GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales	**Name of Meeting** Board **Date of Meeting** 30 July 2020 **Agenda item:** *5.7*

Public Health Wales Workforce Report

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Approval/Scrutiny route:	Business Executive Team meeting on 21 July 2020

Purpose

This paper provides the Board with an overview and assurance on a range of workforce issues that will assist and enable the organisation to continue to deliver the Health Protection Response and also to now begin supporting the implementation of Recovery Plans.

Specifically, assurance is provided in respect of the following:

- Employee Well-Being and Engagement
- Workforce Information
- Partnership Working

APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
☐	☐	☐	☐	☒

The Board is asked to take **assurance** in respect of the following workforce areas:

- Employee Well-Being and Engagement
- Workforce Information
- Partnership Working

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 Priority/Well-being Objective	7 - Building and mobilising knowledge and skills to improve health and well-being across Wales
Strategic Priority/Well-being Objective	5 - Protecting the public from infection and environmental threats to health
Strategic Priority/Well-being Objective	Choose an item.

Summary impact analysis	
Equality and Health Impact Assessment	An Equality and Health Impact Assessment has not been undertaken
Risk and Assurance	There is a link to Risk 1 in the Corporate Risk Register.
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Theme 7 - Staff and Resources Choose an item. Choose an item.
Financial implications	It is important that all workforce planning is within available budgets
People implications	It is vital that PHW has the staff with the right skills in the right place to deliver the Response and Recovery Plans, whilst at the same time ensuring their health and well-being.

1. Purpose

This paper provides the Board with an overview and relevant assurance on a range of workforce issues that will assist and enable the organisation to continue to deliver the Health Protection Response to the COVID-19 pandemic and also to now begin supporting the implementation of the organisation's internal Recovery Plan.

Specifically, assurance is provided in respect of the following:

- Employee Well-Being and Engagement
- Workforce Information
- Partnership Working

2. Background

Public Health Wales continues to experience extremely challenging and unparalleled circumstances and we are having to continually adapt and change our workforce in order to meet the demands of both responding to the global Coronavirus pandemic, both now and in future, whilst at the same time take steps towards recovery.

Employees across the organisation continue to rise to this challenge and we have put in place a number of mechanisms to enable this to happen, as well as providing staff with support measures to assist them in these unprecedented circumstances.

3. Description/Assessment

3.1 Employee Wellbeing and Engagement

This section provides a further update on employee well-being and support activities within Public Health Wales, together with our immediate focus linked to the organisational recovery plan and also summarises the findings of the recent *Tell Us How You Are Doing – Internal Communications and Wellbeing Survey*.

Tell Us How You Are Doing #1 – Internal Communications and Wellbeing Survey

Organisational Action Plan

An Action Plan is in place and all actions have been completed, with the exception of external risk assessment of Public Health Wales estates which will lead to development of prioritised action plans, which has been deferred

to early August. Matrix working arrangements have become more routine and require additional supporting materials. Development of a management brief for redeployment/matrix management situations is on track for a completion date of 31st July, this will provide clarity for substantive line managers setting out what they remain responsible for.

Members of the OD team are currently developing a plan for staff engagement and feedback activity, including the NHS Wales Staff Survey 2020, to ensure there is connection across activity and we maximise participation through managing potential survey fatigue and duplication.

Wellbeing and Engagement Partnership Group

Establishment of this group (approved 16th June 2020) is underway, and terms of reference have been developed. The group will ensure a co-ordinated and integrated approach to the organisation's achievement in this area and will meet monthly as a network and/or on a one-to-one basis for regular updates. All directorate/divisional leads have now been nominated.

Initial one to one meetings with most nominated members have either taken place or are scheduled, and all efforts are being made to ensure that a meeting with each representative will take place imminently. Members are being asked to develop a local action plan which addresses the issues highlighted in their directorates/divisions findings, to be completed by 7th August 2020.

Trade Union partners will be invited to participate in the group meetings with the intention that they will support the development and delivery of local action plans.

National Health Protection Cell (NHPC)/National Call Centre (NCC)

Work is underway with NHPC/NCC colleagues to understand the optimal interventions which can be put in place to support their particular needs and working environments. This is in addition to the wellbeing and other resources already available to all staff.

Initial conversations suggest the provision of Taking Care, Giving Care (TCGC) sessions may be of real value. These are facilitated 20 minute/one hour sessions, which can be delivered virtually, aimed at supporting staff to revisit their values and to spend time thinking about how they can take better care of themselves so that in turn they can care for others.

Plans will be finalised by the end of July, with a view to rolling out tailored support in August. An accompanying plan for how to measure effectiveness and agree future steps will also be developed.

Supplementary Workforce Support

Both the offer of coaching for line managers and the listening service remain available but with very low take up. The number of colleagues providing the support for both services has reduced following redeployment (internal and external).

The ongoing offer will remain in place for at least a further four weeks, after which we will review the need and make a decision to continue as-is or utilise the skills in a different way (potentially linking in with NHPC/NCC support)

Personal Risk Assessments

A Personal Risk Assessment tool, developed by a working group commissioned by the Welsh Government, was recently rolled out to all staff in Public Health Wales. The tool aims to identify high-risk individuals in high risk settings so that action can be taken to adapt their workplace or move them into a lower risk environment, such as working from home.
Arrangements are being put in place to add the risk assessments as a competency on ESR, which will show up on the compliance bar to encourage managers to complete. This also enables monitoring and reporting. Any workplace adjustments must be reported to the Head of Estates, Facilities and Health and Safety, and any workforce issues need to be discussed with the relevant People Business Partner.

Arrangements are in place to monitor if there are themes arising from the risk assessments, currently home working is the main theme.

Performance and Development (My Contribution)

An action plan has been approved and relevant requirements communicated to all staff to ensure My Contribution meetings are held this year. Key dates include:

- 24th July – all discussions which have already taken place must be recorded in ESR

- 31st August – all year-end reviews/objective setting meetings must have taken place and be recorded in ESR

- 5th October – mid-year data captured

Updates will be provided to the Executive Team each month and to Audit and Corporate Governance Committee in August and October 2020.

Non-pay budgets are under scrutiny; any offer of costed (priority) learning and development is dependent on the outcome.

3.2 Organisational Recovery Plan - Workforce

The workforce element of the organisational recovery plan sets out corporate-level people activity. Phase one focussed on the delivery of actions which improve the foundations for ongoing response as well as recovery, including

- having a policy tracker and associated process in place for the regular review of relevant people policies
- establishing and communicating the individual risk assessment process
- reviewing statutory and mandatory training needs

The second phase of the recovery plan focuses on planning, progressing and/or implementing work that will assist broader and more transformational organisational recovery whilst continuing to respond to the pandemic. We assume this is our continued normal for some time but need to readdress how we work, how we care for and engage our workforce and how we need to adapt what would be business-as-usual activity for the current environment. Furthermore, we want to start truly exploring and understanding our staff's experience. As well as planned and scheduled surveys and ongoing local activity, we want to start to capture stories. Amidst the continued response and ongoing rapid changes are our organisational and personal experiences that we can record, revisit and use any learning to shape and inform future plans.

Whilst the People Strategy wasn't launched as intended due to the pandemic, it remains relevant and we are keen to align the priority activity within this recovery phase to its *key themes* as follows:

- Workforce Data and Planning: *workforce shape and planning, harnessing data*
- Creating Shape: *designed to deliver, optimising relationships, attracting and recruiting talent*
- Learning and Development: *exploiting technology and skills for the future*
- Wellbeing and Engagement: *employee experience and harnessing data*
- Capturing Narrative and Developing Culture: *employee experience, inspiring culture and leadership, attracting and recruiting talent*

This will not only build organisational connection to the people strategy, but it will help us all identify what we've done and what we are already doing which has unintentionally taken the strategy forward.

In summary, the focus for phase two of the recovery plan is to move beyond transactional activity and really digest what has happened this year, harnessing opportunities for true workforce transformation as a result. We are clear that this plan is ambitious, and some deliverables aim to just define future activity or make a start. We emphasise that engagement with the organisation is going to be critical to the delivery of this plan and the window to capture stories and lived experience is short.

3.3 Workforce Information

Staff Status

Following on from the previous Board report we have now been able to obtain further verification and validation of the data received from Directorates.

The data attached at Appendix A is an overview of the staff status information as at 20th July 2020. It shows that from a total of 1594.37 wte staff:

- 90% of our workforce, that is 1437.44 wte, are currently working, with 91.48 wte not currently working due to sickness, maternity, shielding, external secondment etc.

- 657.2 wte are in Covid-Critical roles, 741.3 wte are in Business Critical roles and 188 wte are not critical. 96.3 wte of the employees whose substantive posts are not critical have been redeployed into other critical roles.

- The data shows there is currently a total of 79.21 wte who are available for redeployment/mobilisation. This is comprised of 68.71 wte staff who are working in non-critical roles and 10.5 wte staff who are in critical roles but have availability for a proportion of their time. It excludes those who would have been available but are absent on sickness, maternity etc.

- The majority of available staff are employed within Screening, therefore this number is likely to decrease as Screening programmes are reactivated.

Overtime

The table below provides a high level overview of COVID-19 related overtime hours taken to date:

	Paid April (worked 22nd Feb - 21st March)		Paid May (worked 22nd March - 21st April)		Paid June (worked 22nd April - 21st May)		Estimate July (worked 22nd May – 21st June)	
	Hours	**£**	**Hours**	**£**	**Hours**	**£**	**Hours**	**£**
Enhancements	0		2,135		3,852		3,484	
Overtime	4,169		5,983		6,006		5,396	
Plain Time	413		688		700		782.61	
Total	**4,582**	**268,383**	**8,806**	**320,473**	**10,558**	**363,812**	**9,663**	**393,998**

This is then broken down further by Directorate:

Directorate	Apr-20	May-20	Jun-20	Jul-20	Grand Total
	Hours	**Hours**	**Hours**	**Hours**	**Hours**
COVID Bank					
Health and Wellbeing	1,133	1,255	1,719	1,635	**5,742**
Hosted	43	78	72	69.41	**262**
Improvement Cymru	312	740	492	326.72	**1,871**
Knowledge	273	190	211	62.05	**736**
Operations and Finance	438	574	568	310.24	**1,890**
People & OD	123	136	38	49	**346**
Public Health Services	1,803	5,470	7,022	6,778	**21,073**
Quality Nursing & Allied Health Professionals	203	168	164	197.3	**732**
SPRs	61	58	180	234.45	**533**
WHO Collaborating Centre	193	136	92	0	**421**
Grand Total	**4,581**	**8,805**	**10,558**	**9,663**	**33,608**

COVID-19 response has remained the priority for all Directorates throughout the organisation. The support being provided to the COVID-19 rotas, both in relation to the Health Protection cell and contract tracing has led to overtime and additional hours being used to cover evening and weekend working, along with staffing of microbiology and testing and surveillance functions. These additional hours are accounted for in the figures for Public health Services, Health and Wellbeing and WHO CC and also in the support provided by the enabling functions. Mobilisation of staff across all Directorates to support the response also accounts for the additional hours reflected in the figures.

There is a concerted effort being made to reduce the use of overtime and additional hours, which will both improve the wellbeing of staff and

control costs. This is being promoted by Executive Directors and managers.

3.4 Partnership Working

Throughout the COVID-19 period we have continued to work in partnership with both Agenda for Change and Medical and Dental trade union colleagues.

There are weekly meetings with the chair and vice chair of the Local Partnership Forum in addition to wider monthly meetings to which a larger group of trade union representatives are invited.

An example of the current issues under discussion are:

- Taking of annual leave and carry over
- Results of the Well-Being survey and actions arising
- Change Management Principles
- Application of terms and conditions of employment such as Overtime
- Flexible working arrangements now and for future – link between home working and returning to safe office environments
- Non-pay budgets especially items that impact on staff such as training and child care voucher scheme
- Discussions continue on diversity and inclusion matters including BLM but also how the network groups can link more formally into the organisational governance. The Single Equality Plan was also discussed and it was reflected that a lot of very good work had been done in this area
- Concern expressed about the 'Lighthouse Labs' and lack of information concerning this and the potential for these to be private sector jobs as opposed to NHS
- Discussion and involvement in the re-start plans for Screening

Medical and Dental colleagues continue to have an open invitation to these meetings but decline to attend.

Therefore, there are separate weekly catch ups with the chair of the Joint Medical and Dental Committee in addition to quarterly meetings of that Committee. The external British Medical Association representative attends this meeting as do Executive Team members.

The last meeting of the Joint Medical and Dental Committee was held on 14th July 2020 at which the following was discussed:

- Overtime payments and WG advisory notice

- On Call rota – capacity and equity
- Annual Leave – carry over and time off in lieu
- Indemnity – to close issue following correspondence
- Salary Scales
- Job Planning Training
- Microbiology capacity
- Redeployment of Consultant staff
- Supporting Professional Activities (i.e. training time)

These arrangements are expected to continue for the foreseeable future.

3.5 Well-being of Future Generations (Wales) Act 2015

This work has been put together following the five ways of working, as defined within the sustainable development principle in the Act, in the following ways:

These workforce measures is vital to ensure that PHW is resourced

These measures will prevent PHW being unable to meet its responsibilities for resourcing now and into the recovery.

These measures integrate with all PHW priorities in the Response and Recovery plans

Consultation with the Trade Unions occurs on a regular basis

Stakeholders across PHW involved in this work.

4. Conclusion and Recommendation

There is much work that continues to be undertaken both in supporting our response to the pandemic and also preparing for the organisational recovery on certain functions. However, this must be balanced with the key priority of being able to respond effectively to the health protection aspects of the pandemic and also preparing for any resurgence in the transmission of COVID-19.

Appropriate reports and assurance will continue to be provided internally through the work streams, the Delivery Confidence Assessment reported to Gold weekly and through reports to the Business Executive Team. Relevant reports will continue to be reported to the Board in the absence of the People and Organisational Development Committee.

The Board is asked to take **assurance** in respect of the following workforce areas:

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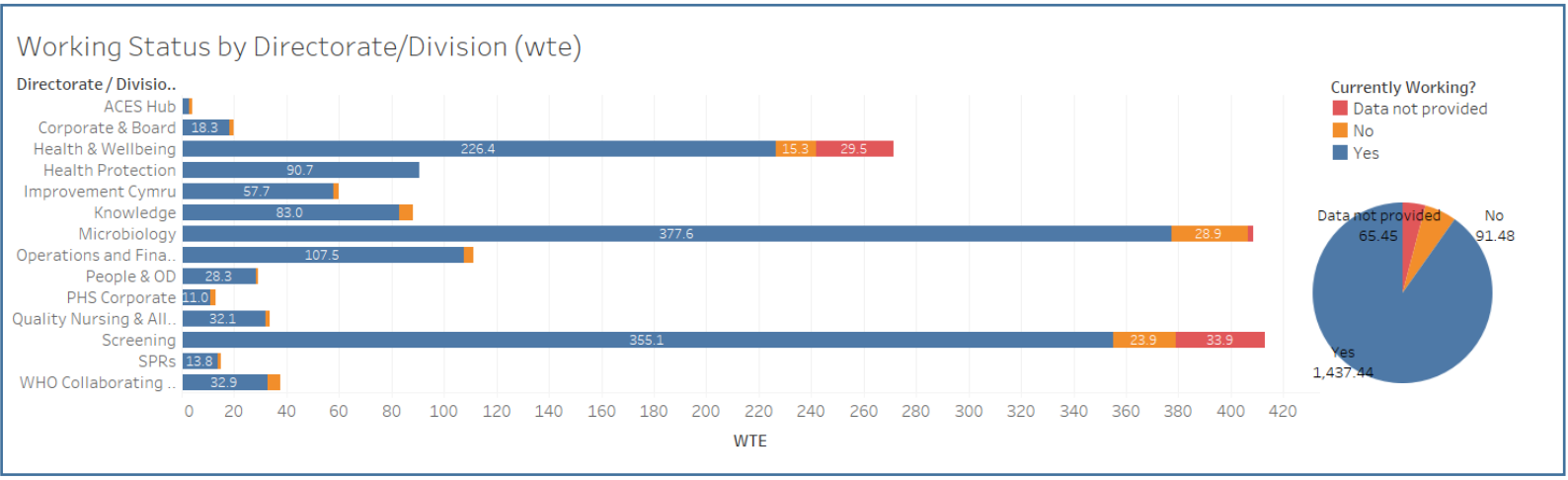
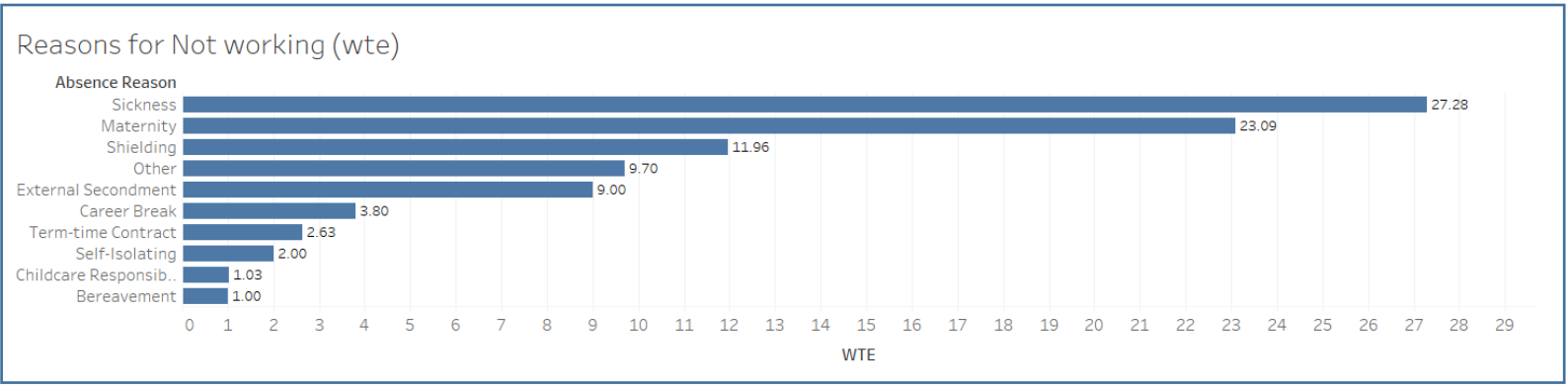
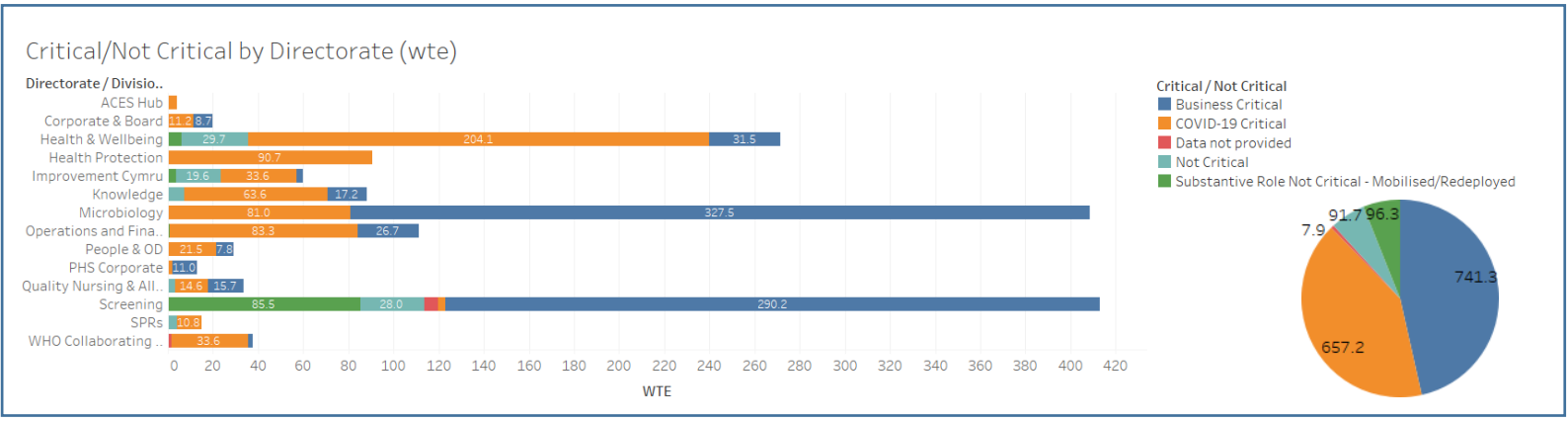
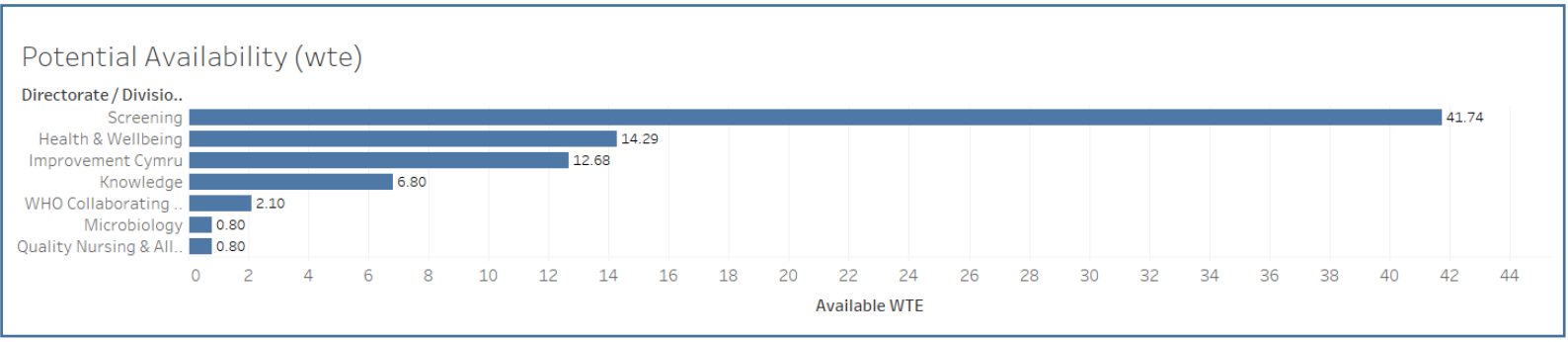
Appendix A

PHW Staff Availability Data

(based on data collated on the 20th July 2020)