Cardiff and Vale Stakeholder Reference Group

Tue 24 May 2022, 14:15 - 15:40

Microsoft Teams

Agenda

14:15 - 14:15
0 min

1. Welcome and Introductions

Sam Austin

14:15 - 14:15
0 min

2. Apologies for Absence

Sam Austin

14:15 - 14:20
5 min

3. Declarations of Interest

Sam Austin

14:20 - 14:25
5 min

4. Minutes and Matters Arising from the SRG Meeting on 22 March 2022

Sam Austin

📄 Item 4 Unconfirmed Minutes of SRG Meeting 22 March 2022.pdf (6 pages)

14:25 - 14:35
10 min

5. Feedback from Board

Nicola Foreman

To highlight key issues from the Board meeting held on 31 March 2022

14:35 - 15:10
35 min

6. Shaping Our Future Wellbeing Strategy Update

Marie Davies

To discuss the proposed approach to updating the Strategy

📄 Item 6 SOFWB Refresh discussion - SRG May 2022.pdf (14 pages)

15:10 - 15:40
30 min

7. People and Culture Plan

Rachel Gidman

📄 Item 7a SRG - PC PLan 05.05.22.pdf (5 pages)
📄 Item 7b PC Plan Presentation 05.05.22.pdf (24 pages)

UNCONFIRMED MINUTES OF CARDIFF AND VALE STAKEHOLDER REFERENCE GROUP MEETING HELD ON TUESDAY 22 MARCH 2022 CONDUCTED VIA MICROSOFT TEAMS

Present:

Sam Austin	Llamau (Chair)
Frank Beamish	Volunteer
Jason Evans	South Wales Fire and Rescue
Iona Gordon	Cardiff Council
Duncan Innes	Cardiff Third Sector Council (items 22/07 – 22/13)
Paula Martyn	Independent Care Sector
Linda Pritchard	Glamorgan Voluntary Services
Geoffrey Simpson	One Voice Wales
Siva Sivapalan	Third Sector, Older Persons
Lauren Spillane	Carers Trust
Lani Tucker	Glamorgan Voluntary Services

In Attendance:

Cath Doman	Director of Health and Social Care Integration
Abigail Harris	Director of Strategy & Planning, UHB
Angela Hughes	Assistant Director of Patient Experience, UHB
Suzanne Rankin	Chief Executive, UHB (items 22/07 – 22/10)
Jon Watts	Head of Strategic Planning, UHB
Anne Wei	Strategic Partnership & Planning Manager, UHB

Apologies:

Shayne Hembrow	Wales and West Housing Association
Zoe King	Diverse Cymru

Secretariat: Gareth Lloyd, UHB

SRG 22/07   WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

SRG 22/08   APOLOGIES FOR ABSENCE

Shayne Hembrow and Zoe King.

SRG 22/09   DECLARATIONS OF INTEREST

There were no declarations of interest.

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SRG 22/10   INTRODUCING THE UHB'S NEW CHIEF EXECUTIVE

The Chair welcomed Suzanne Rankin the UHB's recently appointed Chief Executive to the meeting.

Suzanne Rankin began by explaining her reasons for applying for the position and her initial thoughts on the organisation following her first few weeks in post. She had received a very warm welcome and noted the professionalism and resilience of staff during particularly challenging times.

Suzanne Rankin commended the excellent Executive team. Meriel Jenney had agreed to take the role of Medical Director for the next 18 months, and the UHB had commenced the recruitment process to replace Ruth Walker who would shortly be retiring from her post as Executive Nurse Director. Caroline Bird would continue as Interim Chief Operating Officer until the end of the summer and the UHB had begun the process for making a substantive appointment to this position.

The UHB has a very good strategy with an emphasis on working more with Local Authorities, the third sector and other stakeholders and a shift in emphasis from simply treating illness to becoming more of a health and wellbeing service. There has already been considerable work undertaken to progress the integration of health and social care and there is consensus amongst the leadership of each of the organisations on the direction of travel.

The UHB does have work to do on its quality and improvement agenda. An at scale quality improvement approach is required which will create opportunities as well as challenges.

Suzanne Rankin had noted a lack of investment in the UHB's estate and digital infrastructure. The UHB would continue to develop proposals for UHW2 and she was looking to double the investment in the digital infrastructure during the coming financial year to begin to bring it into line with the standards expected in the 21st Century.

The SRG then raised a number of questions and made several observations.
- It was pleasing to note the importance placed on working with the SRG and stakeholders in general.
- The third sector in Cardiff and Vale is extremely diverse and consideration needs to be given to how it can be more involved. Suzanne Rankin acknowledged that there was a tendency to over medicalise and the UHB must work together with the third sector identify what services it can provide.
- It was pleasing to note the emphasis on improving the digital infrastructure. The speed of the transfer of information is crucial. With ownership of information comes responsibilities.

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- What is being done to improve staff wellbeing? Suzanne Rankin explained that she saw her role as enabling staff to be brilliant at their jobs and paying attention to their wellbeing is critical to this. The contribution of staff must be recognised and rewarded and they must have a safe and therapeutic environment in which to work.

It was agreed that Suzanne Rankin would return to the SRG later in the year.

Action: Gareth Lloyd/Suzanne Rankin

SRG   22/11   MINUTES AND MATTERS ARISING FROM STAKEHOLDER REFERENCE GROUP MEETING HELD ON 25 JANUARY 2022

The SRG **RECEIVED** and **APPROVED** the minutes of the SRG meeting held on 22 January 2022.

SRG   22/12   FEEDBACK FROM BOARD

Nikki Foreman informed the SRG that the UHB Board had reverted to meeting bi-monthly. Recordings of Board meetings were available to watch via the UHB's website 2-3 days after each meeting.

Nikki Foreman drew the SRG's attention to some specific items discussed at the UHB Board meeting held on 27 January 2022.

- Chair's Report - Had included the Chair's appraisal. The Dental Directorate had been thanked.
- Chief Executive's Report – HMP Cardiff's healthcare success had been celebrated. A new optometry service for homeless citizens was announced.
- Systems Resilience Briefing Report – Sickness absence remained a problem. The number of Covid-19 cases had begun to increase.
- Integrated Performance Report – A small financial surplus was forecast. The next financial year would be challenging with the UHB's underlying financial deficit increasing.
- The People and Culture Plan had been approved. It was agreed that Rachel Gidman be invited to attend a future of the SRG to discuss the Plan

Action: Gareth Lloyd

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The SRG enquired whether the high sickness rates were due to C-19 and whether absences were split between short and long term absences. Nikki Foreman explained that many of the absences were due to C-19 but there were also significant numbers off work due to stress and anxiety. Sickness absences were split between short and long term absences. Rachel Gidman would be able to provide further details when she came to the SRG.

SRG 22/13 INTEGRATED MEDIUM TERM PLAN 2022/25

The SRG received a presentation from Jon Watts on the UHB's draft Integrated Medium Term Plan (IMTP) 2022-2025, a copy of which had been circulated to members a few days prior to the meeting.

The SRG were reminded that Welsh Government (WG) required Health Boards to submit three year IMTPs that are refreshed annually. The current financial position was extremely challenging. At its meeting on 31 March, the Board would be asked to approve the draft IMTP for submission to WG. WG were happy to accept a draft pending submission of a final IMTP in June/July in order to give the UHB time to address the financial issues.

Jon Watts explained that although the IMTP was a public document it was essentially a technical document that has to respond to the requirements of the UHB Board, Welsh Government and external commissioning bodies. This can make the document difficult to digest. Support from staff and the public for the ambitions contained in the IMTP would be critical to the UHB's success. The SRG was therefore asked what are the key messages from the IMTP that the UHB should be sharing and asking its population to 'buy-in' to?

The SRG then raised a number of questions and made several observations and suggestions.
- There is a big problem with people not understanding where they are on waiting lists or treatment pathways. There would be greater acceptance of delays or changes if people were kept up to date. Worry can often result in people developing parallel mental health issues. Jon Watts agreed that the UHB should articulate what it was doing to reduce waiting lists.
- The UHB should produce 'Bite-size' easy read updates throughout the year to supplement the IMTP.
- A mixed communications strategy is required using multiple languages and formats.
- People are generally more concerned about their treatment and pathways. It would be helpful if by entering their NHS number people could get an update on their position on waiting lists etc.
- Information should be provided about where patients are likely to receive treatment. It should be explained that regionalised provision is

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designed to ensure that people receive treatment in the place that will deliver the best clinical outcome.

- The UHB should put greater emphasis on publicising its achievements.

SRG   22/14   @HOME/SHAPING OUR FUTURE COMMUNITY SERVICES PROGRAMME

The SRG received a presentation from Cath Doman on the @Home/Shaping Our Future Community Services Programme.

Cath Doman explained that the Regional Partnership Board had begun to organise its priority programmes under one of three headings: 'Starting Well', 'Living Well' and 'Ageing Well'. For governance purposes the @Home/Shaping Our Future Community Programme comes under the 'Ageing Well' heading but it is not limited to this as its for whoever needs joined up community care regardless of age. The main principle underpinning the Programme is that each Locality is responsible for the health and wellbeing of its local population. It is a huge Programme that moves towards planning, thinking and acting as a single organisation across a range of partners.

The SRG was then asked how do we support the organisation to move towards this way of thinking: from direct control to negotiating and agreeing joint service planning and delivery with other organisations?

The SRG then raised a number of questions and made several observations and suggestions.
- Concern was raised about those with a terminal diagnosis living in older houses requiring structural alterations, the disruption this can cause and whether it was always the best solution for the individual.
- Finances should not be a bar to joined up provision.
- Re-productive coercion is a growing problem. There is a need to improve access to advice and support for women of re-productive age.
- There is a need to consider who will act as advocates to ensure people receive the co-ordinated care they require. Cath Doman acknowledged that co-ordination of care could be improved. As joined up models are further developed it will be imperative to ensure care is co-ordinated. The first point of contact could for example, be a key worker, occupational therapist or someone from the third sector, dependent on the needs of the individual.
- There needs to be a culture change towards people taking more responsibility for their own health and wellbeing.
- Access to primary care is a concern. Cath Doman reported that the South West Cardiff Cluster had significantly reduced the proportion of

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people who end up in hospital by working closely with the Local Authority and third sector to offer better solutions.

SRG 22/15   ANY OTHER BUSINESS

Councillor Gordon
Cllr Gordon informed the SRG that this would be her last meeting as she would not be standing for re-election at the forthcoming local elections.

The Chair thanked Cllr Gordon for her valued contribution to the SRG over the past few years

SRG 22/16   NEXT MEETING OF SRG

Microsoft Teams meeting, 1.30pm-4pm, Tuesday 24 May 2022.

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Cardiff and Vale UHB

Refreshing our strategy

Stakeholder Reference Group

May 2022

Lloyd Gareth
05/10/2022 10:19:31

What was the problem we were trying to fix in 2013?
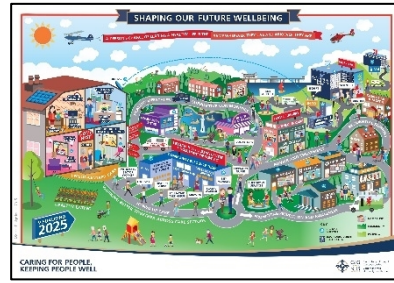
We need a long term plan to make sure that we have sustainable services for our citizens that takes account of:-

- Demographic changes

- Epidemiology

- Financial climate

- Workforce

- Changes in clinical practices

- Technological

- Environmental impact

Lloyd Gareth
05/10/2022 10:19:31

Why Have a Clinical Services Plan?

The benefit of having a Clinical Services Plan over the medium-longer* term is to improve:-

- Outcomes of care by ensuring our services are designed with citizens and take account of international best practice and innovation

- Access and sustainability by designing clinical models which reflect future population needs and make sure that we have a sustainable plan to deliver them (plans will include clinical model, workforce, finance and estate)

- Effective use of limited resources, including estate

- Resilience of the UHB to serve patients and citizens in a climate of increasing financial austerity, skills shortages in certain areas and increasing demand on services

- The working environment - by having a clear direction that people who work with and for the UHB are involved in designing

Lloyd Gareth
05/10/2022 10:19:31

*Medium-longer term is 3, 5 and 10 year horizon

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What Could the End Product Look Like?

A clear picture of the future shape of Clinical Services that reflects the health needs of our population

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Working Together in 2015:
Co-producing Change

Shaping Our Future Wellbeing — Clinical Services Briefing September 2014

Strategic principles developed

Visual minutes recorded

Workshop output refined with clinical experts

Vision for Cancer Care

Vision for Dementia Care

Vision for Dental and Eye Care

2014　Ma　**2015**　Fey
Time Line　Aug　Nov　Dec　Jan　Mar　May

Key priorities identified

- Cancer
- Dementia
- Dental and Eye Care
- Long Term Conditions
- Maternal Health
- Mental Health

Informed by public health led review of evidence

6 workshops completed

Service user and third sector feedback obtained

6 shared visions of the future created

Vision for Long Term Conditions

Vision for Maternal Health Services

Vision for Mental Health Services

Lloyd Gareth 06/10/2022 10:19:31

People at the Centre of Our Strategy

Our whole system service model

Cardiff and Vale UHB
Shaping Our Future Wellbeing
Strategy into Action

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Developed with partners, and reflecting learning from Canterbury to speed up transformation of model of care

Joint asset management plan with LAs
• Community hubs
• SOFWiC

Primary care estates plan – responding to new model for primary care and LDP population expansion

Shaping Our Future Wellbeing in the Community
• 3 locality health and wellbeing hubs
• 9 cluster hubs
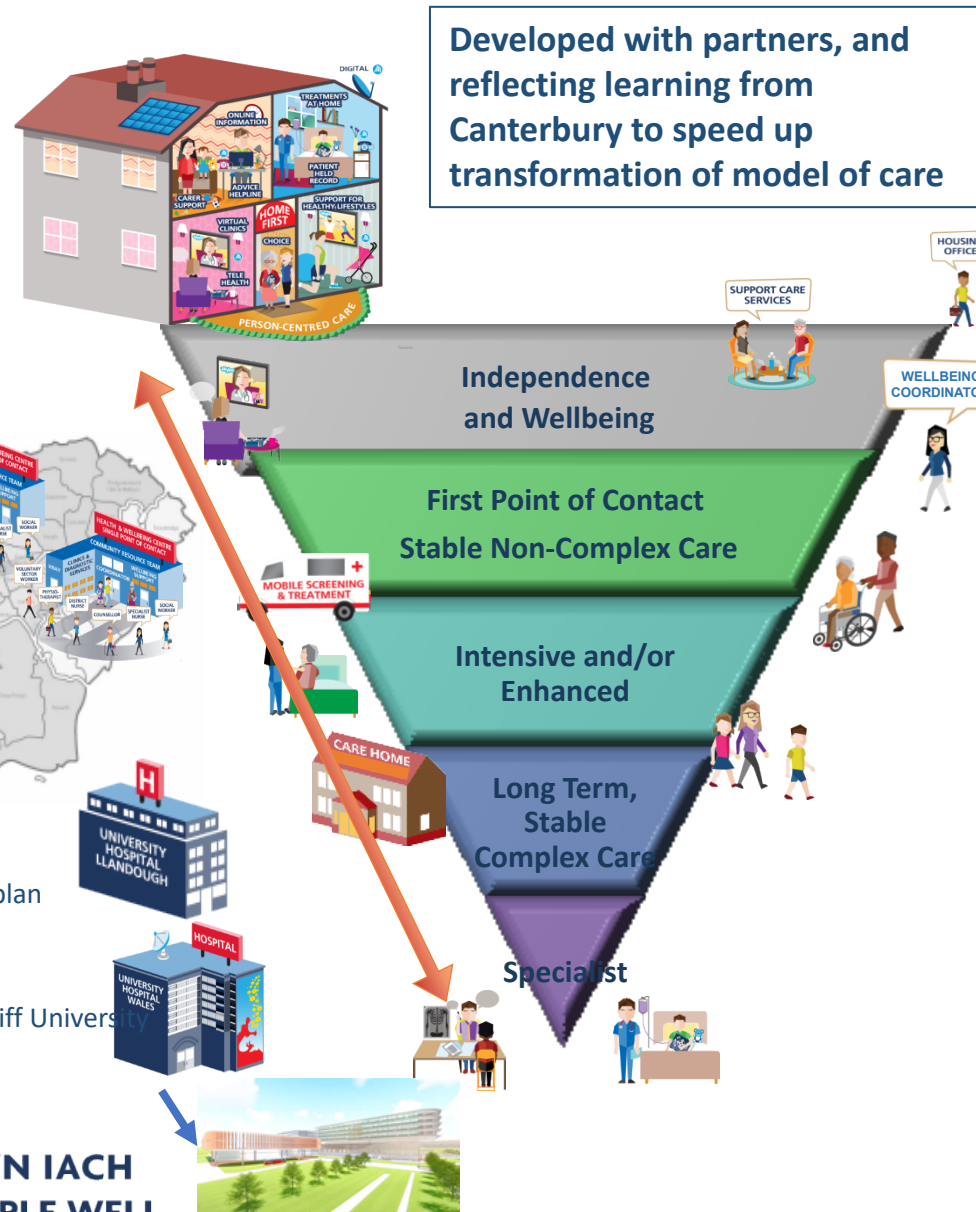• Rationalised community health centres

St Davids plan
• ECAS for Cardiff

UHL development plan

UHW rebuild/replacement plan developed with Cardiff University

Lloyd Gareth
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Independence and Wellbeing

First Point of Contact Stable Non-Complex Care

Intensive and/or Enhanced

Long Term, Stable Complex Care

Specialist

Independence and wellbeing
• Self care enabled through technology assisted care and support at home, with access to good information

First Point of access
• Single point of access in the community to care and support across health and social care
• Signpost to full range of community services
• Primary care clusters providing same day access to urgent case, and timely access for routine planned care delivered by multi-disciplinary team
• Joint information systems across health and social care facilitates better share care planning and delivery

Intensive of enhanced care
• Elderly care assessment services providing urgent and routine specialist service in the community supported by range of community services – including CRT, ART, district nursing and speciality nursing in the community.
• Acute and emergency specialist care accessed via the Emergency Unit at UHW and medical assessment units at UHW and UHL and surgical assessment unit at UHW. Some direct access to specialist services for agreed pathways (FNOF etc).
• Timely access to specialist advice for both acute and routine, non-urgent care planned care
• MH and MHSOP centre of excellence for assessment and acute treatment at UHL

Long term stable complex care
• Specialist rehabilitation as part of regional model with repatriation to local care at right point in pathway

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Work concluded that the vision with Shaping Our Future Wellbeing remains appropriate as are the design principles around which we have organised the actions needed to delivery the strategy. Further work undertaken by the Executive Team with Q5 to further define the outcomes we want to achieve, how we would measure progress and the key programmes required to secure meeting the outcomes and delivering the key milestones and measures along the way.

First: Establishing 'what 2025 means'

Principle	Outcomes	How will we know when we've got there?
Home First	Care and support is easily delivered at home or within the community. Our infrastructure, resources and digital transformation enables delivery of virtual services as the norm.	50% of all outpatient attendances could be carried out in a virtual clinic
		Reduce Average Length of Stay – 100,000 Bed Day Challenge
		51% of our resources spent in community
Empower the Person	Our community takes on responsibility for managing their own health and wellbeing. Our people feel empowered and thrive in a culture of innovation and improvement.	Enrolment in Patient He... Reported Outcome Mea...
		Increase number of pati... an Optimisation List (Pre...
		75% of staff expressing ...
		4/5 clinical leadership ha... (TBC))
		Frontline leadership dev...
		Reduction in smoking/o...
Outcomes that Matter to People	We offer a reliable and positive experience to our patients at an appropriate cost.	Reduced complication r... falls within hospital, fall...
		Reduced mortality rates...
		Increase patient satisfac... patient access)
		(Mental health)
Avoid Waste, Harm and Variation	Our best practice approach ensures we set the standard and do this safely. We minimise waste, operate efficiently and consider the sustainability implications in everything that we do.	Patients on a recognised health pathways
		Patients on clinical trial ...
		Carbon reduction

Second: Agreeing on the key work that would deliver the vision for 2025

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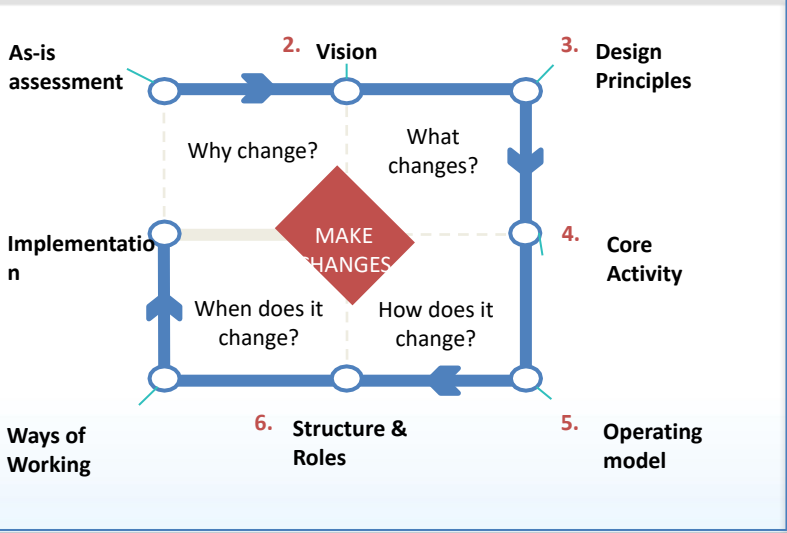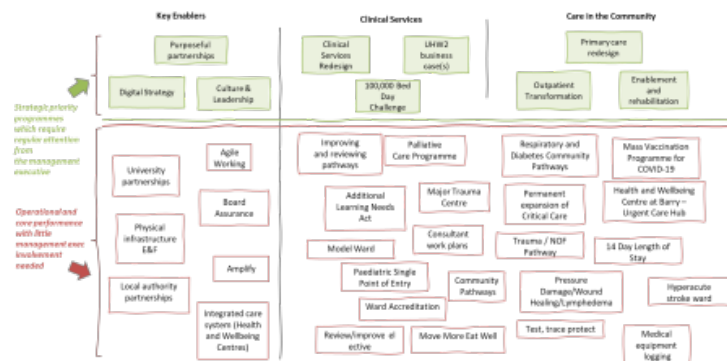
Concurrently, Q5 undertook further interviews & workshops with leaders (e.g. SDDG, Clinical Board Directors) and existing change teams

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**Shaping Our Future
Clinical Services**
2020/2030

We specifically tested thinking on ...

- The need to change our services based on a full understanding of our challenges and opportunities

- Programme approach and principles – clinically led, patient centred, whole pathway, guided by best practice, in partnership

- Changes in how clinical services may be delivered (principles for Emergency and Urgent, Elective, Specialised)

- Changes in where clinical services may be delivered (Home, Community, Hospitals)

- Important considerations – our workforce, our digital infrastructure, our buildings

Shaping our **Future Wellbeing**

Shaping our Future **Clinical Services**

Shaping our Future **Community Care**

Shaping our Future **Hospitals**

A vision for future clinical services

draft

By 2030, Cardiff and Vale University Health Board will be one of the best health and care providers in the world, as part of a truly integrated health, care and wellness system. We will work with our local, regional, and supra-regional populations, caring for people closer to home and keeping people increasingly healthy and well.

We will be **prevention focussed** but when people are unwell, we will provide **high-quality clinical care** and support to help them to manage their own conditions in their own **homes and their local community**. When care in hospital is required this will be delivered in **world class and modern facilities**; people will be helped to recover as close to home as possible, freeing-up our hospitals for those who really need them.

Our world-class care will **attract and retain high-performing, compassionate staff** who harness innovation to deliver the best-possible outcomes for our patients. Our specialists will work alongside **regional, national and international** colleagues as well as in **partnership with our local community services**, sharing expertise to develop and improve our services.

Our clinical services will embrace **advances in medicine, technology, and data** to maximise outcomes and experience for both our **patients and staff**.

We will **work with our partners** to develop local and regional solutions that deliver the requirements of national guidance and best practice to ensure these services are sustainable and deliver the **best outcomes** no matter where a person lives.

The funding we receive will reflect the needs of the populations we serve and will deliver **value-based healthcare** for our patients and staff.

Shaping our **Future Wellbeing**

Shaping our Future **Clinical Services**

Shaping our Future **Community Care**

Shaping our Future **Hospitals**

The response

- 88% strongly agree or agree with challenges and opportunities set out
- 92% strongly agree or agree there's need to change our clinical services
- 74% strongly agree or agree with principles set out in the programme approach
- Which clinical services – principles (80%+)
- Most important aspect of people care – Best Outcome, Right Specialist, Timely (travel distance and closer to home)
- Receiving care digitally – 71% happy to and have the means, 3% access (caution)
- 74% would be happy to be emailed about future engagement & consultation

351 Survey Responses

20% Staff responses

Most common themes

- Right care, right place, right time
- Communication
- Digital transformation and technology
- Quality
- Organisation and integration of services
- Physical access issues
- Support for the Home First/Care closer to home concept
- Workforce
- Comments on specific services
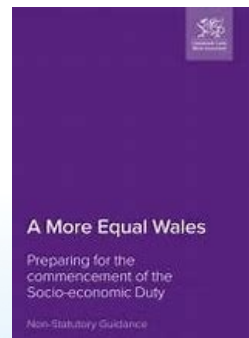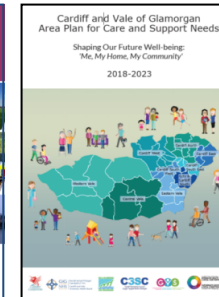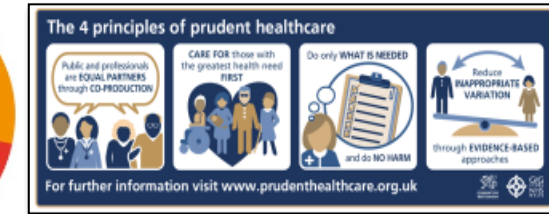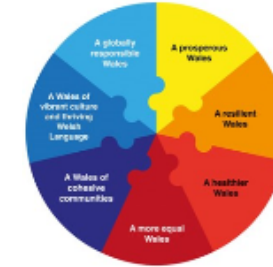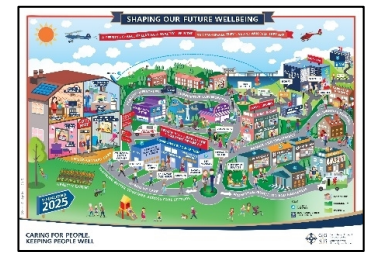- Comments about primary care
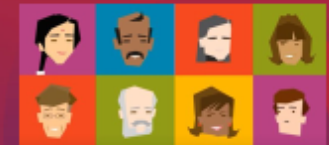
2022

- What have we achieved? A lot (Review March 2021)

- What has changed:
  - Policy/legislations context and resulting plans
  - Pandemic
  - Strategy stocktake Sept 2020
  - SOFCS Engagement

Work with partners including public and third sectors

Through UHB
Shaping Our Future
Well-being Strategy

	Strategic Programme Portfolio				Operational Recovery Portfolio					Enabling Programmes	
	Shaping our future hospitals	Shaping our future communities	Shaping our future Clinical services	Shaping our future population health	Primary care	Planned care	USC	Diagnostics	MH	Workforce	Digital and Data

What is the Problem We are Trying to Fix in 2022?

We need a long term plan to make sure that we have sustainable services for our citizens that takes account of:-

- **Demographic changes** (ageing, health inequalities, diversity, deprivation)

- **Epidemiology** (burden of disease, mental health, new diseases)

- **Financial climate** (Brexit, pandemic, global geopolitical situation = economic decline and recession)

- **Workforce** (risk and opportunity - people and culture plan)

- **Changes in clinical practices** (genomics, cell and gene therapy, ATMPs, digitally enable, data informed, research and evidence based)

- **Technological** (technology revolutions accelerating)

- **Environmental impact** (carbon zero target – 2030)

- **Estate** that has become functionally and conditionally unsuitable
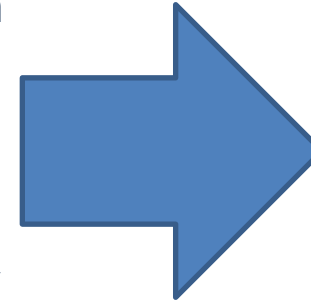
SOFWB II
Accelerating the pace of transformation to respond to the challenges of today and meeting the needs of tomorrow. Clear vision and route map for our journey of transformation.

Strategy Refresh – 2025 - 2035

- **Questions:**
  - **Why?** Our strategy timeframe ends 2025, world has changed.
  - **When?** To inform 2023/24 or 24/25 IMTP? Timetable for related plans – 2023 for Area Plan and Wellbeing Plans
  - **How?** Engagement, refresh, starting from scratch? Formal programme.
  - **Who?** Led by Strategic Planning, but whole organisational
  - **What?** Population lens, commissioner, provider, clinical services plan? Aims, objectives.

Lloyd Gareth
05/10/2022 10:19:31

Proposed Next Steps

- Establish Programme Governance (Light touch – utilising existing frameworks and governance structures)
- Secure feedback on approach and timescale from ME & Board – April – June
- Develop Stakeholder Map – April – June 2022
- Develop detailed Engagement Plan with clear outputs and timelines – April – May 2022
- Execute internal and external Engagement – June 2022 – Sept 2022
- Develop Draft Strategy – Oct - Nov 2023
- Test with Stakeholders – Dec - Jan 2023
- Final Updated Strategy Complete – March 2023

QUESTIONS FOR SRG

- How can we ensure that key stakeholders are truly meaningfully engaged – especially as our workforce, partners and communities are exhausted and still dealing with the ongoing consequences of the pandemic?

- How and how often does SRG want to engage or receive updates on progress?

- Are there critical considerations of which we need to take account that haven't been covered in the presentation?

Lloyd Gareth
05/10/2022 10:19:31

Report Title:	People and Culture Plan			Agenda Item no.	
Meeting:	SRG	Public	x	Meeting Date:	tbc
		Private			
Status *(please tick one only)*:	Assurance		Approval		Information	x
Lead Executive:	Executive Director of People and Culture				
Report Author (Title):	Deputy Head of People Assurance and Experience				

Main Report
Background and current situation:

To effectively meet the needs health and care needs of our population, we need to ensure that we can deliver our services closer to, or at, home as set out in our UHB Strategy.   Attending hospital should only occur when it is not possible to provide care and/or treatment safely anywhere else.   Achieving this is completely dependent on our workforce, but we cannot achieve it by things remaining the way they are. We need to transform the way we attract, train, continually develop and support our workforce through a culture of compassionate and inclusive leadership with a focus on wellbeing at the core. This will include working with the Social Care to develop an integrated workforce.

The [People and Culture Plan](#) was approved by Board in January 2022.   It is our opportunity to improve the experience of our staff, ensure that the improvements we have made over recent years continue, and confront the challenges which have arisen as a result of the pandemic and subsequent in the recovery period.   We know that by improving our staff experience we can move towards a compassionate culture and improve the experience and outcomes of the people we care for.

CONTEXT

The UHB People and Culture Plan is aligned to a number of key documents including:
- Shaping Our Future Wellbeing which sets out our intention to have joined up care empowering the person, care at home or close to home, delivering outcomes that matter to people, and avoiding harm, waste and variation.   Linked to all of this is our ambition to be a great place to work and learn.
- Workforce Strategy for Health and Social Care which sets out the ambition to have a motivated, engaged and valued Health and Social Care workforce with capacity, competence and confidence to meet the needs of the people of Wales by 2030.   To ensure this alignment exists we have taken the same 7 themes but given them a UHB context and built our own objectives
- IMTP and the Operational plan; thereby ensuring a whole-system approach, that is working at pace to achieve the greatest positive impact, and can adapt to rapid service change and seasonal pressures

The challenges faced by Cardiff and Vale, along with the rest of the NHS in Wales, include social, technological and demographic changes at the same time as the challenges brought about by the pandemic and the necessary period of recovery.

ABOUT THE PLAN

This plan is built around 7 themes which are based on the those set out in the Workforce Strategy for Health and Social Care, with an added emphasis on retention in theme 2 to recognise the importance of retaining our staff as well as recruiting new people:

1. **Seamless workforce models** - to support the integration of Health and Social Care services, to deliver a seamless, coordinated approach from different providers, based on outcomes that matter to the person

2. **Engaged, motivated and healthy workforce** - to have a workforce that feels valued and supported wherever they work

3. **Attract, recruit and retain** - to recruit and retain the right people with the right skills

4. **Building a digitally ready workforce** - to have a workforce that is digitally ready: one which has both the technology available and skills to utilise this effectively and enhance their ways of working

5. **Excellent education and learning** - To ensure that education and development of the workforce remains a key priority, with an equitable approach to education provision and support for those who have additional learning needs.

6. **Leadership and succession** – to help our leaders display collective and compassionate leadership.

7. **Workforce supply and shape** - to have a sustainable workforce in sufficient numbers to meet the health and social care needs of our population.

Each theme has a Workforce and OD lead who is working closely with a named staff representative (Trade Union) lead.   The People and Culture Plan can only be delivered through engagement and partnership working with our staff.   We are committed to listening to them and will work closely with staff representatives in the development, implementation and monitoring of the schemes, projects and actions contained within this Plan.

PROGRESS TO DATE

Good progress has been made against the 7 themes of the People and Culture Plan since it was approved by Board in January.   Examples of actions taken in the last month include:

- Approximately 40 coaches are being trained on the ILM level 5 and/or 7 Mentoring/ Coaching programme. 38 coachees, who are Ward Managers and Deputy Ward Managers, have now been assigned a coach. A coaching tool (PushFar) has been procured to help coaches and coachees select and manage the relationships.

- Winning Temp engagement tool has been procured, engagement sessions are taking place with Nursing staff, with implementation planned for the end of May 2022.

- All procurement exercises have been completed for the additional investment secured to support the health & wellbeing of our staff and spend has been allocated. Projects are now in the early implementation stage, including identifying evaluation metrics and pilot areas. Estates work has commenced to support the environmental aspects of the plan which includes staff room improvements and an additional 13 hydration stations.

- Following the success of the first scheme, a further 10 applicants with learning disabilities or autism have been appointed via Project Search. These will start their placements in September 22.

- In total 162 individuals were recruited onto the Kickstart scheme.   Of these, 33 have now gained employment with the UHB, 2 have joined apprenticeship schemes and 44 are still currently on the scheme.   The scheme closed on 31 March 2022.

- A revised process and recruitment campaign have been developed for the Temporary Staffing Department to increase the number of staff on the Bank;

- 91 job offers have been made and 59 of these have already started work with Facilities following our social media adverts and inter work events held since February 22.

- 4 places have been awarded to CAV UHB staff on a MSc in Digital Transformation for March 2022 start (1x Senior Nurse, 1x AHP, 1x DH&I and 1x I&I). Promotion for September 2022 (part-funded) cohort has begun.

- The Acceler8 Senior Leadership Programme was launched in April 2022 with 12 delegates. Interest in Cohort 2 has already been received and expressions of interest will start to be collated in May 2022. Development of additional leadership development programmes, including Collabor8, has commenced and plan to launch in June 2022.

- 20 UHB HCSW have been progressed to interview for the USW flexible undergraduate programme.

- 90 managers have been enrolled on ILM level 4 and 5 management apprenticeship programmes in the last 6 months which is a significant achievement in light of the pandemic pressures and a significant increase in numbers.

- Recurrent funding has been secured to establish a permanent e-rostering team, within the first 12 months the team will focus on:
  - implementing the new e-rostering system for the Nursing Workforce;
  - embed effective e-rostering principles resulting in significant cost efficiencies;
  - improve workforce supply and fill rates for bank and agency;
  - provide ongoing education , learning and support for system users;
  - Data reporting and analytics;
  - review and audits to identify further efficiencies.

- Medical & Dental Staff Bank – Operational performance continues to improve. Total hours fill rate for March is 91.06%. Hours filled by Bank – 79.76% and by Agency – 11.82%.   The staff bank has significantly improved our workforce supply.

- People Analytics – Workforce metrics and reporting is currently available for the Nursing workforce via SharePoint. In May this information will be available for all staff groups and all managers will be able to access.

Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

At Cardiff and Vale University Health Board (UHB) we pride ourselves on being a great place to train, work and live, with inclusion, wellbeing and development at the heart of everything we do.

The People and Culture Plan sets out the actions we will take over the next three years, with a clear focus on improving the wellbeing, inclusion, capability and engagement of our workforce.   Five

months on from the launch of the Plan we can already see significant improvements but we know there is much more to do.   The Stakeholder Reference Group is asked to consider:

- How can we ensure that this is a truly integrated People and Culture Plan?
- What one thing can we do differently to move this integrated agenda forward together?

Recommendation:

The SRG is requested to:

- Note the contents of this report and consider the questions asked above

Link to Strategic Objectives of Shaping our Future Wellbeing:
Please tick as relevant

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people		7. Be a great place to work and learn	x
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered
Please tick as relevant

Prevention		Long term	x	Integration		Collaboration		Involvement	x

Impact Assessment:
Please state yes or no for each category. If yes please provide further details.

Risk: Yes/No   no

Safety: Yes/No no

Financial: Yes/No   no

Workforce: Yes/No   yes

if we don't do things differently we will not be able to achieve the objectives set out in our strategy. This is dependent on our workforce and this Plan is our roadmap for achieving this

Legal: Yes/No no

Reputational: Yes/No   no

Socio Economic: Yes/No	no
Equality and Health: Yes/No	no
Decarbonisation: Yes/No	no

Approval/Scrutiny Route:	
Committee/Group/Exec	Date:
n/a	

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Cardiff and Vale UHB People and Culture Plan 2022-25

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**Shaping Our Future
Workforce**

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About the Plan…

- Aligned to SOFW, A Healthier Wales: workforce strategy for health and social care & IMTP (longer term, transformational) but also Winter Plan, Recovery Plan (quick wins)

- High level published plan setting out ambitions and key enablers, supported behind the scenes by series of objectives and actions

- 7 themes - Working in partnership to develop objectives

- Plan needs to be seen in context of the shape of our current workforce and where we need to move to

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Theme 1: Seamless Workforce Models

Our Ambition: To provide holistic and person centred, seamless health & care to our population through a skilled, motivated, healthy & integrated workforce

Challenges we face:

- Embracing new ways of working
- Developing existing roles, building new/advanced roles, skills and capabilities in new areas
- Enabling and empowering the workforce to work to the 'top of their licence' or scope of practice
- Providing a climate for innovation & creativity to enable solutions for real, lasting change
- Harnessing the right skills, in the right number, at the right time, therefore, reducing duplication, waste and avoiding harm wherever possible
- Building a digital ready workforce so that access and geography are not a barrier
- Breaking down organisational barriers

Benefits if we get this right:

- Improved access to services, closer to home – better patient outcomes
- Breaking down boundaries
- Reduce waste, harm and variation - prudent healthcare
- Reviewing operating models/establishments to improve ways of working
- Integrated strategic workforce planning and OD
- engaged and motivated workforce

Key objectives

- Agreeing a common purpose and outcomes that meet the needs of the population
- Develop a seamless workforce framework
- OD programmes to support workforce engagement, leadership development, & to integrate structures, systems & processes
- Lead the strategic and operational workforce and OD plan for the Strategic Plan for Primary Care & Together for Mental Health
- Implement workforce models to support MDT /integrated working, scaling up success
- Development of new and advanced/extended role pathways
- harmonised & integrated T&Cs, governance and learning, education & development

Achievements to date

- Ongoing meetings with LA HR/Workforce Leads to build relationships and shared plans
- Workforce Leads identified for the SOFW projects and connected to projects to understand scope and develop workforce plans
- Developing the infrastructure for Physician Associates and embedding the roles including how we measure impact
- Identifying integrated roles and how we can measure developments

Theme 2: Engaged, Motivated and Healthy Workforce
Our Ambition: To have a workforce that feels valued and supported wherever they work

Challenges we face:

- Staff are feeling exhausted and experiencing burnout
- How do we ensure that our communication channels are enabling our staff to be involved and informed of training, how to participate in surveys and how they can have a voice?
- Staff have stepped into new roles at short notice without support and training
- Staff time to be released (e.g. for training)

Benefits if we get this right:

- Engaged workforce with better patient outcomes
- Improved engagement score
- Increased participation on training / surveys
- Reduced sickness
- Improved retention rates

Key objectives

- Update the engagement framework

- Develop a wellbeing strategy & plan

- Develop coaching and team development
- Focus on communications – training & channels
- Promote and embed UHB values & behaviours
- Staff Surveys (NHS Wales, MES, Pulse, Wellbeing)

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Achievements to date

Engagement/ Surveys

- Results from the Medical Engagement Survey – shared at 2 workshops led by Claire & Meriel

- Burnout/ stress questionnaire to be circulated to medical staff shortly

- Weekly surveys will be sent out to all nursing & HCSW staff to temperature check and identify trends in areas – Winning Temp

Wellbeing

- Upgrading of staff rooms, hydration stations, Swartz rounds

- £5 aroma voucher for staff

Rewards and Recognition

- Staff Recognition Awards postponed and will now take place on 14th July

- Some local events have taken place

Coaching

- Coaching network has been set up

- 38 Coaches progressing through ILM 5 or 7 qualification in coaching and mentoring

- 38 Coachees, consisting of ward managers and deputies have been assigned to coaches

- PushFar platform – electronic system to help coaches and coachees to manage the relationship

Theme 3: Attract, Recruit and Retain

Our Ambition: To attract, recruit and retain high quality and diverse candidates to work at Cardiff and Vale UHB

Challenges we face:

- Large scale vacancies in a number of professions
- High vacancy levels across UK labour market (1.1m)
- Turnover in some staff groups are higher than national average
- High competition from neighbouring Health Boards and other Health /Care employers
- High reliance on Bank and Agency

Benefits if we get this right:

- Improved planning – whole systems approach
- Improved reputation – employer of choice
- Inclusive recruitment
- Improved staff experience and engagement
- Retention of knowledge, skills and experience
- Improved patient experience and outcomes

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Key objectives

- Develop branding for the UHB's job advertising and career promotions
- Promote NHS careers
- Develop and expand a whole systems approach for temporary staffing across multiple professions and roles
- Identify and attract new sources of recruitment
- Review and adapt recruitment processes within the NWSSP parameters
- Develop and implement an action plan to improve staff retention.

Achievements to date

- Kickstart Scheme – of the 162 recruited onto the scheme, 33 have now gained employment with the UHB, 2 have joined apprenticeship schemes, 44 are still currently on the scheme

- Appointed 10 applicants with learning disabilities and autism via Project Search. Their placements will start in September 2022 following the success of the first scheme

- All marketing media for the UHB's Careers Fair on 4 May 2022 has been developed and promoted

- Attended 7 NHS Roadshows in conjunction with Inter Work services during March and April

- Engagement session held with 6 long term unemployed to help to get them back into employment. Work placements are being arranged to help develop their confidence

- All 135 overseas nurses have been appointed by the Nursing Hub and will start between May to November 22

- 91 job offers made and 59 of these have already started work with Facilities following our social media recruitment campaign and Inter Work events

- A revised process and recruitment campaign have been developed for the Temporary Staffing Department to increase the number of staff on the Bank

- Retention – A new Retention Plan has been developed for the UHB and will be implemented over the coming months

- Attended a successful Careers Fair at Cardiff Capital Centre where in excess of 100 people were provided with NHS careers advice.

Theme 4: Digitally Ready Workforce

Our Ambition: To have a workforce that is digitally ready: one which has both the technology available and skills to utilise this effectively

Challenges we face:

- Staff have had to rapidly upskill themselves, in already challenging circumstances

- Implementation of new technologies has highlighted issues with system design

- New challenges e.g. regularity of Teams meetings and volume of email correspondence

- Adoption of new technologies has not yet been universal and the digital divide between those with access and those with

Benefits if we get this right:

- Equal access to technologies
- Enhanced digital skills
- Improved ways of working
- Pushing boundaries to innovate
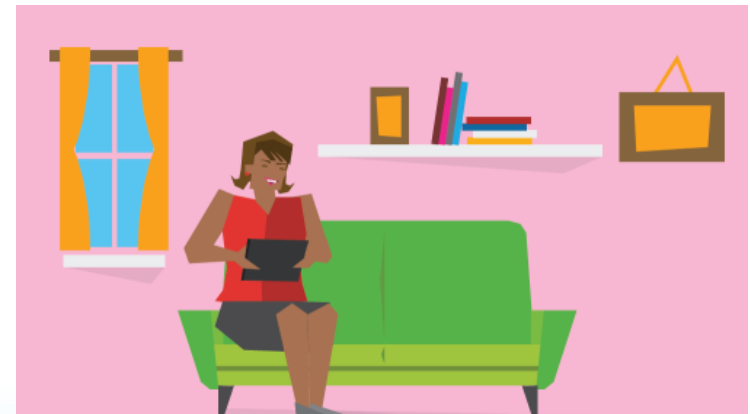
Key objectives

- Improved access to core technologies
- Enable staff to develop a core set of skills
- Develop practices and procedures which enable us to use digital technology effectively, whilst enhancing staff wellbeing
- Maximise the benefits of agile working for the organisation, service and individual
- Keep abreast of enhancements to existing systems and explore new emerging technologies

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Achievements to date

- Agile working framework launched
- Digital Capability Framework under development - engagement discussions held with groups of staff to gather user feedback
- Started engagement piece around barriers facing staff to utilising technology effectively
- Costings of providing staff with NADEX and Office 365 accounts ready to agree funding

- Launched Office 365 Training group
- DCF UHB awarded fully funded places on various ILA offerings, covering a range of staff groups
- Exploration of new technologies to facilitate agile working
- Started mapping exercise to create developmental pathways for staff to enhance digital skills

Theme 5: Excellent Education and Learning

Our Ambition: to invest in education and learning to deliver the skills and capabilities needed to meet the future needs of the people we care for

Challenges we face:

- Unprecedented workforce pressures are significantly compromising ability to release staff
- Funding limitations and limited uptake of externally funded learning opportunities
- The impact of the constraints imposed by the pandemic upon face to face learning.
- Leadership, management and clinical education is well established, however, there are limited development opportunities for many other staff groups which need to be addressed.

Benefits if we get this right:

- Inclusive culture
- Supports workforce redesign and service transformation
- Improved recruitment and retention
- Enhanced patient safety
- Staff wellbeing
- Staff engagement

Key objectives

- Prioritise education & development of the workforce
- Foster an inclusive culture, ensure an equitable approach to education, and supports those who have additional learning needs.
- Develop creative and transformational approaches to education and development
- Raise awareness of the education infrastructure and opportunities

- Review the educational infrastructure, education provision and future needs to inform the development of the organisational education strategy.
- Enable collaborative partnerships to increase access to educational funding for UHB staff and raise the profile of funded educational opportunities.

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Achievements to date

- 264 international nurses achieved NMC registration, celebration event is being planned for when we hit 300 nurses

- Development of the Cardiff and Vale UHB Centre of Excellence for Health Education website is well underway with the launch planned for end of June at the latest.

- 20 UHB HCSW have been progressed to interview for the USW flexible undergraduate programme, which is our largest group to date. Awaiting confirmation from HEIW that they will fund all 20 if they are successful.

- Learning@NHS Wales has now successfully been implemented as the learning platform for UHB specific training. 9 programmes are now available on the platform, we have a total 3,000 active uses and an additional 6 programmes are currently in development.

- 90 managers have been enrolled on ILM level 4 and 5 management apprenticeship programmes in the last 6 months

- Extensive Improvement work being undertaken to work with student representatives to improve student experience

Theme 6: Leadership and Succession
Our Ambition: To help our leaders display collective and compassionate leadership

Challenges we face:

- The need to develop leaders at all levels
- Providing a wealth of development opportunities
- Planning for succession

Benefits if we get this right:

- Improved staff engagement
- Succession planning
- Improved retention
- Enhanced staff wellbeing
- Better outcomes for patients
- Recruiting managers and leaders with compassionate leadership skills

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Key objectives

- Provide opportunities for leaders and managers at all levels to enhance their skills
- Embed Compassionate, Inclusive and Collective Leadership Principles across organisation through effective development and alignment of approach
- Develop, nurture and facilitate coaching and mentoring network to support individual and organisational effectiveness
- Identify potential leaders at all levels of the organisation
- Embed robust succession planning processes to support recruitment to critical leadership roles

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Achievements to date

- The Acceler8 Senior Leadership Programme launched in April 2022, after more than 200 enquiries, 12 people were successful in starting the programme.
- Following interest in the Acceler8 Senior Leadership Programme, the Collabor8 programme is now in development and will be launched Autumn 2022.
- A talent management organisational diagnostic has been undertaken with HEIW and WOD leads have embarked on a series of workshops to shape talent management at an All Wales level.

Theme 7: Workforce Supply and Shape

Our Ambition: To have a sustainable workforce in sufficient numbers to meet the health and social care needs of our population

Challenges we face:

- Supply - significant shortages in some professions, services and skills
- Rising levels of absence, vacancies and turnover
- Lack of capacity and resources for innovation - Workforce Modernisation
- Engagement
- Digital systems
- Lack of capacity – develop & grow our people
- Collaboration between health and social care necessary

## Benefits if we get this right:

- Quality of care improved
- Meaningful strategic workforce planning enabled
- Data and modelling will inform strategic decisions and performance
- Increased capability, agility, efficiency and performance

Key objectives

- Shape decisions about people and the workforce using Workforce Analytics.
- Shape the workforce by growing our people - supply.
- Develop Strategic Workforce Planning capabilities.
- Embed Workforce Systems that drive efficiency.
- Design of the organisation meets the requirements of a modern health and social care system.
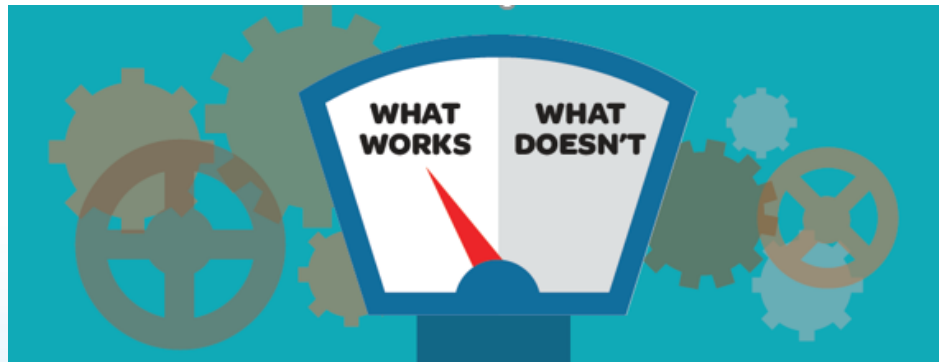
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Achievements to date

Workforce Analytics

- Separate workforce analytics and e-rostering team, creating capacity to deliver against key priorities.

- Improved the accuracy of our data & modelling for HCSW and R/N Improved accessibility - via SharePoint

Workforce Systems that drive efficiency

- Medical & Dental Staff Bank = 91% fill rate (Bank -80%: Agency 11%)

- Optimising medical workforce sessions - e-job planning compliance = 82%

- Restarted the implementation of HealthRoster for our Nursing Workforce on 28/02, also implemented for Facilities & Nurse Bank.

- Secured recurrent funding for e-rostering team

Strategic Workforce Planning capabilities

- Team aligned to UHB Strategic Programmes to ensure that WP is a planning priority.

- National Nursing WP submitted

- Aligned to Regional Workforce Partnership Board.

- Regular meetings with Local Authority

Workforce Shape

- Band 4 Assistant Practitioner roles implemented in Theatres x 6, District Nursing x 12 – further development in other areas. C&V leading All Wales on MH roles.

- Benefits scoped out for Band 3 roles and Health Care Apprenticeships.

Questions for SRG

How can we ensure that this is a truly integrated People and Culture Plan?
What one thing can we do differently to move this integrated agenda forward?

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