

Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board



Meeting Date	27 th March 20	019	Agenda Item	4.1	
Report Title	Corporate Risk Register (Workforce Risks)				
Report Author	Hazel Robinson, Director of Workforce and OD				
Report Sponsor	Hazel Robins	Hazel Robinson, Director of Workforce and OD			
Presented by	Hazel Robins	on, Director of W	orkforce and O	D	
Freedom of	Open				
Information					
Purpose of the	The purpose of	of the report is up	odate the Workf	orce and OD	
Report		n the progress a		•	
	•	the Workforce a			
		August. This foll			
	undertaken by	y the Director Of	Workforce and	OD.	
Key Issues	The report highlights the progress that has been achieved				
	in a number of areas of workforce risk.				
	A rick register has been developed and is attached to the				
	A risk register has been developed and is attached to the				
Creation Action	paper as appendix 1.				
Specific Action	Information	Discussion	Assurance	Approval	
Required			v		
(please ✓ one only) Recommendations	The committe	o io ookod to:			
Recommenuations	The committee is asked to:				
	- Note the progress achieved to date.				
	 Identify specific areas of risk where the committee requires a further detailed report, as a matter of 				
	• •				
	priority, to provide further assurance.				

CORPORATE RISK REGISTER (WORKFORCE RISKS)

1. INTRODUCTION

The purpose of the report is to provide an update on the progress made over the last 5 months to manage and mitigate the workforce risk outlined in the stocktake of risks previously presented to the Workforce and OD Committee in August.

2. BACKGROUND

The Workforce and OD Committee and Audit Committee have previously received a briefing report which outlined the key workforce risks and challenges faced by both the Workforce and OD Directorate and the Health Board.

Since the development of this stocktake a number of actions have been put in place to address the key risks and challenges previously identified. In addition, the risks which were identified as significant have been added to both the Directorate and Health Board risk registers, attached as Appendix 1 of this paper.

3. UPDATE ON KEY RISKS AND CHALLENGES

The following table provides a summary of overall progress against the risks and issues that have been identified.

Issue/Risk	Change	Comments and Rationale
Capacity of Workforce and OD Function		Additional temporary funding secured Greater awareness of fragility Positive WAO Structured commentary in relation to workforce matters and reference to workforce capacity issues. Staff resource transfer to Cwm Taff agreed which will add to the fragility of the function. In addition a number if temporary funded posts have proved impossible to recruit to and some temporary staff that had been recruited to support critical pieces of work have/are leaving having secured substantive positions. Critical replacement posts (band 8a and band 7) approved for immediate recruitment to mitigate risk. Band 8a Senior HR Manager to retire.
Workforce Structure	↑	Detailed work to commence January 2019. Work to implement new workforce team structure to be taken forward April 2019 Draft structure prepared for discussion with senior leadership team and workforce

ESF Funding	Ť	function to test fit for future organisation and priorities during March 2019. Resource requirements to be presented to DoF in confirm and challenge process. Welsh Government has confirmed the ESF £2.6m extension funding for the In Work Support Service until December 2022. Grant letter from Welsh Government to ABMU signed on 19/2/19.
Sickness Absence		 Attendance improvement plan developed as part of the R and S programme which includes: Sharing internal best practices in managing attendance (POW Case Study) with all DU's. Create new Attendance Audit for ABMU in line with New MAAW Policy. Create new Cultural Audit for ABMU to measure the culture of each department. Pilot Focusing on early communication and support to aid early RTW for Short Term Absences. Strategically align Health & Wellbeing plans with Attendance Management work stream. Testing of Absence Data. Develop pilot within Facilities to test and exploit the benefits of using ESR Manager Self-Serve in managing absence more effectively. Confirm and challenge sessions organised for sickness absence focussing specifically on management of Long Term Sickness. Discussions had with staff side to support improving attendance at work. Development of a pilot has commenced within a selected area in order to address high absence some of which will apply learning from the above best practise case study.

 Other recent activity includes: Implementation of new all Wales Managing Attendance policy. Ongoing training for managers regarding the new all Wales Managing Attendance policy. OH Improvement Plan completed with targets for reductions in waiting times approved by Exec Board. Key developments include commencing the scanning of all OH records to enable a digital record and reduce inefficiencies (to be completed October 2019) and increasing OH resource with AHP's from TI monies. This has resulted in waiting lists for management referrals initially reducing from 4 to 2 weeks. Currently implementing digital dictation software for clinicians to reduce waits for OH reports to be sent to managers. Evaluation to be completed July 2019. 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. Over 300 Staff Wellbeing Champions now trained to support their teams health and wellbeing and signpost to HB support services, promoting a prevention/early intervention approach. Plan to deliver 'menopause wellbeing workshops' across 4 main sites during Spring 2019 to support the implementation of the new all Wales Menopause policy. Continued Flu vaccination programme which to date has seen almost 54% of staff vaccinated as 19/2/19.

		 Continued delivery of Mental Health awareness sessions to managers. To date 16 sessions have been delivered to 132 managers. Continue further delivery of Work related stress risk assessment training for managers. To date 24 sessions have been delivered to 210 managers in total Detailed sickness absence action plan developed and for assurance discussion on February W&ODC agenda.
Occupational Health	Ť	Options paper presented and considered at Execs in November 2018. Agreement reached on future model, R&R of current consultant and required performance standards. Meeting scheduled January 2019 to discuss requirement s with OH CD Meeting conducted in partnership with MD. Retire and Return of OH consultant discussed and agreed in principle with MDs/W&ODS ABMU and CT in support of future SLA post boundary change. Ongoing negotiations with OH Consultant regarding job plan as 20/3/19.
Health Surveillance	(New Risk)	The OH Clinical Director has produced an SBAR with several recommendations to help meet statutory obligations relating to health surveillance. These include ring- fencing Nursing and Medical resource to help develop and implement a project plan and developing robust risk assessment processes with H&S colleagues.
ER Casework	↑	Software management system procurement pathway agreed, formal purchase order placed. Project Implementation is well under way with system training completed and testing underway. Go live is on track for Mid April 2019. Additional short term support through employment law team to support case resolution and identification of lessons

		learnt to improve operating pra casework management	actices and
		IGB funding secured to independent IOs to s processes. JD completed for and content agreed in partnersh side. Posts have cleared interr control and been set up on TF will be live week ending 29 th Ma	formal JE formal JE hip with staff nal vacancy RAC advert
Employee Relations	Ť	Positive relationships being dev ACAS supported intervention of November 2018. All three plan have been held. Discussions or with ACAS on 15 th April. IGB funding secured to independent IOs to speed up and has secured significant go positive improvement in the relation	appoint 3 processes od will and ationship
E learning S&M	↑	 Compliance improving (Febr 74.37%) This improvement has come from interventions including: Uploading of competencies Mapping competencies the recognition of prior le Work with national tean authority transfers and data Focused work in areas such and estates departments. Media be an area of targeted working quarter of 2019. Outcome of re-audit received. has improved from limited to assurance. 	om focused ies to ensure arning m on inter d accurate as facilities cal staff will in the first
PADR		PADR Compliance remains stal risen to 66.81% in February 201 in August 2018. All Service delivery units ar amber at over 65% compliance.	9 from 62% e currently
		Mental Health & Learning Disabilities Morriston Hospital	78.09% 69.22%
		· · · · ·	
		Neath Port Talbot Hospital	83.20% 78.58%
		Primary Care & Community	
		Princess of Wales Hospital	65.49% 71.66%
		Singleton Hospital	71.66%

		All Service Delivery Units have been asked to write a plan for increasing their compliance levels. With the boundary change and impact of organisational restructure, maintaining this level of PADR compliance will remain a challenge until structures are stabilised and the roll out of ESR self and supervisor self- service are complete.
Recruitment and Retention action plans	Ť	Additional short term resource secured. Medical R&R action plan drafted for W&ODC comment. Nursing R&R plan in development. Initial findings from work with Kendall Bluck well received by Exec Team. Final presentation due on 3 rd April. Work underway to clarify the Medical and Dental establishments to feed into the development of the Recruitment & Retention Strategy for medical staff.
Turnover		Health Board Turnover has remained low over the last few months with a very small increase compared to the all time low figures seen just prior to December 2018. Nurse FTE turnover remains very low hovering around 8%.
Nurse Bank		Discussion with ND team and NWSSP took place in January 2018. Discussions held on the development of a collaborative bank. Initial pilot between ABMU and CT prior to wider all Wales roll out. Subject to agreement with CT this is anticipated to be May 2019. Benefits will be staff can register on more than one bank to work in multiple organisations and the collaborative bank will have the capacity to pay staff weekly, a major incentive to bank workers. Implementation for collaborative bank has been pushed back to June. Currently over 700 staff from ABMU have indicated that they would wish to work for both banks. To date no communication has gone out to CTUHB staff to see what the uptake would be there.

	Nurse Bank to transfer to W&OD in April.
Personal files	Long term digital solution needed. Immediate risks are being managed. The Workforce function have completed all the work to move the Gorseinon files. There has been a delay in Health Board accommodation being available. This is taking longer than anticipated as the Estates Department still have not confirmed that the building is ready for the files.
GDPR	 Immediate risks managed
Welsh Language	 The Health Board has received the formal compliance notice. We are currently preparing the formal response under the guidance of the Health Board Welsh Language group.
Agency/Locum	Kendall Bluck work will support solutions. This has involved a Review of all rota templates, vacancies & agency spend. The data analysis and discussion of proposed solutions and workforce models has taken place with clinical and management teams. Initial feedback made to Executive Team on 28th February. Final report submission and final presentation due on the 3 rd April 2019. Develop implementation plan based on the final report during April 2019. Long term recruitment key to sustainable improvement. Various recruitment scheme proposals have been outlined including a review of long term agency locums and overseas recruitment. Finalise the Medical and Dental establishments by the end of April 2019. Develop detailed plans for proposed recruitment schemes during May 2019. Medacs work on long term locums bringing some benefit. Data reporting and process compliance has improved. Implementation of Locum on Duty will support this. Written assurance from each Delivery Unit on how the local scrutiny panels for agency cap operate with evidence of good processes and framework.

		Further assurance and confidence building
		meetings with planned with each DU to improve process compliance and data reporting. Locum on Duty System procurement is complete. The Implementation team recruitment is still in progress. Commence roll out-April 2019. Value Opportunities' work programme.
Job Planning	Ť	 The Implementation team recruitment process is complete. Full team will be in place by end of March 2019. System cleansing is in progress and on track to be completed by 31st March 2019. Project board sign off (April 2019) ➢ Roll out plan ➢ "Board Settings"(System Hierarchies) ➢ Scrutiny criteria ➢ Benefit realisation plan
Employee Engagement		Positive messages on Staff survey with staff contributing to development of actions through October, November and December using a variety of methodologies to promote accessibility and capture what matters most to staff. Engagement complete and list of priorities and actions shared with Partnership Forum, Workforce & OD Committee and Executive Team. Actions identified against three themes: Healthy Workplaces and Wellbeing, Great Leaders Great Managers, Innovation Learning & Development. Pilot areas to be identified and work commences immediately. Other actions include: Support for the introduction of an independent ' freedom to speak up model ' to enable staff to speak up in confidence in relation to any worry or risk in the workplace. Procurement for this independent resolution-focused service process has been completed and the contract has been awarded to The Guardian Service Ltd. Appointment of

Leadership Development	↑	 managers attending. The remaining 3 workshops are fully booked. Due to the success of the workshops, a further 10 workshops have been commissioned and these will run March through to August 2019. Additional short term R&S funding until March 2020 has enabled us to expand our successful behaviour-based people management programme 'Footprints' and launch a new 'Bridges' programme for senior leaders in Bands 8a and above. 'Bridges' launched in December 2018 and 3 cohorts have been completed so far with
		dedicated Guardians for Swansea Bay University Health Board is currently underway along with detailed commissioning work to set up the service end April/early May 2019. Commissioning ACAS to work with ABMU from November 2018 through to March 2019 to run workshops for HR, Trade Unions and line managers. These workshops have been well received. The aim of the ACAS workshops has been to equip staff with people management responsibilities, with additional tools to benefit them in their day to day roles, particularly in dealing with difficult people management situations of a bullying nature. The focus is on creating a workplace and culture where appropriate behaviours are promoted and supported. It was initially targeted at those areas where the NHS Wales Staff Survey had confirmed a 20% or higher response rate to the bullying and harassment questions, however this training has now been opened out to all areas and is combined with the new Managing Attendance at Work Policy and promoted as a full-day People Management Skills Programme. All HR & trade union workshops are now complete. Originally 10 line manager workshops were planned. So far, 7 out of the 10 have been completed with 82

application. Further Bridges programmes are scheduled throughout the year.
'Footprints' has also been shortlisted for a national HPMA award.
Training for level 1 MBTI has been completed with assessment set up for March 2019. This will double the capacity within the L+OD team to deliver team interventions which involve the use of MBTI.
Set up contract to deliver ILM level 5 coaching qualification for 32 members of staff has commenced. All places are filled and this will triple the capacity that ABMU has to deliver coaching interventions. An ABMU coaching strategy is also in development.
Relaunched consultant development programme which includes bridges behavioural Multi-Disciplinary element. Medical directors have nominated individuals to attend the cohorts from consultants who have been recruited in the previous 18- 24 months. The first cohort will take commence April 2019 and all places are full.
We are working closely with Service Delivery Units to enrol staff onto ILM Level 5 Certificate in Leadership and Management with Gower College.
A management pathway is in development which sets out 8 core management and leadership modules with 3 optional/additional modules, covering topics that managers across the organisation have identified as most important. This pathway is out to consultation for implementation from 1 st April 2019.
Nominations are also out for Summer School 2019 as a core component of our investment in leadership development and succession planning.

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		Funding has been allocated via an agreement to top slice funding for the Internal Graduate Scheme. The Graduate Growth Scheme is currently out to advert (March 2019). This is a 2-5 year programme, consisting of 2 year rotational graduate experience, year 3 working within identified posts within units. Years 3-5 will enable individuals to complete a part time Masters degree programme, if applicable).
Change management	Ť	The additional funding through R&S and Values team to support these activities. The programme of change will require significant focus and support through 2019 and beyond. Planning and implementation of the Organisational Strategy, the CSP, the transformational change programme and significant tail of work following BBC, High Value Opportunities work programmes (etc) will all require significant and dedicated workforce support. The availability of workforce capacity and capability presents a potential delivery risk.
Vocational training		Long term, secure funding stream required to ensure the sustainability of this service which is contributing the regional Health and Wellbeing goals and the Future Generations Act. Work has been completed to map where underpayments have been made from Welsh Government. The £34,000 underpayment has now been recovered from Welsh Government. However, this area remains a risk with change of Welsh Government contracts in 2019 (already delayed).
Apprenticeship academy		Long term, secure funding stream potentially required. The team continue to support the organisation to recruit apprentices. Work has been undertaken to consistently record all apprenticeship pathway programmes for existing staff on ESR to demonstrate return on investment from the Apprenticeship Levy.

		Gower College has provided the Apprentice Team with an individual, who now holds an honorary contract with ABMU to develop apprentice activity specifically in Singleton SDU. This agreement is also based on continued support from Gower College as a partner organisation. The Apprentice Co-ordinator for Singleton funded by Gower College will not continue. The L&D Project Manager is in discussions with Gower to ensure continuity for the staff on Singleton site.
		Our existing apprentice apprenticeship coordinator has secured substantive employment in ABMU at Band 3. Discussion has been had with NPTC group around the replacement of this post. Funding has been agreed for a further 12 month period.
		Meetings are underway to develop Project Search in Swansea. This will be built into the Apprenticeship Academy, however, has no dedicated resource or budget.
Work Experience		Long term, secure funding stream required if the organisation wants to deliver work experience. The health board continues to receive requests for work experience placements on a weekly basis. No work has been progressed on this as there is currently no funding to support this.
Medical education		Discussion with incoming MD to develop future operating model. Exec MD has asked the Workforce function to develop plans to form the basis of future discussions regarding how the interface should operate optimally. Key posts will leave the Medical Education and this will result in risks to leadership and organisational memory. The Medical Director and Director of Workforce & OD have agreed a review of medical education.
Bridgend	Ť	Additional resource in place to manage transition – work programme on target but remains a very significant resource drain on the workforce team. The majority of the additional resource secured to undertake

		this work will leave at the end of March 2019 as additional funding has not been secured to manage post BBC work. Delivery of the workforce processes remain on track and within the overall programme scope. The efforts of the workforce team have been exceptional to deliver the required activity.
BREXIT Preparations (new risk)	ſ	Health Board has engaged with our EU nationals in the workforce supporting HMG plans around the "settled status" post Brexit. Workforce related issues are picked up through NHS Employers and we continue to monitor developments and advice through both National and local Committees (EPRR) overseeing preparation. Staff facing web content is being prepared and should be live by beginning of March.

4. **RECOMMENDATIONS**

The Workforce and OD Committee is asked to:

- Note the progress achieved to date
- Identify specific areas of risk where the Committee requires a further detailed report, as a matter of priority, to provide further assurance

Governance and Assurance												
Link to corporate	Promoting and enabling healthier		Delivering excellent patient		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and			
objectives (please ✔)	communities		outcomes, experience and access						partnerships			
									*			
Link to Health	Staying	Safe		Effective		Dignified	Timely	Individual		Staff and		
and Care	Healthy	Care	e	Care		Care	Care	Care	•	Resources		
Standards												
(please ✔)												
Quality, Safety and Patient Experience												
Workforce and OD is an integral part of the governance structure which supports quality, safety and patient experience.												
Financial Impli	cations											
Address, on a sustainable basis, adequate resourcing of the workforce and OD function to ensure that the Directorate is able to support the Health Board and meet current and future service, financial and workforce challenges.												
Legal Implications (including equality and diversity assessment) There are no legal implications.												
Staffing Implica	ations											
The report outlines a range of workforce risks, within the workforce and OD function and within the wider organisation.										function		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015 - <u>https://futuregenerations.wales/about-</u> us/future-generations-act/)												
The decision to establish a workforce and OD forum will help shape the long-term												
governance arrangements for the health board.												
Report History		First report to the committee considered on 13 th November 2018.										
Appendices	Ap	Appendix 1 – Risk register										