Meeting Date	14 June 2022	Agenda Item	3.3
Report Title	**Workforce Metrics**		
Report Author	Julian Quirk, Assistant Director of Workforce &OD		
Report Sponsor	Debbie Eyitayo, Director of Workforce & OD		
Presented by	Julian Quirk, Assistant Director of Workforce & OD		
Freedom of Information	Open		
Purpose of the Report	To provide the monthly Workforce Metrics report to the Committee		
Key Issues	Detailed within the attached report - Workforce metric focus on the key issues only.		

Specific Action Required *(please choose one only)*	**Information**	**Discussion**	**Assurance**	**Approval**
	☐	☐	☒	☐

Recommendations	Members are asked to: • **NOTE** the contents of this report.

WORKFORCE METRICS

1. INTRODUCTION

There is a standard workforce metrics report that is developed on a monthly basis.

2. BACKGROUND

There have been no changes to the standard format for the workforce metrics report since the last meeting. Commentary on actions and key outputs/activity are set out in the body of the report.

3. GOVERNANCE AND RISK ISSUES

The monthly metrics report forms part of the governance arrangements for reporting on key workforce activity and key corporate performance targets.

4. FINANCIAL IMPLICATIONS

There are no specific financial implications associated with this report for information.
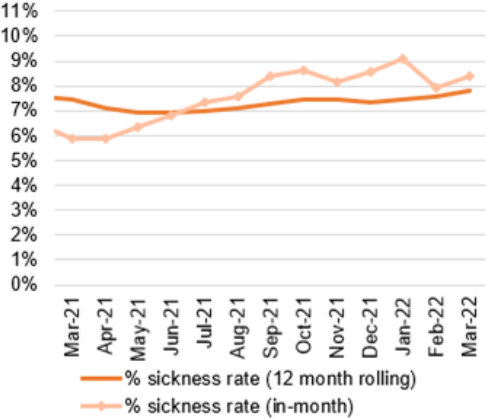
5. RECOMMENDATION

The Committee is asked to note the contents of the report.
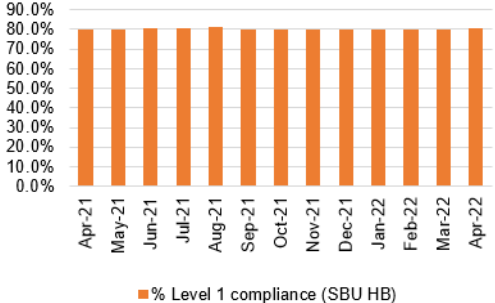
Governance and Assurance		
Link to Enabling Objectives *(please choose)*	**Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities**	
	Partnerships for Improving Health and Wellbeing	☐
	Co-Production and Health Literacy	☐
	Digitally Enabled Health and Wellbeing	☐
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☐
	Partnerships for Care	☐
	Excellent Staff	☒
	Digitally Enabled Care	☐
	Outstanding Research, Innovation, Education and Learning	☐

Health and Care Standards		
(please choose)	Staying Healthy	☐
	Safe Care	☐
	Effective Care	☐
	Dignified Care	☐
	Timely Care	☐
	Individual Care	☐
	Staff and Resources	☒

Quality, Safety and Patient Experience
Workforce Metrics cover a rage of key performance targets that are linked to quality, safety and patient safety as the relate to workforce availability, training and other key compliance and governance issues

Financial Implications
None.

Legal Implications (including equality and diversity assessment)
There are no financial implications.

Staffing Implications
None.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)
There are no long term implications in relation to the impact of the Well-being of Future Generations Act.

Report History	None.
Appendices	Appendix 1 – Workforce Updates and Actions

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*	• March 22, in month absence increased by 0.44% to 8.27%. In comparison to March 21 this is an overall decline of 2.46%. • Absence due to anxiety/stress related reasons was 25.60% representing one of the lowest months for this absence reason in the last two years. • Mental Health and LD was the clinical group with the highest in month absence in March 22 at 8.90% an increase of 0.45% on the previous month and Estates were the highest non-clinical group at 13.70%, which was an increase 1.43% on the previous month. • Short-term sickness for March 22 was 3.89%, an increase of 0.42% on the previous months reported STS. Long-term sickness decreased in month by	**% of full time equivalent (FTE) days lost to sickness absence (12 month rolling)** *Line chart showing % sickness rate from Mar-21 to Mar-22. Y-axis 0% to 11%. Two lines: % sickness rate (12 month rolling) and % sickness rate (in-month).*	• A focus on the reduction of LTS and STS with an expectation that sickness reduces and remains below 6% • All service groups sickness absence performance to be monitored via established grip and control meetings • All service groups now have a full action plan which focuses on rolling hot spots with targeted approach to improve performance and a heavy focus on well-being, as well as ensuring cases are managed accordingly to policy. • A full action plan developed for Facilities where sickness absence remains higher than other groups. A successful business case approved by the Health Board in March 2022 will support the Staff Wellbeing's increased service demand and will enable services developed and extended during the Covid-19 pandemic to continue; this includes the roll out of TRiM, additional psychological practitioner resource and admin resource. The following services are supporting staff to both return to work and remain well in work; • Supporting staff experiencing Long Covid with self-management approaches/return to work advice – over 140 referrals to date. The Minister for Health & Social Care visited the Health Board on 3/2/22 to hear the experience and outcomes from staff and service-users and recently announced £5m

	0.24% compared to previous months reported LTS to 4.38%. • In March 22 Covid related absence stood at 2.27%, a slight increase of 0.06% on the previous month. If we discount Covid related reasons from March's overall absence performance we see an absence percentage of 6.0% for the month. Compared to March 21 (not including Covid absence) this would represent an overall increase of 0.96%		extension funding to support long Covid services across Wales until April 2023. • Delivery of Post-Covid Staff Wellbeing Strategy that includes a review of the evidence base and consultation with a wide range of stakeholders. • Advice for managers and staff on Covid-19 exceptions to isolation to maximise attendance at work, and on underlying health conditions and pregnancy • Planning to support the Autumn rollout of the co-administered Covid-19 vaccine and staff flu vaccine. • Supporting the All Wales Workforce Risk Assessment • Working with related organisations to reduce the stigma and discrimination of mental health in work. • Continued delivery of Occupational Health and Staff Wellbeing Service Improvement Plans that include recent internal audit recommendations and actions. Improving access to Case Conferences to manage long tern complex sickness absence. • Promotion of & support in the delivery of 'Compassionate Circles' Mini-rounds across the Health Board (as developed by mental health colleagues) • TRiM project team established and rollout to priority areas has commenced and over 1550 staff have undertaken the React MH training. • New Occupational Health and Wellbeing SharePoint site to communicate support available to staff • Continued roll-out of prevention based webinars including 'menopause for managers – supporting staff', 'Information and support for cervical cancer' and 'mindful menopause for staff'

			Continuing to develop the network of 550+ Wellbeing Champions, supported by a regular programme of workshops. This remains a fluid situation and should we face a further surge of Covid cases affecting our hospitals due to easing of social restrictions we may once again need to re assign some of our resources to support the response to best utilise resources in the situation.
Description	**Current Performance**	**Trend**	**Actions planned for next period**
Mandatory & Statutory Training- *Percentage compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation*	• Since the last performance report, compliance against the 13 core competencies has changed slightly from 80.67% to 80.94%. This is a 0.28% increase. • The Staff Group Medical & Dental continue to be the lowest performing area, standing at 48.06% compliance, which is an increase of 0.75% on the last reported figure. • Staff Group Allied Health Professionals remain the highest performing area, which stands at 87.46%. This is a slight increase on the last reported figure by 0.31% • Morriston Service Group is the lowest performing service group which stands at 74.15% • NPTS Service Group 83.20%	**% of compliance with Core Skills and Training Framework** 90.0% 80.0% 70.0% 60.0% 50.0% 40.0% 30.0% 20.0% 10.0% 0.0% Apr-21 May-21 Jun-21 Jul-21 Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 ■ % Level 1 compliance (SBU HB)	• [**Updated**] E-learning drop in sessions have now been booked in the libraries of Cefn Coed, Singleton, Morriston & Neath Port Talbot for 2023, The sessions are held physically in the libraries of the main sites, details are available within ESR on every individuals MY Learning page under announcements. Virtual support via Teams is also offered as well as email and other support for staff. • [**Completed**] Safeguarding are looking to recruit additional Administrative staff to assist with An ongoing capacity issues around updating staff records of those who have attended level 3 training. Providing training later in March/Early April. A person has now been recruited and access and training has been provided. • [**Ongoing**] The process of identifying essential training within pilot areas that will identify training required above the corporate requirements has started, however, due to capacity any progress is slow. This will reduce the number of active position numbers within ESR, which currently over 7000. Pilot areas identified are Midwifery, Radiology, Physiotherapy and Speech & Language together with the ESR Team. The first areas have been

• MH & LD Service Group 86.28% • Primary Care & Community Service Group is the highest performing service group which stands at 88.51% • The core competency with the highest compliance is: NHS|MAND|Dementia Awareness - No Renewal, which stands at 89.60% • The core competency with the lowest compliance is: NHS|MAND|Violence Against Women, Domestic Abuse and Sexual Violence - 3 Years| This stands at 74.51%	completed, however, work needs to be completed on the effect of this on staff and to ensure compliance is restored. Ongoing with ED • [**Completed**] All e-learning modules are in the process of being updated to use Microsoft EDGE as the browser of choice, with only a few working in Internet Explorer. This work has now been completed and ALL M & S e-learning is available via EDGE • [**Ongoing**]A new project of identifying essential training for all admin staff is underway; this will also assist in the identification of the different roles within this staff group. • [**Updated**] A meeting of the Mandatory Training Framework group has been organised to reviews the Mandatory Training policy on 11th April with all Subject Matter experts. The meeting took place and the Framework is being finalised with any updates and is due to be completed by June 2022 • [**Updated**] A review of staff with Learning administration has taken place and staff not using this level of access within the last 12 months have been removed and others are being granted in place, training of new staff with this level of access in underway. With SSS (Supervisor Self-Service) due to be rolled out by the local ESR team in time for the pay progression to be implemented later this year, all staff with Learning Administration access used to update PADR data will have accessed removed as it will no longer be required. This is reliant on the local ESR completing the roll out of SSS across the HB.

Description	Current Performance	Trend	Actions planned for next period
Vacancies *Medical and Nursing and Midwifery*	• Covid specific measures in terms of recruitment have ended and normal levels of local and corporate recruitment are now re-established. • Focus of recruitment to Imms programme is still being closely monitored in a very fluid workforce plan.	(see tables below)	• The business case for 22/23 has been developed and approved and activity has commenced to recruit up to 200 overseas nurses in the next financial year. It has been suggested that a further 150 overseas nurses need to be recruited in order to achieve the transformation schemes that are being proposed and a further case is being developed to identify what extra infrastructure would be needed to achieve this increase in numbers. • The recent SSP process for student nurses who qualify in September 22 has recently been completed and we expect to receive circa 180 newly qualified nurses into the Health Board in Sept/Oct 22 the HB resourcing team have begun the planning process for supporting these new employees through their pre-employment checks process to ensure they are ready to commence employment upon the issuing of their NMC PIN. • The selection phase of the Therapies and Health Science SSP has finished for students that will qualify from numerous AHP/HS professions in September 22. The HB expects to have an intake of circa 60 newly qualified therapists and health scientist in Sept/Oct 22 and once again the resourcing team will be assisting in ensuring pre-employment checks are completed in time for them to commence upon qualification. • The CEO has requested an additional 150 overseas nurses be commissioned in this financial year. This brings the total number to 350. This raises significant issues for the infrastructure including OSCE trainers, training facilities and accommodation

Vacancies Feb to Apr 2022

Grade - Medical And Dental	Feb-22	Mar-22	Apr-22
21000-Consultant (M&D)	-52.29	-46.80	-48.94
21100-Locum Consultant (M&D)	17.40	20.10	19.00
22110-Associate Specialist (M&D)	-9.78	-10.88	-10.88
22250-Specialist Dental Officer	0.40	0.40	0.20
22260-Senior Dental Officer	0.00	0.00	0.00
22270-Dental Officer	-0.01	-0.01	-0.11
22310-Speciality Doctor (M&D)	-18.35	-15.35	-12.65
22320-Locum Speciality Doctor (M&D)	-0.10	-0.10	-0.10
23100-Specialty Registrar (M&D)	-188.71	-253.80	-270.20
23105-SLE- Specialty Registrar (M&D)	-29.03	-28.03	-28.03
23120-Locum Specialty Registrar (M&D)	1.50	4.50	3.50
23200-Specialist Registrar (M&D)	-4.00	-4.00	-4.00
24100-F2 foundation year 2 (M&D)	-38.00	-38.00	-38.00
24105-SLE -F2 Foundation year (M&D)	-1.00		
24110-Locum F2 Foundation year 2 (M&D)	-1.00	1.00	-1.00
24400-F1 foundation year 1 (M&D)	-53.50	-51.50	-52.50
24410-Locum F1 Foundation year 1 (M&D)			1.00
24900-Dental Trainees in Hosp Post	-1.63	-0.63	-0.63
25000-Clinical Assistant (M&D)	-0.09	-0.09	-0.09
25100-Senior Lecturer (M&D)	-3.00	-3.00	-3.00
25300-G.P.Sessions / Staff Fund	5.26	6.96	7.62
Total	**-375.93**	**-419.22**	**-438.81**

Grade - Nursing & Midwifery Registered	Feb-22	Mar-22	Apr-22
2A182-Nurse Consultant Band 8B	-0.60	-0.60	-1.00
2A281-Nurse Manager Band 8A	11.18	14.08	12.29
2A282-Nurse Manager Band 8B	1.03	1.03	2.50
2A283-Nurse Manager Band 8C	-2.60	-1.00	-1.40
2A284-Nurse Manager Band 8D	3.00	4.00	4.00
2A297-Nurse Manager (above Band 9)	-1.00	-1.00	
2A451-Registered Nurse Band 5	-356.58	-331.68	-330.80
2A461-Registered Nurse Band 6	-30.66	-25.87	-37.39
2A471-Registered Nurse Band 7	-28.47	-12.25	-38.22
2A481-Registered Nurse Band 8A	-1.85	-8.61	-5.74
2A482-Registered Nurse Band 8B	-1.00	-1.00	-1.00
2A600-Registered Nurse - Bank	0.76	0.76	0.76
Total	**-406.79**	**-362.13**	**-396.00**

Grade - Healthcare Support Workers	Feb-22	Mar-22	Apr-22
2AA21-Nursing HCA/HCSW Band 2	-152.52	-100.27	-124.85
2AA31-Nursing HCA/HCSW Band 3	-39.28	-13.10	-13.44
2AA41-Nursing HCA/HCSW Band 4	14.32	39.03	40.65
2AA51-Nursing HCA/HCSW Band 5	0.96		
Total	**-176.53**	**-74.33**	**-97.65**

Description	Current Performance	Trend	Actions planned for next period
Recruitment *Metrics provided by NWSSP. Comparison with all-Wales benchmarking*	• Swansea Bay UHB overall performance has improved this period, and is now back within the target level for NHS Wales when excluding outlier data.	**Vacancy Creation to Conditional April 2022 (working days: excluding outliers) T13** T13 TIME TAKEN Vacancy Creation to Conditional Offer (inc Bank Holidays) Linear (T13 TARGET TIME Vacancy Creation to Conditional Offer)	• Recruitment activity has largely returned to normal. • Through the Covid Pandemic HR Ops worked more closely with units using reports to target and review recruitment activity. • For doctors we continue to recruit overseas on a post by post basis. • The central resourcing team continues focussing on the recruitment of B5 nurses, B2 ward based HCSW's and assisting in overseas nurse recruitment. In addition they are assisting in the recruitment of newly qualified nurses, AHP's and Health Scientists via the all Wales Student Streamlining process. As well as specific identified hard to recruit to posts. • SBW who have been appointed via a tendering process to help Swansea Bay develop its recruitment brand and associated recruitment platform are due to present their creative recruitment branding proposal to Management Board at the end of June and if approved will lead to formal development of this brand inc tools and materials fr the use in future recruitment campaigns and a recruitment microsite which will allow us to showcase the opportunities available within Swansea Bay and the varied services and activities that make up Swansea Bay Health Board. • The initial presentation is promising and attendance at Management Board is being arranged.
Turnover *% turnover by occupational group*	• Turnover has increased and is at the higher end of the normal spread seen pre Covid. It is not clear just how much impact the	**Period Turnover Rate – 01 May 2021 - 30 Apr 2022**	• Currently working on making Exit Questionnaires available earlier to leavers, to provide better opportunity for individuals to access and complete, with a view to increasing the response rate. Review to be arranged with Payroll to monitor timing of

		Staff Group	FTE	Headcount	Prev position		action for A4 termination forms which could affect response rates.
	pandemic has had particularly in areas traditionally with higher levels of background turnover and where the increase in recruitment volumes may also play in with higher drop out rates. As 2022 progresses this is something we will need to watch carefully. • All categories increased during this period, except for Estates and Ancillary who experiences a significant reduction from 11.15% in the last period, to 8.2% this time.	Add Prof Scientific and Technic	7.29%	7.97%	▲		• Early indications are that Exit Questionnaires yield lower response rates than Staff Surveys, and that a 30% return would be considered very good. • In order to identify potential flaws in the process, SNPTH SG have agreed to identify a sample of leavers to engage in feedback on the leaver process. • Analysis commenced by Workforce Information Cell to identify patterns and trends contributing to overall increase.
		Additional Clinical Services	8.72%	9.29%	▲		
		Administrative and Clerical	11.55%	12.17%	▲		
		Allied Health Professionals	11.40%	12.49%	▲		
		Estates and Ancillary	8.20%	8.55%	▼		
		Healthcare Scientists	8.01%	8.32%	▲		
		Medical and Dental	7.67%	8.43%	▲		
		Nursing and Midwifery Registered	11.59%	12.49%	▲		
		Overall Rate	FTE	Headcount	Prev position		
		Overall Rate	10.22%	10.92%	▲		

| Description	Current Performance	Trend	Actions planned for next period
PADR *% staff who have a current PADR review recorded*	• Staff who have had a Personal Appraisal and Development Review (PADR) since the last report stands at 56.05%. This is a slight increase on the last reported figure by 0.10% • Estates and Ancillaries continue to be the lowest performing staff group at 45.93%.However, this is an increase on the last reported figure by 7.13% • Add Prof Scientific & Technic are currently the highest performing staff group with 73.92% a slight decrease of 0.27%.	**% of staff who have had a PADR in previous 12 months** 	• **[Complete]** PADR Training Resources have been updated to reflect the updated PADR and Pay Progression Policy • **[Ongoing]** Since last reporting on Estates and Facilities, there has been an increase in compliance by 7.13%. However, their overall result of 45.93% is still low. • **[New]** Service Groups, in particular Morriston, have been asked for action plans on how to address PADR results. This is an ongoing process. • **[Updated]** Recommendations regarding updates of PADR paperwork to include a talent discussion component and four talent management categories have now been approved. The timeline for release of updated PADR paperwork is yet to be identified

	• By HB L5 the Service Group figures are;
	• MH & LD: 70.60%
	• Morriston: 46.45%
	• NPTS: 59.98%
	• PCC: 77.01%
	
	The lowest performing Dir by HB L5 is Strategy, which currently stands at 2.74%
			• **[New]** April 2021 to March 2022;
			   o 159 Completed
			   o 87 are scheduled to attend up to Nov 2022
			Manager Pathway April 2021 – March 2022
			   o Completed: 82
			   o Course Cancelled: 14
			   o DNA: 22
			   o Withdrawn: 18
			April 2022 – March 2023
			   o Completed: 29
			   o Confirmed: 40
			   o DNA: 3
			   o Withdrawn: 3

Description	**Current Performance**	**Trend**	**Actions planned for next period**
Operational Casework *Number of current operational cases.*	• No. of open Disciplinaries has increased slightly from 46 to 50, as the average no. of incoming cases has remained elevated at 14 per month consistently for 5 consecutive months. • Number of Grievances (30) has raised slightly from 28 last period. • Dignity at Work has reduced from 3 to 2 cases. • Capability cases have reduced from 5 to 4.. • ET's have risen from 1 to 3 (peaking at 4 in April) which is unusually high for SBUHB however still very low in	**Number of Operational Cases**	• Guardians service continues to be available to staff throughout this period • Embedding of Respect and Resolution policy, providing feedback to the central group on lessons learnt from current cases • Embedding of Just Culture Principles to existing Values and Behaviours Framework. Utilising the decision tree when providing advice to managers • ER dashboard rolled out to Service Groups to create transparency and enhance awareness • Work to ensure E&D data is recorded on ER tracker and updating the system to reflect changes to policies • Embedding 'hub' model of providing advice, guidance and support to managers

comparison to the number of employees.

- No whistleblowing cases ongoing at present.

Number of Disciplinary cases
No. of Disciplinary cases opened in month
No. of Disciplinary cases closed in month
Total No. of staff suspended (inc those >6 months)
No. of staff suspended >6 months
No. of cases continuing for >2 years
Dignity at work
Grievances
ET's
Capability
Whistleblowing