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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

**Swansea Bay University Health Board
Minutes of the Workforce Delivery Development Group
held on 20th February 2023 at 11:00**

Present:

Debbie Eyitayo	Director of Workforce & OD (in the Chair)
Julian Rhys Quirk	Assistant Director of Workforce & OD
Louise Joseph	Assistant Director of Workforce & OD
Janet Williams	Service Group Director, Mental Health & Learning Disabilities
Julie Lloyd	OD and Culture Lead
Mark Turp	Workforce Planning Manager
Emma Evans	Senior ESR and Workforce Information Manager
Paul Dunning	Head of Staff Health & Wellbeing
Guy Holt	Associate Head of HR
Kay Myatt	Head of Education, Learning and OD
Ruth George	Human Resources Business Partner

Minute	Item	Action
1.1	Welcome & Apologies	
	Debbie Eyitayo welcomed everyone to the meeting. Mark Turp was in attendance for Sharon Vickery to present item 3.1 Apologies received from Mark Madams, Karen Stapleton, Emma Owen, Gareth Howells, Sharon Vickery, Simone Houlbrooke.	
1.2	To receive and approve the minutes of the previous meeting	
	The previous minutes of 23 rd January 2023 were agreed as being an accurate reflection of the meeting.	
1.3	To receive and consider any matters arising not otherwise on the agenda	
	No additional items were received.	
1.4	To receive the action log	

	Action log – all actions now closed.	
2.1	ESR Project	
	<p>Emma Evans gave a high level overview of the ESR Self Service Project.</p> <p>EE advised of the three main roles available:</p> <ul style="list-style-type: none"> - Employee Self Service – ESS – implemented several years ago. <p>Examples of ESS:</p> <ul style="list-style-type: none"> - Payslip, P60 viewing - Total Reward Statement view - On line learning including compliance & competence - Absence requests - Equality & Diversity Details - Personal information - Record flexible working requests <ul style="list-style-type: none"> - Supervisor Self Service – SSS – introduced in May 2022 to facilitate Annual Leave transactions and assist with Pay Progression processing <p>Examples of SSS:</p> <ul style="list-style-type: none"> - Approver/viewer role for annual leave, some personal information updates, qualification updates, Online learning/compliance/competency - PADR recording and compliance data - pay progression <ul style="list-style-type: none"> - Manager Self Service – MSS <p>The difference between MSS & SSS is that SSS can approve transactions which are generally not pay affecting. MSS does give access to some pay effect ones which carry a much greater risk.</p> <p>Statistics show that currently 73.8% of FTC and Permanent employees have some annual leave recorded against their record for</p>	

	<p>2022/23 (excluding M&D rises to 78.7%). Some 10,120 staff have records and 3,588 have no record.</p> <p>The pay progression policy was launched in October 2022 and promotional guidance was provided along with training sessions.</p> <p>The system generated automated emails to line managers and identified staff due a pay progression.</p> <p>NWSSP Audit provided a range of outcomes and recommendations for example that the HB should continue to stress and enforce the requirement for all staff and managers to record their absence record; that the HB should continue to monitor the uptake of ESR to ensure more reliable, accurate and timely information; that the HB should continue to complete the data cleansing exercise to ensure that all staff have a supervisor/manager allocated to them on ESR; that the HB should raise awareness of ESR reports available and their benefits to staff and guidance and training should be provided to line managers and report usage monitored on an ongoing basis.</p> <p>EE summarised the next steps/priorities for the Project:</p> <ul style="list-style-type: none"> - To set up Project Board Membership - To gather more momentum in terms of user uptake - To focus on equality and diversity data updates in collaboration with Anti-Racist Wales Action Group to take opportunity to encourage staff to complete E&Q data - To implement sickness absence transactions within Self Service - To ensure continued maintenance and support of implemented transactions. <p>DE thanked EE for a really good presentation.</p> <p>PD asked if the training was still ongoing. EE responded that the training offered was for pay progression and was in place for 3 months. Attendance dwindled significantly in December, and this training is no longer available, however the project team are monitoring compliance and if needed the team will offer further training.</p> <p>JL suggested recording a training session which would have less impact on the team's resource.</p>	
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	<p>EE responded that word document guidance and an accompanying video is currently available.</p> <p>DE wondered to what extent the wider organisation was aware of this work. EE responded that emails and bulletins have been issued HB wide.</p> <p>It was suggested to use the Team Brief as a platform to promote the use but JW was of the opinion that perhaps it would not necessarily target the audience needed.</p> <p>DE concluded that the way forward might be for the business partners to organise a session which could be discussed outside if this meeting.</p> <p>DE asked if there was a risk associated with personal amendments to Equality and Diversity on the system, particularly where there were ongoing ER issues. EE responded that there was no risk as any changes would come from the employee. JRQ advised that for ER matters as the data was self-reported other forms of information would also be requested as needed.</p> <p>KM commented that it would only be a risk if the manager did not authorise the change. EE thought that it was rather strange that the manager would have to sign some things off and not others. EO was unsure what part the manager would have to play in an employee declaration.</p> <p>DE thanked Emma for the comprehensive overview and asked that we consider how to get the word out more widely.</p>	
3.1	Update on IMTP	
	<p>Mark Turp was in attendance on behalf of Sharon Vickery.</p> <p>MT took the opportunity to talk through 2 reports that went to the Workforce & OD Committee the previous week.</p> <p>The Workforce and OD Directorate have committed to support managers within the organisation to plan their workforce more effectively</p> <p>Building capability and capacity to plan the organisation's workforce in the short, medium and long term was a key priority for the organisation and its importance was reflected in the Health Board's Integrated Medium Term Plan (IMTP) and organisational strategies. Over the past 12-18 months, the Workforce planning team have</p>	

	<p>worked extremely hard to develop a culture whereby workforce planning is inextricably linked to service development plans.</p> <p>Having a robust workforce planning methodology and effective workforce plans was a key enabler for service transformation.</p> <p>It had been identified that there was a need for the central Workforce Planning team and HR Business Partner team to prioritise the following activities over the next 12 months:</p> <ul style="list-style-type: none"> • Further strengthen and standardise the methodology for workforce planning based on the 6 step approach ensuring that this is a simple and easily understood process by line managers. • Create a resource page on the organisation's intranet site to provide increased access to standardised tools and resources for workforce planning • Explore opportunities to improve data quality and develop workforce intelligence tools/ dashboards with forecasting ability, learning from best practice examples in other NHS organisations • Continue to offer workforce planning training and sharing of best – practice case studies and examples to service areas • Review opportunities to increase bank staff/ flexible workforce for some services • Continue to raise awareness of grow our own workforce options and routes into healthcare (e.g. apprentices) • Make links with workforce planners in wider health and social care system through use of networks and health and social care workforce strategy events <p>Having robust workforce plans is a key enabler for service transformation and therefore it is essential that workforce plans are embedded in overall service delivery plans and monitored and refreshed on a regular basis, in line with step 6 of the workforce planning methodology endorsed by Health Education Improvement Wales (HEIW). It should be noted that Wales Audit Office have commissioned an audit into Workforce planning within NHS Wales. The findings of this report will help us strengthen our approach.</p> <p>It was agreed that the biggest challenge of all in delivering anything within this organisation is delivering the workforce.</p> <p>The dire shortage is a key issue in terms of commissioning, NHS failed to fill it's university undergraduate courses, Health Care Sciences, Diabetes – there is a national shortage.</p> <p>DE asked what options could be considered – could we 'train our own'?</p>	
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	<p>JW reported that there were only 8 applicants on a mental health course for Swansea University recently and was of the opinion that the Service Model for inpatient care does not help i.e. isolated locations, fuel costs to the individual does have an impact. JW added that they have a new consultant nurse from NHS England and perhaps it would be useful to touch base with him as he could have some ideas.</p> <p>LJ commented that the workforce planning team is working with partners in colleges around getting whatever education programmes we need ready for the workforce of the future. Feedback suggested that the quantity of students wanting to work in the health sector is getting thinner and thinner.</p> <p>JL noted the importance of needing to understand why the societal shift and the need to thinking about the data triangulation as well and the big conversation, there are many reasons that we have that keep people. So when we engage on what is excellent about working within Swansea Bay, there are a lot of those reasons. So how do we translate that? Isn't it what keeps people, to what will attract people? So there's a linkage to the recruitment campaign and from a mental health and learning disabilities perspective on some of the sessions we sat in was around the mention of discrepancy in pay between, a band 2 working in mental health in comparison to learning disabilities.</p> <p>PD commented that Caswell Clinic used to be an easy place to recruit as there was a recognition of teamwork and a dynamic progressive service. Now there is a big reliance on agency staff which can often undermine and have a detrimental effect on good teamwork and a sustainable workforce. PD added that historically it was perceived to be a very nepotistic place to work which may have run it's course and may be part of the problem.</p> <p>JW responded that another issue with Caswell Clinic is a service issue. It's a WHSSC commissioned service whereby there is a clinical versus WHSSC challenge.</p> <p>DE thanked MT for the update.</p>	
3.2	Recruitment & Retention Update	
	<p>Guy Holt gave an update on Recruitment and Retention. DE asked that he particularly focus on retention as he has given good assurance about what is happening with regard to recruitment.</p> <p>GH reported that the Recruitment and Retention Group met last week and there are now 4 task & finish groups each focussing on the areas outlined in the paper:</p>	

	<ul style="list-style-type: none"> - Mentorship/buddy scheme for new starters. - Stay interview framework - Feed into management experience and development the critical importance they play in good staff experience and engagement. <p>In addition</p> <p>and as a result of discussions with Trade Union colleagues we had also added a further area of</p> <ul style="list-style-type: none"> - Improving flexibility for staff <p>Following group analysis of the turnover data it was agreed that the data did support a focus on these 4 themes and the R&R group is now in the process of organising a separate task and finish group for each of these themes in order to take work forward. Each group will be led by a member of the R&R Development group.</p> <p>JL commented that she attends one of the groups linked to Managers and Engagement and will make contact with leads to ensure they report back.</p> <p>DE would like updates from the groups at the next Delivery Group meeting.</p>	
4.1	WOD Update of Attendance Management & Occupational Health & Wellbeing Interventions	
	<p>Ruth George gave an update on Management of Attendance at Work including Wellbeing and Occupational Health interventions.</p> <p>Key points to note:</p> <ul style="list-style-type: none"> - The report makes positive reading in that month sickness absence decreased and was the lowest for the last rolling 12 month period at 1.88% - In comparison to 12 months ago, in November 21 there is an overall reduction of 1.22% - Anxiety and stress remained the top reason for sickness absence followed by, cold, cough and flu and gastro or infectious diseases – these tend to fluctuate as top reasons. <p>Ruth confirmed that there had been a focus on Theatres as a hotspot area and additional HR support had gone into mental health to manage their sickness cases.</p> <p>DE said well done to Ruth and the Team as it sounded like the targeted intervention were paying off in the hot spot areas.</p>	

4.2	Update on the integration of Occupational Health & Wellbeing and the perceived benefits	
	<p>Paul Dunning provided a presentation on the integration of Occupational Health & Wellbeing and the perceived benefits.</p> <p>Historically within the Wellbeing Service there were 2 admin teams and 2 different systems/databases. This resulted in some staff receiving duplicated appointments for Occupational Health and Wellbeing along with some overlap in skills across the teams, particularly AHP's.</p> <p>It became evident of the need to integrate the service to reduce duplication. The benefits of this would be a single point of access for service users and an enhanced experience for service users. This resulted in an increased resilience and sustainable administrative team, reduced duplication, utilising OH database will result in more efficient fully electronic administrative processes and the OH database will increase ease and ability to report on service KPI's.</p> <p>Other benefits include an All Wales OH system that has been procured nationally which will roll out in September and SBUHB will be the first HB to have that service which will allow a much more e-based management referral system where managers will be able to log and monitor via the system resulting in some resource savings. The SLA is ready to sign off.</p> <p>In terms of developing a sustainable workforce we have started taking nursing student placements this has resulted in 1 nurse who achieved a Nursing Education Award for the student placement she undertook last year and we are the only nursing team in Wales with OH who have a fully complimented team with no temporary staff. Sarah has done a tremendous job from a nursing leadership perspective to really grow her own occupational health service.</p> <p>JL congratulated PD and his team on the successful integration of two services.</p> <p>LJ added her thanks and complimented both PD and the team also for the years of work that have got them to this position in making the full nursing compliment and being able to 'grow your own'.</p> <p>DE advised that she has to report to the Board on Workforce Resilience in March and will invite both PD and LJ to present.</p> <p>LJ confirmed that the presentation was in hand and there would be the potential to put lots of different options on the table which would include the psychological contract and what is on offer to the organisation and equally what is their commitment to us as an organisation.</p>	

	<p>DE commented that in the Welsh Government Document Implementation Plan there is a mention around investing in Health & Wellbeing – if there is funding available le we will be applying for it.</p> <p>DE thanked PD for his presentation to the meeting.</p>	
5.1	Industrial Action	
	<p>JRQ reported on WAST action taking place this week and there are significant concerns as there will be a severe tightening of derogations.</p> <p>JRQ had tried to make contact to see what the impact is on the front line/front door and there has been a lot of activity to try and mitigate against action over the next three days.</p> <p>GMB & UNITE have rejected the offer and the result of the RCN ballot is expected on 27/3.</p> <p>The RCN have recommended the acceptance of the Scottish Government which effectively looks like a 14% pay rise and this year's pay rise which is going to set the bar, but the first minister in Wales has made it clear that there is no more money available in Wales so there are no expectations for acceptance.</p> <p>DE thanked JRQ and commented that the junior doctors in England are balloting and there is uncertainty how that will or will not affect Wales. JRQ replied that Service Groups and Teams will be kept updated.</p>	
5.2	Swansea Bay Staff Engagement 'Big Conversation'	
	<p>JL gave a brief update on key points on the assumption that the comprehensive papers provided had been read.</p> <p>Key concerns and improvements that were specific to local areas and departments were noted during the Focus Groups by the CEO for direct action to be taken. Hotspot areas identified from the anonymous data were also extracted for reporting to Service Groups and Corporate Directorates, in order to inform local actions for improvement.</p> <p>This report and its discussion points are to be shared as part of phase 2 of Our Big Conversation, which will run from 31st January to 24th February 2023 and will include 7 targeted Focus Groups and 4 open Focus Groups, which will be a mixture of virtual and face to face. There will also be a digital method of engaging and contributing for those unable to attend.</p>	

	<p>Phase 2 of Our Big Conversation will aim to:</p> <ul style="list-style-type: none"> - feedback what staff told us and what we have heard from across the organisation - develop a proposed vision for the organisation - engage on how we take this vision forward together <p>As with phase 1 of the programme, we will be providing the opportunity for all staff, students and volunteers to get involved through virtual, face to face and digital means. Mark and the executive team will again, play key roles in facilitating these conversations and listening to your views, supported by Workforce & OD.</p> <p>A final report is to be compiled for Health Board, Executive Team and Management Board to be reported during March's forums as appropriate, and then shared with the wider organisation for sustainable action and embedding.</p> <p>There was praise for JL on how this project has been delivered and how the whole organisation has been made aware of what is happening.</p> <p>JL will continue to provide regular updates at this meeting.</p>	
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7.	Risk Register	
	It was agreed to keep the 2 risks – Medical/Dental and Nurse Staffing remained at a score of 20.	
8.1	Any other business	
	<ul style="list-style-type: none"> - SBUHB Workforce Summit April/May – holding 10/5 – DE advised that this date is being held but may move after an initial planning meeting has taken place. 	

	<ul style="list-style-type: none"> - Meeting effectiveness – a discussion took place about WOD Delivery Group: <p>DE asked that the group think about the frequency and effectiveness of the Workforce Delivery Group Meeting.</p> <p>JL commented that it would be good to see more stakeholders around the table.</p> <p>DE acknowledged JW's regular attendance.</p> <p>JW commented that it would be difficult for the Service Directors to commit to a monthly meeting but could probably commit to a quarterly meeting. She also mentioned that given the matters discussed, there would be some merit in the membership being extended to the tier below the service group directors. JW confirmed that she would feed this back to other SGDs at the COO meeting.</p> <p>DE advised that she would revisit and consider the approach as the WOD Delivery needs to feed in to WOD Committee which meets bi monthly.</p> <ul style="list-style-type: none"> - JRQ's last meeting before retirement <p>DE took the opportunity to thank JRQ for his support, expertise and common sense approach.</p> <p>JW added that JRQ's advice and guidance was always valued.</p> <p>JRQ said that he appreciated the comment and their (Janet and Julian) conversations and even the more difficult one's as HR need to hear it from the front line.</p> <p>Everyone wished Julian well as he begins his new chapter.</p>	
	Date of the next meeting Monday 22nd May 2023	