

# CARING FOR PEOPLE, KEEPING PEOPLE WELL

A PERSON'S CHANCE OF LEADING A HEALTHY LIFE IS THE SAME WHEREVER THEY LIVE AND WHOEVER THEY ARE



## 7.3 Workforce and Organisational Development

### 7.3.1 Workforce and Organisational Development Framework

The organisation's workforce delivery plan supporting our overall aim of "caring for people, keeping people well" is embedded throughout the IMTP due to the *integrated* nature of the Plan. It is based upon five core objectives demonstrated in the following diagram and aligned to the Prudent Healthcare principles, *A Healthier Wales* and the organisation's ten year strategy, *Shaping Our Future Wellbeing 2015-25*.



**The vision is to improve delivery of outcomes year on year moving through levels of achievement**

*Improving* → *Established* → *Advanced* → *Leading Practice*

Opportunities, risks, constraints and benefits have been considered in the development of these outcome deliverables.

### **7.3.2 Workforce Risk, Planning Assumptions and Priorities**

Informing the development of the Workforce and OD Framework and Delivery Plan are risks and assumptions which include the following:

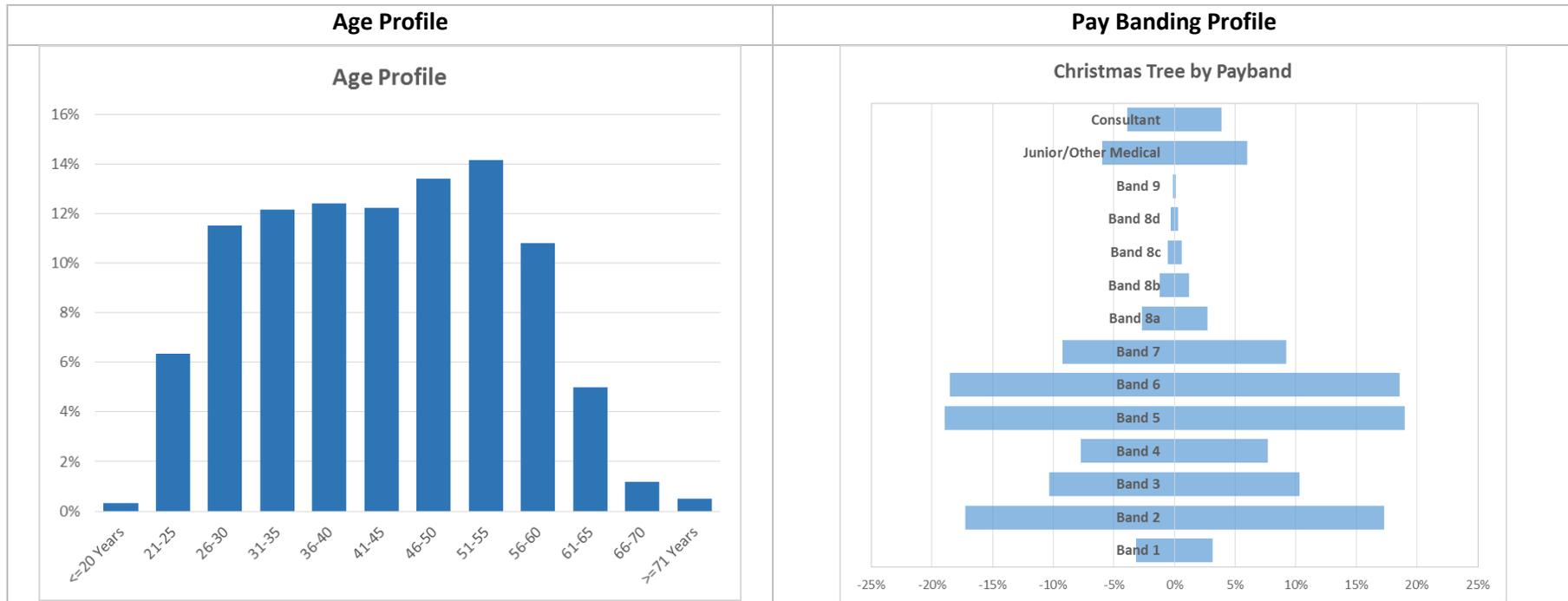
- Increasing need to innovate and develop a future workforce; new ways of working and workforce transformational change
- Increasing need to engage and motivate workforce as demand for service increase
- Increasing need to develop organisational leadership and management skills
- Increasing need to embrace new technology
- Increasing need for accurate workforce information and analysis
  
- Continuing requirement to reduce workforce cost to underpin financial framework
- Continuing requirement to eliminate and reduce any unnecessary cost e.g., variable pay and agency cost
- Ensure sustainability and recruit to substantive posts to provide continuity and effective clinical care
- Meeting short term capacity requirements, especially in nursing; and need to flex workforce recruitment to support winter pressures and unplanned capacity requirements
  
- Workforce impact and drivers associated with reconfiguration of Acute Services identified in the South Wales Programme
- Working more closely and in partnership with primary care, local authority and nursing homes to find creative workforce solutions to ensure patients are cared for out of hospital and closer to home

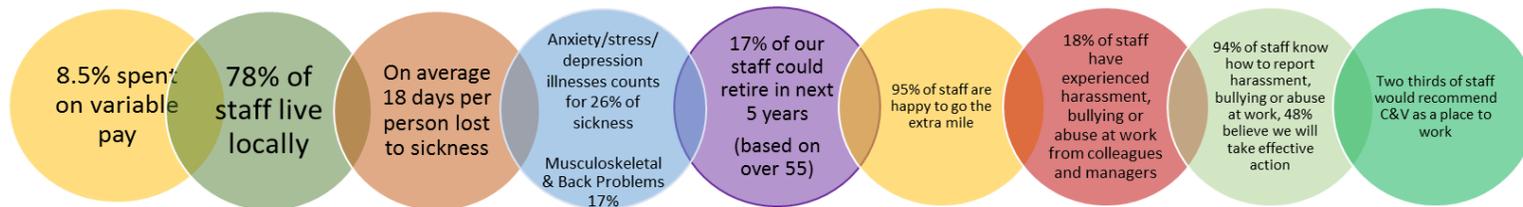
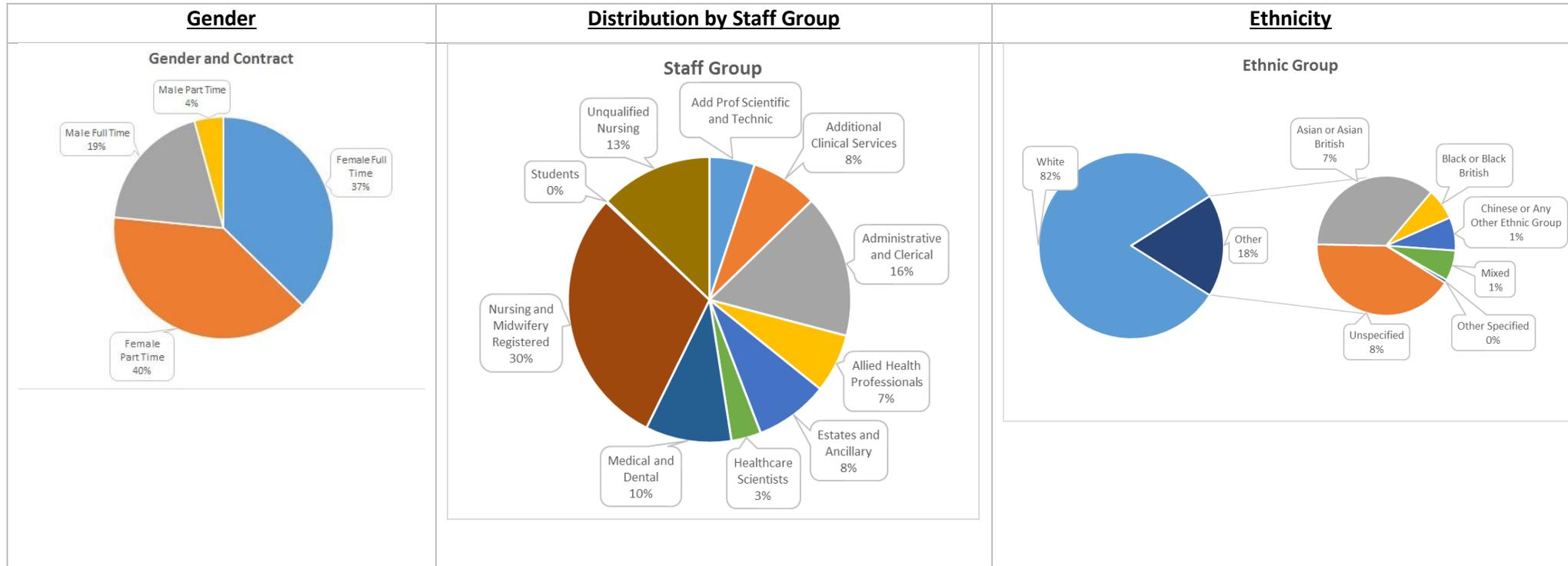
#### **Current Workforce Profile and high level Analysis**

As further context, the charts below indicate the following challenges when determining optimal ways to deploy the current and future workforce and how to consider future supply against the service priorities as laid out within this Plan:

- The UHB has an aging workforce similar to the all-Wales position with the largest age categories being aged 46-50 years and 51-55 years (approximately 2000 staff in each of these categories). The impact of employees retiring from service critical areas is key in Clinical Boards undertaking local workforce planning.
- The largest grade categories are staff in Agenda for Change Bands 2, 5 and 6. The UHB has made a shift in the skill mix and overall shape of its “Xmas Tree” over recent years as in 2012 the highest percentage of workforce was in band 6. Continually reviewing skill mix and new ways of working is important in ensuring adequate future supply of skills in the right place and grade.

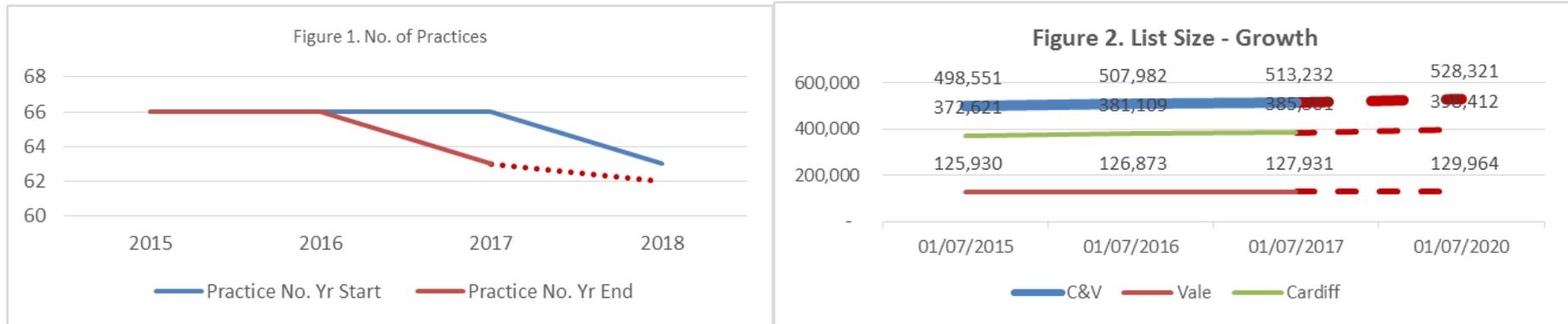
- The majority of the workforce is female (77%) with an almost even split in this group of full-time (37%) and part-time working (39%). Use of our employment policies, such as the Flexible Working policy, is crucial to retaining talent and keeping staff engaged.
- The majority of the workforce is white (82%) with 11% in Black and Minority Ethnic categories and 7% not stated. The Strategic Equality Plan has a number of actions to continue review of our workforce in this regard to ensure it strives to reflect the local population where relevant e.g. in recruiting practices.
- The nursing and midwifery registered staff and unqualified nursing staff make up just over 43% of the total workforce. Given there is a recognised national shortage of registered nurses, the UHB has made nurse sustainability a high priority on its workforce agenda as detailed later in the plan.
- The capture of equality data is reported as 63% in September 2018.





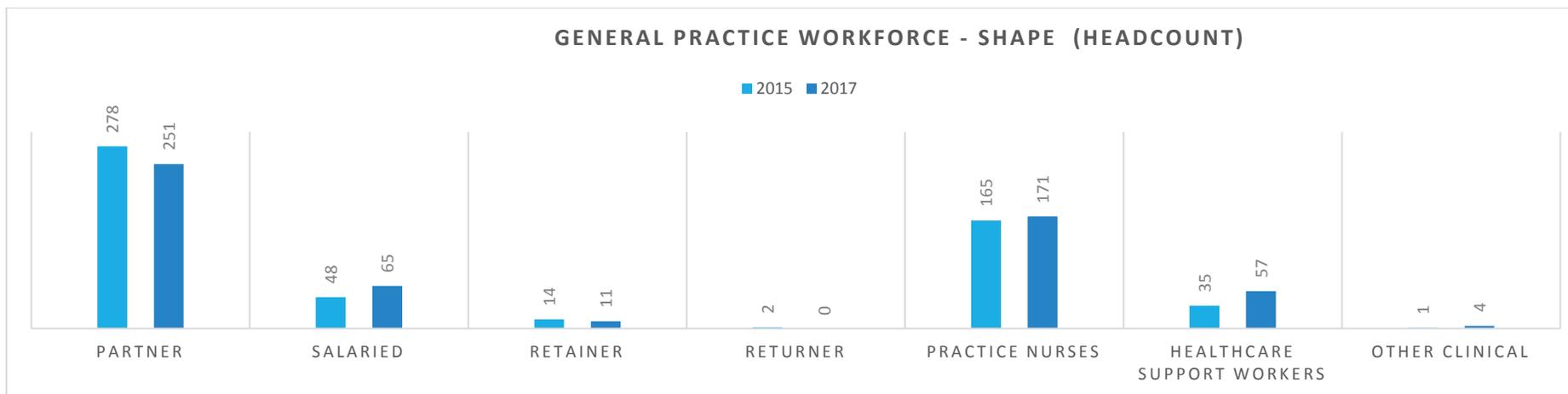
## Primary Care Workforce Profile:

Sustainability of Primary Care services remains a key priority for the Health Board. With the knowledge that General Practice is a less attractive career choice due to the increasing workload, increasing demands and the financial challenge and risks associated with the traditional partnership model a 'basket' of support was outlined to identify proactive support/options available to all GP Practices. This includes the Merger Discretionary Payment protocol as a tool to support practices to merge, as an alternative to handing the contract back. 3 Mergers between neighbouring practices/business have taken place to date, with Organisational Development support provided to join up teams and processes both pre and post-merger.



Current profiling confirms that the practice population for Cardiff and Vale will increase in-line with growth expected as part of Local Development Plans and by 2020 the population is likely to increase. The area predicted to be impacted most is within North West Locality, which includes the Cardiff North, Cardiff South West and Cardiff West Cluster areas.

Profiling based on practice development plans, and validated workforce submissions in 2017 provides a baseline to make comparisons on the changing shape of the Medical and Clinical workforce:

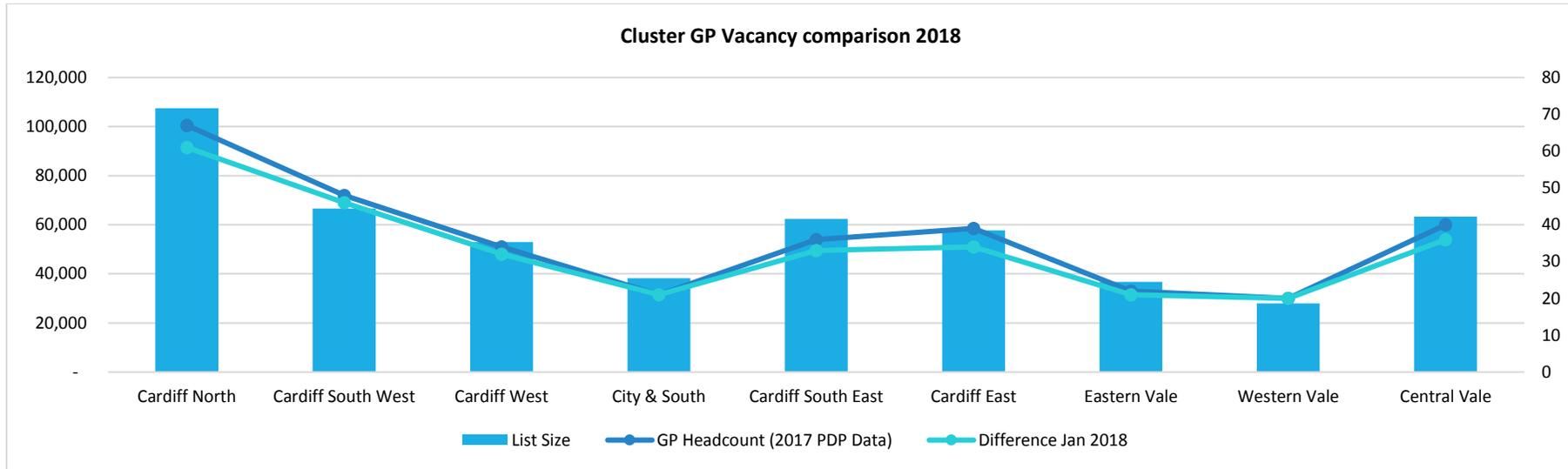


Further analysis demonstrates the change by Locality Area as follows:

Locality Area	Role/ Year	2015				2017			
		2015	2017	Difference	% inc /- dec	2015	2017	Difference	% inc /- dec
Cardiff North West	Partner	124	119	-5	-4.03	78	66	-12	-15.38
	Salaried	20	21	1	5.00	20	26	6	30.00
	Retainer	6	5	-1	-16.67	5	4	-1	-20.00
	Returner	0	0	0		2	0	-2	-100.00
	Practice Nurses	73	70	-3	-4.11	50	50	0	0.00
	Healthcare Support Workers	18	28	10	55.56	10	14	4	40.00
	Other Clinical	1	1	0	0.00	0	0	0	
Cardiff South & East	Partner	76	63	-13	-17.11	76	63	-13	-17.11
	Salaried	8	17	9	112.50	8	17	9	112.50
	Retainer	3	2	-1	-33.33	3	2	-1	-33.33
	Returner	0	0	0		0	0	0	
	Practice Nurses	42	49	7	16.67	42	49	7	16.67
	Healthcare Support Workers	7	10	3	42.86	7	10	3	42.86
	Other Clinical	0	3	3		0	3	3	
Vale	Partner	76	63	-13	-17.11	76	63	-13	-17.11
	Salaried	8	17	9	112.50	8	17	9	112.50
	Retainer	3	2	-1	-33.33	3	2	-1	-33.33
	Returner	0	0	0		0	0	0	
	Practice Nurses	42	49	7	16.67	42	49	7	16.67
	Healthcare Support Workers	7	10	3	42.86	7	10	3	42.86
	Other Clinical	0	3	3		0	3	3	

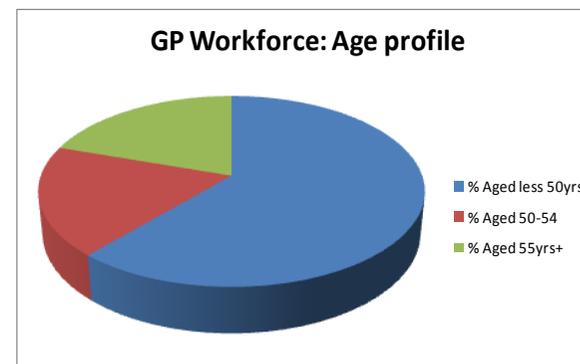
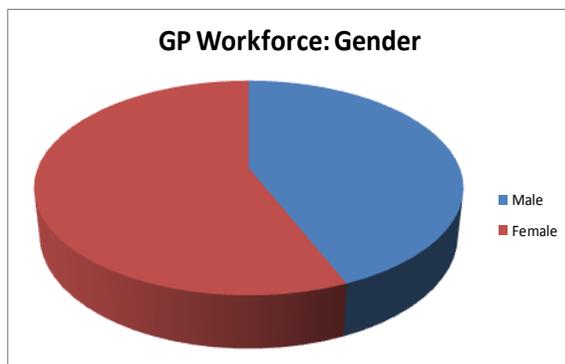
In the absence of a Quality Outcomes Framework for 2018 the annual practice development submission, where workforce data is extracted, is no longer a contractual requirement for practices, therefore we have been unable to extend the analysis beyond 2017 at this time.

In January 2018 the Clinical Board developed a GP recruitment and retention project group, working with members of the LMC, whose primary purpose would be to provide expertise and recommendations to enable and support the flow of GPs into Primary Care practices across Cardiff and Vale. The Project team needed to create a baseline understanding to support evaluation and monitoring of the groups work which included surveying practices and GPs who categorise themselves as Locums to understand the scale of the problem. The vacancy position as at January 2018, compared to 2017 was found to be as follows:



Following a Survey undertaken in June this year, 32% responded. Practices have been consistently reporting the growth in status of the GP Locum role, which appears to be becoming comparatively more attractive than partnership or salaried GPs roles.

Further analysis of the GP workforce identifies that 56% are female and 39% of the total GP workforce is aged 50 years and over (20% aged 55 years+) which is in line with national predictions indicating that the GP workforce is becoming increasingly younger and more female. It's also evident that many GP's are working part time hours.



### 7.3.3 Key Priorities within the Objectives of the Framework

Below is a summary of the key priorities within the 5 objectives of the Workforce and Organisational Development Framework.

**TRANSFORMING WORKFORCE**  
 Enable quality, productivity & continuous improvement through innovation

Workforce Transformation is necessary to underpin the achievement of the ten-year vision for the UHB **Shaping Our Future Wellbeing**. This year, our new Workforce & OD Director has been working closely with the Chief Executive and Executive Team to develop plans which enable the mobilisation and engagement of the organisation to transform. As outlined in Chapter 6.2 above, there are 10 Transformation Projects within the Transformation Programme. The workforce enablers are Leadership and Management, Values and Behaviours and Digitally Enabled Workforce.

There are **4 themes** to the UHB’s longer term Workforce Transformation Plan:

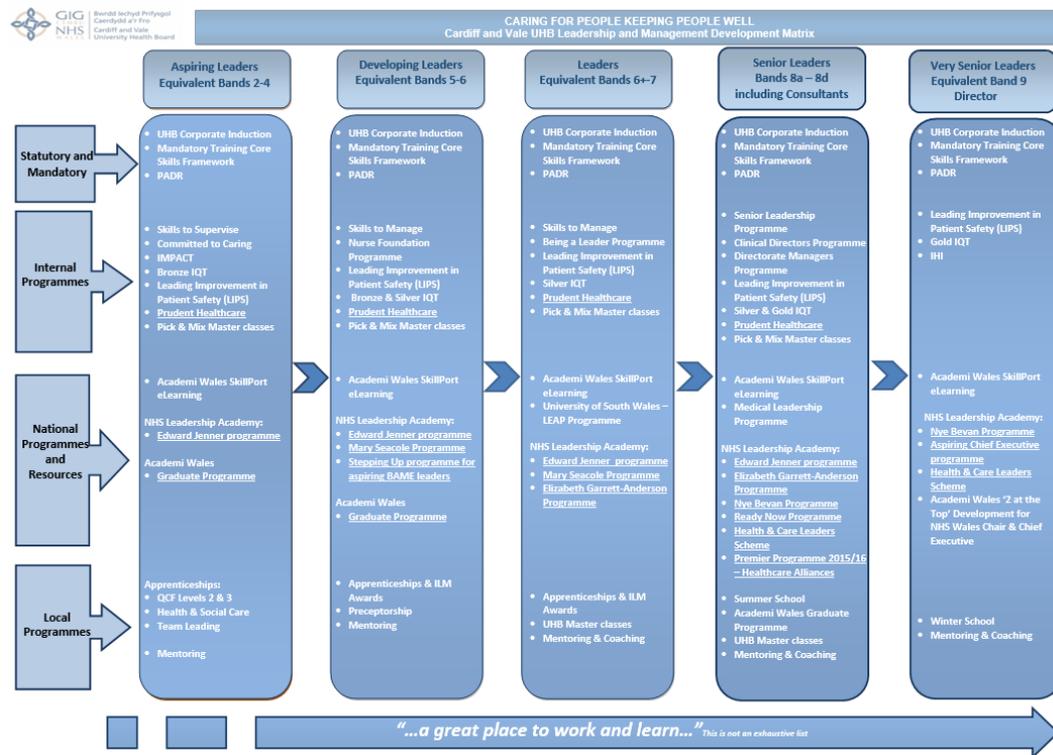
**1. Cultural and Behavioural Change** - *Build, Buy and Borrow*

We will continue to build **internal transformation capability** in 2019/20 to ensure we can **“do it for ourselves”** and reduce reliance and expenditure on external support; integrate transformation principles into all leadership activity; and leverage internal skill and support. We are drawing upon evidence-based practice from other organisations and our internal expertise to build this capability. The use of OD interventions and principles will be key to successful implementation of change in line with the national and international links with our alliancing partners which include strong relationships with **Canterbury integrated health system, New Zealand**; as we consider the learning they have to offer us from developing their integrated, operating model at both a strategic and operational level. For example, being clear about our change model (how change happens in the UHB), in achieving the new ways of working and cultural alignment within and across organisations. In 2019 we will continue to drive the work through the



transformational enablers of the transformational programme building the development of Lean Champions throughout the UHB which includes developing our leaders to change and transform services.

In 2018 the UHB became a member of the **Quest Group**, which allows collaborative working with 15 other high performing Healthcare Trusts in England. The organisations work together on a triple aim of improving patient safety and quality; to be recognised as the employer of choice; and to improve innovation through greater enabled technology. Whilst the UHB's involvement in Quest is in its very formative stages it is apparent that we can benchmark and learn from others, allowing us to introduce and inherit processes other organisations have already benefitted from.



During 2018 the UHB refreshed and reviewed its **Leadership and Management Education Framework**, as described opposite. This review indicated the framework is doing its job and there are a number of embedded programmes now in play to support leadership development at all levels within the UHB. In 2019/20 we will be introducing a new **Leadership and Development Programme for our Top 70 Leaders** to help them embed the **“Cardiff and Vale way”**, focussing on increasing trust and innovation and being more outward looking and reducing bureaucracy.

## **2. Shape of the Workforce and Role Redesign**

### **Optimising roles within Bands 1-4**

Primary Care have a number of action plans in place during 2019 to continue to maximise the skills of all our workforce. Examples include: continuing to define and train all Health Care Support Workers to embed the HCSW Skills and Career Framework and the development of a Band 4 role to release District Nurse Capacity. Nursing HCSWs now have the opportunity to develop their knowledge and skills to undertake a undergraduate nursing degree whilst employed by the UHB. A flexible earn as you learn approach is now provided by two universities to cater to the adult and mental health branch. CD&T are developing the Health Care Support Worker workforce linked to radiology in order to utilise the skills of this workforce more effectively, centred around the needs of the patient.

### **Physician Associates**

The UHB is proactively developing the introduction of Physician Associate role and engaging with senior clinical leaders to introduce this role. The plan in 2019 is to appoint substantive PA posts in Primary Care and work with WEDS to offer clinical placements.

### **Advanced Practice**

The UHB has a significant number of staff who evidence working at the Advanced Practice (AP) level and Nursing Advanced Practitioner (AP) roles are well established within the majority of clinical boards and new trainee APs are currently being developed in Children and Women, Medicine, PCIC and Specialist Services. Work is being undertaken in Mental Health to support the development of new AP roles, particularly for the community. AP roles are also being developed in Allied Health Professions, for example First Contact Physiotherapists who are being appointed to work in GP practices and provide patient care instead of GPs. An inter-professional Advanced Practice Working Group has been established to provide strategic drive and support for this agenda and to standardise the approach to the development and governance of AP roles across the UHB. It is widely known that the AP workforce: support the provision of expert, holistic patient care; increase capacity, consistency and capability of clinical teams; and transform patient pathways. In meeting all four pillars of the Advanced Practice Framework for Wales APs are also senior clinical leaders making a significant contribution to service improvement, research and the education of the clinical workforce.

### 3. Cross Cutting Transformation across the UHB

#### Primary Care Workforce Plan

The UHB has put in place dedicated Primary Care Workforce Planning and OD expertise which provide advice to the 62 GP practices and core Sustainability Team; also working directly with Clusters and practices supporting the delivery of actions aligned to the Primary Care Plan for Wales. The Team have identified a three year Workforce operating model with significant progress having been achieved during 2018 and further detailed action plans in place for 2019:



#### Cluster Development

All Clusters are encouraged to develop a terms of reference, outlining their vision, purpose, membership and decision making criteria to improve cluster governance. All Clusters who have invested funds in the development of roles/models have been supported to evaluate their investments to date. Using a logic model of evaluation the purpose of the evaluations across Pharmacists and Frailty/Older Peoples nurses has been to establish;

- Scope of role; Lessons learnt; Outcomes and Measures; Engagement and integration; Education and skills; Communication, including feedback, objective/priority settings

In 2019 the evaluation will be used to inform the future development of the roles/services and outcomes in line with a 'Once for Wales' for approach. In addition the lessons learnt from our experiences and investments to date will be used to inform the development of the **Partnership Agreement** between the Health Board and Clusters as part of the MSK/MH roll out. It will also inform our understanding of the **education and training requirements** of the emerging MDT roles working with practices/clusters.

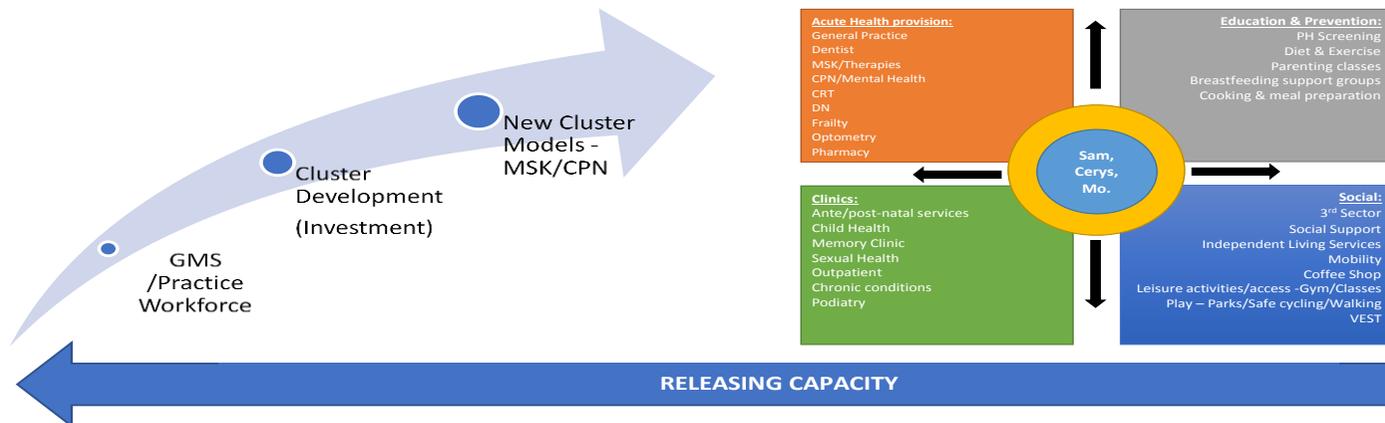
The leadership capacity and capability of Cluster Leads will need to be considered in light of the Cluster Governance ‘ A good practice guide’. A Cluster Leads workshop was held in October 2018 and further work will be undertaken in 2019 to create an organisational development plan to support the continued development and evolution of their cluster in line with the good practice framework.

The Workforce Planning and OD Manager continues to feed into the Public Health Wales Cluster development group. In addition the Workforce Planning and OD Manager has co-facilitated a South Wales Cluster Leadership Programme ‘**Leading with Purpose, Passion and Perseverance**’ with Academi Wales. The programme is designed to support Cluster Leads to strengthen their leadership contribution to improving care delivery for patient and clients. The programme framework also provides a peer support mechanism through Action Learning, enabling personal and service change and promoting quality care in line with Prudent Principles. To date two Cluster Leads in Cardiff and Vale have experienced this programme, with a celebration of learning and success planned for December 2018; as well as gaining the skills to be able to run the programme locally.

**Locality/Cluster Wellbeing Hub Development:**

North West Locality have actively engaged all partners in a series of workshops to date, with a further workshop planned for November 2018 as part of the Shaping our Future Wellbeing Strategy. The focus and the priority of the work is the development of the wellbeing Hub within the Cardiff West Cluster area. Workshops have been designed collaboratively with stakeholders using the population health needs assessment to ensure services are designed, modelled and delivered around the patient to identify a range of scenarios/options to inform decision making and planning.

The following diagram illustrates the journey towards sustainability based on the engagement and inclusion of partners to date.



**OOH:**

Significant progress has been made supporting the sustainability of OOH services across Cardiff and Vale. The multi-disciplinary model has been shared as a case study for inclusion in the Primary Care Compendium of roles/models demonstrating the service successes through the introduction of clinical practitioners, with a nurse or Paramedic registration, as an alternative where GP cover has been continually challenging. Recent demand and capacity modelling has supported the creation of a workforce plan and service model of the future which includes the continued development of the multi-disciplinary team focused on skills.

**District Nursing:**

The creation of a Novice to Expert pathway for District Nurses has been a welcomed tool to support the education and development needs of the workforce in line with the DN principles, the interim guidance on staffing principles, as a result of Nurse Staffing Levels (Wales) Act 2016. An aging nurse workforce continues to be an issue within our District Nursing service however succession planning and talent development is ongoing to ensure the service continues to meet the SPQ requirements through the identification of staff and funding requirements to expedite the number of staff achieving SPQ over the next 2years.

The nursing role continues to be physically demanding with increasing patient complexity and whilst work continues to articulate and describe levels of patient acuity, the establishment is likely to remain unchanged at this time, however further modelling of the workforce will be needed once this is available. In addition the service will explore the role of a level 4 Healthcare Support Worker whilst also considering the career development pathways from unregistered to registered workforce in line with developments across Wales as part of ongoing succession plans and career aspirations of staff.

Further aspirations include the journey towards a 'Community Nurse' which would incorporate the nursing provision currently situated in separate services (CRT Nurse, Frailty Nurse & DN Nurse) taking account of the learning from Community Nursing Pilots across Wales. Further workforce planning activities are to include specialist areas of work including Acute Response (ART), Continence and Nurse Assessor Teams.

**Department of Sexual Health:**

The review of sexual health services in Wales (2017) has prompted the development of a workforce plan for the service. Historically recruitment to specialist nursing roles has been challenging, however an education and competence pathway is required to provide assurance that the Health Board is continuing to train and develop staff to meet the needs of the population and increased capacity for more drop in clinics and bespoke services (principle 1).

**Prison Services:**

Health Boards in Wales are responsible for the funding of Prison Healthcare services. A review of the workforce employed in provision of prison healthcare has not been undertaken since their transfer to the Health Board in 2013 and it is our intention to

undertake a review in 2019. In the absence of a National Strategy for Prison Healthcare recruitment and retention of staff remains a challenge due to the existence of a flat career structure, with limited opportunities for growth and development. A workforce plan for Prison Healthcare will provide recognition of roles; education, training requirements and competencies; a flexible workforce able to meet the population needs.



### **A Healthier Wales – Regional Partnership Board Proposal**

“Me, My Home, My Community” ambition for Cardiff and the Vale of Glamorgan provides for significant opportunity. Engaging staff and partners will be critical to its success, in addition to the development of integrated workforce plans across our health and social care system.

### **Diabetic Specialist Nursing Development**

The UHB continues to progress its strategies to build the capacity and experience of the nursing specialists in order to delivering better access to diabetic services. The proposals supports the cluster plans on a number of levels, including patient access, chronic conditions management and the provision of a service in the local community.

### **Regional Collaboration/Clinical Change Programme**

Formal Joint Regional Planning and Delivery Committees are in place for the South Central and South East Region (Cwm Taf, Cardiff and Vale and Aneurin Bevan, with representation from ABMU for the Bridgend population) and the South West Region (ABMU and Hywel Dda). The workforce transformation required to support these change programmes is embedded within each of the two streams and no longer sits alone. These include Vascular; ENT; Paediatrics, Obstetrics, Neonatal and Gynaecology (PONG); and Regional Priority programmes covering Orthopaedics, Ophthalmology and Diagnostics.

As part of its role in the **Cardiff and Vale Regional Partnership Board**, the UHB participated in a Workforce Planning Development Session. The purpose of this was to review, in partnership, the strategic workforce context across the health and social care region, noting the working already taking place in each of the 3 areas at a local, regional and national level and considering further strategic priorities and action plans. Coming out of this, last year, the senior leadership teams in Workforce & OD in the UHB and Cardiff Council met informally in order to develop working relationships and share practice across sectors. This will continue to grow in 2019.

**Workforce systems - enhanced ESR Hire to Retire** – the UHB has completed the rollout of ESR Manager Self-Service and has successfully moved all substantive staff to on-line payslips. Paper-payslips are still issued to weekly paid workers however in 2019 this will be addressed. During 2019/20 our priorities for further developments are:

- Auditing self-service usage
- Continuing the implementation of the national Hire to Retire Plan locally
- Migration to the occupational health bi-directional interface of the Cohort and ESR system
- Improving and simplifying further the learning and education self-service functionality for users
- Continuing to raise awareness of the ESR Portal functionality which enables our staff and management to access ESR remotely on PC's, laptops and smart phones.
- Continuing to provide bespoke training and education to maximise usage and efficiency

#### 4. Transformation within Professions and Standards

##### Apprenticeships



In 2018 the UHB launched a new **Apprenticeship Programme** to underpin our commitment to the *Well-being of Future Generations Act; a prosperous Wales*. The launch included signing the Cardiff Commitment Pledge. This investment in apprenticeships, internships placements and graduate opportunities remains a key development in our workforce plan for 2019/20. Our intention is to develop 100 entry level apprenticeships in 2019/20 and also continue to upskill our current workforce with opportunities to study apprenticeship courses. The pledge aims to ensure that all young people in Cardiff are provided with the support, choices and opportunities to make a successful transition from compulsory schooling to ongoing education, training and the world of work, and are enabled to reach their full potential.

To support this we are continuing to support the widening access agenda by attending Careers Events and visiting schools across Cardiff and Vale to publicise the Academy and the varied roles and opportunities that are available in the Health Board. Promoting the UHB as a 'great place to work and learn' and to #TRAINWORKLIVE in Wales.

**Modernising Pharmacy Careers** - this work has been transitioned into the Pharmacy Deanery of Health Education and Improvement Wales. The UHB is embracing the pharmacy workforce changes required to support the vision in Healthier Wales, initially by ensuring that all pre-registration training is delivered across primary community and secondary care, from 2019 intake. Further pharmacy workforce development (from early 2020) will include cross sector career pathways for pharmacists, pharmacy technicians and support staff wherever appropriate, including Foundation and Advanced practice and supportive job planning to reflect the needs of patients, the public and healthcare in Wales.

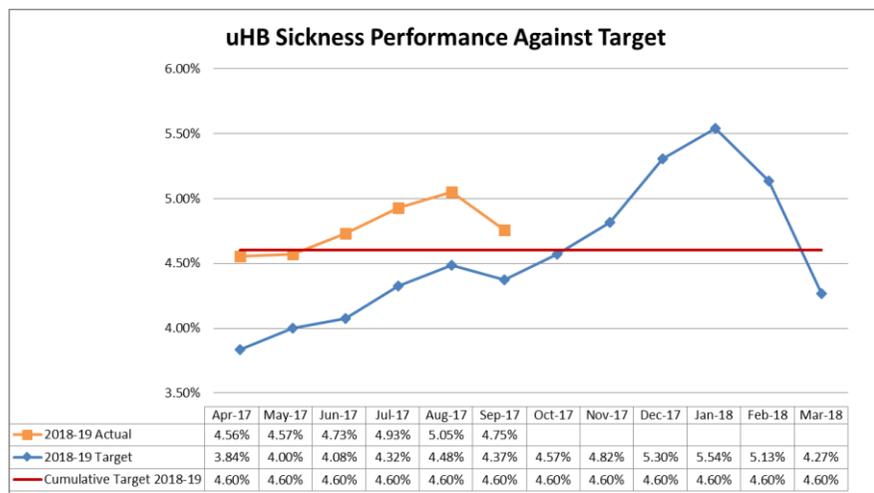
**Modernising Scientific Careers (MSC)** - the UHB continues to develop and implement service and workforce plans in Cellular Pathology, and Laboratory Genetics. Genetics staff (Clinical Scientists, Bioinformaticians, Technologists) receive further training to meet the increasing demands of the growing Genomic service. It is also progressing analogous integrated workforce planning in Radiology which is outside MSC. This has resulted in new structures and skill mix to support 7 day working and change in service pathways. The UHB will develop plans to respond to the challenges and opportunities for healthcare science and healthcare scientist as described in “Healthcare Science in NHS Wales – Looking Forward”. Non-Genetic healthcare professionals (across Wales) to be trained in the delivery of clinical Genomic Medicine services and how they are main streamed into routine clinical practice.

**National Standards of Cleanliness, Nutrition and Fluid intake** – a structured refresher training and assessment programme is ongoing within Operational Services for staff to undertake NVQ’s for cleaning standards and customer skills; IQT, dignity and respect and customer communication.

## EFFICIENT WORKFORCE

### Achieve target workforce metrics (KPI’s)

Delivering against the UHB’s **Workforce Metrics**; ensuring the total pay-bill remains within budget; reducing temporary agency and locum expenditure; continued reduction of sickness absence and promotion of staff wellbeing remain key priorities for the UHB in **2019**. The UHB has made significant improvements in many of these areas but our challenge of reducing expensive high premium agency costs remains a focus.



Key Performance Indicator	2017-18 Outturn	YTD	Monthly Actual - Sep-18	2018-19 target	2019-20 target	2020-21 target	2021-22 target
1. Sickness Absence Rate	5.07%	5.13%	4.75%	4.60%	4.60%	4.40%	4.40%
1a. YTD Sickness Absence Rate (Fin year)	5.07%	4.77%	4.75%	4.60%			
2. Job Plan Compliance	50.80%	50.15%	50.15%	85.00%			
3. Voluntary Resignation Turnover Rate (WTE)	6.34%	6.63%	6.63%	6.34%			
4. Pay Bill Over/Underspend	-0.43%	-0.10%	-0.44%	Underspend			
5. Variable Pay Rate	8.06%	8.52%	8.54%	Improve			
6. Actual (Contracted) WTE	12738.43	12718.97	12718.97	12726.00			
7. Fire Safety Mandatory Training Rate	65.32%	66.35%	66.35%	85.00%			
8. PADR Rate	57.19%	57.93%	57.93%	85.00%			

The financial year to date Sickness Absence figure to September 2018 is 4.77%. The cumulative sickness absence rate for the 12-month rolling period to September 2018 is 5.13%. The 12-month cumulative sickness rate for the UHB has been at or around the same rate since April 2018. The strategic action plan for **improving staff health and wellbeing** is described within the Engaged Workforce section.

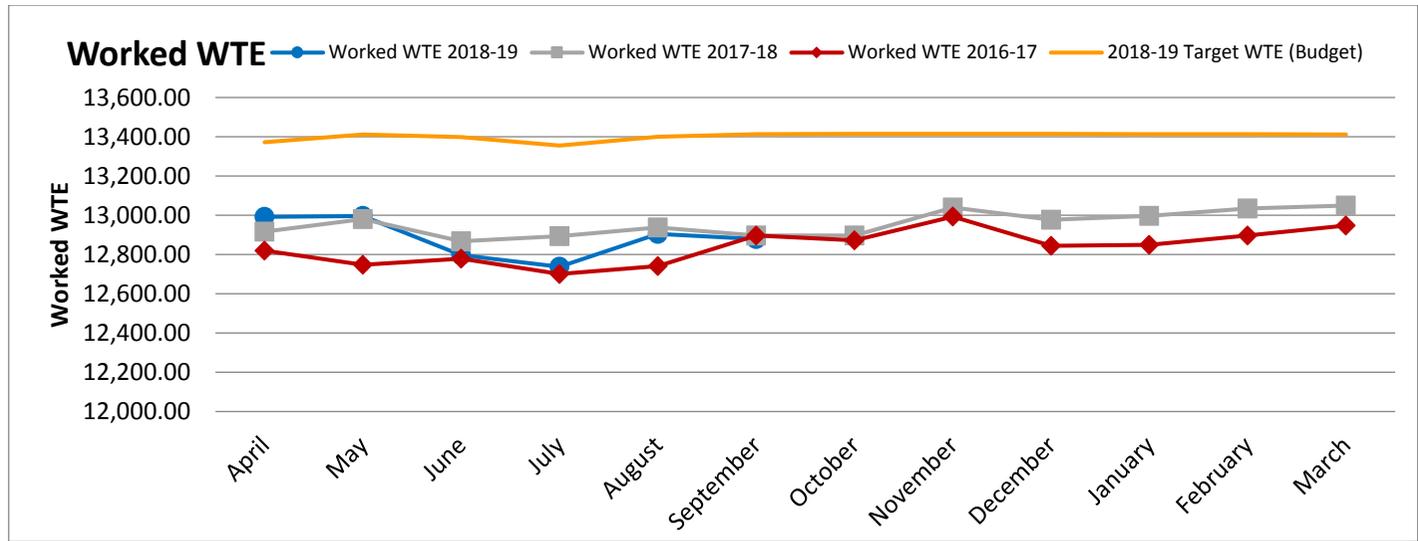
Table: monthly sickness rates 2018/19 compared to 4.60% target

Table: NHS Wales Absence Benchmarking (NHS iView data June 2018)

	Headcount	Contracted FTE	12-Month Cumulative Sickness
ABMU	15,810	13,835	5.90%
Aneurin Bevan			
University LHB	13,095	11,180	5.19%
Betsi Cadwaladr	17,545	15,085	4.86%
Cardiff & Vale	14,465	12,670	5.14%
Cwm Taf	8,175	7,185	5.44%

Hywel Dda	9,510	8,220	5.05%
Powys	2,125	1,725	4.66%
Public Health			
Wales	1,770	1,570	3.92%
Velindre	3,875	3,560	4.00%
Welsh Ambulance Services	3,305	3,085	7.32%
NHS Wales	89,555	78,115	5.24%

**Workforce costs** have been tightly controlled during 2018/19, seeing a significant reduction in variable pay and expensive agency costs. This is illustrated by a cumulative month 6 budget underspend of £0.289m (0.10%).



The focus in 2019/20 will be to continue to drive these unnecessary costs out to ensure an affordable and sustainable pay-bill. Clinical Boards and corporate functions continue to refine their workforce saving opportunities, controlling vacancies, temporary spend, skill mix, sickness absence costs and alternative ways of working. Reducing UHB wide workforce costs forms part of the UHB's tactical efficiency savings in 2019/20 and is being driven through the Nursing Productivity Group, Medical Productivity Group, Workforce Productivity Group, that feed into the Cross Cutting Steering Board.

Last year Executive Directors undertook a review of corporate administrative and management functions. A 10% cost challenge was achieved. Further reviews are being undertaken in Clinical Boards to consider administration and management structures.

Following the 2018 Pay Deal within NHS Wales, **Band 1** has been closed to new entrants from 1 December 2018. During 2019 work will be undertaken in partnership with our trade unions to review roles and upskill roles from Band 1 to Band 2.

The appraisal process and documentation is being thoroughly reviewed due to **the PADR compliance** remaining static at around 56-60% for many years. The process will be aligned with the talent management process and fundamentally this new approach will enhance the staff experience and improve the career conversation. A task and finish group has been established to develop the material in collaboration with our staff; ready for implementation of the new approach in 2019.

**SUSTAINABLE WORKFORCE**  
**Ensure the right people, in the right roles, in the right place, at the right time.**

Ensuring **sustainability** of current and future workforce supply, especially in nursing and medical roles, remains a priority for the UHB in 2019 and beyond. Specific actions identified within the plan are: deliver Project 95% and sustain Project Switchover; continue to deliver Medical Training Initiative (MTI) strategy; monitor the implementation of the Welsh Government Agency and Locum Circular, recruit hard to fill vacancies; develop talent management and succession planning for senior management posts.

**Project 95%** has held a number of very successful recruitment campaigns in 2018 and continues to fill substantive nursing posts. Recent work has been focussed on the development of a **Nurse Retention Plan** to ensure that when we recruit we also retain our nurses. We are also having great success with our nurse adaptation programmes and have a “waiting list” of people who wish to join these. Further cohorts are planned for 2019.

		ACTUAL	FORECAST (month end position)					
	Combined Band 5 and Band 6 including ODP	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
UHB	Establishment	3564.57	3563.53	3546.09	3546.09	3546.09	3546.09	3546.09
UHB	Forecast Actual	3259.07	3285.74	3305.49	3337.47	3337.65	3328.84	3341.02
UHB	Forecast Vacancy	305.50	277.79	240.60	208.62	208.44	217.26	205.07
UHB	%	91%	92%	93%	94%	94%	94%	94%
UHB	Forecast Starters TOTAL	74.89	63.09	46.41	58.64	26.84	17.84	38.84
UHB	Forecast Leavers	35.14	26.66	26.66	26.66	26.66	26.66	26.66

**JOB OF THE WEEK**



**70 Nurses for September**

Saturday 22nd September, 10am - 3pm, Sports and Social Club, UHW.

#TrainWorkLive #CAVJobs

**Band 5 Nurse - various areas**

£22,129 to £28,747 per annum pro rata

Job ref: 001\_NMR237-0718

Contact: Lisa Evans, lisa.evans10@wales.nhs.uk

We have positions in medicine, surgery, acute nursing, theatres, community nursing, the prison service, children's nursing, mental health and many more, so if your preference is intensive care or community nursing or anything in between we have something to offer you. Many of these departments are tertiary services which provide specialist and highly skilled services for the wider population of Wales.

**Project Switchover** has continued to sustain its position of eradicating 100% off contract agency usage.

**Nurse Staffing Levels (Wales) Act 2016** – 25B, C and E commenced in April 2018. Guidance has been implemented to enable us to comply with the Act. The Executive team and Clinical Boards are working together to ensure reporting requirements are understood and implemented.

**Medical Locums** remains a priority for the UHB in 2019 and control measures in place and monitored through the established Medical Productivity Project Team, led by the UHB Medical Director are being further enhanced as we implement the Welsh Government Agency and Locum Cap Circular. Each Clinical Board has a detailed action plan and Support Panels are held regularly to review these. Implementing the WG Cap shows that many service areas are holding the rates with the specialty areas of most concern being the Emergency Unit, Paediatric Surgery, Psychiatry and Neuroscience.

**MTI** – in 2019 the UHB is aiming to continue to hire more MTI doctors through the BAPIO initiative.

**Hard to fill vacancies** - As at end of December 2018, there were 4 hard to fill consultant vacancies and 25 hard-to-fill trainee and higher grade HB medical vacancies. Whilst the UHB have had a number of successes in 2018 in filling key roles in Emergency Medicine and Paediatrics, our recruitment strategies continue to be reviewed especially in Medicine, Paediatrics and Psychiatry. Our plans to address other professions include: newly qualified nurses, Sonographers, Radiologists, qualified mechanical and electrical trades, Perfusionists, Cardiac scrub nurses and Advanced Nurse Practitioners.

**Brexit** – during 2019 we will be supporting our staff who require EU settlement by providing them with as much information and guidance as is available. Briefings have been communicated and sent throughout the organisation in readiness for staff to use the pilot scheme during November and December. Further work will be undertaken to support staff and to improve our reporting of EU nationality on ESR.

## **CAPABLE WORKFORCE**

**Meet learning & leadership skills needs through delivery of quality training & development.**

Investing in our workforce to build capability and capacity is central to the UHB's ambition to be a **Great Place to Work and Learn**. Much of this is coordinated through the Learning, Education and Development Department, working collaboratively with Clinical Boards and Executive Departments.

**Mandatory Training** compliance is monitored and reported monthly to ensure we are moving towards 85% compliance target. During 2018/19 the ESR system was utilised to develop a training needs analysis for all level 1 awareness raising mandatory

training. This has replaced the previous blanket approach and now provides a system for staff to identify the modules and refresher periods they are required to undertake, deemed essential for their role. In 2019 the same approach is being adopted for level 2 and 3 mandatory training which, again, will identify the roles that require the relevant training, therefore avoiding duplication and unnecessary time undertaking training not relevant to role.

**Performance management and talent development** are integral to our appraisal, recruitment and retention plans for 2019/20.

We are undertaking a Pilot Programme with invited Managers (clinical and non-clinical) to form a Talent Management Community of Practice over 6 months during 2018/19. An action plan based on national work on talent and succession planning will ensure our local plan draws on best practice and an early indication of how the 9 Box Grid is developing is outlined below. The group will tease out this tool to enable the Career Conversation with individual members of staff. Areas of focus are: recruiting talent; identifying and retaining talent; deploying talent; and succession planning. Outcomes will include: a values-based recruitment process; a promotional plan for the UHB; an increase in our graduate-management scheme places; a post-graduate scheme; a talent-management tool for use across all Clinical Boards and Corporate



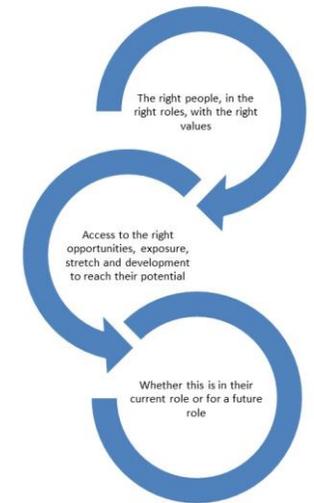
Department; a bespoke programme of development for those identified through the talent management process; and a career-pathway brochure. Benefits will be identified through a reduction in hard-to-fill posts and reduction in

expenditure on interim staffing arrangements.

	Partially meets expectations / Needs Development	Meets expectations	Exceeds expectations
Ready Now	<b>TRANSITION EMPLOYEE</b> High potential though underperforming, may be in wrong job / manager or new to role <i>(needs support)</i> DEVELOP	<b>FUTURE POTENTIAL</b> High potential, capacity for key roles, strong, valued contributor <i>(recognise and develop)</i> STRETCH / DEVELOP	<b>ROLE MODEL</b> High potential to go further <i>(reward, recognise and promote)</i> STRETCH
Developing Talent, Ready Soon	<b>DEVELOPING GENERALIST</b> Potential for some growth, Needs stretching, some under performance <i>(provide coaching)</i> OBSERVE	<b>CORE EMPLOYEE</b> Solid and adaptable <i>(motivate, engage and reward)</i> DEVELOP	<b>GROWTH EMPLOYEE</b> Pivotal and flexible, strong contributor <i>(challenge, reward, grow and motivate)</i> STRETCH / DEVELOP
Shows Promise	<b>DEVELOPMENT ROLE</b> Has reached job potential and is not meeting objectives / behaviours <i>(Support, manage)</i> OBSERVE	<b>FUTURE PROFESSIONAL</b> Reliable performer with potential in current role, specialised, expert <i>(engage, focus, motivate)</i> OBSERVE	<b>TRUSTED PROFESSIONAL</b> Specialised, expert, reached career potential <i>(retain, reward, encourage, mentoring others)</i> DEVELOP

Leadership and Management skills development is a key focus in 2019/20 as we continue to invest in development to build **leadership capability**. In 2018, the leadership development offer in the organisation was reviewed in line with the UHB Strategy and renewed transformation programme. The focus has been to define the skills and behaviours that the organisation wants to see in our leaders, against the NHS Leadership Framework, and background from recent leadership theory. The focus of our leadership development at all levels is on networking, supporting each other and stimulating leaders to solicit new ideas and innovative solutions from each other and their teams and encouraging them to present ideas that are different from their own.

A leadership programme for Clinical Directors is now embedded into the suite of leadership programmes offered, designed partially in response to insights from the Medical Engagement Survey. The leadership pathway for all roles will be mapped and accessibility to programmes increased. We will also participate actively in the development of **public sector partnership leadership programmes** through our involvement in the Public Services Board.



**Nurse capability:** A 'Nursing and Midwifery Education and Development Framework' is under development to support nurse progression through career pathways. Newly registered nurses are supported through an innovative Nurse Preceptorship Programme (NPP) for their first 12 months post registration. This programme is currently under review and a new programme will be tested in 2019/20. Additional induction pathways are being developed to support the acquisition of competence in other roles e.g. Ward Sisters and Charge Nurses. A robust Adaptation programme for Overseas Nurses has been developed in 2018 and will be more widely implemented and evaluated in 2019/20. The new ESR competency module is now being used to document the achievement of competence for nursing clinical skills and this will continue to be implemented for all clinical skills programmes in 2019/20.

**Non-registered nurse capability:** The NHS Wales Skills and Career Framework for Healthcare Support Workers was mandated by Welsh Government in 2016 for new starters and for substantive staff in 2018. As a result of the work undertaken to implement the framework clear development pathways are now in place for all non-registered nurses working across all settings in the UHB. Development pathways now help HCSW to access undergraduate nurse training through the traditional route or one of the flexible routes that are now open to HCSW (University of South Wales and Open University). Compliance with the framework is measured annually and 49% compliance achieved in January 2018.

## ENGAGED WORKFORCE

Create conditions which unleash more capability, potential, and commitment to the goals and values

**Improving levels of staff engagement** improves performance and outcomes, including: mortality rate; health and wellbeing; absenteeism; patient satisfaction; quality of services; and financial management (NHS Employers, 2013). We have a comprehensive programme of engagement work at both organisational and Clinical Board level.

Our surveys – Medical Engagement, Staff Survey and Values Survey – are one way in which our staff can share their views and they have given us a clear picture of the work we need to do to improve staff engagement. Although our staff are feeling more engaged, improvement is required. The results of the NHS 2018 survey for Cardiff and Vale continue to show positive improvements in most areas since 2016 survey and the Board is above the overall NHS Wales scores on many questions. However, there are some scores which have declined and some which are below average which include stress at work and harassment, bullying and abuse. The Executive Director of Workforce and OD is chairing a task and finish group with a range of staff throughout the UHB to develop a response.

Theme	Cardiff and Vale University Local Health Board			NHS Wales		
	2018	2016	2013	2018	2016	2013
Intrinsic psychological engagement	4.02	3.90	3.77	4.02	3.91	3.80
Ability to contribute towards improvements at work	3.65	3.31	3.16	3.65	3.35	3.14
Staff advocacy and recommendation	3.81	3.71	3.37	3.79	3.68	3.37
<b>OVERALL ENGAGEMENT INDEX SCORE:</b>	<b>3.83</b>	<b>3.64</b>	<b>3.43</b>	<b>3.82</b>	<b>3.65</b>	<b>3.43</b>

In 2019/20 we will continue to invest in reward and recognition of staff; improve staff involvement in change activity; improve the quality of our appraisals; improve our response to complaints of bullying; and reduce the number of stress-related absences. In 2019/20 we will enhance our understanding of the drivers of engagement, bringing together the 'key diagnostic indicators' of engagement,

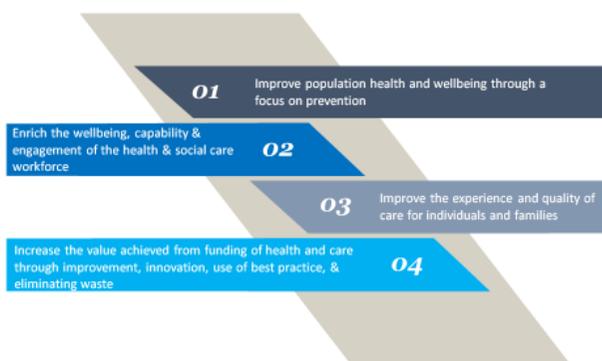
such as selection of workforce measures, medical engagement results, and data from our Values programme. We have recently been working with Professor Michael West in the quest to continue to develop the culture in our Health Board for High Quality Care. We will reflect on this work and build it into our action planning for engagement and well-being.

Medical Engagement has been a particular focus in recent years and in 2019/20 we will continue to evaluate our progress in order to develop further the Engagement Charters at team level.

We recognise that staff wellbeing is key to staff feeling engaged. A multi-disciplinary group leads a strategic action plan for **improving staff health and wellbeing**. Dietetics, physiotherapy, health and safety, transport and travel, occupational health, employee wellbeing and the Public Health team developed a collaborative plan, which realised improvements across a range of areas. 2017/18

was a year of great success with the UHB achieving both the Gold and Platinum Corporate Health Standards and being recognised as an exemplar organisation. In 2019/20 we will continue to use the learning from these standards to stretch our health and wellbeing activity even further, achieving further reductions in sickness absence through whole-system approaches.

## The Quadruple Aim for All



An Employee Engagement Framework and Toolkit was launched in 2017 providing the basis for Engagement Plans across the UHB. Key aspects are: having a strong **organisational values**; effective senior **leadership**; excellent line managers; a strong **employee voice**; and good **partnership working**.

We have involved patients and their families and clinical and non-clinical staff in creating a behavioural framework to bring our Values to life. In doing so we have also refined our Values to ensure they are memorable and relevant. As an organisation we strongly believe that it is vital our leaders exhibit the behaviours and values that we expect from all our staff. In 2018/19 these behaviours were integrated in to all workforce processes, including recruitment, promotion, appraisals, induction and performance management. Each of our core value comes with a set of behaviours that are measurable and specific. Incorporating

core values as part of the performance management process will enable employees to be recognised whenever they behave in alignment with core values. Reviewing people based on values is interrelated with rewarding people for demonstrating the values. All leadership and Management training in Cardiff & Vale now incorporates training on a coaching style and managers are encouraged to coach and support employees on how to demonstrate the core values which eventually lead to recognition and rewards.



### **Year 3 of the Strategic Equality Delivery Plan.**

We have again made the **Stonewall Workplace Equality** Index **Top 100 Employers** list as one of their gay and trans-friendly employers. We are one of two **top Health and Social Care organisations in Wales** and are in the **top 5 Health and Social Care** organisations in the UK as well as being in the **Top 10 Employers in Wales**. In 2018 we had a strong presence at the annual PRIDE Cymru Parade, led by our Chief Executive and we are currently reviewing our supporting transgender staff procedure and Equality Policy. We have achieved **Disability Confident** Employer status and are looking at how we become a more inclusive organisation and achieve Disability Confident Leader status. As part of this piece of work, which is led by the Engage to Change project, funded by Learning Disability Wales and the Big Lottery Fund's Getting Ahead 2 grant, we are working to support the employment of young people with a learning disability and/or autism throughout the organisation. The UHB has also focused attention on **sensory loss** issues for patients, some of whom are staff. We have developed, in partnership with Action on Hearing Loss, training for staff in basic British Sign Language. In the coming months we are looking to extend this work in partnership with the local British Deaf Association. This coming year we will also be looking at developing a gender pay gap review action plan based on the issues raised by the gender pay gap review report published earlier this year. All this work is part of the transformational and cultural change that the UHB is looking to progress with the end goal of removing systematic barriers and leading to the widening of access

### **Welsh Language**

The Welsh Language Standards, after a very comprehensive and systematic consultation process undertaken by staff, was placed with the UHB at the end of November 2018. The implications of their content and implementation means that there are challenges that the UHB must meet if the standards are to be achieved. Issues such as providing training opportunities to staff and working with local dementia networks to develop a reminisce resource for staff to use with Welsh speaking dementia patients are examples of the work that we are and will continue to develop in the coming year. The Standards also provide us with opportunities and not just challenges. Through our work in meeting the Standards, we will be able to identify good practice with the More Than Just Words Awards taking place in 2020. This can be used a measurement tool to see how far we have progressed.

### 7.3.4 Workforce and Organisational Development Delivery Plan 2019 - 22

Key actions to support delivery of a Transformed Workforce include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<b>TRANSFORMING WORKFORCE</b>				
<p>The transformational programme has brought together the skills and expertise of the following departments: Organisational Development (OD), Continuous service improvement (CSI) and project management (PMO) to:-</p> <ul style="list-style-type: none"> <li>Identify specific development needs</li> <li>Develop programmes of work</li> <li>Identify external contributors where appropriate and schedule dates throughout 2019/20</li> </ul>	Build internal transformation capability	Create programme of development to build skill and capability of transformation team, and ensure effective use of existing internal expertise. Draw upon expertise of partner organisations where appropriate.	Further training needs analysis, development and evaluation of impact and capability	Further training needs analysis, development and evaluation of impact and capability
<ul style="list-style-type: none"> <li>Implement Actions following Audit of self-service</li> </ul>	Enhance ESR functionality and enable workforce digital solutions	Implement ESR S/S in medical and dental staff group Increase usage of ESR Portal	Review functionality available and C&V usage of this to explore	ESR MSS usage sustained for all functionality in ESR

Key actions to support delivery of a <b>Transformed Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>• Ensure annual leave functionality is being used across the UHB</li> <li>• Implement ESR S/S for medical and dental staff group</li> <li>• Continue implementation of national Hire-to-Retire Plan locally</li> <li>• Automate starter and staff changes forms within ESR MSS</li> <li>• Migrate to Occ Health Bi directional interface</li> <li>• Ensure all rosters up to date against agreed staffing levels</li> <li>• Provide further training to managers on Workforce solutions</li> </ul>			opportunities to maximise benefits of ESR and associated systems	
<ul style="list-style-type: none"> <li>• Deliver required outcomes against the themes in the Plan</li> <li>• Continue to support ongoing cluster development/ maturity of, and succession planning for primary care clusters and the sharing of best practice</li> <li>• Continue to engage and work with Public Health Wales Primary Care cluster development team and pacesetter work</li> </ul>	Deliver 'Planned Primary Care Workforce for Wales'	<p>Development of emerging models of working and evidence of impact.</p> <p>Embedded evaluation exercises and PDSA cycles of all new roles/models of working to inform</p>	<p>Deliver the HB actions against the required outcomes</p> <p>Sustainable multi-disciplinary workforce for GMS</p>	Deliver the HB actions against the required outcomes

Key actions to support delivery of a <b>Transformed Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>Support and influence the evaluation of cluster projects, maximise the use of advanced and extended skills for possible roll out of initiatives in other areas e.g. cluster pharmacist and diabetes specialist nurse</li> <li>Continuing to build a more robust approach to workforce planning</li> <li>Continue to invest in the development of the wider primary care workforce</li> </ul>		<p>service improvement.</p> <p>All Clusters working towards maturity level 2.</p> <p>100% of Cluster Leads attended/completed a recognised Leadership programme</p>		
<p>Deliver against milestones for:</p> <ul style="list-style-type: none"> <li>Paediatrics, Obstetrics, Neonates</li> <li>ENT</li> <li>Major Trauma</li> <li>Emergency Medicine</li> <li>Vascular and Surgery (as models emerge)</li> <li>UHW/UHL Medical Model</li> <li>UHB Theatres and Critical Care</li> <li>Collaborative/National models: Pathology, Imaging</li> </ul>	Support South Wales Clinical Change Programme - Reconfiguration	Deliver Workforce actions in SW Programme (see actions)	Deliver Workforce actions in SW Programme (see actions)	Deliver Workforce actions in SW Programme (see actions)

Key actions to support delivery of an <b>Efficient Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
EFFICIENT WORKFORCE				

Key actions to support delivery of an <b>Efficient Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>• Development &amp; implement a work plan linked to the new Managing Attendance at Work Policy, with monthly meetings to ensure progress is made in a timely manner.</li> <li>• Benchmark against other organisations</li> <li>• Deliver training in partnership with Trade Union representatives.</li> <li>• Continue to build manager capability through effective coaching, holding Attendance Surgeries and developing resources.</li> <li>• 60% seasonal Flu vaccination uptake</li> <li>• Support managers with LTS cases, involving Occupational Health as appropriate</li> <li>• Continue with representation on relevant all Wales groups e.g. Managing Attendance Group</li> <li>• Raise awareness of the new All Wales Managing Attendance at Work Policy</li> </ul>	Improve attendance (reduce sickness absence)	95.4% attendance (4.6% UHB sickness absence)	95.6% attendance (4.4% UHB sickness absence)	95.6% attendance (4.4% UHB sickness absence)
<ul style="list-style-type: none"> <li>• Implementation of hard-to-fill / service critical post resourcing strategies</li> </ul>	Improve Workforce Capacity	<5% vacancies	<5% vacancies	<5% vacancies
<ul style="list-style-type: none"> <li>• Map management vacancies/pending gaps</li> <li>• Publish career pathways brochure</li> <li>• Cost/benefit analysis for a new post graduate scheme</li> <li>• Contribute to all-Wales succession planning and retention groups</li> </ul>	Improve Retention	7-9% turnover	7-9% turnover	7-9% turnover

Key actions to support delivery of an <b>Efficient Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>• Monitor ESR recording and train managers to input via MSS (at source)</li> <li>• Review opportunities for E-Job Planning and review pilot in Specialist Services</li> <li>• Publish leading practice on productive and team job planning</li> <li>• Deliver further job planning training</li> </ul>	Optimise medical workforce sessions	85% Job Plans 85% job plans reviewed in 12 month period 100% EWTD compliance	85% Job Plans 85% job plans reviewed in 12 month period 100% EWTD compliance	Job Plans systematically linked to Patient Outcomes
<ul style="list-style-type: none"> <li>• Embed robust initial assessment/fact finding process to stop cases progressing to formal disciplinary investigation inappropriately.</li> <li>• Continue to optimise the fast track disciplinary hearing process for minor misconduct.</li> <li>• Implement &amp; embed the new Investigating Officer's information pack, to improve consistency &amp; capability.</li> <li>• AHWODs to act as Case Managers to improve the monitoring and timeliness of formal investigations.</li> <li>• Pilot using bank Investigating Officers in Clinical Board's with high numbers of formal disciplinary investigations, to reduce duration/create capacity.</li> <li>• Appeal hearings to be prioritised and arranged wherever possible within 28 days</li> </ul>	Improve Management of Disciplinary and Grievance cases	Reduction in number of formal investigations from 60 to 50  Fast Track Disciplinary process completed within 21 days (non medical)  Complete 50% of investigations in 90 days  70% Appeals heard within 28 days  Reduction in ET claims	Reduction in number of formal investigations from 50 to 40  Fast Track Disciplinary process completed within 14 days (non medical)  Complete 60% of investigations in 70 days  80% Appeals heard within 28 days  Reduction in ET claims	Reduction in number of formal investigations from 40 to 35  Fast Track Disciplinary process completed within 14 days (non medical)  Complete 70% investigations in 60 days  85% Appeals heard within 28 days  Reduction in ET claims

Key actions to support delivery of an <b>Efficient Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>Implement &amp; evaluate the electronic recording of formal hearings, e.g. disciplinary &amp; appeal</li> <li>Implement an electronic file storage system, so that documents can be shared securely.</li> <li>Review Investigating Officers training and deliver in partnership with TU Representatives</li> </ul>		<p>Increase efficiency &amp; reduce cost</p> <p>Increase the capability of Investigating Officers</p>	<p>Increase efficiency &amp; reduce cost</p> <p>Increase the capability of Investigating Officers</p>	<p>Increase efficiency &amp; reduce cost</p> <p>Increase the capability of Investigating Officers</p>

Key actions to support delivery of a <b>Sustainable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<b>SUSTAINABLE WORKFORCE</b>				
<ul style="list-style-type: none"> <li>Complete a detailed and robust WTE and financial workforce plan, with identified workforce savings against Core, Variable and Agency Workforce</li> <li>Complete WG IMTP workforce templates</li> <li>Define workforce milestones for years 1, 2 and 3</li> <li>Develop new workforce models and new roles to support plans e.g., Physician Associate, Rehabilitation Assistants</li> </ul>	Meet Future workforce supply needs	<b>Firm</b> Workforce Plans in place for each CB, aligned to commissioning intentions, cross cutting themes and with detailed action & delivery plans	<b>Indicative</b> Workforce Plans in place for each CB, aligned to commissioning intentions, cross cutting themes and indicative priorities, actions and workforce challenges and risk	<b>Outline</b> Workforce Plans in place for each CB, aligned to commissioning intentions, cross cutting themes outlining progress towards strategic objectives
<ul style="list-style-type: none"> <li>Deliver 'Project 95%' with CBs (focus on Medicine and Surgery CB)</li> <li>Support 'Nurse Benefits' project</li> </ul>	Improve Nurse Capacity and reduce costs	95% Band 5/6 establishment	95% Band 5/6 establishment	95% Band 5/6 establishment

Key actions to support delivery of a <b>Sustainable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>• Sustain Project Switchover (with Corporate Nursing)</li> <li>• Review locally Student Nurse Streamlining</li> <li>• Implement Nurse Retention Action Plan</li> <li>• Deliver and evaluate the Adaptation Programme</li> <li>• Support HCSW to undertake flexible undergraduate nursing programmes</li> </ul>		100% on contract agency usage sustained	100% on contract agency usage sustained	100% on contract agency usage sustained
<ul style="list-style-type: none"> <li>• Deliver MTI strategy</li> <li>• Develop International Recruitment strategies aligned to hot spot area</li> <li>• Reduce Junior Doctor recruitment gaps</li> <li>• Monitor WG Cap Agency and Locum</li> <li>• Review Managed Service Staff Bank Proposal</li> <li>• Support All Wales Med Efficiency Group</li> <li>• Review options with BMJ to attract international applicants for specialities</li> </ul>	Improve Medical Workforce Capacity and reduce costs	Continue to implement WG Agency and Locum Cap Circular Reduce long term agency locums (over 1 month) Fill hard to fill vacancies	Monitor usage in areas that don't comply with cap Reduce long term agency locums (over 1 month) Fill hard to fill vacancies	Reduce long term agency locums (over 1 month) Fill hard to fill vacancies
<ul style="list-style-type: none"> <li>• Participate in Public Services Graduate Scheme</li> <li>• Publish clear development pathways for managers in different roles</li> <li>• Development of additional management programmes to meet demand, such as Clinical Directors' programme; Skills to Manage; Skills to Supervise</li> </ul>	Improve Management Capacity	Increased number of graduates in place through NHS Graduate Scheme (Cwm Taf lead) and participate in Public Services Graduate Scheme	Introduce post-graduate scheme. Reduction in leadership & management vacancies Reduction in management agency costs	Increased number of graduates in place through NHS Graduate Scheme (Cwm Taf lead) and participate in Public Services Graduate Scheme

Key actions to support delivery of a <b>Capable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<b>CAPABLE WORKFORCE</b>				
<ul style="list-style-type: none"> <li>• Introduction of new TNA software</li> <li>• Continue to train managers in ESR Portal and data access systems to improve reporting</li> <li>• Focus on increasing compliance through Mandatory Training Steering Group</li> </ul>	Increase & improve Statutory & Mandatory core skills compliance	85% compliance subjects as determined by the individuals training needs analysis (TNA).	85% sustained compliance in core subjects as TNA determines	85% sustained compliance in core subjects and to note new subject areas if mandatory through WG
<ul style="list-style-type: none"> <li>• Develop a new PADR process aligned with the talent management development</li> <li>• Maximise PADR functionality within ESR Portal</li> <li>• Develop PADR stories to increase awareness, on the benefits of PADR</li> </ul>	Improve individual performance management & development in the form of career conversations.	85% PADR compliance for all staff including the medical workforce	>85% PADR compliance for all staff groups	>85% PADR compliance for all staff groups
<ul style="list-style-type: none"> <li>• Implementation of Leadership and Management Framework</li> <li>• The development of new programmes as required by the service and aligned to the UHB strategy</li> <li>• Introduction of a managers tool kit</li> <li>• Develop a talent and succession management pathway for tiers 4 or hard to fill roles within the UHB</li> <li>• Produce a TNA of training requirements</li> <li>• Increase uptake on apprenticeship courses that are fully funded through HEIs.</li> </ul>	Improve leadership & management capability	To embed a Leadership and management pathway for all staff. For all CBs to produce a leadership and management plan in line with the WOD strategy and work in collaboration with LED	Working with partners (through sub-group of Public Services Board) to identify and develop opportunities for partnership leadership programmes.	To have a robust leadership and management framework

Key actions to support delivery of a <b>Capable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>Achievement of all clinical skills competencies will be logged onto ESR using ESR competency module</li> <li>Implementation of escalation process for non-achievement of competence</li> <li>Continue review of all clinical skills programmes</li> </ul>	Improve nurse capability	ESR competency module will be used for 75% of clinical skills training	ESR competency module will be used for 95% of clinical skills training	ESR competency module will be used for 100% of clinical skills training
<ul style="list-style-type: none"> <li>Maintain Agored Cymru Centre Status</li> <li>ESR Coding to be aligned to new Healthcare Assistant Titles</li> <li>Competency module on ESR to be used to log individual compliance with the framework and facilitate a live reporting mechanism.</li> <li>Yearly scoping exercise will be undertaken in December to enable annual reporting to HEIW</li> <li>Use talent management approach to identify HCSW who will progress to undertake undergraduate nursing programmes</li> </ul>	Improve non-registered (HCSW) competence and capability	Increased compliance with L2–L4 education for band 2- 4 clinical HCSW across the UHB in line with the HCSW Career and Development Framework.	100% of HCSW achieving the appropriate academic qualifications in line with of the Skills and Career Framework if continued WEDS funding is provided.	Maintain 100% of Healthcare Support Workers achieving the appropriate academic qualifications in line with of the Skills and Career Framework.
<ul style="list-style-type: none"> <li>Continue to enable leaders to develop a coaching style of leadership through enhanced</li> </ul>	Build coaching capability	UHB coaching framework will have been developed and systems established to monitor coaching	10 additional executive coaches will have been trained	95% of managers across the UHB will have completed the UHB's Coaching

Key actions to support delivery of a <b>Capable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<p>communication and coaching skills workshops</p> <ul style="list-style-type: none"> <li>• Create effective coach allocation process and monitoring database</li> <li>• Continue integration of coaching skills into new leadership and development activity</li> <li>• Identify additional coaches via partners in All Wales network in Public sectors</li> <li>• Launch the coaching framework</li> </ul>		provision across the UHB.		Skills for Managers programmes.
<ul style="list-style-type: none"> <li>• Identify mentors for managers and create a database so the individuals are easily recognised</li> <li>• Develop and design mentorship programme for non-nurses</li> <li>• Create a matching service for mentors for employees to access</li> <li>• Create a document that support mentorship for non-nurses</li> <li>• Developing the leadership expertise of the mentee in a work context, with the process of mentoring encouraging independence, autonomy and self-development.</li> <li>• Regular update of data base of all the qualified mentors in line with the NMC standards</li> </ul>	Build mentoring capability	Build mentoring capability through training 30 senior manager mentors in CBs.	Build mentoring capability through training a further 20 managers	For mentorship matching service to be embedded into the UHB representing all disciplines



Key actions to support delivery of a <b>Capable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>Continue to develop Project Enable for individuals with learning disability</li> </ul>				
<ul style="list-style-type: none"> <li>Implement the Welsh Language Standards</li> <li>Increase number of staff being trained to improve Welsh language skills</li> <li>Work with local dementia networks to develop a reminisce resource for staff to use with Welsh speaking dementia patients</li> </ul>	Promote Welsh Language	Deliver actions against the single organisational Welsh Language Plan and Welsh Language Standards	Deliver actions against the single organisational Welsh Language Plan and Welsh Language Standards	Deliver actions against the single organisational Welsh Language Plan and Welsh Language Standards
<ul style="list-style-type: none"> <li>Administer 2018 all-Wales staff survey</li> <li>Set up T&amp;F to be chaired by the Exec Director of WOD</li> <li>Continued roll-out and communication of Staff Engagement Framework and Toolkit</li> <li>Continued implementation of corporate and Clinical Board plans responding to values survey, national staff survey &amp; Medical Engagement Scale (MES)</li> <li>Monitoring of performance through Exec Performance Reviews</li> <li>Build further capability in engagement methodologies</li> </ul>	Improve Staff Engagement	Improved engagement score and improvements in priority issues identified through previous MES, values and staff surveys.	Improvements in priority issues, measured through local staff Pulse Survey	Improvements in engagement score and priority issues, measured through national staff survey

Key actions to support delivery of a <b>Capable Workforce</b> include				
ACTION	OUTCOME	19/20 MEASURE	20/21	21/22
<ul style="list-style-type: none"> <li>Continued delivery of Values project: communications; patient experience; staff engagement; and workforce processes in line with the talent management development</li> </ul>	Embed optimal behaviours against CVUHB values	Introduce values-based recruitment (VBR) for nursing	Introduce VBR across other staff groups. Integrate values measures in to local Pulse Survey	Improvements in integration of values in to all processes, measured through survey results
<ul style="list-style-type: none"> <li>Provide training for staff regarding applications for awards and publications</li> <li>Annual Recognition Awards</li> <li>Encourage clinical boards and corporate departments to align their categories with the UHB awards</li> </ul>	Support staff reward & recognition	Deliver annual recognition awards, including nominations from all clinical boards and corporate departments	Deliver annual recognition awards, including nominations from all clinical boards and corporate departments	Deliver annual recognition awards, including nominations from all clinical boards and corporate departments