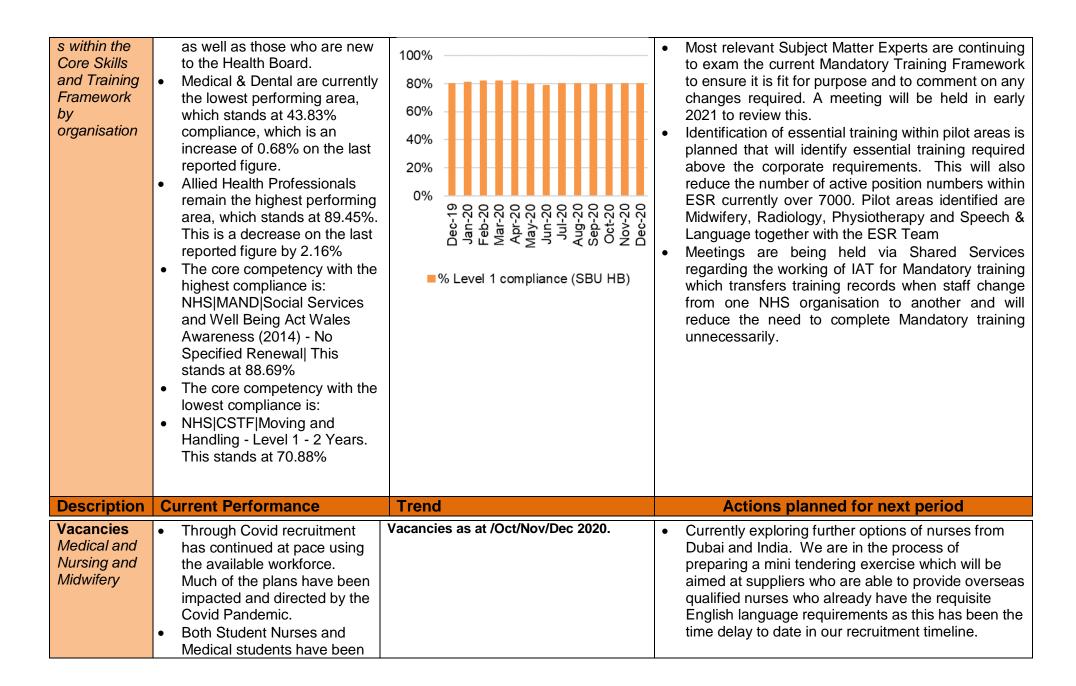
10. WORKFORCE UPDATES AND ACTIONS

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	 Our in-month performance for November 20 has deteriorated by 1.42% from 6.89% in October 20 to 8.31%. The 12-month rolling performance to the end of November 20 has deteriorated by 0.16% from 7.01% to 7.17% At the peak of the Covid 19 pandemic in April 20, 2.68% of the monthly absence was attributable to Covid reasons. In November 20 this was fallen to 2.48%. Therefore, if we discount Covid related reasons from November's performance we see an absence percentage of 5.83% for the month. Which if compared to November 19 is an improvement of 0.64% 	% of full time equivalent (FTE) days lost to sickness absence (12 month rolling) 11% 10% 9% 8% 7% 6% 5% 4% 3% 2% 1% 0% -0and -0an	 Following the pause in our absence management plans due to the Covid pandemic we had planned on a review of previous and current MAAW plans. However, due to the continued pressure caused by Covid 19 this has yet to formally happen. As and when the pressure eases on our resources we will revise these to ensure that our focus continues to be in the correct areas based on the most up to date data and fit for purpose in the current situation in supporting absence reduction. Covid resource gained to support Occupational Health due to 78% increase in management referrals related to Covid-19 & WF risk assessment, contact tracing for staff, staff testing – new Nurse team developed with AHP/Medical support Staff Flu campaign – 63% frontline staff vaccinated by Jan 21 - 8190 staff vaccines administered. Occupational Health supporting Covid vaccination with fixed term B7 'Staff Vaccine Coordinator' to support staff Covid-19 vaccine programme. Providing Covid-19 vaccines for staff with contraindications in the OH Dept Scanning of all OH records completed to enable an e-record with increased efficiencies, ability to access records anywhere on-line and virtual working. Continue to deliver Staff Wellbeing Service with aim of support within 5 working days of referral. Includes trauma pathway for staff and additional bereavement support. Increase in referrals to service – additional Counselling gained via Charitable funds

			 Additional Service Group based Covid support with L&D Coaches – support provided during critical events TRiM – 310 line managers trained in brief REACTmh to identify early signs of trauma and signpost. Procurement for full 2 day training in progress. Winter Wellbeing Comms presentation produced to communicate support for staff during 2nd Covid-19 wave with new CEO, Mark Hackett introducing this. Supporting HB wide Wellbeing days with Senior Nursing colleagues – 2 days monthly for next 12 months 387 Wellbeing Champions supporting teams and services Supporting/Communicating National WB approaches – Health for Health Professionals Wales (CBT support), SilverCloud (on-line CBT support), Samaritans, #doingourbit (on-line physical exercise for NHS staff)
Description	Current Performance	Trend	Actions planned for next period
Mandatory & Statutory Training- Percentage compliance for all completed Level 1 competencie	 Since the last performance report, compliance against the 13 core competencies has changed slightly from 80.68% to 80.67%. This is a 0.01% decrease. This takes into account both current employees who are maintaining their compliance 	% of compliance with Core Skills and Training Framework	 E-learning drop in sessions are not running due to the current situation, however, individual one to one via Teams are being offered as and when required. A follow up meeting is planned for early 2021 to discuss the recording of face to face Mandatory training Currently Safeguarding are the only SME not to record high level training



- used in accordance with agreements with the appropriate bodies. This has include direct employment by extensive use of Bank Contracts.
- All newly qualified registered staff have been deployed as required.
- HCSW recruitment has continued at pace with over 600 new recruits engaged since the beginning of the campaign.
- Since Oct significant focus of recruitment to Imms programme in a very fluid workforce plan.

Grade - Medical & Dental	Oct-20	Nov-20	Dec-20
21000-Consultant (M&D)	-41.46	-35.69	-33.40
21100-Locum Consultant (M&D)	3.25	0.15	-0.75
22110-Associate Specialist (M&D)	-4.97	-7.07	-6.42
22250-Specialist Dental Officer	0.20	0.20	0.80
22260-Senior Dental Officer	-1.20	-1.20	-0.40
22270-Dental Officer	-1.36	-1.36	-1.36
22310-Speciality Doctor (M&D)	-19.03	-18.63	-18.63
22320-Locum Speciality Doctor (M&D)	-1.10	-1.10	-1.10
23100-Specialty Registrar (M&D)	-42.26	-71.53	-73.53
23120-Locum Specialty Registrar (M&D)	-1.00	2.70	2.70
23200-Specialist Registrar (M&D)	-4.00	-4.00	-4.00
24100-F2 foundation year 2 (M&D)	-1.41	-0.41	-1.51
24400-F1 foundation year 1 (M&D)	-58.12	-57.12	-56.12
24900-Dental Trainees in Hosp Post	8.37	8.37	9.37
25000-Clinical Assistant (M&D)	-0.09	-0.09	-0.09
25100-Senior Lecturer (M&D)	-2.00	-2.00	-2.00
25300-G.P.Sessions / Staff Fund	2.66	1.73	1.71
Total	-163.51	-187.04	-184.73

Grade - Nursing & Midwifery	Oct-20	Nov-20	Dec-20
2A182-Nurse Consultant Band 8B	0.20	0.20	0.20
2A281-Nurse Manager Band 8A	3.25	5.15	6.85
2A282-Nurse Manager Band 8B	-1.99	-0.96	-2.56
2A283-Nurse Manager Band 8C	0.50	1.50	2.50
2A284-Nurse Manager Band 8D	0.00	-1.00	-1.00
2A451-Registered Nurse Band 5	-253.96	-247.02	-257.71
2A461-Registered Nurse Band 6	-30.76	-30.16	-33.06
2A471-Registered Nurse Band 7	-36.24	-27.87	-23.01
2A481-Registered Nurse Band 8A	-4.13	-4.13	-4.13
2A482-Registered Nurse Band 8B	0.00	0.00	0.00
2A297-Nurse Manager (above Band 9)	1.00	1.00	1.00
Total	-322.12	-303.27	-310.92
Grade - Health Care Support Workers	Oct-20	Nov-20	Dec-20
2AA21-Nursing HCA/HCSW Band 2	-41.55	-40.17	-78.52
2AA31-Nursing HCA/HCSW Band 3	-21.00	-17.33	23.37
2AA41-Nursing HCA/HCSW Band 4	22.99	20.99	25.07
Total	-39.56	-36.52	-30.08

 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).

