

**Swansea Bay University Health Board**

**Unconfirmed**

**Minutes of a Meeting**

**of the Workforce and Organisational Development Committee**

**held on 10th August at 9.30am to 11.30am**

**Microsoft Teams**

**Present**

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

**In Attendance:**

Debbie Eytayo	Director of Workforce and Organisational Development (OD) (Interim)
Richard Evans	Executive Medical Director
Christine Williams	Interim Director of Nursing and Patient Experience
Christine Morrell	Interim Director of Therapies and Health Science (from Minute 83/21)
Julian Quirk	Assistant Director of Workforce and OD
Sharon Vickery	Assistant Director of Workforce and OD
Joanne Gubbings	Assistant Director of Workforce and OD
Paul Dunning	Head of Occupational Health and Wellbeing
Claire Mulcahy	Corporate Governance Manager
Neil Thomas	Deputy Head of Risk (Minute 83/21)
Dai Roberts	Service Group Director, Mental Health and Learning Disabilities (Minute 85/21)

<b>Minute</b>	<b>Item</b>	<b>Action</b>
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<b>77/21</b>	<b>WELCOME</b>	
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Tom Crick welcomed everyone to the meeting, with a particular welcome to Debbie Eytayo in her new role as Interim Director of Workforce and Organisational Development.

Tom Crick advised that further to a wider review of health board committees, there would be a change of approach to the W&OD committee going forward, with the committee taking on a more strategic assurance focus and a move away from the operational focus that it has had in recent years. The primary focus would be on the challenges and opportunities in delivering the organisational annual plan. Therefore, the committee's Terms of Reference, work programme, agenda and reports would be

realigned to the annual plan and providing assurance to the Board. The agenda would need to be more carefully focused, with more reports for noting and only discussed by exception.

Debbie Eytayo agreed to take an action to work with Corporate Governance colleagues to look at the Terms of Reference and the committee work programme in order to shape the agenda moving forward.

**Resolved** - A meeting to be arranged with Corporate Governance colleagues to look at Terms of Reference **DE/TC**

**78/21 APOLOGIES**

Apologies were received from Pam Wenger, Director of Corporate Governance and Kay Myatt, Head of Learning and Development.

**79/21 DECLARATIONS OF INTEREST**

There were no declarations of interest.

**80/21 MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting on the 15<sup>th</sup> June 2021 **received** and **confirmed** as a true and accurate record.

(i) Minute 56/21 – Nurse Staffing Levels (Wales) Act 2016 (NSA)

Jackie Davies queried whether there had been any progress with an all-Wales solution. Christine Williams assured that there were internal processes in place to monitor compliance as well as local reporting. Work was still ongoing with regards to the all-Wales solution and there had been no date for completion set. There was work underway with Allocate Software, on an all-Wales basis to ensure we can monitor compliance.

Tom Crick advised that NSA would remain a key strategic focus for the committee, especially to provide assurance to the Board, and would remain a standing item on the agenda.

**81/21 MATTERS ARISING**

There were no matters arising.

**82/21 ACTION LOG**

i. 30/21 Stress Related absence in Corporate Areas

Joanne Gubbings advised that further information in relation to the sickness within medical records was included within report for item 4.3.

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

## 83/21 WORKFORCE RISK REGISTER

Neil Thomas was welcomed to the meeting.

The Workforce and OD Risk Register was **received**.

In introducing the report, Neil Thomas highlighted the following points:

- The report presented the risk register that was received at Board in July 2021;
- There were four risks on the Health Board Risk Register which were assigned to the Workforce & OD Committee for oversight;
- Three of which were rated at 20; *Workforce Recruitment, Nurse Staffing Levels Act* and *Workforce resilience*;
- A new risk had been added; *Partnerships Working* and this was rated at level 15;

In discussion of the report, the following point were made:

Tom Crick stated that he was glad to see the *Partnership Working* risk had been captured, this relationship had an impact on the health board's ability to do things and some thought was needed on how best to mitigate. Nuria Zolle commented on the need to be cautious, our partners play a key role in supporting our staff and the description of the risk needed to be carefully considered.

In relation to the *Nurse Staffing Levels Act* risk, Jackie Davies was pleased that this had been added to the health board risk register. She queried whether the title of the risk needed to be updated and Neil Thomas undertook to check this and feedback.

With regards to the *Workforce Recruitment* risk, Tom Crick queried whether the routine annual recruitment for medical staff had also been impacted or whether this was stable due to our partnership with the University. Richard Evans advised that there was no issue with undergraduates. Positively, Richard Evans highlighted that Swansea University had a great reputation and had been nominated as the top UK medical school and this would help to expand the student pipeline. Further work was required to increase Physician Associate posts within the health board and retaining those staff. Richard Evans advised that there had been some challenges with post graduates, these were allocated via Health Education and Improvement Wales (HEIW). These were a fixed number and were allocated on to

speciality rather than health board need, they don't necessarily align to demand. Junior doctors were deployed in different ways; posts were based on whole time equivalent (wte) and vacancy appointments were rotated based on vacancy rather than posts. Tom Crick requested that this was looked at in further detail at a future committee. **RE**

Tom Crick added that challenges in recruitment for certain specialist posts was evidently an issue within the health board as well as a wider national issue.

In relation to *Workforce Resilience*, Tom Crick commented that it was important to think about the 'new normal' and it must be acknowledged that there will still be emerging impact across the workforce, and mitigation was key here.

- Resolved:**
- A deep dive on challenges within post graduate medic allocations from Health Education and Improvement Wales (HEIW) be considered at a future committee. **RE**
  - The report be **noted**.

## **84/21 COVID-19 UPDATE**

A verbal update on COVID-19 workforce position was received.

Julian Quirk highlighted the following the points;

- There had been no increase in asymptomatic COVID-19 absences;
- The rules in Wales has recently changed and guidance had been given to staff to continue with the protections already in place;
- Risk assessment measures were in place across the health board to risk assess the way out but clinical settings were continuing as previous;
- Guidance for health and social care staff in relation to self-isolation was due to be issued which sets a pathway for staff to risk assess subject to PCR testing;
- Gold meetings were continuing on weekly basis;
- The pay impacts for staff with long COVID would be considered at the end of the year;
- There had been a Vulnerable Staff Review and the service groups were working through the detail. 100 staff had returned to their roles but there would be a focus on the 40 staff that had not yet returned;

In discussion, the following points were raised;

Tom Crick queried the potential number of staff with Long COVID. Julian Quirk informed there were currently over 100 staff with Long COVID and with a wide range of issues across the clinical pathway.

Tom Crick queried whether there had been vaccination reluctance seen within the health board. Julian Quirk advised there was good take up of the vaccine with over 90% against the 80 to 90% expected level of take up.

Nuria Zolle made reference to the managerial approach taken with those staff with Long COVID and queried whether there was a consistent message and what the challenges would be moving forward.

Julian Quirk advised that the service groups were looking at the detail of staff that were unable to maintain their roles and were working on an individual basis, with environment risk assessments designed by Occupational Health with the aim to re-introduction into the workplace. This had been working well and there had been a focus on these staff. Paul Dunning added that there was also a Long COVID occupational health clinic in which 80% of those staff access that support.

In relation to Long COVID, Julian Quirk advised that Welsh Government guidance had stated that those who had not continued in employment would be on full pay for 12 months but this would end in December 2021. There needed to be consideration on the next steps and whether career breaks could be offered. Jackie Davies commented that this was complicated and there were some staff internally that have not come under this guidance. There was a need to improve communication with staff and ensure that there is clarity around the change to no-pay in December 2021. Julian Quirk advised that guidance on the next steps had not been issued as yet and concerns on this had been raised nationally via the All-Wales Network. Tom Crick requested that the committee are updated on this at the next meeting.

- Resolved**
- Julian Quirk to provide an update on the issue on pay for Long COVID staff at the next Committee; **JRQ**
  - The report be **noted**.

**85/21 MENTAL HEALTH AND LEARNING DISABILITIES ACTION PLAN FOR THE STAFF SURVEY**

Dai Roberts was welcomed to the meeting.

The Mental Health and Learning Disabilities Staff Survey Action Plan was **received**.

In introducing the report, Dai Roberts highlighted the following points;

- The Service Group strive to deliver high quality services, credible staff and good working environments, as such these KPI's had been monitored before the staff survey and were not new to the Service Group,
- The Service Group had been exploring issue of the Equality Act and established the Equality Act Group, as well as the Wellbeing Plan in March 2020;
- In December 2020, the results were received from the staff survey which highlighted the three main themes;
- Three workshops within the Service Group took place between February and April 2021 led by workforce colleagues. Action plans were formulated and shared across the group;
- These action plans were routinely reviewed and updated and were attached as appendices;
- The committee were asked to note the content of the report and be assured of the Service Group's commitment to the implementation of the plan;

In discussion the following points were raised:

Tom Crick highlighted the key themes from staff survey, in particular, bullying and stated it was important to focus on how we can best support staff encountering these issues.

Nuria Zolle commented that the action plan presented was sensible and queried when an update could be expected. Dai Roberts advised that it was difficult to give a timeline as the different parts of the service move at difference paces and they would need to respond in a malleable way. Jackie Davies concurred adding there was diversity across the service group. She highlighted the positive partnership working within the MHL D Service Group with Staffside and the Service Group were fully engaged. Thanks should be given to Dai Roberts on the work undertaken to get to this position.

Nuria Zolle queried whether there were plans to undertake the staff survey again to understand the impacts of the work undertaken within the action plans. Tom Crick added that the changes would need to be seen and this would take at least 6 months to a year but would be useful to have a snapshot of the impacts of the actions. Timing was important to ensure the survey is effective and there is useful data to work with. Joanne Gubbings advised that there were plans to re-run in September 2021 across all health boards but it was felt that this was not the right approach due to survey fatigue. She undertook to find out the planned date for the next survey.

Members requested a further update on the action plan following the next survey and the item to be included on the work programme.

- Resolved:**
- The content of the report and action plan were **noted**.
  - The committee to receive a further update on the action plan following the next survey and the item to be included on the work programme; **DR**
  - Joanne Gubbings to find out the planned date for the next Staff Survey; **JB**

## **86/21 WORKFORCE METRICS**

A report providing an update on Workforce Metrics was **received**.

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

- Performance in staff who have had a Personal Appraisal and Development Review for June 2021 stood at 64.81%;
- COVID-19 absences had reduced to 0.54% during May 2021;
- Overall absence percentage discounting COVID-19 absences stood at 5.77%;
- Turnover rates were very low and there was relatively very little change in comparison to the previous year;

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

Tom Crick asked Julian Quirk how this data could be most effectively used for the committee. Julian Quirk informed that the data presented was in the format of the Integrated Performance Report and this would need to be explored further if other formats were required. Tom Crick advised that the committee should be looking at strategic, trend information and a discussion would be needed with the Director of Workforce and OD to establish what information is required by the committee.

- Resolved:**
- A discussion to take place surrounding the Metrics report and what information the committee require going forward. **TC/DE/**
  - The report be **noted**. **JRQ**

## **87/21 MEDICAL AGENCY AND LOCUM UTILISATION**

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

In introducing the report, Sharon Vickery highlighted the following points:

- The data for June 2021 had identified that the utilisation and costs associated with medical agency had reduced;
- The Executive Medical Director had established an ambitious medical efficiency programme aimed at; recruiting to all vacant posts; innovative and creative ways to recruit and retain particularly with junior staff. As well as the roll out of the Allocate Medic on Duty modules to provide further controls around annual, study, sickness and professional leave;
- The health board was looking at working with external companies to support the recruitment to consultant's posts. This was a costly service but there would be a focus on difficult to fill posts where in some cases that had been no applications from local recruitment campaigns;
- The health Board was also looking to work with an external company on attraction and general recruitment material for all staff as well as nursing and therapies campaigns via a digital tool.

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

Tom Crick queried whether the position with technology and software was stable. Sharon Vickery informed yes but post COVID there had been some recovery work and a complicated roll out through the two year programme. Departments had been very receptive to the new system, with Medicine in particular wanting in place urgently. The deployment of staff over the pandemic had been very difficult and this system would provide the Service Groups with a much better understanding of their establishments.

In terms of the locum monitoring and having oversight of all posts and a better grip and control, Nuria Zolle suggested that it would be useful for the committee to get a sense the impacts of action taken place. Richard Evans replied that conversations were ongoing with the Service Group Medical Directors, and a number of key actions were planned. In regards to spend on locum, there needed to be an agreed cap on rates in order to control spend. With agency spend, the overall aim was to fill the long term gaps but if agency was needed an agreed hourly rate needed to be adhered to, with limits on premium rates.

The gaps in the medical workforce were continually looked at but this was a complex issue. The sustainability of the workforce was a key priority. Nuria Zolle added that an update on where the gaps were as well as the link to the finances would be helpful for the committee. Richard Evans



advised that this work was being agreed at the moment. Historically there was no central knowledge of the gaps but the Service Groups now had a clearer understanding of the baseline. Sharon Vickery concurred, stating that work was underway with the Service Groups with regards to vacancies but these do change frequently. With regards to the Sustainability Plan it was important to produce realistic plans, good feedback had been received from Welsh Government but further granular data was required for the delivery. Nuria Zolle requested that further information is received by the committee on where the gaps are within the medical workforce.

RE/SV

Jackie Davies suggested that the committee also received an update on the additional functionality for e-rostering and how the health board is utilising the function and what are the outcomes. Sharon Vickery informed that this was still in early stages but an update could be provided in December 2021 where further detail will be available.

SV

Tom Crick queried whether the health board needed to re-think its establishments. Sharon Vickery advised that an analysis was required of what posts were needed as well as a fundamental review of those posts that were impossible to recruit to. Richard Evans added that the health board never recruit to what we need, these are dictated by HEIW.

Christine Morrell informed that alternative professionals with extended skills were being looked at for areas such as pathology, radiology and diagnostics in order to alleviate pressures in medicine. Tom Crick commented that this was good in terms of flexibility of skills and career paths in order to help retain staff. Christine Morrell to provide an update in the Autumn on the progress of the use of alternative professionals to alleviate the pressure in medicine.

CM

**Resolved:**

- An update be provided to the committee on the gaps in the medical workforce;
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- An update be provided in December 2021 on the progress and outcomes of the use of the additional functionality in E-Rostering system;
- Christine Morrell to provide an update on the progress of the use of alternative professionals to support the pressure in medicine;
- The metrics and associated costs including the early indications that utilisation and costs could possibly be falling were **noted**;
- Note the continued plans for 2021 were **noted**.

RE/SV

SV

CM

88/21

**SICKNESS, WELLBEING AND OCCUPATIONAL HEALTH**

An update report on sickness, wellbeing and occupational health was **received**.

Joanne Gubbings and Paul Dunning highlighted the following points;

#### Sickness

- The report provided sickness performance data for May 2021 in which levels had increased;
- For the first time since the 2<sup>nd</sup> peak of Covid19, in month absence for May 21 increased by 0.45% to 6.31% in May 21;
- COVID-19 absence continues to reduce and if COVID-19 absence is discounted, in-month absence stood at 5.7%;
- Absence due to anxiety/stress related reasons has remained broadly stable but 35% of absence was related to anxiety and stress;
- The Morriston clinical group had the highest in-month absence in May 2021 at 6.80% and facilities were the highest non-clinical group at 10.70%;
- Admin Staff sickness levels stood at 2.5% and working from home has been attributed to this improvement;
- Within the areas most effected by sickness changes were being implemented to address and sickness would play in part in the delivery of the annual plan;
- The committee can be assured that were sickness action plans, further scrutiny and better grip and control within the service groups and there was focus on the five hot spot areas;
- There were 16 hotspots within Morriston Service Group but a key focus had been within the Emergency Department where there is 14% sickness level and a number of long term absences. There was now a wellbeing focus in the department;
- Mental Health and Learning Disabilities have piloted counsellor services for staff in which 33 staff had returned to work as a result;
- Within Estates and Facilities, there is a plan to manage sickness is centrally;
- Medical Records; Audit work took place in July 2021, there was an action plan in place to address and improvements have been seen;

#### Staff Health and Wellbeing

- The Occupational Health Consultant service to SBU HB, which historically has been delivered via a Service Line Agreement

from Cwm Taf Morgannwg Health Board ended on the 30<sup>th</sup> June. Agency consultant support was being utilised to bridge the gap;

- From a strategic perspective, there had a number of developments with focus on stress, the delivery of TRIM, train the trainer;
- Additional resource had been requested from charitable funds for further counselling support;
- 50% of referrals to the wellbeing services were nursing staff;
- The Staff Post-Covid Wellbeing Strategy had been developed and included a review consultation with a wide range of stakeholders and was due to Management Board for approval;

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

Tom Crick made reference to the high number of Information Governance errors made in relation to Datix reporting, highlighting how this was a significant issue due to the sensitivity of the work undertaken within the Occupational Health department. Paul Dunning informed that the error had been primarily down to redeployed staff but assured that IG Colleagues had agreed to E-Systems that were now in place which would reduce that error.

In relation to the health board values and the staff absence relating to stress and anxiety, Nuria Zolle queried whether the values aligned with the management support on the ground. It was important for the principles to be embedded within the organisation. Debbie Eytayo advised of the 'Just Culture' initiative planned to be integrated across the organisation address and the aim is that this would provide effective communication tools for management to support staff.

Tom Crick referred to the European Social Fund (ESF) projects and queried whether there was any clarity from a health board perspective on future funding from the UK Community Renewal Fund or the "Shared Prosperity" Fund. Paul Dunning advised that feedback from Welsh Government was unclear at the moment, the Shared Prosperity Fund would likely not be wholly directed by the Welsh Government but this would be accelerated further next year to establish what is available.

Members commented on the commendable work undertaken by the Occupational Health and Wellbeing Service throughout the pandemic.

- Resolved;**
- The content of this paper and appendices were **noted**.
  - The actions that have been taken especially throughout the Covid-19 pandemic as well as the actions we are taking in relation to supporting sickness absence reduction across the Health Board were **noted**.

## 89/21 MEDICAL WORKFORCE BOARD

An update on the Medical Workforce Board was **received** and **noted**.

## 90/21 NURSING AND MIDWIFERY WORKFORCE AND OD UPDATE

An update on key nursing matters within Nursing and Midwifery was **received**.

Christine Williams highlighted the following points;

- This report provided updates to the Workforce & OD Committee on key nursing matters of relevance;
- The Welsh Nursing Care Record (WNCR) had been piloted with Neuro Rehabilitation ward at NPT Hospital and was rolled out across the further 5 wards by June 2021. The implementation of the which is planned for Autumn 2021;
- Enteral Feeding Framework; further work would be undertaken to scope the resource options and costs to implement the framework;
- Nursing Education Funding; the funding was being utilized for the development of the nursing and midwifery Workforce and conversation were underway with Swansea University to utilize further;
- The health board had a total 269 band 5 nursing vacancies and this was variable month on month;
- Overseas nurse recruitment – 25 nurses have been interviews and offered posts and interviews are continuing;
- Have direct access applicants from overseas, with an increase in applicants from Nigeria and African countries for posts in Morriston Hospital;
- Student Streamlining - 138 students have accepted posts to commence in September 2021.
- ‘Grow your Own’ initiatives are still in place for health care support workers;
- In relation to turnover, exit interviews were being undertaken to understand and inform retention strategies.

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

Jackie Davies queried whether there had been many applicants from student streamlining via NHS Jobs. Christine Williams undertook to enquire

and provide Jackie Davies with an update. Joanne Gubbings advised that Shared Services have provided data on the number of applicants and there had been a reduction in the number of applicants on NHS Jobs overall.

Tom Crick queried the risk exposure within some nursing specialisms. Christine Williams advised that the specialist areas overall had more applications. The issue within the health board was within general nursing particularly within Care of the Elderly, Medicine and Singleton Hospital. A key hotspot within the health board in terms of a whole staff group, was within Theatres and solutions were in train to address this issue.

Tom Crick sought further information on the implementation of the WNCR. Christine Williams advised that this was initiative for ABMU initially and had been picked up on a national basis therefore there had been slower progress than anticipated in getting the framework in place. There were key standards and a national working group, as well as resource within Digital to implement the programme. Tom Crick commented that this was a good development to move the health board forward and also towards a more digital health and social care system overall.

**Resolved;** The report be **noted**.

#### **91/21            WORKFORCE AND DELIVERY FORUM**

An update on the Workforce and Delivery Forum was **received** and **noted**.

#### **92/21            THERAPIES AND HEALTH SCIENCE WORKFORCE AND OD KEY ISSUES REPORT**

The Therapies and Health Science Workforce and OD Key Issues Report was **received**.

In introducing the report, Christine Morrell highlighted the following points:

In discussion the following points were raised:

- The report brings together key workforce issues and risks relating to the Therapy and Health Science professions;
- There was work underway to develop the Therapies and Health Science Workforce and OD Group which had a quarterly cyclical work plan to include all the professionals;
- In relation to the pre-registration education tender, Cardiff University were successful for the education contract for Physiotherapy and Diagnostic Radiography;

- The Occupational Therapy and Operating Department Practitioner (ODP) degree will be delivered by Swansea University going forward which will provide good opportunities for the health board;
- Recruitment principles for Allied Health Professionals (AHP) and Healthcare Scientists (HCS) delivery of the bursary programme and workforce objectives were to be developed and agreed in partnership with HEIW and Shared Services;
- An examination of the utilisation of (AHP) and HCS) agency staff was undertaken and the two professional groups with high locum utilisation due to difficulty in recruitment were Bio Medical Science and Cardiac physiology;
- Plans were in development to address the issue via 'Grow your Own' and local and all-Wales initiatives;

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

In relation to Professional regulation, registration and referrals, Tom Crick queried how referrals to professional bodies were recorded and monitored across the professions. Christine Morrell advised that the structure had been strengthened in terms of professional accountability and it was a requirement for all Heads to report them corporately. One issue to highlight was the slow processes within the professional bodies which does cause delay. She assured that there was now a central record of cases and all are followed through. Tom Crick acknowledged the difficulty and lengthy processes involved. He added that there should be policy in place which ensures the same approach is taken across all registered professionals.

Tom Crick made reference to the recruitment difficulties within Nutrition and Dietetics and queried whether this was difficult across Wales. Christine Morrell informed it was, particularly within the specialist posts. She advised that a policy was required for good rotation and training packages and this was part of ongoing recruitment plan.

**Resolved:** - The report was **noted**.

**93/21 ANY OTHER BUSINESS**

There was none.

**94/21 ITEMS TO REFER TO OTHER COMMITTEES**

There were no items to refer to other committees.

95/21

**DATE OF NEXT MEETING**

The date of the next meeting was noted as the **12<sup>th</sup> October 2021.**