



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board

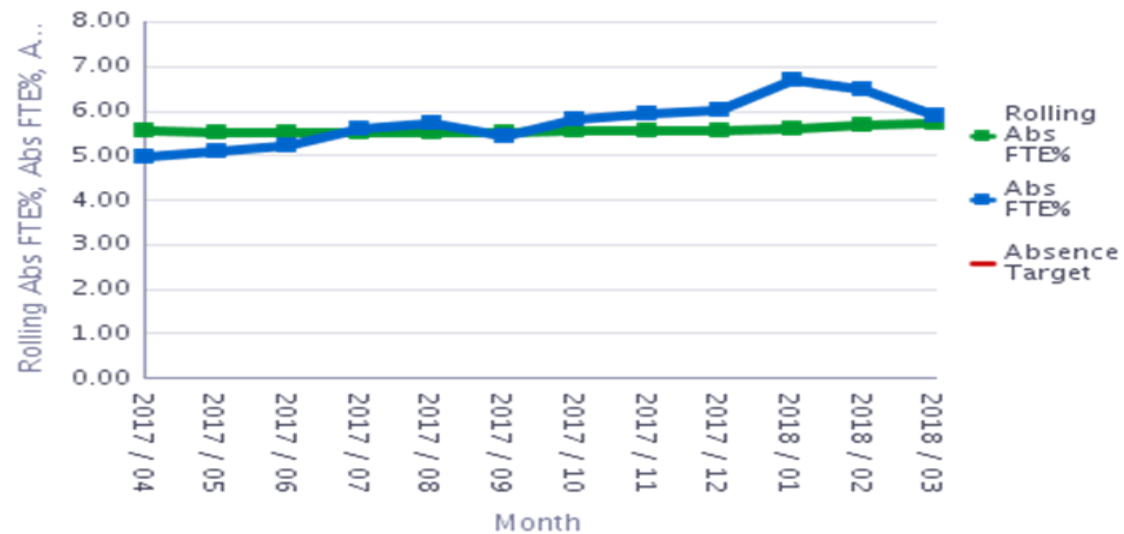


<b>Meeting Date</b>	<b>20<sup>th</sup> June 2018</b>		<b>Agenda Item</b>	<b>2d</b>
<b>Report Title</b>	<b>ABMU Workforce Metrics Report June 2018</b>			
<b>Report Author</b>	Julian Quirk, Head of HR, Delivery Units, Policy & Systems			
<b>Report Sponsor</b>	Hazel Robinson, Director of Workforce & OD			
<b>Presented by</b>	Hazel Robinson, Director of Workforce & OD			
<b>Freedom of Information</b>	Closed			
<b>Purpose of the Report</b>	To provide the updated workforce metrics report for June 2018.			
<b>Key Issues</b>	Key workforce metrics are detailed within the main report.			
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
		✓		
<b>Recommendations</b>	Members are asked to note the attached metrics paper.			

## Part 1 – Sickness Absence April 1 2017 – 30 March 2018

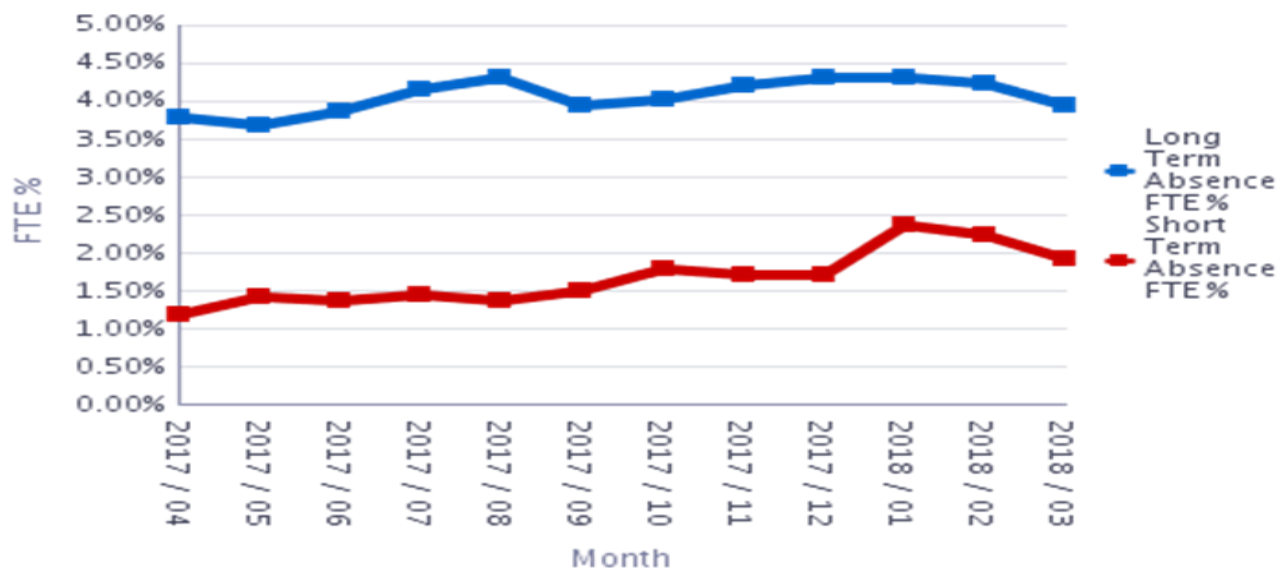
**March 18 in Month** = 5.88% (0.59% decrease on previous month)

**March 18 Rolling 12 month performance** = 5.74% (0.05% increase on previous month)



### **LTS v STS position March 2018**

**In Month** - Long Term = 3.94% (decrease of 0.36% on previous month)    Short Term = 1.94% (decrease of 0.23% on previous month).



The large increase in short term sickness experienced in through the winter months due to high levels of Colds, Coughs and Flu related absence, has continued to reduce in March but is still above levels seen for the same period last year. Are highest reason for absence continues to be stress related absence, which increased slightly compared to last month.

Absence Reasons by FTE Lost Feb 18					Absence Reasons by FTE Lost March 18				
Absence Reason	Headcount	Abs Occurren	FTE Days Lost	%	Absence Reason	Headcount	Abs Occurren	FTE Days Lost	%
S10 Anxiety/stress/depression/o	428	483	6,986.34	27.4	S10 Anxiety/stress/depression/othe	430	546	7,245.04	28.2
S13 Cold, Cough, Flu - Influenza	624	649	3,038.34	11.9	S12 Other musculoskeletal problems	177	218	2,836.07	11.0
S12 Other musculoskeletal prob	191	221	2,709.57	10.6	S13 Cold, Cough, Flu - Influenza	394	412	2,244.06	8.7

**March Cumulative** – Long term = 4.06% (+0.02%)    Short Term = 1.67% (+0.01%)

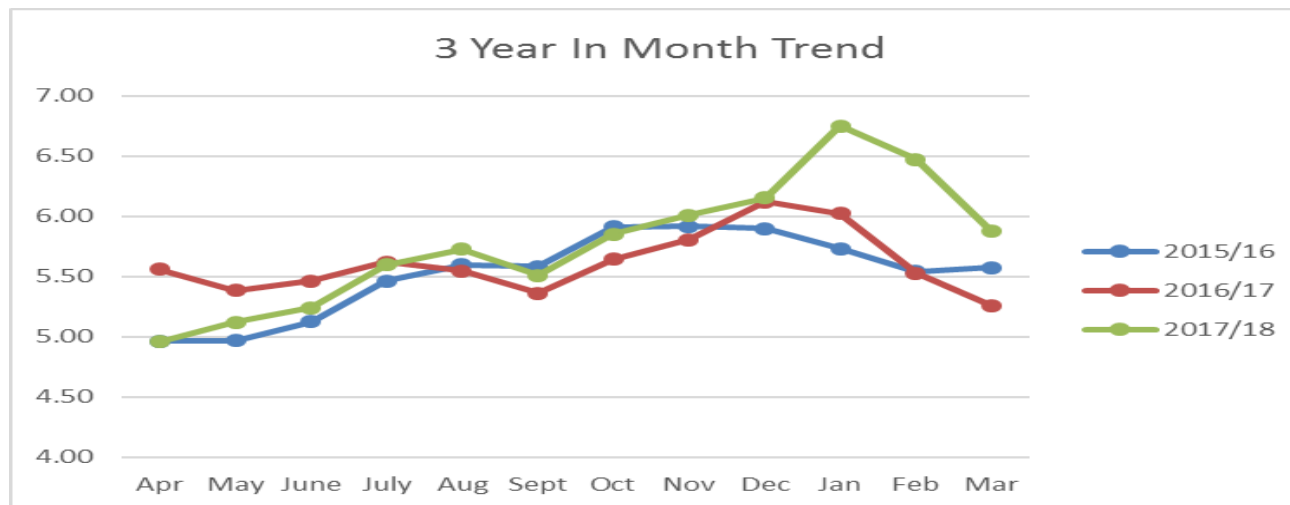
### Delivery Unit performance March 18

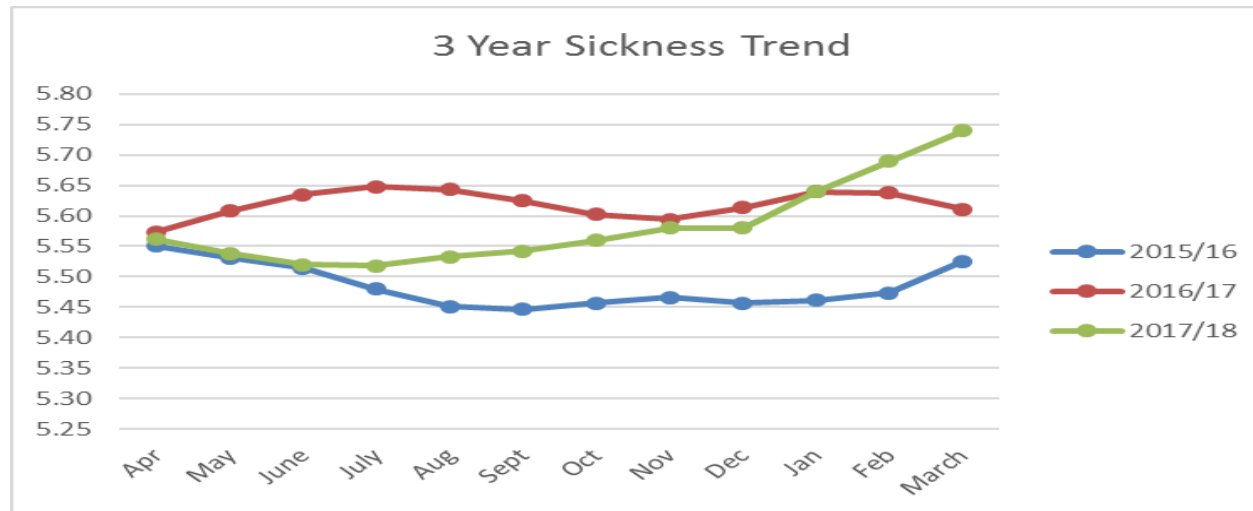
All of the six units improved their in month sickness performance in March 18 largely due to a further decrease in Cold and Flu related absence, however, similar to the previous month only MH and LD improved their cumulative performance.

	In month	+/- on previous month	Cumulative	+/- on previous month
Mental Health and LD	5.63%	- 0.26%	6.12%	- 0.03%
Morrison	6.28%	- 0.21%	5.95%	no change
Neath Port Talbot	5.31%	- 0.58%	4.93%	+ 0.13%
PCC	5.55%	- 0.72%	5.79%	+ 0.10%
POW	5.36%	- 0.90%	5.19%	+ 0.06%
Singleton	6.16%	- 0.88%	5.61%	+ 0.08%

### 3 Year Trend

Whilst the continued decrease in Colds, Coughs and Flu related absence in March has improved in month performance it is still the worst performance we have experienced in the last 3 years and significantly worse than the same time last year. Based on the current trend data available for April it is likely that whilst performance may improve it will still be above last years levels, which would result in cumulative performance deteriorating further.





### Actual performance versus Target

As already highlighted above the table below shows our 12 month cumulative sickness absence performance further deteriorated in the final month of Q4. The below is based on our IMTP target trajectory which the HB performance card is based on. As predicted last month, we have fallen short of the 5% recovery and sustainability target by in excess of 0.5%.

	Projected end of March 2017 position	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Target	5.7	5.65	5.6	5.55	5.5	5.45	5.4	5.35	5.3	5.25	5.25	5.2	5.15
Actual	5.7	5.65	5.59	5.54	5.53	5.54	5.54	5.56	5.58	5.58	5.64	5.69	5.74

## Actions being taken

Actions taken completed April - May	Actions planned for June/July
<ul style="list-style-type: none"> <li>• Further draft of LTS guidance following comments received in awaiting sign off in order to share with staffside</li> <li>• Continue to focus efforts on the top 10 worst LTS cases in each unit.</li> <li>• Finalised development and piloted training in HSE work related stress risk assessment.</li> <li>• Development of an evaluation of the Wellbeing Champion network.</li> </ul>	<ul style="list-style-type: none"> <li>• Single point access Staff Wellbeing Advice and Support service to commence.</li> <li>• Launch text reminder service for OH appointments to reduce DNA rate and improve efficiency.</li> <li>• Commence mental health in the workplace for managers' training.</li> <li>• Launch of staff health and wellbeing website</li> <li>• Commence formal roll out of HSE work related stress risk assessment training.</li> </ul>

## **Part 2 – Establishment, Vacancies and Recruitment**

Over the last year or so we have been developing the ESR system to include an “establishment” figure so that we are able to accurately assess the number of true vacancies at any given time. The work has focused on our operational directorates and in particular nursing given the shortage of qualified nurses available within the employment market.

For this report a comparison with the position as at 31 March 2017 is provided.

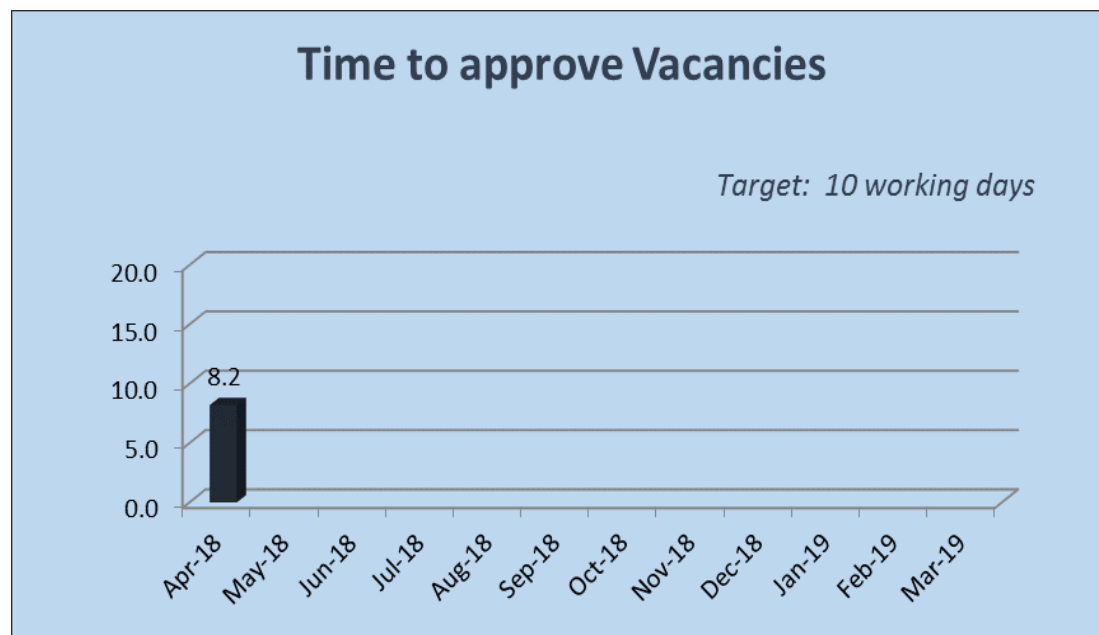
	Budgeted Establishment as at 31 May 2018	Staff in Post as at 31 May 2018	Vacancy shown as +ve, over-establishment shown as -ve	Movement since April report
<b>Health Board</b>				
Administrative & Clerical	2572.09	2468.33	103.76	↑
Medical And Dental	1538.97	1302.25	236.72	↑
Nursing And Midwifery Registered	4879.76	4435.24	444.52	↑
Add Prof Scientific And Technical	468.67	442.20	26.47	↓
Additional Clinical Services	2774.37	2728.95	45.42	↑

Allied Health Professionals	980.75	911.94	68.81	↑
Healthcare Scientists	336.95	325.91	11.04	↓
Estates And Ancillary	1528.99	1388.53	140.46	↑
Students	6.00	5.00	1.00	-
<b>Total</b>	<b>15086.55</b>	<b>14008.34</b>	<b>1078.21</b>	↑

Vacancies have increased in most Occupational groups.

NURSE VACANCIES		Establishment wte	Post wte	(SIP - Funded) wte
Singleton DU	Qualified	786.87	729.75	-57.12
	Unqualified	289.29	306.91	17.62
	<b>Total</b>	<b>1,076.16</b>	<b>1,036.66</b>	<b>-39.50</b>
POW DU	Qualified	750.86	665.61	-85.25
	Unqualified	284.17	270.52	-13.65
	<b>Total</b>	<b>1,035.03</b>	<b>936.13</b>	<b>-98.90</b>
Morrison DU	Qualified	1,469.16	1305.41	-163.75
	Unqualified	459.76	496.78	37.02
	<b>Total</b>	<b>1,928.92</b>	<b>1,802.19</b>	<b>-126.73</b>
Mental Health & Learning Disabilities	Qualified	824.75	732.37	-92.38
	Unqualified	670.36	619.20	-51.16
	<b>Total</b>	<b>1,495.11</b>	<b>1,351.57</b>	<b>-143.54</b>

<b>Primary Care &amp; Community DU</b>	Qualified	689.95	653.08	-36.87
	Unqualified	224.42	211.90	-12.52
	<b>Total</b>	<b>914.37</b>	<b>864.98</b>	<b>-49.39</b>
<b>NPT DU</b>	Qualified	313.97	301.86	-12.11
	Unqualified	126.97	124.56	-2.41
	<b>Total</b>	<b>440.94</b>	<b>426.42</b>	<b>-14.52</b>

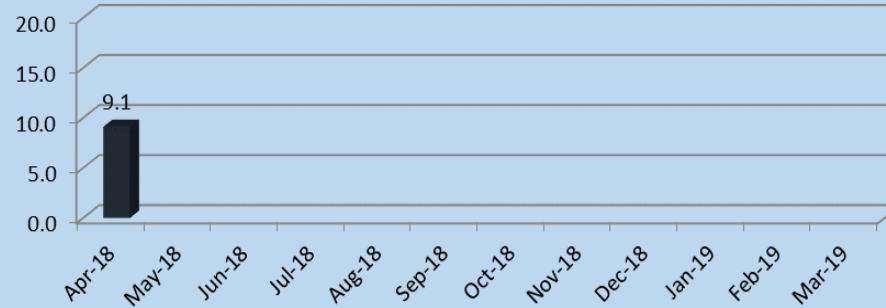


Has remained below the target figure for the last 6 months of 2017/18



### Time to Shortlist by Managers

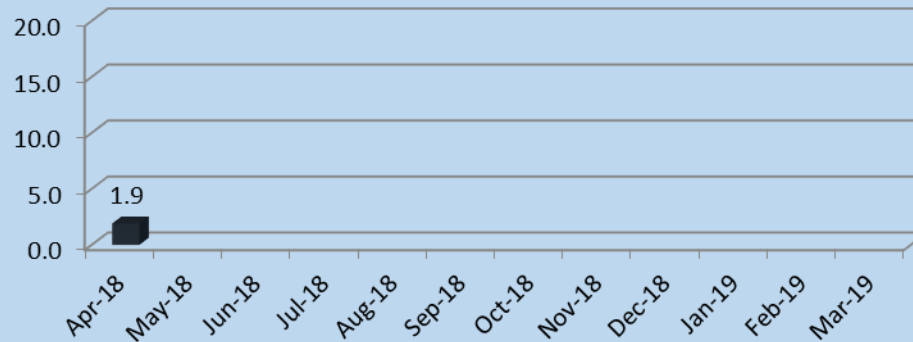
Target: 3 working days



Shortlisting time remains just under 10 days

### Time to notify Recruitment of Interview Outcome

Target: 3 working days



Is now showing as consistently below the target figure.

## Recruitment Timeline as at April 2018

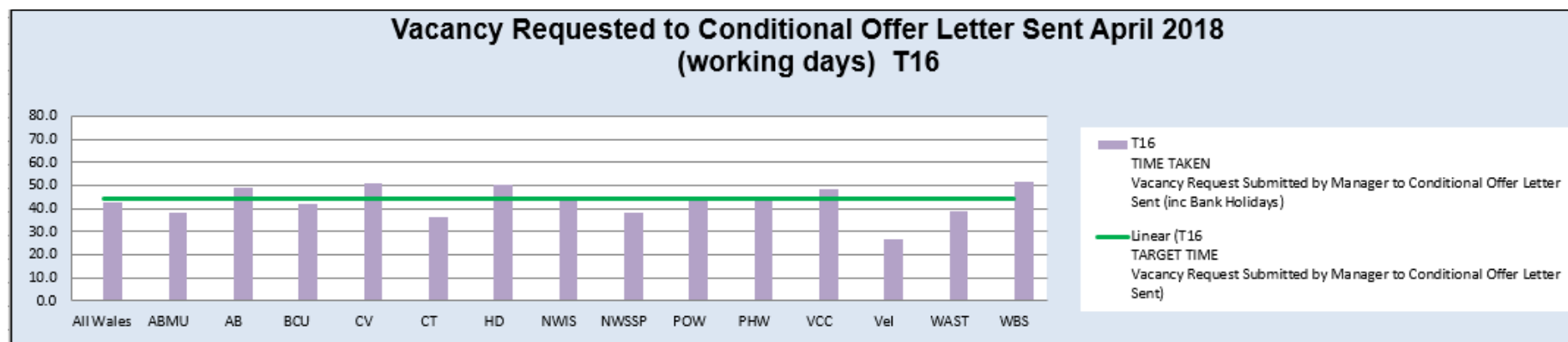
Org	T16 TARGET TIME Vacancy Request Submitted by Manager to Conditional Offer Letter Sent	T16 TIME TAKEN Vacancy Request Submitted by Manager to Conditional Offer Letter Sent (inc Bank Holidays)	T17 TARGET TIME Conditional Offer Letter Sent to Unconditional Offer Letter Sent	T17 TIME TAKEN Conditional Offer Letter Sent to Unconditional Offer Letter Sent (inc Bank Holidays) Excluding Outliers	T17 TIME TAKEN Conditional Offer Letter Sent to Unconditional Offer Letter Sent (inc Bank Holidays) Including Outliers	T18 TARGET TIME Vacancy Requested to Unconditional Offer Letter	T18 TIME TAKEN Vacancy Requested to Unconditional Offer Letter (inc Bank Holidays) Including Outliers
All Wales	44.0	42.9	27.0	19.2	26.2	71.0	74.2
ABMU	44.0	38.2	27.0	21.4	32.7	71.0	72.9
AB	44.0	48.8	27.0	24.8	33.7	71.0	81.1
BCU	44.0	42.2	27.0	16.1	26.1	71.0	68.4
CV	44.0	51.1	27.0	20.5	23.6	71.0	73.6
CT	44.0	36.0	27.0	23.9	30.3	71.0	76.5
HD	44.0	50.2	27.0	21.5	25.5	71.0	71.6
NWIS	44.0	44.0	27.0	14.4	17.0	71.0	60.3
NWSSP	44.0	38.4	27.0	13.6	14.3	71.0	54.4
POW	44.0	43.1	27.0	22.2	36.2	71.0	81.9
PHW	44.0	43.4	27.0	17.4	17.4	71.0	61.8
VCC	44.0	48.1	27.0	18.7	26.7	71.0	63.6
Vel	44.0	27.0	27.0	12.0	12.0	71.0	129.0
WAST	44.0	38.5	27.0	17.3	45.9	71.0	81.6
WBS	44.0	51.8	27.0	24.7	24.8	71.0	62.3

Note – outliers are cases where the timescales have been exceeded to a very significant level and often reflect issues with reporting activity as being concluded. The ability to run our own reports will allow ABMU to manage its own data cleansing.

RAG Rating Key for table above.	
T15	
<span style="color: red;">■</span>	> 50 days
<span style="color: orange;">■</span>	45-50 days
<span style="color: green;">■</span>	0-44 days
T16	
<span style="color: red;">■</span>	> 50 days
<span style="color: orange;">■</span>	28-50 days
<span style="color: green;">■</span>	0-27 days
T17	
<span style="color: red;">■</span>	> 91 days
<span style="color: orange;">■</span>	71-91
<span style="color: green;">■</span>	0-71 days

#### Comment

- ABMU compares well against similar sized NHS Wales organisations.
- Outliers continue to adversely affect the target timescales.
- Delays with some checks do affect the end to end performance but all checks are now based on the absolute minimum required by law (right to work) and NHS recruitment standards.
- OH processes have been revised to look at improving triaging recruitment checks.
- The most significant delays remain applicant based eg failure to submit OH clearance declaration, failure to provide required documentation and or DNA at the identity checking appointments.



Trac Recruitment Health Check Average Times in Working Days	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Apr-18
From Notice Date to Vacancy Request Date (New measure from 01/08/17)	67.4	43.4	56.7	64.3	49.1	36.6	48	70	49.1

This is a new measure which extracts data from the TRAC authorisation detailing when the individual gave notice to the date the TRAC authorisation was submitted. The ABMU KPI for this is 10 days, allowing some time for the effect the vacancy panel process has. The data clearly shows a lengthy delay between the point the incumbent for a post leaves and the date the request to recruit is submitted on TRAC. Looking at the reasons for this and improving performance is the first area we will explore following the ability to run DU specific reports.

Actions taken completed April / May	Actions planned for June July
<ul style="list-style-type: none"> <li>.</li> </ul>	<ul style="list-style-type: none"> <li>Further work on the use of TRAC reports</li> </ul>

### **Part 3 - Turnover & Labour Stability**

Period Turnover Rate - 01 June 2017 - 31 May 2018

Average turnover has decreased by 0.18% since the March report and remains relatively low as an organisational rate. The rate has been fluctuating around 9% for most of 2017/18. Nursing turnover has reduced in the last six months.

Staff Group	Headcount	FTE	Change (headcount) from March 2018
Add Prof Scientific and Technic	9.51%	9.47%	↑
Additional Clinical Services	9.73%	9.32%	↑
Administrative and Clerical	8.23%	8.10%	↓
Allied Health Professionals	8.87%	8.32%	↑
Estates and Ancillary	5.78%	5.69%	↓
Healthcare Scientists	3.40%	3.03%	↓
Medical and Dental	9.27%	8.70%	↑
Nursing and Midwifery Registered	9.36%	9.07%	↓

Health Board - Excluding Junior Medical & Dental Staff & Students	Headcount	FTE	
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Overall Rate	8.67%	8.40%	
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Actions taken completed April / May	Actions planned for June / July
<ul style="list-style-type: none"> <li>DU analysis of leavers to establish patterns and check on concerns over staff leaving using available exit information started.</li> </ul>	<ul style="list-style-type: none"> <li>Review data consistency with a view to adding some analysis to the next metrics report.</li> </ul>

## Part 4 - PADR

### Current Position and Background

The following provides a breakdown by ABMU Delivery Unit of PADR completion and recording within Electronic Staff Record (ESR) as a percentage, as of the 6<sup>th</sup> June 2018 for a 12 month rolling period.

Org L5	Assignment Count	Reviews Completed	Reviews Completed %
130 D3 Board Secretary - Div	44	12	27.27
130 D3 Clinical Medical School - Div	20	8	40.00
130 D3 Clinical Research Unit - Div	42	26	61.90
130 D3 Delivery Unit - Div	33	0	0.00
130 D3 Director of Strategy - Div	1,660	477	28.73
130 D3 Director of Therapies & Health Sciences - Div	27	23	85.19
130 D3 EMRTS - Div	29	4	13.79
130 D3 Finance - Div	94	68	72.34
130 D3 Informatics - Div	401	53	13.22
130 D3 Medical Director - Div	44	30	68.18
130 D3 Nurse Director - Div	72	55	76.39
130 D3 Workforce & Organisational Development - Div	136	67	49.26
130 SDU - Mental Health & Learning Disabilities - Div	1,970	1,501	76.19
130 SDU - Morriston Hospital - Div	3,108	1,802	57.98
130 SDU - Neath Port Talbot Hospital - Div	1,450	995	68.62
130 SDU - Primary Care & Community - Div	1,746	1,399	80.13
130 SDU - Princess of Wales Hospital - Div	1,551	893	57.58
130 SDU - Singleton Hospital - Div	2,178	1,280	58.77
<b>Grand Total</b>	<b>14,605</b>	<b>8,693</b>	<b>59.52</b>

Please find below a table of areas where the PADR Compliance is below 30%.

Org L5	Assignment Count	Reviews Completed	Reviews Completed %
130 D3 Board Secretary - Div	44	12	27.27
130 D3 Delivery Unit - Div	33	0	0.00
130 D3 Director of Strategy - Div	1,660	477	28.73
130 D3 EMRTS - Div	29	4	13.79
130 D3 Informatics - Div	401	53	13.22

The overall Health Board percentage of PADR's recorded within ESR as of June 2018 for a 12 month rolling period is **59.52%**, however the all-Wales and local target is 85% of PADR's recorded in ESR and so continued improvement remains essential.

Actions taken April / May	Actions planned for June / July
<ul style="list-style-type: none"> <li>Continued retraining of staff with Learning administrative access to enable the updating of local PADR information</li> <li>All staff given Learning Administration access have been trained to be able to produce local reports on PADR activity for their area/Unit.</li> </ul>	<ul style="list-style-type: none"> <li>Requests for administrator access to input PADR data continue to be received and training provided accordingly</li> </ul>

## **Part 5 - Statutory and Mandatory Training**

In August 2016 it was mandated that the Electronic Staff Record (ESR) would be the only method of reporting Statutory and Mandatory Training Compliance for all NHS organisations. Subject Matter Experts and their administrators have been entering local Mandatory Training records / compliance, manually into ESR since October 2012. National e-Learning packages for the minimum competencies became available to Staff and Health Boards from June 2014, with new starters being able to access the e-Learning since October 2014, meaning an automatic transfer of training records between the Learning@Wales e-learning platform and ESR, however this is mainly for level 1 training. The updating of the training records from Learning@Wales has been a manual process.

A major change in the accessing of e-learning was completed on 1<sup>st</sup> January 2017, meaning that staff are only able to access e-learning modules for Mandatory and other e-learning via the ESR system. This has had the following benefits, which have been lacking to date:

- Only needing 1 log-on / password
- Instant and accurate updating of individual training records for the Mandatory Training subjects
- Removal of the use to enrolment keys
- Access to a greater variety of e-learning subjects
- Managers with Manager Self Service access will be able to monitor the training compliance of their staff direct

### **Compliance by Unit**

#### **Mental Health & Learning Disabilities**

<b>Competence</b>	<b>% staff compliant</b>
<b>Overall Compliance</b>	<b>67.38</b>
<b>Equality &amp; Diversity</b>	<b>35.75</b>
<b>Fire</b>	<b>77.01</b>
<b>Health, Safety &amp; Welfare</b>	<b>63.33</b>
<b>Infection Prevention &amp; Control</b>	<b>71.88</b>



<b>Information Governance</b>	<b>74.73</b>
<b>Resuscitation</b>	<b>51.88</b>
<b>Safeguarding Adults</b>	<b>66.70</b>
<b>Safeguarding Children</b>	<b>60.52</b>
<b>Violence &amp; Aggression</b>	<b>77.96</b>
<b>Dementia Awareness</b>	<b>68.41</b>
<b>Social Services</b>	<b>91.31</b>
<b>Violence Against Women</b>	<b>55.25</b>

#### **Morrison Delivery Unit**

<b>Competence</b>	<b>% staff compliant</b>
<b>Overall Compliance</b>	<b>53.53</b>
<b>Equality &amp; Diversity</b>	<b>58.39</b>
<b>Fire</b>	<b>60.56</b>
<b>Health, Safety &amp; Welfare</b>	<b>55.26</b>
<b>Infection Prevention &amp; Control</b>	<b>57.94</b>
<b>Information Governance</b>	<b>56.49</b>
<b>Resuscitation</b>	<b>42.12</b>
<b>Safeguarding Adults</b>	<b>50.24</b>
<b>Safeguarding Children</b>	<b>46.31</b>
<b>Violence &amp; Aggression</b>	<b>54.60</b>
<b>Dementia Awareness</b>	<b>54.94</b>
<b>Social Services</b>	<b>79.66</b>
<b>Violence Against Women</b>	<b>38.4</b>

## Primary & Community Services

Competence	% staff compliant
Overall Compliance	64.14
Equality & Diversity	69.47
Fire	75.94
Health, Safety & Welfare	64.40
Infection Prevention & Control	67.10
Information Governance	78.75
Resuscitation	45.42
Safeguarding Adults	56.31
Safeguarding Children	52.59
Violence & Aggression	58.79
Dementia Awareness	73.57
Social Services	86.30
Violence Against Women	50.76

## Neath Port Talbot Delivery Unit

Competence	% staff compliant
Overall Compliance	66.40
Equality & Diversity	73.37
Fire	75.02
Health, Safety & Welfare	69.81
Infection Prevention & Control	69.68
Information Governance	78.97
Resuscitation	47.40
Safeguarding Adults	60.38
Safeguarding Children	57.88
Violence & Aggression	64.07
Dementia Awareness	76.40

<b>Social Services</b>	<b>88.66</b>
<b>Violence Against Women</b>	<b>48.58</b>

#### **Princess of Wales Hospital**

<b>Competence</b>	<b>% staff compliant</b>
<b>Overall Compliance</b>	<b>55.67</b>
<b>Equality &amp; Diversity</b>	<b>59.83</b>
<b>Fire</b>	<b>65.67</b>
<b>Health, Safety &amp; Welfare</b>	<b>54.14</b>
<b>Infection Prevention &amp; Control</b>	<b>54.03</b>
<b>Information Governance</b>	<b>65.40</b>
<b>Resuscitation</b>	<b>41.26</b>
<b>Safeguarding Adults</b>	<b>50.68</b>
<b>Safeguarding Children</b>	<b>46.89</b>
<b>Violence &amp; Aggression</b>	<b>52.95</b>
<b>Dementia Awareness</b>	<b>69.79</b>
<b>Social Services</b>	<b>80.13</b>
<b>Violence Against Women</b>	<b>38.60</b>

#### **Singleton Delivery Unit**

<b>Competence</b>	<b>% staff compliant</b>
<b>Overall Compliance</b>	<b>51.81</b>
<b>Equality &amp; Diversity</b>	<b>55.64</b>
<b>Fire</b>	<b>60.13</b>
<b>Health, Safety &amp; Welfare</b>	<b>56.43</b>
<b>Infection Prevention &amp; Control</b>	<b>54.77</b>
<b>Information Governance</b>	<b>51.74</b>
<b>Resuscitation</b>	<b>39.24</b>
<b>Safeguarding Adults</b>	<b>46.88</b>

<b>Safeguarding Children</b>	<b>46.06</b>
<b>Violence &amp; Aggression</b>	<b>51.06</b>
<b>Dementia Awareness</b>	<b>56.62</b>
<b>Social Services</b>	<b>83.16</b>
<b>Violence Against Women</b>	<b>33.60</b>

<b>Actions taken April / May</b>	<b>Actions planned for June / July</b>
<ul style="list-style-type: none"> <li>• E-learning drop-in sessions are continually provided to assist individuals with any issues.</li> <li>• The Action Point system continues to provide advice and support across the organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Access to ESR to be encouraged and increased through promotion of NHS Wales Staff Survey accessible via ESR for staff to complete. E-learning will be promoted at the same time and the staff survey promoted to staff attending e-learning.</li> <li>• Gradual roll-out of e-payslips to commence in June, increasing the use of ESR and access to e-learning.</li> </ul>

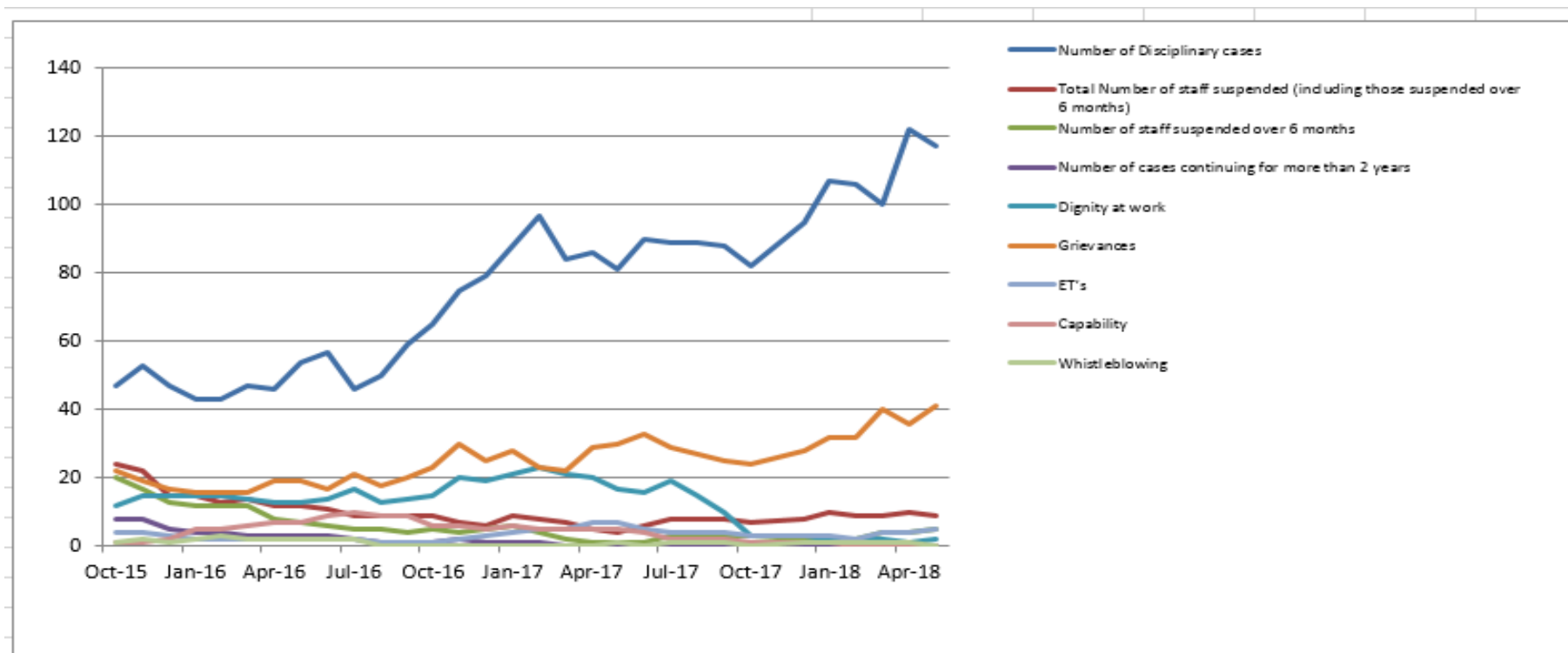
## Part 6 - Variable Pay

### ABM - Variable Pay

Health Board Wide		2018/19 £m			2017/18 £m				2016/17 £m
		P01	P02	Total	P01	P02	Total P01- P02	Total P01- P12	
Medical	Agency	0.619	0.689	1.308	0.457	0.750	1.207	7.961	9.765
	Irregular ADH	0.448	0.531	0.979	0.461	0.582	1.043	6.976	6.832
Total Medical		<b>1.067</b>	<b>1.220</b>	<b>2.287</b>	<b>0.918</b>	<b>1.332</b>	<b>2.249</b>	<b>14.937</b>	<b>16.597</b>
Registered Nursing	Agency	0.538	0.901	1.439	0.592	0.464	1.056	7.572	6.288
	Overtime	0.281	0.227	0.508	0.232	0.213	0.445	2.301	3.092
	Bank	0.321	0.283	0.604	0.223	0.236	0.458	3.222	3.009
Total Registered Nursing		<b>1.140</b>	<b>1.411</b>	<b>2.551</b>	<b>1.047</b>	<b>0.912</b>	<b>1.959</b>	<b>13.095</b>	<b>12.389</b>
Other Staff Groups	Agency	0.226	0.239	0.465	0.524	0.313	0.837	3.984	8.009
	Overtime	0.338	0.310	0.648	0.272	0.289	0.561	3.420	4.244
	Bank	0.488	0.524	1.012	0.375	0.429	0.804	5.528	4.732
Total Other Staff Groups		<b>1.052</b>	<b>1.073</b>	<b>2.125</b>	<b>1.172</b>	<b>1.031</b>	<b>2.203</b>	<b>12.932</b>	<b>16.985</b>
Total Variable Pay		<b>3.260</b>	<b>3.704</b>	<b>6.964</b>	<b>3.136</b>	<b>3.275</b>	<b>6.411</b>	<b>40.964</b>	<b>45.971</b>

Actions taken April / May	Actions planned for June / July
<ul style="list-style-type: none"> <li>New bank system continues to be imbedded within the HB, Post implementation review started.</li> </ul>	<ul style="list-style-type: none"> <li>Agency diagnostic tool Action Plan issued for Comments</li> <li></li> </ul>

## Part 7 - Operational Workforce Activity



Actions taken April / May	Actions planned for June / July
<ul style="list-style-type: none"> <li>IGB Case submitted and approved to purchase or develop internally case management software to support Workforce.</li> </ul>	<ul style="list-style-type: none"> <li>Paper seeking support/investment for dedicated Investigating Officer team to be submitted to IGB.</li> <li>Internal review of casework management being undertaken as part of directorate meeting 14<sup>th</sup> June 2018</li> </ul>



Governance and Assurance										
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
							✓			
Link to Health and Care Standards (please ✓)	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care	Individual Care	Staff and Resources			
							✓			
Quality, Safety and Patient Experience										
This is covered within the detail of the report.										
Financial Implications										
This is covered within the detail of the report.										
Legal Implications (including equality and diversity assessment)										
N/A										
Staffing Implications										
This is covered within the detail of the report.										
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)										
N/A										
Report History		This report is considered at Performance & Finance Committee every two months.								
Appendices		Appendix 1 details the key workforce metrics for each Delivery Unit.								