

ABM University Health Board	
17 th January 2018 Workforce and Organisational Development Committee Agenda item: 19	
Subject	Workforce & OD Directorate Internal Risk Register
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Presented by	Kate Lorenti – Acting Director Human Resources

1.0 Purpose

To provide an update to the Internal Risk register for the WF&OD Directorate.

2.0 Introduction

Each Delivery Unit and corporate department are required to maintain their own risk register covering risks internal to their area of responsibility. Attached is the updated internal risk register for WF&OD. Please note that the spreadsheet format of the formal document is such that hard copies can be difficult to read. The attachment is an extract of the full spreadsheet covering the key components in a format that can be more easily read.

There have been minimal changes to the risk register since the last report. Changes are highlighted in bold text.

3.0 Recommendations

The Committee is asked to note the updated Internal risks identified.

Workforce and OD Directorate Internal Risk Register

Risk	Staff Health and Well-being – Well-being through Work – European Funded Project
Current Context	The above project is funded by ESF through Welsh Government (as lead sponsor) until 31/8/18. Funding is just over £600k per annum and funds the Well-being through Work Team. The scope of the project is to deliver individual support to employees with work limiting conditions to avoid them losing their jobs and accessing the welfare system. The scope of the project <u>does not allow</u> the team to deliver to Health Board employees and participation from other Public Sector organisations is capped at 30%. The main focus of the project is those who work in the private/third sector. The project was designed to fit with the new Department for Work and Pensions 'Fit for Work Service' (FFWS). 40% Of referrals (800 over the life of the 3 year project) were to come directly from the FFWS and 900 the project was to generate through promotion to GPs, other health professionals and employers. The DWP FFWS has not been used by GPs and employers in the way that DWP had planned and the contracted out service has been scaled down accordingly. The team has only received 3 referrals from this source. As a result the project has received a 'red' RAG rating overall and the Well-being team is now expected to generate the 1700 referrals to meet the ESF targets set. A marketing/promotion plan has been developed and implementation has already begun.
Controls in Place	<ol style="list-style-type: none"> 1. Welsh Government (WG) Project Board meets quarterly and seeks assurance on project progress/improvement plans 2. Monthly audits by the Welsh Government Project Team 3. Assurance provided to Workforce and OD Committee regarding management of project risks and issues that satisfy Welsh European Funding Office (WEFO)
Action Plan	<ol style="list-style-type: none"> 1. GP/Employer Engagement post filled and marketing/promotion plan being developed 2. Ongoing meetings with WG and WEFO to challenge evidence requirements and change of project scope and targets 3. Project Targets profiled realistically over the life of the project (to August 2018) to drive performance
Progress	The revised budget/participant targets, reflecting the reduced participant referrals to the project, were accepted by Welsh Government in May 2017. Conversations are continuing between Welsh Government and WEFO around extension funding of the project until 2022, however, WEFO have queried the methods by which ABMU participant eligibility is received. This is despite being two years into delivery of the service. Currently eligibility evidence is received via post or by e-mail and WEFO are claiming this needs to be gained face to face from the participant. Welsh Government are meeting WEFO on 22 nd August to clarify the position.

Score	6
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Risk	The directorate has to vacate the 7 th floor of Oldway house in March/April 2017.
Current Context	<p>The directorate has a number of staff based on the 7th Floor of Oldway, medical staffing JE and rostering team. We were aware that it was highly likely that we would have to vacate the floor which we currently occupy as tenants of NWSSP. The directorate pays around £55K for the use of the offices. The building was purchased by a developer and he has given early indication that he was going to redevelop the property.</p> <p>As part of long terms plans we had been allocated accommodation on the Morriston where we were going to bring the operational teams and others into one building. We had been maintaining close contact with Morriston management and only 2 months ago had it confirmed that we were going to be allocated the top floor of the old management centre once the existing staff moved to the new build.</p> <p>In late October we were informed the commitment to house the team had fallen away and we were not going to be housed on site.</p> <p>Accommodation has been identified on the Morriston site to accommodate the staff who currently are based in Oldway and the Operational staff currently based on the Morriston site. HR successfully completed the move from Oldway to Morriston on the 8th and 9th May. There was minimal service disruption and the teams have settled in well. There are some remaining issues with storage of personal files as MYG is due to be demolished. Off site storage will be used for a short period prior to the distribution of personal files to line management.</p> <p>It has now been confirmed that the Plan for the Vocational Training Team is that they move to Singleton Hospital. Dates have not yet been confirmed</p>
Controls in Place	Discussed options with capital planning and following a site visit we have agreed a refurbishment plan for the old crèche accommodation.
Action Plan	<ol style="list-style-type: none"> 1. Discussions with the CE to confirm nothing can be done and also discuss costs. 2. As there is no corporate management of the ABMU estate so we will have to find accommodation ourselves. We will be making contact with local Office vendors week commencing 31st October to scope what is available and what it may costs. 3. Hold discussions with Capital Planning

	<ol style="list-style-type: none"> 4. Agree site plan for refurbishment. 5. Agree move date 6. Move planned 8th and 9th May 2017. 7. Move completed successfully.
Progress	HR Move Completed
Score	5

Risk	Many of our technical and specialist roles rely on single employees and individuals, loss of these staff would have a direct and immediate impact on that services ability to sustain its support to the health board.
Current Context	The ABMU HR team is one of the smallest in terms of HR team – workforce ratios in NHS Wales. Our specialised staff in areas such as Job evaluation, Roster management, roster system IT management, aspects of medical workforce management rely on one individual with the requisite skills and knowledge supported by administration support. Cover with the ability to fully pick up these roles is not readily available.
Controls in Place	We do have back up plans to cover specialised staff but these have been put under pressure through staff being seconded to new roles we have been required to support such as Nurse International recruitment and support for the HB reorganisation. This has stretched our ability to cover roles. In the case of JE we are now using a fourth layer of cover from within the Operational Workforce. This is having knock on effect across operational support and other specialised areas.
Action Plan	<ol style="list-style-type: none"> 1. Some areas we simply have to tolerate the risk as there are no viable means to provide back up cover. 2. We would look to use specialised agency support should there be no means to provide internal cover. Potential developments in roster system may require a new approach compounded by sick absence affected our Roster lead.
Progress	Risk Tolerated
Score	20

Risk	The NPT operational team has had to be supported by Agency cover for some years loss of the agency staff will a disproportionate effect on this three WTE team .
Current Context	The team has been successful in securing the services of one of the recent agency staff on a substantive basis, this has allowed them to retain the individual who has built up skills over recent years. The team are losing one member (agency) who has secured a permanent role in the Glanrhyd team .
Controls in Place	n/a
Action Plan	1. The team are currently supported for two days a week from agency support - this support ceased at the end of April. Funding issues have delayed recruitment but case is being made to a band mix change reducing band 3 and adding support at band 6 where it is most needed. The team (2.4wts) are only able to provide a limited (priority) service to managers in the areas they support
Progress	Work plan is in place to ensure essential and priority work is covered following the agency cover being withdrawn. Business case submitted to replace posts (now affected by the corporate A&C recruitment freeze). Interviews have been held and two successful candidates have been informed, one internal and one external. Staff should be in post in January.
Score	15 (risk increased to reflect increase in vacant posts and impact on team)

Risk	The need for the health board to have expertise in matters concerning HMRC and the treatment of pay elements is increasing. HMRC are in the process of challenging the NHS generally across a range of issues.
Current Context	The health board has already experience significant costs associated with issues where HMRC sought and secured payment of back tax payment of near £0.5M. They are currently looking at issues within GPOOH and the payment regime that support GPS in that service. They have also recently approach NHS Wales regarding the payment of agency staff of all occupational groups and Locum Doctors seeking assurance that HBs were acting correctly.
Controls in Place	We do have some local tax knowledge which is sufficient to deal with routine matters. ABMU has provided the lead HR input to recent discussions with HMRC. The work with GPOOH is complex and at the point where HMRC made a formal approach and challenged the HB more expert advice and support was needed. We are using Deloitte's Tax expertise to provide more experienced support in this area
Action Plan	1. Continue to use expert help where needed. 2. Maintain levels of tax related knowledge through personal development.
Progress	This issue is being handled on an all Wales basis an all-Wales position was agreed in May and Deloitte's

	<p>responded formally to HMRC. HMRC have responded and as expected have confirmed they still believe that GPOOH should be taxed as if the staff were employed.</p> <p>Staff are aware of the outcome the HR function continues to provided support and expertise in this area..</p>
Score	15 (risk increased to reflect HMRC decision)

Risk	<p>We are continuing to see a cost pressure from the Training for Work cost centre, due to the required levels of income not being achieved. As at month 7, the income is £34.7k short of the target.</p> <p>Less staff within the team to deliver more intensive programme with higher targets – recruitment onto the programme will have to be managed further.</p>
Current Context	<p>ABMU is the only Health Board in Wales who have been awarded a contract to deliver in house programme for adults and young people. Links to sustainability programme - widening workforce, retention, recruitment.</p> <p>Adult learning Contract awarded by Rathbone for team to deliver starts on adult Vocational Training Programme with cap on numbers lifted. Following 6 month delay in awarding of Welsh Government contract.</p> <p>The predicted average amount that we can claim on each candidate start will be £1353.48 if they complete the whole programme.</p> <p>This is broken down as follows (a week is 16 hours):</p> <ul style="list-style-type: none"> · The payment we get if they start is £208.62 · For each week they are in the centre we get £92.49 · For each week they are in work placement we get £30.83 <p>The new contract means that we are paid in 'Learning Units' which are £23.18 per unit (the length of these is variable.) The maximum Learning units we can claim -66.5 learning units.</p> <p>Vocational trainer has left the team - fixed term contract expiry. One Vocational trainer will now deliver all essential skills and assessment. Administrative Assistant has commenced Maternity leave from the end of June 2017. Currently won tender for engagement programme for young people in Swansea to increase income generation and completing registration processes. Increase in Agored registrations attract no income (including HCSW framework). Increase in pressure to recruit to Lift Programme, which attracts no income. Uplifting of banding in team has created extra financial pressure. Competition for placements due to financial pressures limiting ability of staff to mentor/ develop trainees</p>
Controls in Place	<p>Team are planning the contracted starts to ensure they are able to manage/deliver and meet the spec of the Employability Skills Programme.</p> <p>Regular meetings with Job Centre to raise the profile of Vocational Training.</p> <p>Increase of contract with Rathbone for number of starts (also requested further breakdown of financial information).</p> <p>Regular discussions/meetings with finance.</p> <p>Not replaced Vocational trainer band 5 vacancy.</p>

	<p>No back cover of Maternity Leave. Vocational Trainee working within the team to support admin tasks. Guaranteed interview for VT onto apprentice posts to deliver progressions. Supported reasonable adjustments to enable member of staff to stay in work with Long Term Health Condition.</p>
Action Plan	<ol style="list-style-type: none"> 1. Continue working with NPTC to deliver Traineeships to potential candidates within the Swansea and NPTH areas Contract commenced May 2017. 2. Taken on two adult trainee to help with the administration work whilst Administrative assistant is on Maternity leave. 3. Spoken to staff about planned annual leave, no two staff to be off at any one time on annual leave. 4. Working with Rathbone to process how payment will be received by the Health Board and the processes behind this as the draw down for WG different with the new contract. 5. Working with Nurse Education to explore opportunities for shared administration resource related to Agored Registrations. 6. Working closely across L+OD to ensure that the programmes align with the Apprentice development work. 7. Continue to hold Band 5 Vacancy.
Score	