

Swansea Bay University Health Board

Unconfirmed

Minutes of a Meeting

of the Workforce and Organisational Development Committee

held on 9th February 2020 at 9.30am to 11.00am

Microsoft Teams

Present

Tom Crick	Independent Member (in the chair)
Jackie Davies	Independent Member
Nuria Zolle	Independent Member

In Attendance:

Kathryn Jones	Director of Workforce and Organisational Development (OD)
Richard Evans	Medical Director
Paul Davies	Interim Assistant Director of Nursing and Patient Experience
Louise Joseph	Assistant Director of Workforce and OD
Sharon Vickery	Assistant Director of Workforce and OD
Joanne Gubbings	Assistant Director of Workforce and OD
Julian Quirk	Assistant Director of Workforce and OD
Paul Dunning	Head of Occupational Health and Wellbeing
Kay Myatt	Head of Learning and Development
Claire Mulcahy	Corporate Governance Manager
Stephen Spill	Vice Chair (Observing)
Hazel Lloyd	Head of Risk (Minute 12/21)

Minute	Item	Action
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01/21 WELCOME

Tom Crick welcomed everyone to the meeting.

02/21 APOLOGIES

Apologies were received from Chris White, Director of Therapies and Health Science/Chief Operating Officer/Director of Primary Care and Mental Health, Christine Williams, Interim Director of Nursing and Patient Experience; Pam Wenger, Director of Corporate Governance and Joanne Gubbings, Assistant Director of Workforce and OD.

03/21 DECLARATIONS OF INTEREST

There were no declarations of interest.

04/21 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on the 10th December 2020 were **received** and **confirmed** as a true and accurate record.

05/21 MATTERS ARISING

There were no matters arising.

06/21 ACTION LOG

The action log was **received** and **noted**.

07/21 WORK PROGRAMME 2020-21

The work-programme for 2020-21 was **received** and **noted**.

08/21 ANNUAL EQUALITY REPORT

The Annual Equality Report was **received**.

In introduction, Kay Myatt highlighted the following points;

- The purpose of report is to present the Annual Equality Report and Employment Information 2019/2020;
- The Annual Equality Report gives an overview of the progress made by the Health Board in meeting the public sector equality duty;
- The employment information is presented in a separate report from the Annual Equality Report;
- Overall, the report was positive and provided evidence to show the health board had fulfilled the equality objectives;
- The equality plan and objectives will be refreshed and there will be the joining up with the organizational annual plan;

In discussion of the report, the following points were made;

Tom Crick queried whether there had been problems in terms the quality of data Kay Myatt informed that there had been some issues with recruitment data as it relies on external systems. She stated that she was confident that there would less 'unspecified' categories going forward with a 72% completion rate for ethnicity questions.

Tom Crick queried whether there had been tensions amongst staff in terms of the data collection. As they were not obligated to provide this information, what would be the best approach in terms of requesting it. Kay Myatt replied stating it required a different approach and an open and honest discussion with staff on how the collection of data helps staff and patient experiences and how the organisation is better equipped to support staff in their individualities. She advised that the pandemic had increased the equality discussions due to media coverage and a big difference has been evident. New starters were more likely to declare ethnicity and there has been an increase over recent years.

In terms of approach, in particular to ethnicity, Paul Davies added that there was some suspicion amongst staff and to address this would be changing the rationale put forward so that they do not feel threatened. He agreed that the pandemic has helped foster different views in this space.

Jackie Davies commented that she was pleased to a number of networks within the organisation including CALON and BAME and queried whether more could be added. Kay Myatt advised that this was currently discussion and required groups to come forward.

Nuria Zolle queried whether there was evidence of system change in terms of socio-economic duty. Kathryn Jones replied that there had been discussion at Executive Team with regards to where this responsibility sits and the links to service design and delivery. Further conversation will take place to establish this.

Tom Crick stated that it was pleasing to see the improvement in the data quality, as a public body we have the requirement to be visible and open. It was important to ensure staff were aware of the reasons for data collection and not just about informing policy but having the ability to better support staff in the individualities.

In terms of ESR, Tom Crick queried whether we have the system and processes in place to use it effectively. Kathryn Jones advised that this was national piece of work and has been halted as a result of COVID-19.

- Resolved:**
- Members **endorsed** the Annual Equality Report and Employment Information for publication on Swansea Bay UHB's external website.
 - The report be **noted**.

09/21 COVID-19 WORKFORCE UPDATE

A presentation providing an update on COVID-19 in relation to workforce was **received**.

The following points were highlighted;

(i) Workforce Information Cell

- Staff have been deployed specifically to analyse workforce information to help identify opportunities regarding step down of services and staff release to support surge capacity, to aid Operational Silver decision making;
- The Cell was now supporting Immunisation team to track the recruitment pipeline;

(ii) Recruitment and Deployment

- There are 1404 additional bank staff added to the system since April 2020 in a mixture of COVID-19 and non-COVID-19 related roles;
- There continues to be a rolling advert for bank Healthcare Support Workers;
- A campaign has recently commenced to recruit up to an additional 88wte Domestic staff on to the domestic bank;

(iii) Medical Recruitment

- The health board are supporting the redeployment of doctors into different rota patterns and are working with HEIW Health Education and Improvement Wales around changes to rotas;
- Resourcing as many doctors as possible to boost services, many from overseas that will quarantine in hotel accommodation for 14 days;
- The aim is to over establish locums in Medicine, ITU and Anaesthetics where possible;
- The Medical Recruitment team are running the locum on duty system on behalf of the delivery units;

(iv) Training

- The ongoing HCSW induction programme continues at Liberty Stadium, this will need to be reviewed as the venue contract comes to an end in March 2021;
- Training, education and inductions programmes in place for bank, Support Services Assistants Domestic;
- Manual Handling training capacity has increased and resources in place to respond to further recruitment and new starters;
- The training programme for vaccinators is underway, which includes a series of 6 COVID-19 e-learning modules.

(v) Test, Track and Protect (TTP)

- Test, Track and Protect is currently stable, the health board has worked closely with local authorities and has moved to 100% staffing;
- Contracts have been extended until the end of June but lack of clarity around funding from quarter 2 onwards which likely to affect workforce stability;
- There is considerable increase in testing capacity yet testing numbers have reduced;

(vi) Accommodation

- The health board is currently providing hotel accommodation to a range of staff who do not want to risk transmitting the virus at home;
- Currently firming up the approach through the agreement of a policy so clear criteria is in place for those staff utilising accommodation;
- The health board is now using the CTM platform to procure hotel accommodation appropriately.

(vii) Immunisation

- There is a multi-agency approach to recruitment to support immunization with some agency workforce, peer vaccinators, bank staff ex-employees and other registrants;
- The booking centre now has over 40 administration support staff which is in advance of the original plan;
- The health currently uses the vaccination POD Model which requires registered staff, this has been successful with staff in the pipeline but the health board may need to consider revising the model in the future;

- Support cells have been set up to support immunisation recruitment and training;

(viii) Staff Wellbeing and Occupational Health

- The development of the post COVID-19 strategy was underway to understand the needs of staff and undertake an evident based review;
- 310 managers have undertaken TRIM training and there continues to be focus on the leadership culture to encourage and enable managers to support staff;
- There were some concerns with regards the sustainability with occupation health service as nurses go back to substantive roles, there was the need for additional resource to ensure it is robust and resilient;

In discussion, the following points were raised;

With regards to staff wellbeing, Kathryn Jones highlighted the need to continue to support our key workers throughout the pandemic and keep a focus on workforce resilience and support for staff. There was also the need to support line managers in this space. It must be recognised the amount of work undertaken in the area already and the robust wellbeing we have in place but there is still work to do in this area.

Tom Crick concurred adding that the health board has been both pro-active and reactive during the pandemic. It is important to maintain the good innovations arising from this and it would be helpful if this were pushed at both a local and national level.

Jackie Davies made reference to post COVID-19 syndrome pilot within Occupational Health. Paul Dunning advised that this was a small piece of work being undertaken with staff who are experiencing symptoms of post COVID-19 syndrome and utilising the Cognitive Behavioural Therapy approach to get them back to work.

Richard Evans added with regards to post COVID-19 syndrome, that it was not yet understood the impact or significance and there was not a test currently. It was important to bear in mind the links to post viral fatigue syndrome and also symptoms could be linked to a manifestation of stress, anxiety and depression therefore those people could be helped in a different way.

Paul Davies thanked the team for the comprehensive presentation. He made reference to the healthcare support workers (HCSW) rolling recruitment campaign and stated that it was important to understand that as we bridging that gap, we need to be mindful of the pressures in the

domiciliary care in the community and need to ensure there is the balance of risk.

In relation to HCSW training, Paul Davies queried whether the modified training provided to them has had a detrimental effect on quality.

With regards to issue of accommodation for training at the Liberty Stadium, Paul Davies advised that Ward 10 in Singleton was available as a training suite and could be used for this purpose.

Paul Davies referred to registered nurses and informed that the health board had retained 91% of Swansea University students and it was important that we retain these staff members with a focus and wellbeing and good supervision. He also referred to the importance of overseas recruitment and developing an infrastructure with experienced overseas nurses. He highlighted a key resource of those staff within Retire and Return. He added that it was important to advertise the interesting services that we have in the organisation to entice new staff to the health board.

With regards to accommodation, Paul Davies queried whether it would be risk of losing those off contract staff if the hotel accommodation is taken away due to the implementation of the policy.

In reference to the health board's immunisation model, Paul Davies highlighted that the HCSW national model requires different governance arrangements.

Resolved - The report be **noted**.

10/21 INTERNAL AUDIT COVID-19 GOVERNANCE REVIEW REPORT

A report providing an update on the Internal Audit Action Plan was **received** and **noted**.

11/21 STAFF SURVEY RESULTS

A report setting out the findings of the NHS Wales staff survey 2020 was **received**.

In introducing the report, Julie Lloyd highlighted the following points:

- The national staff survey was open for three weeks during November 2020;
- It was the first time that it had been co-ordinated centrally by Health Education and Improvement Wales;

- The questionnaire had been simplified from previous years which made it difficult to benchmark the results against those of 2018;
- The results of the survey were positive given the current climate and there was a 75% engagement score, with 2,365 staff members completing the survey;
- The findings could be broken down to department level to identify hotspot areas;
- Three key priority areas had been identified on which to focus – healthier working relationships staff health and wellbeing and compassionate leadership;
- The next steps were for the service groups to develop action plans as they needed to take ownership and responsibility for the findings within their services;
- The plan was to take through a programme of engagement within the organisation, it was important to demonstrate that we have listened. This would form part of an communication and engagement strategy;
- It was requested that the Workforce and OD Committee monitors and takes accountability on the progress of the survey;

In discussion of the report, the following points were raised;

Tom Crick thanked Julie Lloyd for the comprehensive report and confirmed that the Workforce and OD Committee would be content to monitor and take accountability for the progress. He added that this was a key mechanism in better understanding our staff experience and it was pleasing to see positive engagement.

Jackie Davies made reference to bullying and harassment highlighted in the survey, adding that she was confident that the organisation was doing as much as possible to address these issues and queried what else could be done. Julie Lloyd replied that she felt disappointed with the results and she felt amalgamation of the question on whether it was managers or colleagues and affected the results. She added that this was an opportunity to take a step back and look at other areas for example managers style which may have been impacted by the crisis situation we find ourselves in currently.

Kathryn Jones concurred, adding that lots of work had been undertaken to tackle bullying and harassment but there was now a need for further focus on line management. This would form part of the organisation's wellbeing priorities for the coming year.

Paul Davies highlighted his frustration with the survey in that there appeared to be disconnect with staff perception, particularly with the results for bullying and harassment. Julie Lloyd concurred, adding that the results did seem contradictory and once there was the ability to have a qualitative, granular insight into the data, it would be looked at it more depth. The 2018 survey was much more comprehensive than that of 2020 and the amalgamated question in relation colleagues and managers may have impacted the results.

Nuria Zolle commented on thorough presentation by Julie Lloyd, adding that it will be good when there is some headroom in the system to do a deeper analysis on the results.

Tom Crick commented that although engagement was broadly good, it might be helpful to have wider stakeholder engagement. Julie Lloyd concurred, adding that there was a wider engagement plan going forward, a lot of work has been done in the bullying and harassment space and it would be an opportunity to spread the message of what has been undertaken. Tom Crick queried how it could be better communicated to staff.

Kathryn Jones informed that the aim was to communicate with staff on acceptable behaviours in the workplace and push the health board values and ways of working and to set a clear message that this type of behaviour is unacceptable. Tom Crick concurred, adding that it was important to demonstrate that the health board would enforce regulations and procedures in these circumstances.

Nuria Zolle commented on the links to ongoing work on the the 'Compassionate leader' and 'Just Culture' and how it was important to the push and truly embed the health board values in our ways of working. Kathryn Jones agreed, stating that this would begin at the start of the employment and recruitment process and this will be an action taken forward this year.

Resolved - The report be noted.

12/21 WORKFORCE RISK REGISTER

Hazel Lloyd was welcomed to the meeting.

A report informing the committee of the risks from the Health Board Risk Register assigned to the Workforce and OD Committee was **received**.

In introducing the report, Hazel Lloyd highlighted the following points;

- The report was a high level summary of the highest risks assigned the Workforce and OD Committee;
- The aim of the report was to alert the committee of the highest risks, those with rating of 20 and above;
- The report also included the health board COVID-19 risk register risks (**Appendix 2**);

In discussion of the report, the following points were raised;

Tom Crick made reference to the risk *Sustainable Corporate Services* and queried the change of assignment from Chief Executive to Workforce and OD as he felt this was not solely the responsibility of the Director of Workforce and OD. Kathryn Jones concurred and advised that this would be raised at the Executive Team meeting.

Tom Crick commented that the report highlighted that the board are aware of the health board's highest risks and were addressing these in the medium term, but queried whether enough was being done to mitigate in the long term.

Nuria Zolle queried whether the issues raised by Trade Unions with regards to PPE had been progressed. Kathryn Jones advised that these were in fact two separate risks. In terms of the PPE, the health board were comfortable in the position set out with the NHS Wales guidance. The Trade Union partnership continues to be a concern. There had been significant engagement with the trade union colleagues and the development of partnership working but challenges still remain. A review of the position would take place in a couple of weeks.

Resolved

- The risks assigned to the Workforce & OD Committee and the mitigating action being taken to manage the risks were **noted**;
- The report be **noted**.

13/21 WORKFORCE METRICS

A report outlining the performance in Workforce Metrics was received.

In introducing the report, Julian Quirk highlighted the following points;

- In November 2020 the monthly absence attributed to COVID-19 had decreased to 2.48%;

- If COVID-19 related absences were discounted from November's performance there would be an absence percentage of 5.83% for the month which is an improvement of 0.64% in comparison to previous year's figure;
- It was anticipated that sickness levels would increase will increase once pressure in the system stabilises;
- Since the last performance report, compliance against the 13 core competencies for Mandatory and Statutory training has decreased slightly from 80.68% to 80.67%;
- There had been little change to staff turnover during the period;
- Personal Appraisal and Development Review (PADR) performance had decreased by 3.53% due to the pressures of COVID-19, Staff who have had a review as of January 2021 stood at 54.38%.
- For operational casework , there had been a break in the processing between March 2020 and September 2020 due to COVID-19 which included cases all expect gross misconduct disciplinarys;

In discussion of the report, the following points were raised;

Jackie Davies made reference to suspensions, noting that performance figures were low and asked whether this was because the Health Board, as a policy now move staff to alternative work areas instead of suspending. She queried how many staff were in these alternative work places. Kathryn Jones acknowledged that there had been some delays due to COVID-19 but advised that the data was not representative at the moment. She advised that hearings had been an issue due the lack of agreement from all parties to undertake remotely. She undertook to look into the data and feedback to Jackie Davies.

KJ

With regards to those staff who present with long COVID, Jackie Davies queried what pay arrangements were in place. Julian Quirk advised that this was being formalised on an all-Wales basis.

Nuria Zolle queried whether there had been an increase in whistleblowing in terms of COVID-19 related concerns. Kathryn Jones took an action to look into the cases related to COVID-19 and feedback to Nuria Zolle.

KJ

Resolved

- Kathryn Jones to look into the data for suspensions and those staff who had been placed into alternative placements and feedback to Jackie Davies;
- Kathryn Jones to look into whistleblowing cases related to COVID-19 and feedback to Nuria Zolle.

KJ

KJ

14/21 MEDICAL AGENCY AND LOCUM UTILISATION

A report providing an update on the medical agency and locum utilisation was **received**.

Sharon Vickery highlighted the following points;

- The report provided a snapshot of locum and agency utilisation during 2020;
- It was important to note that due to the pressures of the pandemic, the 2020 data may not be representative;
- During November and December 2020 there was an increase in usage, which may correlate with increased activity and staff absence due to COVID-19. Usage in these two months was the highest in the last 13 months;
- The Internal Medical Bank had over 1,100 doctors registered so far;
- The 'Locum on Duty' had been taken held corporately during the pandemic but a recovery plan was required as responsibility would be handed back to service groups on 1st April 2021;
- In 2021 the aim is to implement the Medical Rostering Module which will complete the Medical Optimising package from Allocate;
- Work was underway in terms of the recruitment and retention of the medical workforce;
- It is important for the health board to have a substantive workforce in place and a recruitment plan in place for every vacancy;

- Resolved;**
- The committee **noted** that 2020 may not be a representative year due to the pandemic.
 - The development of the Internal Medical Bank with over 1,100 doctors registered so far was **noted**;
 - The draft plans for 2021, which will be dependent on the effects of the Pandemic were noted.

15/21 ANY OTHER BUSINESS

There was none.

16/21 ITEMS TO REFER TO OTHER COMMITTEES

There were no items to refer to other committees.

17/21 DATE OF NEXT MEETING

The date of the next meeting was noted as the **13th April 2021.**