

Name of Meeting Board Date of Meeting 23<sup>rd</sup> January 2020 Agenda item: 5.1.230120

Recruitment Deep Dive	
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Approval/Scrutiny route:	n/a

## Purpose

This paper seeks to provide Board with background and assurance on Recruitment within Public Health Wales.

This deep dive report will:

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- Provide an overview of what is required in terms of current and planned recruitment activity in order to deliver our strategy
- Identify any barriers to the recruitment of staff with the talent, skills, competencies and experience required to deliver our strategy
- Where such barriers exist, the report will identify the plans to address these

It is essential that the organisation ensures that it has the people with the right skills and competencies in place in order to deliver its strategy. Delays or failures to recruit to key roles can severely jeopardise our ability to do this.

Recommenda	ation: (note - to	o mark an x in	the grey box b	elow right
click on the me	ouse, then selec	ct "properties",	and then sele	ct "checked")
APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
The Board is asked to receive <b>assurance</b> that potential barriers to				
effective and efficient recruitment have been identified and measures				
are being take	n to address th	ese.		

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# Link to Public Health Wales **Strategic Plan**

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

Strategic
<b>Priority/Well-being</b>
Objective

7 – Building and mobilising knowledge and skills to improve health and well-being across Wales.

Summary impact analysis		
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes  7.1 Workforce	

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#### 1. Situation

This paper seeks to provide Board with background and assurance on Recruitment within Public Health Wales.

This deep dive report will:

- Provide an overview of the current and planned recruitment activity required to deliver our strategy
- Identify any barriers to the recruitment of staff with the talent, skills, competencies and experience required to deliver our strategy
- Where such barriers exist, the report will identify the plans to address these.

It is essential that the organisation ensures that it has sufficient numbers of people with the right skills and competencies in place in order to deliver its Strategy. Delays and challenges in recruiting to key roles can compromise our ability to do this.

### 2. Background

One of the key outcomes of our People Strategy will be the successful delivery of our Long Term Strategy through a sustainable workforce with the right skills that meets current and anticipated needs. Ensuring that we can successfully recruit the right staff with the right skills at the right time is broadly dependent on two things. Firstly, that we have an efficient process for the planning and approval and recruitment of posts, including scoping of roles, development of job descriptions and job evaluation. Secondly, we need to have an overarching strategy and realisable workforce plan to identify opportunities and challenges, address any skills gaps and encourage creative approaches too hard to fill and innovative new posts. In addition, measures to ensure that Public Health Wales is seen as an attractive place to work with an inclusive culture where people of all backgrounds are supported to thrive is key for us.

# 2.1 Recruitment Planning and Process

A review by the People and Organisational Development Directorate has indicated that, once posts are cleared to be advertised, the process runs well. All-Wales key performance indicators (KPIs)'s demonstrate that we compare favourably when measured against other NHS organisations. However, the planning and processes leading up to the point of advertising-the 'pre-recruitment' phase, does not operate as efficiently as it should.

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The review identified that, since March 2019, there had been some significant delays in relation to the pre-recruitment and planning process in some parts of the organisation. This included the scoping and development of roles, drafting of job descriptions, job matching/evaluation of job descriptions and Establishment Control Panel approval.

This situation had been accentuated following the awarding of significant investment monies to some Directorates earlier in the year, which had led to a substantial increase in the number of roles that needed to be developed, scoped and recruited, over and above normal recruitment activity. Consequently, this led to some delays in the pre-recruitment process from March 2019 onwards.

The review concluded that this transactional process needed streamlining and improvement. As a result, steps were taken to remove the delays in the pre-recruitment process. These included the training of additional job evaluation assessors and increasing the frequency of job evaluation panels. Whilst delays in the pre-recruitment process have now been eliminated, it has been recognised that the process itself is not as efficient as it could be.

A business process improvement project was therefore established to look at whether an improved and shortened process could be developed which incorporates KPI's to monitor and evaluate the effectiveness of our pre-recruitment and planning process. This work is ongoing and recommendations are expected in March 2020.

## 2.2 People Strategy and Organisational Workforce Plan

There has been a concerted effort over the last six months to develop a People Strategy and an associated first three years Organisational Workforce Plan. Both are essential tools to enable the organisation to identify the workforce of the future, including the skills, competencies and experience required to deliver our Long Term Strategy.

This work has identified challenges that may impact on our ability to attract and recruit appropriately skilled and experienced people to work for Public Health Wales – particularly as we diversify the range of skills and technology that we will be securing and adopting over the coming years.

Some of these challenges include increasing competition for certain skills, hard to source new specialist skills, organisational culture, leadership, and employee experience. Innovative approaches are already being adopted to address some of these challenges including hybrid approaches to new skills areas that include recruiting specialist roles into the organisation that are complemented by commissioning new specialist skills from relevant industry partners. This approach is already underway in our Knowledge

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Directorate in relation to embedding a more data-science approach, and in the establishment of our new Behaviour Change Unit in our Health and Well-being Directorate.

The organisation is now embedding workforce planning within Directorates (and their senior management teams) across the organisation, with oversight from Strategic Priority Leads, in a more systematic way than we have previously adopted. Each area has identified the workforce required to deliver our ambitious Long Term Strategy and further to consider this future demand against current and projected workforce supply, with long-term plans to mitigate any gaps between workforce demand and supply.

From the work completed to date, it is clear that co-ordinated plans for attraction and recruitment for hard to fill and priority roles are required to offer a number of possible solutions to our workforce challenges. This includes the development of a compelling employee value proposition (EVP) and a far more creative marketing approach to our employer brand for social media and recruitment advertising. In addition to this, we will work with our partners to widen access to careers in Public Health, for example through advanced apprenticeships or other non-graduate routes, to expand our supply of suitably experienced candidates and increase participation and progression from under-represented groups. This work is intended to address a number of issues including succession, our workforce age profile, and the diversity of our workforce, such that we become reflective of the diverse communities we serve and invest in creating our workforce of the future.

Full details are set out in the People Strategy and associated three year draft Organisational Workforce Plan. The People Strategy will be presented for approval at the January 2020 Board meeting.

#### 2.3 Recruitment Issues

'Recruitment Issues' were first cited, by some areas of the organisation, as mitigation for non-achievement of objectives in the March 2019 Integrated Performance Report and again in the October 2019 Integrated Performance Report.

These areas are listed below:

#### **Breast Test Wales**

There are long-standing vacancies in the Radiologist Consultant workforce. These positions are joint appointments with health boards in each region and recruitment difficulties are reflective of a national shortage of suitably qualified individuals. In 2018, there were 379 unfilled Consultant Radiologist posts across the UK, two thirds of which (61%) were vacant for at least a year. To reduce our reliance on Radiologists, a four-tier career

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and development structure for Radiographers has been implemented by the service and we continue to develop and support staff up to Consultant Radiographer level. In addition, we have already begun to explore how we adopt artificial intelligence to the imaging components of our Breast Test Wales programme in the first instance. This is being led by our Head of Programme and Clinical Lead and we will involve the Life Sciences Hub and the Imaging Academy in this work.

## **Bowel Screening**

Specific recruitment challenges persist within the health boards due to requirements for Screening Colonoscopists to have a higher skill level than 'routine' Colonoscopists (including a formal assessment process to demonstrate required competence). There are not sufficient numbers of accredited Screening Colonoscopists in Wales to meet future screening demand.

These staff are not employed by Public Health Wales but their services are required within the bowel cancer patient pathway following screening. There is a national programme of work underway to address this issue, led by the NHS Collaborative and Welsh Government. We are actively involved in this work

## **Substance Misuse (Health and Wellbeing)**

There have been significant issues in relation to funding and a succession of fixed term contract roles within the NHS Settings work area. The Consultant for substance misuse portfolio was reallocated to support the NHS Setting portfolio, leaving no consultant lead for Substance Misuse. There have also been significant vacancies in Band 7 Senior Practitioner roles, who work in a matrix format and support all portfolios within the Health and Well-Being Directorate. New development posts have been designed to address the Band 7 recruitment issues and these development posts are now being taken forward.

# **Adverse Childhood Experiences (ACEs) Support Hub**

We host the ACEs Hub and provide support for recruitment to it. The Hub has had significant staffing challenges caused by individuals in fixed term posts leaving for permanent positions elsewhere and also a vacancy due to maternity leave. These posts have now been recruited to and support put in place.

Some Directorates also reported financial underspend due to vacancies, as follows:

#### Health and Well-Being including Local Public Health Teams

Following the appointment of the Deputy Director to the interim Executive Director post, her substantive role has been vacant and has recently been appointed to on a temporary basis.

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Hywel Dda Local Public Health Team (LPHT), has had significant issues in recruiting to two consultant posts which has resulted in a large underspend and these posts have now been successfully recruited. Savings of £78k were also required due to funding redistribution across the LPHTs.

Betsi Cadwaladr LPHT have had a recruitment freeze, pending a savings plan being developed, again this was to meet the requirements of the funding redistribution.

Aneurin Bevan LPHT have had multiple vacancies which they are trying to recruit to. However, they are also making savings via vacant posts for funding re-distribution.

## **Knowledge**

The Observatory Analytical Team has made internal appointments to vacancies, which have resulted in further vacancies.

Welsh Cancer Intelligence and Surveillance Unit has had a number of Macmillan funded fixed term contracts, with individuals leaving to secure permanent employment.

The Evidence Service has used investment money to recruit. However, the appointment of internal candidates to some posts has resulted in further vacancies.

#### **Quality, Nursing Allied Health Professionals**

It has proven difficult to appoint to the role of Assistant Director of Integrated Governance, and other posts have been held back whilst a paper is prepared for the Business Executive Team, on re-purposing the Directorate. These posts will then be released for recruitment.

These and other issues have been highlighted in the Organisational Workforce Plan and are addressed further in Section 3 of the report.

# 3. Potential Barriers/Risks to Effective Recruitment and Measures to Address These

## 3.1 Recruitment Planning and Process

#### **Pre-Recruitment Process**

A Pre-Recruitment Business Process Improvement project group has been established comprising members of the Business Leads Group and the People Team. Their remit is to employ business process improvement methodology to shorten and improve the pre-recruitment process from beginning to end. This will include the following:

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- a. Develop and establish a Corporate Recruitment Tracker which will provide an overall picture of planned recruitment enabling better forecasting and allowing resources to be targeted appropriately. This will also enable us to develop KPI's to measure recruitment (and pre-recruitment) effectiveness from beginning to end. The requirements for a fit for purpose Tracker are currently being scoped and may form the basis of an investment bid in January.
- b. Implementation of a standard job description template, thus providing consistency and making it easier and quicker for managers to develop new job descriptions. This template is currently in the process of being tested and piloted through the job evaluation process. It is anticipated that it will be rolled out in February 2020.
- c. Establish a new and accessible library of matched job descriptions for all recruiting managers, thus potentially reducing the need for job matching. It is anticipated that this will be launched at the same time as the new job evaluation template in the new year.
- d. Achieve full business engagement and acceptance of the above.

The Senior Leadership team is provided with ongoing progress reports on the project. However, in order to ensure that this work continues at pace, in January 2020 we will be commissioning external expertise to drive and facilitate the process mapping and improvement work, as there is recognition that members of the project team are undertaking this work on top of their 'day job'.

It should also be noted that the current People and Organisational Development structure is under review. This review will be guided by the requirement to deliver the ambitions set out in the People Strategy, and actions detailed in the Organisational Workforce Plan. It is anticipated that a permanent, specialist and dedicated recruitment resource will be required to ensure that attraction, recruitment and retention is at the forefront of the work of the People and OD directorate over the coming months and years. Additional resource has been allocated this year on a temporary basis to support the additional work on recruitment.

## **Workforce Planning**

All Directorates have now developed their own local workforce plans, which have in turn, informed the development of the three-year Organisational Workforce Plan. Whilst this is still currently in draft format and will be further developed over the next two months, an extract, attached at Appendix A, shows the workforce actions required over the next three years mapped against our Strategic Priorities.

To ensure these actions are delivered, it is now vital that workforce planning continues to be further embedded throughout the organisation, through

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further iteration of the Organisational Workforce Plan and the development of detailed attraction and recruitment plans as appropriate.

This work will be taken forward by Directorate senior managers, supported by their People and Organisational Development Business Partners, and will be key to ensuring that we are able to effectively plan for our future recruitment needs. This work will include the development of approaches to address current shortage specialties and hard to fill roles, and anticipated skills gaps.

#### **New Posts**

A number of workforce planning actions relate to the recruitment of new posts, reflecting the receipt of additional investment across the organisation, for example in Health and Wellbeing, Improvement Cymru and Public Health Services.

A large proportion of these posts are due to be recruited before the end of the first quarter of 2020/2021, which will pose a challenge in terms of the recruitment and induction of such a high volume of staff. Both Directorates and the People and Organisational Development team will need to devote sufficient resources to this activity over the forthcoming months.

Work is ongoing, with growth plans being developed in conjunction with workforce plans, which are closely aligned with finance, IT and facilities to ensure a joined up approach to delivery. We are currently changing the focus of some of our existing resources to deal with the additional demand and regular updates will be provided to Business Executive Team.

The People and Organisational Development team hold a detailed spreadsheet of planned recruitment which is reviewed and updated through regular discussion and agreement between Directors and Senior Managers and their respective People and Organisational Development Business Partners. This shows that, in addition to the usual recruitment to like for like posts, there will be a significant peak in potential recruitment activity in the first quarter of 2020/2021, as follows:

Directorate/Division	Quarter 1 2020/21
Health Improvement	19
Improvement Cymru	39
Knowledge	3
Operations and Finance	11
Public Health Services	20

It is also anticipated that a small number of additional posts will be required in Screening in relation to Bowel Screening Wales optimisation project, and detail is expected by the end of the current financial year.

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In order to address this peak, between January and March 2020, senior managers within the above Directorates/Divisions are being asked to identify resource/individuals to work with the People and Organisational Development team in order to produce detailed recruitment plans and develop job descriptions/person specifications. It is important to recognise that, to be successful, sufficient time and resource needs to be devoted to recruitment planning. For example, the development of a good job description can be very time consuming to get right, but is crucial in attracting the candidates required.

In addition to the on-going support provided to Directorates by the People and Organisational Development Business Partners, resources will be deployed within the Directorate to establish a small team to support this work in the short term. In the longer term, the requirement for a dedicated recruitment team will be considered as part of the People and Organisational Development structure review.

The People and Organisational Development Team are very much reliant on Directorates identifying their recruitment needs at an early enough stage to allow for adequate planning to take place. In some instances, there has been a lag between the allocation/receipt of investment monies and the identification of subsequent recruitment needs by Directorates. This has not allowed much time for planning, scoping of roles and drawing up job descriptions/person specifications etc.

Whilst recruitment forecasting will never be an exact science, early notification from Directorates will allow for improved forward planning, enabling the identification of recruitment peaks and troughs and better planning of recruitment campaigns, as well as the development of more creative solutions to recruit too hard to fill posts.

# 3.4 People Strategy

The People Strategy has identified a number of key areas which will be essential to address over the forthcoming years:

#### **Hard to Fill Posts**

We have known for some time of the significant recruitment challenges in areas such as Radiology, Radiography and Microbiology (medical and scientific), and have anticipated that new recruitment challenges may arise in areas of emerging skills such as data science including analysts and bioinformaticians.

Some work has already been completed to address these issues, such as the development of a four-tier career structure and professional development programme in Radiography to reduce reliance on Radiologists. However, there are also issues with the supply of Radiographers across the

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UK and so it may be beneficial to develop a number of additional solutions to address such a multi-factorial challenge. It is anticipated that the People and OD Team will need to work closely with senior managers in the Directorates to develop of a number of options to address hard to fill posts. Some of these are likely to be long-term and will necessitate increased public awareness of the organisation as an employer, capitalising on links to existing professional networks, and showcasing what Public Health Wales can offer those individuals with skills in high demand.

Through the development of local workforce plans we now have a far clearer picture of our future skills requirements across the organisation, as well as challenges to the current and future supply of some of these skills.

For example, QNAHPs plan to co-design and implement an integrated governance framework which supports ways of working at all levels of the organisation but have previously found that there are challenges in relation to the workforce supply of individuals with integrated governance skills and other requisite expertise. Similarly, some managers have reported significant challenges recruiting into data science roles due to a limited talent pool and competition from the private sector and government agencies that could affect attempts to recruit in this area

Other key skills priorities identified through workforce planning include digital literacy; behavioural science; social media/social marketing; improvement techniques; epidemiology; research and evaluation including evidence review, statistical analysis and data science; developer (IT systems) skills; project management; business management; and Welsh language. Specialist knowledge of Health Economics, ACEs, violence prevention, housing policy and Dental Public Health have also been reported as a concern, with only a small pool of people with the requisite knowledge and skills.

We have already seen some work to address some of these skills gaps. Examples include adjusting structure and job design to make better use of resources, for example, transferring responsibilities of higher skilled or medically-qualified individuals to other roles within the same area of work, along with investment in new technology to assist and augment some of the more routine work activity. Similarly, adjusting the career progression of biomedical scientists to enable career progression and flow and investing in clinical scientists in our microbiology teams. We have also had some success in offering targeted secondments when open recruitment has not been effective.

With relatively inflexible NHS terms and conditions and, to an extent, limited rewards it is vital to think more broadly about what the organisation can offer as an employer, and how well this meets the expectations of our

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current and future workforce. If the external market cannot produce the skills and staff required in the long term, the organisation will need to consider recruiting at entry level and developing staff into the necessary specialisms over the course of their careers.

This is particularly important for persistent shortage specialities such as Radiology, Radiography and Microbiology, where demand continues to outstrip supply and where we know that the development of the Welsh National Health Protection Service will result in increased demand for Microbiology Consultants, Health Protection Nurses and Epidemiologists. It will also require further development of existing roles such as Biomedical Scientists to support the delivery of a more clinically orientated service. This is currently being addressed through a number of work-streams, including one specifically focussed on the future workforce requirements, to ensure that the organisation can deliver an integrated National Health Protection Service for Wales.

#### **Talent Management**

Investing in our current and future talent is resource intensive but is essential if we are to address some of the issues identified above and are to deliver our long-term strategy. The People and Organisational Development Directorate has been developing our approach to talent, which brings together two perspectives – the organisation and the individual - focusing development where it is needed by the business and where it is a good fit for the aspirations and abilities of individuals.

The approach outlines 'what' our approach to talent management should be, and an accompanying toolkit is being developed alongside this, which will outline 'how' we will support the approach. A session with the Executive Team is scheduled in January 2020 to test the approach to better managing our talent and succession.

#### **A Diverse Workforce**

The organisation's workforce is predominantly middle-aged, white and female, and therefore not yet reflective of the diverse communities of Wales. We are also striving to meet the language preferences of our service users and partners, to promote the use of the Welsh language throughout Wales, and use every opportunity to embrace the Welsh language and promote the rich cultural identity of Wales. A number of actions have been identified to improve diversity and inclusion and these are detailed in the organisation's Strategic Equality Plan, which is due to be submitted to Board in 2020.

The age profile of the organisation presents a particular risk in terms of loss of knowledge and expertise through impending retirement. Nearly one third (31%) of the current workforce is over 50 years of age, compared with 5%

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of staff aged 25 or younger. While succession plans will be critical to mitigate the risk of losing people in critical roles, there is also an opportunity which we have not yet exploited, to recruit from a pool of talented individuals who are younger than our typical employee.

The People and Organisational Development team is currently working with partners in the organisation and across the health and social care system to develop an approach to engaging with young people from all backgrounds, ensuring that we support young people to be equipped for work within the disciplines we require, while raising our profile as an employer. We envisage that the key opportunities for young people must be fully integrated across the population of Wales.

For example, improved co-operation with schools, further education colleges and universities could allow us to influence the curriculum and create a cohort of talented individuals with awareness of the organisation and the careers available in Public Health Wales. A work-placement scheme linked to the Masters in Public Health could allow us the opportunity to build a relationship with future Public Health professionals and provide an 'employment-ready' workforce, thus reducing recruitment issues in this area.

## **Apprenticeships**

Apprenticeships are available up to and including at degree level, and the use of such Apprenticeships will be key to growing and developing our future workforce. The first phase of our approach to Apprenticeships focused on our current workforce, who as a result of taking up Apprenticeships, have been able to enhance their current roles and career aspirations. This approach has resulted in over 40 employees undertaking Apprenticeships through core training contract providers across Wales over the past 18 months.

Guided by the content of our workforce plans, our approach will now evolve to consider existing Apprenticeship Frameworks that are available across Wales and link to the skills shortages, gaps and succession planning issues identified in the Organisational Workforce Plan and People Strategy. An investment in early career initiatives (Bands 2-4) would help to create a talent pipeline into more senior roles needed throughout the organisation. The next phase of our approach to Apprenticeships will be begin in 2020.

#### **Culture and Leadership**

Recent studies indicate that the top predictor of workplace satisfaction is culture, closely followed by the quality of leadership, and career opportunities. The organisation will need to develop a culture where people at all levels are empowered as individuals, and in teams, to act to improve

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services within and across the organisation, thus making PHW an attractive place to work for prospective employees.

Our organisational values, 'working together with trust and respect to make a difference' should guide our behaviours. The People and Organisational Development team has developed a behavioural framework linked to our values which sets out how we will work with others to deliver our outcomes for the people of Wales.

The behavioural framework is currently being piloted through the recruitment process by including behavioural requirements in person specifications in a range of roles across the organisation. The pilot aims to embed approaches to assessing behavioural fit, as well as for technical and professional ability. Following evaluation and refinement, we intend to use the framework as part of the My Contribution process to ensure 'how' people undertake their roles' becomes as important as 'what' people do within their roles, ensuring that values-based behaviours are integrated in all that we do.

## **Employer Brand and Employee Value Proposition (EVP)**

An employer brand is a set of qualities or attributes that makes an employer distinctive. A compelling employer brand can raise awareness of the organisation's strategy; help to attract more applicants to apply for our roles; attract higher-quality applicants; increase candidate engagement; build trust with current workforce and prospective candidates; and reduce unwanted turnover.

An employer brand promises a particular kind of employment experience which appeals to those who will thrive in its culture. A key part of an organisation's brand will be its culture and values, which are sometimes seen as the moral standards of the organisation and strong employer brands connect an organisation's culture, values, ethics, people strategy and policies.

To develop an employer brand, an organisation must first identify and develop what it sets out as its Employee Value Proposition (EVP). An EVP is designed to have a positive and long-term impact, from attracting, selecting and inducting new colleagues to how the organisation deploys, develops and engages those people once employed. The starting point must be the organisation itself, the actual lived experiences of people working within Public Health Wales. There needs to be an understanding of the organisation as a workplace and consideration of what it feel like to work in PHW. This will help us to establish, and articulate, what it is about the employment experience that we offer which is particularly valued by our people.

Work is underway to develop our employer brand and EVP and more detail will be provided in 2020.

#### 4. Conclusion

This report provides an overview of issues in relation to current and planned recruitment activity in line with both the three year Organisational Workforce Plan and local Directorate workforce plans.

Potential barriers/risks to effective and efficient recruitment and action taken or planned to address these risks have been detailed. They can broadly be categorised as follows:

# 4.1 People and Organisational Development Responsibilities

The People and Organisational Development Directorate will continue to support all directorates to embed Workforce Planning such that it becomes an integral part of the regular medium-term planning cycle. It will specifically support the development of co-ordinated plans for attraction and recruitment for hard to fill and priority roles, including the development of a compelling employer brand.

People and Organisational Development will consult widely to develop a cultural narrative and employer brand for new and existing staff that reflects what matters most to our workforce and describe this in terms of everyday actions and behaviours.

The People and Organisational Development team will also work with our partners to widen access to careers in Public Health, e.g. through advanced apprenticeships or other non-graduate routes, to expand our supply of suitably experienced candidates and increase participation and progression from under-represented groups.

They will ensure that the Business Process Improvement project into Pre-Recruitment will seek to identify improvements to our current prerecruitment processes, leading to a more efficient process with measurable KPI's from beginning to end.

In the short term, they will establish a small team to support the People and Organisational Development Business Partners and Directorates in the recruitment planning process, with particular emphasis on the first quarter of 2020/2021. In the longer terms and in order to deliver the ambitious plans set out as part of the People Strategy, a fundamental review of the existing People and Organisational Development structure is underway and a new structure will be proposed in consultation with key stakeholders.

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## 4.2 Directorate Responsibilities

Directors will identify individuals/resources to work with the People and Organisational Development team to plan the recruitment required, particularly for the first quarter of 2020/21.

Considerable work has taken place within Directorates to develop local workforce plans. Directorates will now work with the People and Organisational Development Business Partners to build on this work to ensure that they are able to address the issues highlighted within those workforce plans.

They will work with People and Organisational Development colleagues to develop creative and sustainable solutions to their skills gaps, looking beyond past practice of automatically recruiting to like-for-like roles or 'tweaking' existing roles, and seeking more creative and sustainable approaches wherever possible.

#### 5. Recommendation

The Board is asked to **receive** this report and consider the **assurance** it provides in relation to recruitment and to support the approach to workforce planning and recruitment (and underpinning activity) outlined in sections 4.1-4.2 above.

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# **Appendix A**

# **Organisation-wide**

Ensure we have the right type of workforce, aligned in the right ways, including the Specialist and Practitioner Public Health workforce, to ensure delivery of the Long Term Strategy.

Ensure we are able to manage effectively with the predicted level of turnover resultant from impending retirements.

Ensure we are able to attract and recruit appropriately skilled and experienced people to work for Public Health Wales.

Ensure a diverse workforce that is reflective of the populations we serve, and equipped with the Welsh language skills to offer participants and service users our services in Welsh.

Owner(s)	Year 1: 2020-21
Business Executive Team Senior Leadership Team People and OD	1. Through the process of annual workforce planning, establish the workforce required to deliver <i>each of the strategic priorities</i> , including role mix, grade mix, skill mix, placement of roles in the wider Public Health system, and consider this future demand against current and projected supply, with long-term plans to mitigate any risks/gaps.
	2. Consult widely to develop a cultural narrative for new and existing staff that reflects what matters most to our workforce and describe this in terms of everyday actions and behaviours.
	<ol> <li>Develop co-ordinated plans for attraction and recruitment for hard to fill and priority roles, including the development of a compelling employee value proposition and employer brand for social media and recruitment advertising.</li> </ol>
	4. Work with our partners to widen access to careers in Public Health, e.g. through advanced apprenticeships or other non-graduate routes, to expand our supply of suitably

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Organisation-wide	
	experienced candidates and increase participation and progression from under- represented groups.
	5. Establish a strategic, priority-led investment planning process for funding skills education and training
Job Family Leads People and OD	6. Determine career pathways/development routes across the organisation, identify the knowledge, skills, experience, and behavioural competencies, required for the achievement of each stage including registration requirements, professional standards etc., and develop approaches to enable movement through these structures, including potential for re-deployment and rotation of staff across different part of the system. Including work with others in the health and social care system to develop new working practices that enable agility in respect of recruiting and deploying our people throughout public services in Wales.
	7. Develop enabling processes that give people ownership and choice over how to manage their careers, including working patterns, through their working lives.
Operations and Finance	8. Explore options for creating a shared resource within the current Operations and Finance establishment.
	9. Undertake an assessment of the Information Management and Technology team structure to ensure it is aligned with the new emerging operational model and to supplement the team with the capacity and capability to take forward digital agenda to enable the organisations vision for the future. Develop the strategic, control and planning layer to enhance the capabilities and capacity via support from additional resources to provide the necessary skills within the Information Management and Technology function. Including review of the governance arrangements and risks associated with the in-house development activity to determine the appropriate future course of action.

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Organisation-wide		
	10. Continue to roll out project management approaches, resources and community of practice (including a programme of learning) for project managers. This will include rolling out Microsoft Project, project management and Microsoft Project training across the organisation.	
	11. Recruit posts to Microsoft 365 programme using agreed funding for digital investment, details included at Appendix 2.	
	12. Scope existing BI reporting tools and skills within the organisation and upskilling through relevant training packages on using BI tools. This is expected to lead to the development of proposal for increasing corporate analytics capacity.	
	13. Establishment of a Data Science Innovation Team who will continue with the development of an innovative and up-to-date data science model.	
	14. Work with our partners to increase digital literacy of our colleagues to enable us to exploit the data and technology opportunities in our work.	
	15. Increase capacity in digital and graphic design skills to enable the organisation to become the leading source of Public Health information for partners throughout the system and including the general public.	
Business Executive Team Senior Leadership Team	16. Audit of current staff Welsh language skills. Ensure all future recruitment uses the Assessing Welsh language Skills Needs for Recruitment tool.	
People and OD	17. Welsh language skills training required for reception areas and for clinical consultations, etc.	
Quality, Nursing and Allied Health Professionals	18. Consideration to be given to Directorate structure and functions, e.g. supporting Directorates to develop quality indicators and taking forward 'Our approach to engagement' recommendations. Work with colleagues to establish whether opportunities exist to create different career opportunities and routes for staff development.	

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Organisation-wide		
Owner(s)	Year 2: 2021-22	
People and OD	19. Implement a new programme that supports managers and leaders to embed the culture and new ways of working with a greater focus on secondments, coaching and digital resources	
	20. Embed new working practices that enable agility in respect of recruiting and deploying our people across traditional boundaries	
	21. Establish succession plans throughout the organisation, identifying key roles, assessing the capability internally for succession and identifying actions to enable this succession. This will be key to mitigate the risk of loss of skills through voluntary attrition, including retirement.	
	22. Implement a toolkit and processes to give people greater ownership and choice of their career path at a given time	
Owner(s)	Year 3: 2022-23	
People and OD	23. Ensure access to a digital capability and readiness programme and resources.	
	24. Implement a comprehensive apprenticeship programme for bands 2 and 3 across the organisation.	
	25. Implement a wide ranging volunteering programme with which all staff can engage.	

# 1. Influencing the wider determinants of health

Ensure we have the necessary roles and skills to collaborate with others across the wider Public Health system to influence the wider determinants of health, by building teams of staff operating on a locality level or across localities with adequate administrative and coordination support in place as well as sound business and governance management.

Workforce Action Required		
Owner(s)	Year 1: 2020-21	
Strategic Priority Lead Executive Directors of Health and Wellbeing, Knowledge	1.1 Recruitment of key roles to develop and support a communications strategy with key personnel from within Public Health Wales and across partner agencies and to monitor impact and input to policy development. This will require increased business support, governance and project management expertise, content producers, researchers and research coordination administration as well as administrative staff.	
Owner(s)	Year 2: 2021-22	
Strategic Priority Lead Executive Directors of Health and Wellbeing,	1.2 Establish a core Health Needs Assessment capability in support of evidenced based recommendations and reducing inequalities, and provide training and experience of Health Needs Assessment.	
Knowledge	1.3 Ensure local teams work with a range of partners to understand how other organisations work to provide better support, maximise our impact through a 'place based' approach/ communities/ hubs and explore alternative ways to deliver population health action e.g. by working with the third sector or local authorities.	
Owner(s)	Year 3: 2022-23	
Strategic Priority Lead	1.4 Review skills and role requirements following the identification of areas for further in depth housing and health policy analysis, and development of environmental hazard and health	

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# 1. Influencing the wider determinants of health

Executiv	/e	Di	rectors	of
Health	an	d	Wellbei	ng,
Knowled	lge			

tracking surveillance etc. to ensure the necessary roles and skills to collaborate with others across the wider Public Health system to influence the wider determinants of health.

# 2. Improving mental well-being and resilience

Ensure we have the necessary roles and skills to enable improvements in mental well-being and resilience for our service users, our staff and across the wider system throughout Wales.

Owner(s)	Year 1: 2020-21
Strategic Priority Lead Executive Director of Health and Wellbeing	<ul> <li>2.1 Recruitment of a Consultant in Public Health to Mental Wellbeing and Communities role to enable dissemination of conceptual model of mental well-being and resilience, deliver national conversation, and implement inclusive programme.</li> <li>2.2 Develop skills and experience in mental well-being and resilience, whole system working, making sense of complex situations and developing simple solutions, promoting</li> </ul>
Owner(s)	transformational change and supporting training opportunities.  Year 2: 2021-22
owner(s)	1 Cui 2: 2021 22
Strategic Priority Lead Executive Director of Health and Wellbeing	2.3 Continued recruitment and development of workforce in line with local workforce plans to ensure the necessary roles and skills to enable improvements in mental well-being and resilience for our service users, our staff and across the wider system throughout Wales.
Owner(s)	Year 3: 2022-23
Strategic Priority Lead Executive Director of Health and Wellbeing	2.4 Review skills and role requirements to support continued evidence-based action to promote mental well-being and resilience.

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# 3. Promoting healthy behaviours

Ensure we have the necessary roles and skills to understand the drivers of unhealthy behaviour and promote health behaviours across the wider system throughout Wales.

Owner(s)	Year 1: 2020-21		
Strategic Priority Lead  Executive Director of	3.1 Establish new Public Health behavioural science capacity and capability including within research and evaluation; public health nutrition; social marketing.		
Health and Wellbeing	3.2 Establish obesity system leadership team including options for secondment plus a general manager role (8a) for the Health Improvement Division to facilitate effective and efficient business delivery (subject to funding).		
	3.3 Create lead Consultant roles for Physical Activity, Nutrition and Obesity; Tobacco Alcohol and Drugs		
	3.4 Work with partners to agree a future vision for Public Health Practitioners including recruitment and development, including a plan to increase capacity at Advanced Practitioner level and ensure sustainable workforce at each level of the Public Health Skills Framework.		
	3.5 Identify resources to support education and training at Masters-level for Public Health Advanced Practitioners, including options for advanced Apprenticeships.		
Owner(s)	Year 2: 2021-22		
Strategic Priority Lead Executive Director of Health and Wellbeing	3.6 Implementation of plans to increase capacity at Advanced Practitioner level, and ensure sustainable workforce at each level of the Public Health Skills Framework to ensure we have the necessary roles and skills to understand the drivers of unhealthy behaviour and promote health behaviours across the wider system throughout Wales.		

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Owner(s)	Year 3: 2022-23
Strategic Priority Lead Executive Director of Health and Wellbeing	3.7 Continued recruitment and development of workforce in line with local workforce plans.

# 4. Securing a healthy future for the next generation

Ensure we have the necessary roles and skills to work with parents and services to ensure the best start in life for all children in Wales.

Owner(s)	Year 1: 2020-21	
Strategic Priority Lead Executive Director of Health and Wellbeing	4.1 Succession planning and talent management to provide leadership, vision and cross-system support for sustainable development of this area of work. This will include a Head of Development Team role at 8c for First 1,000 Days Programme; Healthy Pre-Schools (subject to funding).	
Owner(s)	Year 2: 2021-22	
Strategic Priority Lead Executive Director of Health and Wellbeing	4.2 Increase Dental Public Health Consultant Capacity and Public Health Dental analyst skills and knowledge within the team (subject to funding).	
Owner(s)	Year 3: 2022-23	

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Strategic Priority Lead		
Executive	Director	of
Health and	Wellbeing	

4.3 Continued recruitment and development of workforce in line with local workforce plans.

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# 5. Protecting the public from infection and environmental threats to health

Date: 17/01/2020

Ensure we have the necessary roles and skills to protect the public from infection and environmental threats to health, including the development of a National Health Protection service for Wales, which will deliver a world-class service for the prevention, management and control of infection.

# **Workforce Action Required**

Owner(s)	Year 1: 2020-21
Strategic Priority Lead Executive Director of Public Health Services	<ul> <li>5.1 Develop a National Health Protection service for Wales through a dedicated workforce work-stream. Review current arrangements and change requirements in light of proposed service model, identify recruitment and training challenges and retirement profile, and recommend workforce actions for the medium- to long-term.</li> <li>5.2 Work to detailed recruitment plans to deliver a world-class service for the prevention, management and control of infection, including recruitment of additional Field/Hospital Epidemiologists to provide increased epidemiology capacity and strengthened specialist workforce through recruitment of Consultants in Communicable Disease Control/ Consultants in Health Protection; Health Protection Nurses; and Administrative members of staff.</li> <li>5.3 Deliver the UK Anti-Microbial Resistance Strategy (AMR) for Human Health in Wales, enabled by the recruitment of Medical writer (antimicrobial guidelines); Lead Community Infection, Prevention and Control Nurse; Lead Community Antimicrobial Pharmacist; and Information Analyst.</li> <li>5.4 Increase capacity in Air Quality/ Environmental Public Health enabled by recruitment of Health Protection Practitioner/Nurse or Scientist; and Surveillance Analyst.</li> <li>5.5 Increase capacity in communicable disease prevention (including targeted focus on Immunisation uptake), enabled by recruitment of Specialist Nurses and Surveillance Analyst.</li> <li>5.6 Implement the recommendations from the Sexual Health review including securing funding for continuation of Sexual Health Project Lead (Prisons) post. Post appointed to on</li> </ul>

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- a fixed-term basis (funding provided by Welsh Government). Identify project management support for Case and Incident Management system when funding is confirmed.
- 5.7 Reconfiguration of teams to support the proposed service model, including the development of multi-disciplinary teams with skills to deliver rapid molecular testing services at the hot labs.
- 5.8 Review the 'out of hours' requirements and agree core working hours to reflect workload patterns, e.g. 08:00-22:00 Monday to Sunday.
- 5.9 Development of colleagues to use the platforms as part of the 'out of hours service'. This will include Consultant Healthcare Scientists with specialist interests to support the clinical as well as diagnostic service.
- 5.10 Review options and develop recruitment and retention plans, including a career progression framework for Biomedical Support Workers, and Biomedical Scientists, complemented by growth of Assistant Practitioner roles and responsibilities, and an ongoing 'Grow Our Own' programme with closer links with Universities for sandwich courses/ apprenticeships.
- 5.11 Development of clinically facing roles to increase attractiveness of role, will require new competency framework and training/ education capacity
- 5.12 Implement recommendations arising from centralised authorisation project. This is intended to reduce the time burden on medical staff, releasing them for other duties whilst offering an attractive career progression for other staff groups.
- 5.13 Further develop research skills in microbiology and infectious diseases prevention and control.
- 5.14 Ensure appropriate capacity to deliver responsibilities in relation to Civil Contingencies Act, Emergency Planning and Business Continuity supported by Emergency Planning support, and increase capacity and capability in relation to business management support workforce.

## Owner(s)

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Strategic Priority Lead Executive Director Public Health Services	of	5.15 In line with local workforce plans, continue workforce redesign of more clinically facing roles.
Owner(s)		Year 3: 2022-23
Strategic Priority Lead Executive Director Public Health Services	of	5.16 Continued recruitment and development of workforce in line with local workforce plans to ensure the necessary roles and skills to protect the public from infection and environmental threats to health.

# 6. Supporting the development of a sustainable health and care system focussed on prevention and early intervention

Ensure we have the necessary roles and skills to support the development of a sustainable health and care system focussed on prevention and early intervention. This will include appropriate locations, hours, technology, and Welsh language skills to meet population need and service user expectations across our screening programmes and the necessary workforce to develop Quality Improvement capacity, and maximise any investment in this area for the benefit of the health and social care system and beyond.

Owner(s)	Year 1: 2020-21
Strategic Priority Leads  Executive Directors of Health and Wellbeing; Improvement Cymru, Public Health Services; ONAHP	6.1 Development of an agile workforce able to respond to work requests and able to work across programme areas, supporting organisations in creating the necessary improvement infrastructure, cultural conditions and skills to achieve transformation, supporting the increased capability of local teams to address local service challenges. Ensure all current team gain knowledge and experience in the support and delivery of PHM and upskill colleagues to understand and promote the new brand through social marketing.
	6.2 Recruit a number of new roles to support international collaboration and WCISU development, support the Public Health Wales Research and Evaluation Strategy through its six points and in terms of population cancer research as set out in the NHS Wales Cancer Research Strategy. This includes a Cancer Researcher; Epidemiologist; WCISU Analysts; WCISU project manager; Administrative/ project support for CMP (due to expansion of the programme) and CARIS (due to NIPT Evaluation and expanding research culture). Detailed staff profile for CARIS to be developed in 2020/21.  6.3 Recruitment to small number of new roles in research and evaluation. It is anticipated that a high level of IT resource will be required. If this is in-house, this will require IT staff time.

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Close co-operation required (with Information Management and Technology colleagues) to identify and agree IT support required.

- 6.4 Work with HEIW and NHS Health Boards and Trusts to increase specialist Safeguarding knowledge and skills, through the development and delivery of Safeguarding training to support and increase knowledge base.
- 6.5 Bowel Screening Wales optimisation modelling exercise ongoing. Potential workforce implications include small numbers of additional staff required on telephone helpline; small numbers of additional laboratory staff; additional nursing staff. More trained, accredited, screening colonoscopists in the health boards, plus wider work to look at Advanced Practice Nurse Colonoscopists with screening accreditation. Detailed workforce implications to be confirmed Q1 2020/2021.
- 6.6 Diabetic Eye Screening Wales. Recruit to transformation team (small numbers to lead project) to scope workforce implications of the transformation over the next 1 year. Training to be delivered to existing staff on new call/re-call system (approx. 50-75 people). Detail to be confirmed after scoping exercise at end Q1 2020/21. Any additional workforce implications will come out of scoping work in Q2 2020/21.
- 6.7 Cervical Screening Wales. Based on London pilot of self-sampling, small additional workload anticipated, likely to result in small numbers (<5) additional laboratory staff needed for booking in. Work ongoing to expose existing cytology staff to wider BMS work and broaden training base.
- 6.8 Wales Abdominal Aortic Aneurysm Screening. Currently working on activity and pathway improvements to encompass skill mix, staffing requirements and screening venues. Detailed recommendations to be confirmed by end Q1 2020/21.
- 6.9 Breast Test Wales. Long-term plan is that workforce will work together across screening and symptomatic services. This may result in new or extended roles, e.g. Advanced Practice Nursing roles and/or development of more/ new joint appointments. Will require partnership working, relationship building, influencing and negotiation skills. This has the potential to deliver screening pathway efficiencies, which may in turn make the service more attractive to

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	Radiologists and Radiographers. This work will be led by the Collaborative and is anticipated to commence in late 2020/21.  6.10 Explore suitability and sustainability of establishment of a small team of staff within the Division to lead and deliver screening specific requirements, e.g. HCSW Diploma requirements. Initial proposals suggest 2-3 staff, band 5-7.  6.11 Liaise with Information Management and Technology colleagues to identify and agree significant IT developer support required to achieve changes planned across IT systems in the Screening Division in medium- to long-term.
Owner(s)	Year 2: 2021-22
Strategic Priority Leads Executive Directors of Health and Wellbeing; Public Health Services	<ul> <li>6.12 Investigate potential introduction of Artificial Intelligence into work-streams in some population screening programmes. This is likely to augment existing roles and address some staffing issues in e.g. Radiology. Could positively influence quality and allow clinicians time to do other work.</li> <li>6.13 Investigate Business team requirements in order to keep oversight of all project work ongoing. Potential to liaise with PMO to train staff to lead projects. Project management skills development needed across a number of management roles.</li> <li>6.14 Plan to recruit small numbers (&lt;5) Biomedical Scientists (BMS) during year 2 and year 3. Changes in screening programmes will impact volume of work into the laboratory. If increased workload results in purchase of additional automation as expected then small numbers of additional scientific staff required.</li> </ul>
Owner(s)	Year 3: 2022-23
Strategic Priority Leads Executive Directors of Health and Wellbeing; Improvement Cymru,	6.15 Continued recruitment and development of workforce in line with local workforce plans to support the development of a sustainable health and care system focussed on prevention and early intervention. This will include appropriate locations, hours, technology, and Welsh language skills to meet population need and service user expectations across our screening

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Public	Health	Services;
QNAHP		

programmes and the necessary workforce to develop Quality Improvement capacity, and maximise any investment in this area for the benefit of the health and social care system and beyond.

# 7. Building and mobilising knowledge and skills to improve health and well-being across Wales

Ensure we have the critical skills required to build and mobilise knowledge and skills to improve health and well-being across Wales, e.g. evidence reviews, data collection, knowledge creation, knowledge management, collaboration and sharing of intelligence.

Owner(s)	Year 1: 2020-21
Strategic Priority Lead Executive Directors of Knowledge; People and OD; Policy and International Development, WHO CC	<ul> <li>7.1 Strengthen capacity in in-house statistical modelling expertise/ analyses using complex datasets to maximise the potential through recruitment of a number of data science and research roles (subject to funding) and development of staff to use R statistical software.</li> <li>7.2 Explore secondments in/out from Public Health Wales Observatory, higher education and other sectors to build capacity and capability in statistical skills, evidence review, modelling skills, bid writing etc. within existing teams and allow for the development of knowledge transfer partnerships.</li> </ul>
	7.3 Enable evidence review and mobilisation of knowledge through recruitment of a number of new roles to support the evaluation and impact team, the research governance team, working across the organisation to implement the research and evaluation strategy and support the development of a Public Health Research Institute. Expertise required in systematic review / bid writing post to support identification of research gaps and targeted bids.

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	<ul> <li>7.4 Recruit small number of additional staff to improvement, measurement and communications roles, plus recruitment and training of Health Impact Assessment practitioners (subject to funding).</li> <li>7.5 Recruitment and development of workforce to enable the establishment of a new Behavioural Change Unit to deliver high quality advice, approaches and techniques to policy makers, practitioners and the public.</li> </ul>	
Owner(s)	Year 2: 2021-22	
	7.6 Continued recruitment and development of workforce in line with local workforce plans to ensure we have the critical skills required to build and mobilise knowledge and skills to improve health and well-being across Wales, e.g. evidence reviews, data collection, knowledge creation, knowledge management, collaboration and sharing of intelligence.	
Owner(s)	Year 3: 2022-23	
	7.6 Mid-term evaluation review for Knowledge Mobilisation implementation - key learning points shared across the organisations to inform future work to improve how workforce skills and knowledge are developed and shared across the system.	