PADR quality is part of the National Staff Survey. However, this is only undertaken infrequently and the most recent results are now more than a year old.

Mitigations and actions to be taken include Business Managers speaking to Senior Managers to improve compliance rates and

ensuring that staff are correctly assigned within the Electronic Staff Record.

Statutory and Mandatory training compliance was recorded at 84% against a target of 85%.

Staff absence was recorded as 5.8% against a nil target. This was higher than the pre-pandemic figure of 4.6% but compared well with the all-Wales benchmark of 6.9%. An increase in long term absence was noted along with higher than usual absence over the summer period. There are higher levels in patient facing services and there is a correlation with age, including with MSK (Musculo-skeletal) issues. Risk assessments are being undertaken to mitigate the risks of MSK.

Where is sickness absence in GP practices considered?

The Interim Board Secretary advised this was part of the Commissioning Assurance process which is within the remit of the Delivery and Performance Committee.

The number of Employee Relations Cases are low with those categories below 5 not reported. At the Employment Tribunal Case heard in July 2022 all the claims had been dismissed. In common with other NHS organisations in Wales the health board is having challenges with the implementation of the Respect and Resolution Policy. Work is taking place across Wales to improve the processes which support the Policy.

What is happening to cases before the new processes within the Respect and Resolution Policy are outlined?

The Deputy Director of Workforce and OD confirmed there had been good support from union colleagues locally.

Workforce turnover was increasing which was related to the age profile of the workforce with an increasing number of retirements. Whilst an exit survey is undertaken leavers are not providing detailed information as to why they are leaving.

There are high levels of variable pay which are resulting in financial challenges. Agency costs have exceeded bank costs since April and the organisation is trying to improve recruitment in ward areas where the vacancies are highest although it is difficult to recruit clinicians.

It seems that there are issues in accessing bank work and how quickly vacant shifts are sent to bank.

The Deputy Director of Workforce and OD advised that the Temporary Staffing Unit had had its own turnover challenges. A new team were now in place, and it would be necessary to liaise directly with Ward Managers to improve flow.

	<p>It would be necessary to simplify processes, improve the link to payroll and improve efficiency and effectiveness of bank arrangements. It would also be necessary to recruit to bank which was challenging as it was not regular work. Although there are an additional 20% increase in bank staff the attrition rate is not known, nor is the number of bank staff who are inactive.</p> <p>This is an area that is included within the Directorate Risk Register and would continue to be included within the Workforce Performance Report.</p> <p><i>There are high levels of leave recorded from January to March. Is this pandemic related and are there any actions that could be taken to move the end of year date which would spread this effect more evenly?</i></p> <p>The Deputy Director of Workforce and OD acknowledged this was not a new issue.</p> <p>The Director of Finance advised that there was a cost in letting people carry forward leave and it was confirmed that these costs would outweigh the benefits of spreading end of year leave dates across the year.</p> <p>A focus on Maternity Services was provided as the service was in escalation. Attention was drawn to the high rolling turnover which had been at 17.39% at the end of Q1 2022/23. Of the eight leavers half had been due to retirements.</p> <p>The Workforce Performance Report was NOTED.</p>
W&C/22/25	<p>WORKFORCE FUTURES</p> <p>The Assistant Director of Workforce and OD presented the report outlining the focus that had taken place on Workforce Planning with the adoption of the six step model based on the national approach to workforce planning. The progress to date was shared together with the planned areas of work for the second half of the year. This included workforce planning training, a review of the Ward Nursing establishments and workforce modelling activity.</p> <p>The outcome of the International Recruitment programme had resulted in two nurses joining the organisation. Both have arrived, have settled into their accommodation, and are undergoing their training. There are five outstanding vacancies in the International Recruitment programme.</p> <p>Student streamlining is continuing with vacancies due to go live in September. Students then identify posts they wish to be considered for slotting into, to ensure those with bursaries are offered places in Wales.</p>

Bursaries for therapies are to cease and discussions will take place with Health Education and Improvement Wales (HEIW) to understand what will be available in the future.

Recruitment events have taken place in Knighton, Machynlleth and Llanidloes with five Health Care Support Workers and one Registered Nurse interested in joining the organisation. The recruitment of one Registered Nurse would reduce agency spend by £50k/yr.

The organisation will attend a recruitment fayre in Birmingham as a pilot to see if it is cost effective to attend. It is recognised that it is necessary to recruit from east of Powys in addition to recruiting from within Wales.

It is intended to develop talent pools. When there is more than one appointable candidate for a role the unsuccessful candidate will be placed in a talent pool to be considered for future roles which will enable the candidate not to be lost to the organisation.

Progress has been made with increasing the number of commissioned learning places that can be supported from 10 to 28 over the last four years.

Work is taking place with HEIW on the dispersed learning programme. This has been designed for the health board and Hywel Dda whereby colleagues can access training for a Nursing degree virtually. This will be promoted to offer local people the opportunity to be trained whom it is thought will be more likely to stay with the health board.

It will be necessary to work closely with HEIW to improve the opportunities locally. For example, HEIW select via a competitive process whereas the health board would prefer to propose candidates who it is thought are more likely to stay. The links between the health board and HEIW are important to enable understanding of the particular challenges faced locally.

Challenges also exist in relation to the short term funding of support for the Education team in the health board.

The Director of Nursing and Midwifery advised that there needed to be an increasing focus on dual qualified hybrid roles such as Nurse/Social Worker or Nurse/Paramedic. This will require work with partner organisations. England are further ahead than Wales with hybrid roles.

The Director of Primary, Community Care and MH observed that it would be necessary to reflect on the programme of open days and how communities can be encouraged to help own this issue.

	<p>It will also be necessary to work with the Public Service Board as recruitment is not just about filling a role in the health board but for the family to find employment for partners and schools for children.</p> <p>The Deputy Director of Workforce and OD advised that contact had been made with Chester University, but confirmation was required from HEIW that funds could be used to support students in the English education system. There is a need to focus on immediate recruitment, but a balance is needed to also plan for the future. A patchwork approach is necessary to ensure all potential recruitment routes are used.</p> <p>The Chair requested that the next Workforce Futures Report on Workforce Planning include detail of actions taken to encourage consideration of hybrid roles. Action: Director of Workforce and OD</p> <p>The Workforce Futures Report was NOTED.</p>
ITEMS FOR DISCUSSION	
W&C/22/26	<p>ANNUAL REVIEW OF COMMITTEE TERMS OF REFERENCE 2022/23</p> <p>The Interim Board Secretary presented the report. A discussion regarding staff surveys ensued with a request that these are co-ordinated and not overly frequent to avoid survey fatigue with resulting reduction of quality of data.</p> <p>The Interim Board Secretary invited comments to be submitted via email including in relation to the attendee list.</p>
ESCALATED ITEMS	
W&C/22/27	There were no items for inclusion in this section.
ITEMS FOR INFORMATION	
W&C/22/28	There were no items for inclusion in this section.
OTHER MATTERS	
W&C/22/29	<p>CORPORATE RISK REGISTER – RISKS OVERSEEN BY THIS COMMITTEE</p> <p>The Interim Board Secretary presented the Risk Register advising that a more developed Risk Register was in prepare for Board.</p> <p>The Committee NOTED the Committee Risk Register.</p>

W&C/22/30	COMMITTEE WORK PROGRAMME 2022-23 The Work Programme was NOTED.
W&C/22/31	ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND/OR OTHER COMMITTEES There were no items identified under this section.
W&C/22/32	ANY OTHER URGENT BUSINESS There was no urgent business.
W&C/22/33	DATE OF THE NEXT MEETING: 13 December 2022, via Microsoft Teams.