

Workforce & OD Committee Update

December 2020

Workforce Information Cell

- Staff Deployed to support Operational Silver decision making, specifically regarding step down services and staff release.
- Complex data issues being worked through with SGs who have limited resource to engage.
- Attempting to improve the accuracy and quality of the information we can glean from existing system adding local knowledge through Business Partners to filter base financial data so the true numbers able to be used front line can be assessed and linked to bed capacity.

Recruitment /Deployment Cell

- Supporting the redeployment of doctors into different rota patterns
- Working with HEIW 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)
- Over establishing locums in Medicine, ITU and Anaesthetics where possible
- Resourcing how we staff the Field hospital via locum medical bank and from GP provision
- Running the locum on duty system on behalf of the DUs.

Training Cell

- Multi-professional Training Cell operational since October to provide central coordination of workforce training needs and delivery for Covid-19 wave 2 response.
- Key actions as at 1/12/20 include:
 - HCSW induction programme at reviewed to now include virtual delivery– training plan in place up to December 2020 for up to 120 new recruits
 - AHP re-skill programme for staff identified to transfer to Bay
 - Support Services Assistant Training Programme in place for December aligned to recruitment – individual clearances being monitored to ensure capacity of training
 - Domestic Training Programme in place for December aligned to recruitment
 - Increased Manual Handling Training Capacity to satisfy demand for increased training places due to elevated bank recruitment
 - Induction for volunteers arranged at Bay
 - Induction training for newly appointed ward clerks in Bay
 - Bay Staff induction booklet reviewed and updated

TTP

Testing

- Drive in lanes at Margam and Liberty
- Four mobile testing units for deployment for care home testing and outbreaks
- Mobile local testing pop up service provided by MITIE
- Specific grand theatre service in Swansea for student population
- Previously staffed at 60% now in the process of moving to 100%
- Significant risk with lack of WG clarity re funding from April 2021 affecting R&R
- Business continuity issues for drive in centres and risks of terrorist attacks
- Testing may be revolutionised through different methods of testing e.g. point of care testing/lateral flow

TTP

Track and Protect

- Doubling the size of the teams by the end of November/mid December
- WG have confirmed funding until the end of Quarter 1 and provided additional funding for this financial year.
- Staffing model flexing as they learn lessons
- Some practical issues in terms of the interface between Occupational Health, Track and Protect Teams and the new App.

Accommodation

- Currently providing hotel accommodation to a range of staff who do not want to risk transmitting the virus at home
- Working with Finance and Procurement to effectively procure a range of different provisions. Considering using the CTM platform
- Ensuring that hospital accommodation is safe and appropriately socially distanced
- Working with Health & Safety to advise hotels to ensure they have safe systems of work in place, where staff are either Covid positive or self-isolating in the hotels.
- Firming up our approach through the agreement of a policy so clear criteria is in place

Immunization Cell

- **Vaccine Workforce Planning approach**
- SBU developed a workforce model which allows the multi disciplinary project team to estimate and anticipate the staffing requirement.
- That modeller calculates needs based on the “pod immunisation” system being used on the fixed Vaccination sites, and on a separate calculation for the out reach programme for care homes and other vulnerable citizens unable to travel. The plans include the use of the “Immbulance” delivery model of mobile facilities.
- The model is being revised almost daily as the details of vaccination supply, delivery date, handling requirements emerge and change. The model must be fluid to be able to react to changing needs.

Immunization Cell

Workforce Planning Model

Position	Band	Stage 1 WTE (existing/new)	Stage 2 WTE (existing/new)
Registrant immuniser	5	84/16	30/96
Health Care Support Worker	3	26/4	15/48
Administrator	2	32/8	0/96
Support Assistant	2	24/6	0/30
Clinical Supervisor	6	8/2	0/6
Service/site manager	7	4/1	0/5
Booking clerk	2	0/4	0/30
Clinical supervisor	6	0/1	0/2
ATO	3	0/3	0/3
Pharmacy co-ordinator	5	0/1	0/2
Service Manager	8B	0/1	0/1
Administrative Support	4	0/1	0/1
Clinical Lead	7	0.5/0.5	0.5/0.5
Data Analyst	6	0/1	0/1
Project Manager	7	0/1	0/1

NOTE

Numbers are planned requirement. Estimates of existing or new staff are fluid based on supply and impact on other services. Model is under constant revision numbers of existing staff is more heavily reliant on Bank.

Immunization Cell

Vaccine Workforce Deployment

- Given the degree of uncertainty over the final delivery plan the approach in recruitment terms has been to secure as much resource as possible whilst attempting to minimise committed costs.
- We have adopted an approach where we were clear as to the source of staffing given the main constraint is the registered workforce. This includes a deployment model of using existing staff to support multi-site Immunisation for NHS staff.
- We are still seeking to avoid having to use front line staff to any degree given the impact at a time where staffing constraints are very significant indeed.
- We are not at the point where we can guarantee the totality of the programme can be accommodated without a service impact for at least a limited time.

Immunization Cell

Vaccine Workforce Supply and Recruitment

Our plans are broadly as follows :

Staff Training – critical to the programme a dedicated resource has been established.

NHS Staff – multi NHS site delivery using existing NHS Staff – a “pop up” model that will then close once all Front Line SBU staff are vaccinated.

Health Care staff (Local Authority / Care Home employees) – Three Mass Vaccination centres staffed with Agency/Bank/new recruits (registered and unregistered).

Care Home Residents / priority citizens who cannot travel - outreach teams focusing just on these staff supported by the Immbulance mobile delivery. Staffed with Agency/Bank/new recruits (registered and unregistered).

Remaining Citizens in the Priority list - Three Mass Vaccination centres staffed with Agency/Bank/new recruits (registered and unregistered)

Booking Centre – supporting all of the above single site Booking Team – staff directly employed and sourced through SBU Vocational Training programme and links with JCP.

Immunization Cell

Vaccine Workforce Supply and Recruitment

Resource Supply

Multi agency approach to booking - some core agency workforce confirmed and booked.
Peer Vaccinators approached directly 70+ staff joining bank just to support Immunisation.
Ex employees / other registrants – contacting all recently retired staff - Facebook campaign

Workforce - Resource Supply

- Agency approach to booking - some core agency workforce confirmed and booked. Option under constant discussion with agencies.
- SBU Peer Vaccinators approached directly, 70+ staff joining bank just to support Immunisation.
- Ex employees / other registrants – contacting all recently retired staff by letter - Facebook campaign looking for other registrants launched, 90+ suitable applicants so far. High profile (ITV Wales) media exposure. First 24 of these staff due to be trained 5th December.
- HCSW - ongoing campaign to recruit HCSW already in place.
- A&C - Booking centre advance party (approx. 9 staff) confirmed including Team Leader. Will be supporting early on site model and the main booking centre thereafter. Working with SBU Vocational Training Dept and JCP to staff up to 30 + admin staff when Centre at Full strength.
- Management team being put in place.

Immunization Cell

Vaccine Workforce - Issues, concerns and need for support

- Already under significant staffing pressure and surge capacity in place, considering impact of stepping down some services just to manage the current patient needs without having the Field Hospital open yet.
- **Finite** supply of registered workforce to deal with complex vaccination handling needs, will be impacted if Field Hospital opened.
- Covid Related staff absence levels back to levels not seen since early May. Outlook suggests absence levels could increase much further.
- Fluid nature of planning assumptions and supply deliver programme making locking down opportunities to recruit other registered and HCSW staff difficult.
- Much of the Immunisation resource will comprise a “patchwork quilt” of individuals from a range of backgrounds either directly recruited / primary care etc able to support some time alongside any substantive employment. This will be key to the seven day extended service.
- Planning and “stitching” the large number of staff needed and ensuring they are adequately trained into viable rosters is complex. However it is the only viable option unless we step down services.
- Early decision needed on using Primary Care (GP Practice) to directly support the Immunisation programme for the wider local population. GP knowledge of their patients especially those immobile or particularly vulnerable would be beneficial in terms of increasing the speed and efficiency of Vaccine delivery.

Maximising Staff Wellbeing & Resilience – Occupational Health

- Resource to support 78% increase in management referrals related to Covid-19 & WF risk assessment, contact tracing for staff and staff testing – new Nurse team developed with AHP/Medical support
- Staff Flu campaign – 60% frontline staff vaccinated at week 8 - 7808 staff vaccines administered. Execs Comms campaign in development to promote further
- Fixed term B7 ‘Staff Vaccine Coordinator’ appointed to support staff Covid-19 vaccine programme & staff vaccinator support from OH
- 276 staff signed up PHW Surveillance project to test Covid-19 antibodies every 3 months until April 21

Maximising Staff Wellbeing & Resilience – Staff Wellbeing

- Continue to deliver Staff Wellbeing Service with aim of support within 5 working days
- 20% increase in referrals to service since June – additional Counselling support gained with support from Charitable funds
- Developing additional Unit based support with L&D Coaches and possible volunteers & support from Chaplaincy
- TRiM – 240 staff trained in brief REACTmh and procurement for full training in progress
- Winter Wellbeing Comms presentation produced to communicate support for staff during 2nd Covid-19 wave
- Supporting HB wide Wellbeing days with Senior Nursing colleagues – 2 days monthly for next 12 months
- 387 Wellbeing Champions – Virtual Autumn/Winter workshops being delivered
- Supporting National WB approaches – Health for Health Professionals Wales (CBT support), SilverCloud (on-line CBT support), Samaritans, #doingourbit (on-line physical exercise for NHS staff)