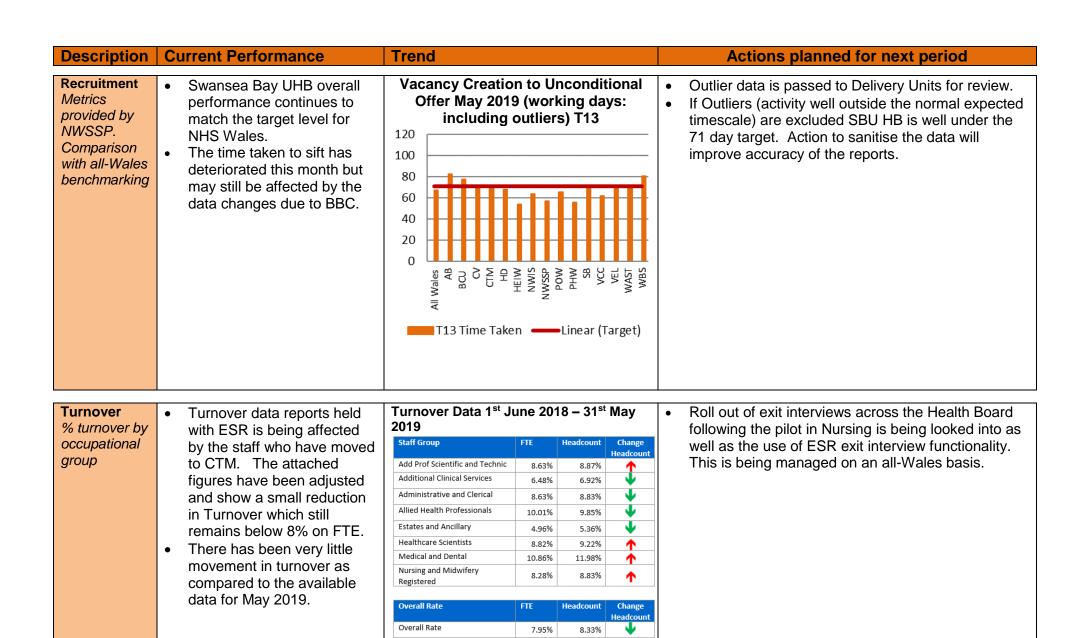
## **WORKFORCE UPDATES AND ACTIONS**

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

Description	Current Performance	Trend	Actions planned for next period
Staff sickness rates- Percentage of sickness absence rate of staff	<ul> <li>The draft 12-month rolling performance to the end of April 2019 has slightly deteriorated from 5.92% in March 2019 to 5.97% in April 2019.</li> <li>Our draft in-month performance for April 2019 has also deteriorated from 5.83% in March 2019 to 6.04% in April 2019.</li> <li>Primary &amp; Community and Morriston are the only Delivery Units to show an improvement in April 2019.</li> </ul>	% of full time equivalent (FTE) days lost to sickness absence (12 month rolling)  6% 5% 4% 3% 2% 1% 0% 8!-AND 8!-AND 6!-AND 6!-A	<ul> <li>Outputs of best practice case study conducted in three areas of good sickness performance (PoW case study), are now incorporated into each DU's attendance action plan deliverable from May 2019 with a review process in place for September 2019.</li> <li>A pilot using early intervention techniques within Morriston Facilities department is currently underway and review process in place from June 2019 onwards.</li> <li>New attendance audit for Swansea Bay has been developed and is currently in use in MH&amp;LD Delivery Unit with the remaining Delivery Units scheduled for June 2019.</li> <li>The Health Board is developing a plan to support the delivery of the new attendance policy training from September 2019 onwards.</li> <li>Occupational Health (OH) Improvement Plan completed with targets for reductions in waiting times approved by Executive Board. Allied Health Professionals have been recruited to OH using TI monies, resulting in reduced waiting times for management referrals to 2 weeks. Scanning of all OH records has commenced to enable an e-record by Sept 2019 with planned increased efficiencies.</li> <li>Delivering Invest to Save 'Rapid Access - Staff Wellbeing Advice and Support Service' enabling early intervention for Musculoskeletal (MSk) and Mental Health, ideally within 5 days (90 referrals monthly) and expediting to MSk diagnostics and surgery when required. This model accepted as Bevan Exemplar 2018/19.</li> <li>340 Staff Wellbeing Champions now trained to support their teams health and wellbeing and</li> </ul>

Description	Current Performance	Trend	signpost to HB support services, promoting a prevention/early intervention approach.  Monthly 'Menopause wellbeing workshops' commenced March 2019 across the main hospital sites.  Actions planned for next period
Mandatory & Statutory Training-Percentage compliance for all competencie s within the Core Skills and Training Framework by organisation	Over the past month compliance against the 13 core competencies has risen from 75.30% to 75.90%. This is a 0.60% increase from the previous month and a 0.60% rise since April 2019.      This equates to approximately 1000+ new competencies being completed in the last month	% of compliance with Core Skills and Training Framework  100% 80% 60% 40% 20% 0% Example 20% 0% Example 20% 100% 80% 20% 100% 100% 100% 100% 100% 100% 100	<ul> <li>E-learning drop in sessions are continuing across the current Health Board and all sites on a regular basis.</li> <li>A review of the Mandatory Training framework is being arranged, later in the year, where all relevant Subject Matter Experts will be invited to a workshop to discuss current and to identify new trends that may need to be introduced.</li> <li>The results of the NWSSP Audit were received and feedback is still to occur, the next audit is being planned for later in 2019</li> <li>The Mandatory Training Governance Committee has a planned meeting of 24th July to discuss content, recording, regular meetings arranged and compliance Once clarified, this would then be subject to approval via the Executive Team</li> <li>A date has been arranged for later in 2019 for further examination of the ESR system, we are awaiting confirmation of the identity of the person from Informatics, as the current person will no longer be involved.</li> </ul>

Description	Current Performance	Trend		Actions planned for next period
Vacancies Medical and Nursing and Midwifery	• Continue to engage nurses from outside the UK to help mitigate the UK shortage of	Trend  Vacancies as at May 2019.  Grade - Medical & Dental 21000-Consultant (M&D) 21100-Locum Consultant (M&D) 22110-Associate Specialist (M&D) 22200-Locum Associate Specialist (M&D) 22250-Specialist Dental Officer 22260-Senior Dental Officer 22270-Dental Officer 22310-Speciality Doctor (M&D) 23300-Locum Speciality Doctor (M&D) 23100-Specialty Registrar (M&D) 23100-Specialist Registrar (M&D) 23200-Specialist Registrar (M&D) 23300-Locum Specialist Registrar (M&D) 24100-F2 foundation year 2 (M&D) 24110-Locum F2 Foundation year 2 (M&D)	May-19 -68.06 4.70 -7.53 0.00 -0.58 -0.80 -2.41 -16.06 -0.60 -108.81 29.20 -6.00 -1.20 -0.91 3.00	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).



Description	<b>Current Performance</b>	Trend	Actions planned for next period
PADR % staff who have a current PADR review recorded	<ul> <li>Staff who have had a Personal Appraisal and Development Review (PADR) as of May 2019 stands at 64.21%. This is an increase of 0.42% from April's figure of 63.79%</li> <li>Medical and Dentals results have seen an increase in completed PADR's from 66.88% to 67.48%. This is an overall 0.60% rise in results.</li> <li>Estates and Ancillaries have seen an increase from 24.09% to 29.91, which is a 5.82% rise in the past month and the biggest rise out of all the staff groups.</li> </ul>	% of staff who have had a PADR in previous 12 months  90% 80% 70% 60% 40% 90% 10% 10% 10% PADR Compliance (SBU HB) Profile	<ul> <li>PADR training offered as part of the new Managers Pathway from 5<sup>th</sup> July 2019 onwards.</li> <li>A current PADR research project is being undertaken. The purpose of this is to identify themes/ practices that can be associated with either good or poor practice. On completion, recommendations will be made as to what could be done to improve future compliance.</li> <li>There are continuing difficulties with implementing Supervisor Self Service in connection with ESR.</li> <li>There have been discussions regarding an online version of the PADR paperwork within ESR and a HTML version has been created. However, the success of this within the HB is, in part, determined by the challenge of providing Supervisor Self Service.</li> </ul>
Operational Casework Number of current operational cases.	<ul> <li>There has been a steady and noticeable reduction in live ER cases over the last 5 months but volume of activity is still significantly increased on averages pre Mid 2016.</li> <li>There has been a reduction in both Disciplinary cases and in the number of grievances.</li> </ul>	Number of Operational Cases Data source has been amended to refelct only SB UHB data over the last 15 months so a comparative picture can be seen over time.  200 150 100 100 150 100 100 150 Total number of cases	<ul> <li>ER system configuration completed. System testing has been completed but IG issues have resulted in a delay in clearance to use the system. No revised date for go live is available yet. User training for case handlers and system admins in preparation for testing has been completed.</li> <li>IO shortlisting has been completed interviews will be held at the end of May.</li> <li>ACAS supported training looking at improving partnership working and a programme of work with managers to look at bullying and harassment (targeted on hot spots identified in the 2018 staff survey) has been agreed. All events completed as at 4<sup>th</sup> Feb. ACAS summary post events is being prepared.</li> </ul>