

Review of Workforce Planning Arrangements – Swansea Bay University Health Board

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Summary report

Introduction

- 1 An effectively planned workforce is fundamental to providing good quality care services. The NHS employs a range of clinical and non-clinical staff who deliver services across primary, secondary and community care, representing one of the largest NHS investments. Over the years there have been well documented concerns about the sustainability of the NHS workforce. And workforce challenges are routinely highlighted to us in our audit reviews and ongoing engagement with health bodies. Despite an overall increase in NHS workers, these concerns remain. The workforce gaps are particularly acute for certain professions such as GPs, nurses, radiologists, paediatricians and ophthalmologists ([A Picture of Healthcare, 2021](#)). In nursing alone, the Royal College of Nursing Wales reported 2,900 vacancies in their [2022 Nursing in Numbers](#) analysis. In addition, the social care sector, which is complimentary to the health sector, is also facing its own workforce issues. These challenges have been exacerbated by the pandemic as the health sector looks to recover services.
- 2 Given the current challenges, robust and innovative workforce planning is more important than ever. Effective workforce planning ensures that both current and future services have the workforce needed to deliver anticipated levels of service effectively and safely. Planning is especially important given the length of time required to train some staff groups, particularly medical staff.
- 3 National and local workforce plans need to anticipate service demand and staffing levels over a short, medium, and long term. But there are a range of complex factors which impact on planning assumptions, these include:
 - workforce age profile, retirement, and pension taxation issues;
 - shifts in attitudes towards full and part-time working;
 - developing home grown talent and the ability to attract talent from outside the country into Wales; and
 - service transformation which can change roles and result in increasing specialisation of roles.
- 4 The key focus of our review has been on whether Swansea Bay University Health Board's (the Health Board) approach to workforce planning is helping it to effectively address current and future NHS workforce challenges. Specifically, we looked at the Health Board's strategic approach to workforce planning, operational action to manage current and future challenges, and monitoring and oversight arrangements. Operational workforce management arrangements, such as staff/nurse rostering, consultant job planning and operational deployment of agency staffing, fall outside the scope of this review. At the time of our work, the Health Board had developed a five-year People Strategy (2024-2029), which was approved by the Board in November 2023. The methods we used to deliver our work are summarised in **Appendix 1**.

Key findings

- 5 Overall, we found that **the Health Board is taking appropriate action to address its workforce challenges. However, it needs to ensure that it has sufficient workforce planning resources to support delivery of its new People Strategy and improve committee level oversight of its Workforce and OD Directorate's Goals, Methods and Outcomes (GMO) plan, which supports delivery of the People Strategy.**

Key workforce planning challenges

- 6 The Health Board is facing significant workforce challenges across a range of services and professions, causing greater workload pressures on existing members of staff. The workforce indicators presented in **Appendix 2** highlight that despite the Health Board steadily increasing its workforce since its establishment in 2019, staff recruitment and retention remain an issue. This caused a sharp rise in agency staff use in 2022-23, although this is reducing in 2023-24. The Health Board's sickness rate (7% in quarter 2, 2023) is one of the highest compared to other health bodies, and its vacancy rate (7% as of September 2023) is one of the highest compared to other Welsh health boards. Whilst similar to other health boards, at 10.8% (2021-22) staff turnover rate also presents a challenge. The Health Board's proximity to other health boards means it competes for skilled staff, in a limited talent pool. This is particularly acute for some professions.

Strategic approach to workforce planning

- 7 **The Health Board's new People Strategy provides a longer-term focus on addressing workforce challenges, and the Health Board is working well with its partners to find shared solutions. However, the Health Board recognises the need to improve its approach to workforce planning and the data which supports it.**
- 8 The Health Board's new People Strategy is a positive step forward providing a longer-term strategic focus and a platform to guide workforce activities. Whilst there are pockets of good practice to support service transformation and redesign, the Health Board recognises it needs to improve workforce planning and its use of data to support it. It also needs to improve completion and consistency of service-based workforce plans and can achieve this by setting a clear target to prepare plans by using the HEIW model template and the Health Board's plan on a page. The Health Board is working well with internal and external stakeholders to find shared solutions to workforce challenges. It has effectively engaged with stakeholders to develop its strategic workforce planning approach and the Workforce Planning Team and workforce business partners engage well with service leads although operational pressures can impact on this. The Health Board also recognises the importance of regional working to support the development of sustainable services.

Operational action to manage workforce challenges

- 9 **The Health Board is proactively managing its workforce challenges with positive impact and has a good understanding of its workforce risks. However, its corporate workforce planning capacity and wider resources could impact on the Health Board's ability to achieve some of the ambition set out in its People Strategy, and a more consistent approach to service workforce planning may identify new or change existing risks.**
- 10 The Health Board has clear intent to improve workforce planning capacity and capability by supporting service groups to take greater ownership of their workforce planning, but the Health Board has limited dedicated corporate workforce planning capacity and is reliant on the capacity of business partners and operational managers to effectively workforce plan. The Workforce Planning Team offers a range of training to increase workforce capacity within the operational teams as well as running targeted training at the request of services, particularly for high-risk areas for example maternity. The Health Board however needs to determine whether the overall workforce planning training approach is making a difference to the quality of service's workforce plans.
- 11 The Health Board has a good understanding of the risks that might prevent the delivery of its workforce ambitions, but actions to mitigate these risks have had minimal effect to date. As the organisation strengthens service group and divisional workforce planning, this may expose new workforce risks or change existing risks. As such the Health Board would benefit by strengthen its risk escalation process to ensure workforce risks are being appropriately raised by service groups and that action is taken to mitigate them. The Health Board is taking appropriate actions to address its current workforce challenges, through a range of recruitment and retention activities, whilst challenges remain, in some areas action taken is starting to make a difference.

Monitoring and oversight of workforce plan/strategy delivery

- 12 **While there is good oversight of workforce performance, opportunities exist to strengthen oversight of the workforce GMO plan and improve the Health Board's approach to benchmarking.**
- 13 The Workforce, OD and Digital Committee receives a good range of performance information, but oversight of the Workforce GMO plan's delivery and its impact needs to be strengthened, especially as it will support the delivery of the new People Strategy. Whilst the Board receives a quarterly update against IMTP deliverables, including workforce, this is brief in nature. The Workforce, OD and Digital Committee would benefit from receiving twice yearly progress reports against the workforce GMO plan actions and the impact of action taken. The Health Board reported that it benchmarks its performance against other health bodies in Wales and against industry best practice when setting workforce measures. There is opportunity for the Health Board to use its workforce

benchmarking to identify best practices and explore innovative approaches with health bodies within Wales and similar organisations across the UK.

Recommendations

14 **Exhibit 1** details the recommendations arising from this audit. These include timescales and our assessment of priority. The Health Board's response to our recommendations is summarised in **Appendix 3**.

Exhibit 1: recommendations.

Recommendations	
R1	<p>To ensure service level workforce plans are consistent, improve workforce data quality and understanding of service level capacity need, the Workforce and OD Directorate should:</p> <ul style="list-style-type: none">1.1 train management teams across the organisation so that they can consistently apply the Skills for Health Six Step Methodology for Strategic Workforce Planning and its associated tools and templates as detailed in HEIW's workforce planning toolkit (see page 11).1.2 evaluate the quality of workforce planning, once recommendation 1.1 is progressed, to determine whether the training is achieving its intended benefit (see page 14).
R2	<p>As service level workforce plans improve in quality, there is the potential to expose new workforce risks. The Health Board should strengthen its risk escalation process to ensure workforce risks are being appropriately raised by service groups and that action is taken to mitigate them (see page 15).</p>
R3	<p>The Workforce, OD and Digital Committee should receive twice yearly progress reports against the Workforce and OD Directorate's GMO plan to highlight overall progress against milestones, and the outcomes and impact of the action taken (see page 19).</p>
R4	<p>The Health Board should use its workforce benchmarking to identify best practice and explore innovative approaches with health bodies within Wales and similar organisations across the UK (see page 19).</p>

Detailed report

Our findings

15 The following three tables set out the areas that we have reviewed and our findings. These focus on:

- The Health Board's approach to strategic workforce planning (**Exhibit 2**).
- Operational action to manage workforce challenges (**Exhibit 3**).
- Monitoring and oversight of workforce plan/strategy delivery (**Exhibit 4**).

Exhibit 2: Strategic approach to workforce planning

This section focuses on the Health Board's approach to strategic planning. We found that **the Health Board's new People Strategy provides a longer-term focus on addressing workforce challenges, and the Health Board is working well with its partners to find shared solutions. However, the Health Board recognises the need to improve its approach to workforce planning and the data which supports it.**

What we looked at	What we found
<p>We considered whether the Health Board's workforce strategy and plans are likely to address the current and future workforce risks. We expected to see a workforce strategy or plan which:</p> <ul style="list-style-type: none">• identifies current and future workforce challenges;• has a clear vision and objectives;• is aligned to the organisation's strategic objectives and wider organisational plans;	<p>We found that the new People Strategy is a positive step forward, providing a longer-term strategic focus aimed at addressing the Health Board's current and future workforce needs.</p> <p>The Health Board is going through a period of organisational change. The Health Board has undertaken several service transformation and service redesign projects, which align to its Clinical Services Plan. These include large workforce programmes such as its Acute Medical Services Redesign Programme, service change initiatives, such as the expansion of the therapies service, and the introduction of new types of roles, for example maternity care assistants. The Health Board recognises that having a robust workforce planning approach is key to supporting service redesign and transformation. The Health Board is also emphasising the need to build workforce planning capacity, capability, and the tools to support this.</p>

What we looked at	What we found
<ul style="list-style-type: none"> • is aligned to relevant national plans, policies, and legislation. Including the national workforce strategy for health and social care; and • is supported by a clear implementation plan. 	<p>Following an extensive ‘Our Big Conversation’ staff and stakeholder engagement programme, the Health Board developed its 10-year vision setting out its ambition to become ‘a high-quality organisation’. Feedback from the stakeholder engagement exercise also informed the development of the Health Board’s five-year People Strategy (2024-29), which the Board approved in November 2023. The People Strategy aims to address issues raised through Our Big Conversation, especially those relating to leadership and organisational culture. Whilst this is the Health Board’s first People Strategy, it builds on the workforce priorities set out in the Health Board’s Integrated Medium-Term Plan (IMTP)¹. As a result, many of the actions articulated in the strategy are already underway. However, the dedicated People Strategy will provide a platform to guide workforce activities in the longer-term and adopt a more strategic focus. The strategy also appropriately supports the ambitions set out in the <u>National Workforce Strategy for Health and Social Care</u> and the <u>National Workforce Implementation Plan</u>. It also aligns to relevant national legislation, such as the Welsh Language Standards and Equality Act (2010).</p> <p>The People Strategy is an enabling strategy supporting the delivery of the Health Board’s 10-year vision. The strategy provides a logical rationale for focusing on seven strategic themes² and sets out high-level actions and measures for each. The Health Board is in the process of developing a high-level action plan to support the delivery of its People Strategy and intends to include annual deliverables in its Annual Plan and IMTP. As in previous years, the Goals, Methods and Outcomes (GMO)³ will be the delivery plan for the Workforce and Organisational Development (OD) Directorate</p>

¹ The Swansea Bay UHB Recovery & Sustainability Plan (2023-24 – 2025-26) is the Health Board’s Integrated Medium-Term Plan (IMTP). This plan has not been approved by Welsh Government because it is not financially balanced. As such it is working to an Annual Plan for 2023-24.

² The themes are: Engaged, Motivated and Healthy; Attract and Recruit; Well Planned; Digitally Ready; Excellent Learning and Education; Leaders that Live our Value and Equality; and Diversity and Belonging.

³ The Health Board uses the Goals, Methods and Outcomes (GMO) process to articulate directorate level annual delivery plans, aligned to the strategic objectives agreed through the IMTP and Annual Plan.

What we looked at	What we found
	<p>with progress reported quarterly through the annual plan performance framework and by reviewing milestones on a quarterly basis.</p>
<p>We considered whether the Health Board has a good understanding of current and future service demands. We expected to see:</p> <ul style="list-style-type: none"> • use of reliable workforce information to determine workforce need and risk in the short and longer term; and • action to improve workforce data quality and address any information gaps. 	<p>We found that whilst there are pockets of good practice to support service transformation and redesign, the Health Board recognises it needs to improve its workforce planning and its use of data to support it.</p> <p>There is improving workforce information to support service modelling and planning. In February 2023, the Workforce and OD Committee⁴ received a deep dive on service-level workforce planning, which highlighted a need to develop business intelligence dashboards that provide service workforce data and forecasting capability. The Health Board has made some progress, with a new digital dashboard to monitor the temporary medical workforce due to go live soon. The Health Board is also due to start developing a new digital strategy which the Workforce and OD Directorate will feed into. The Health Board has reasonable operational workforce data. This includes sickness, vacancy and appraisal rates, statutory and mandatory training compliance, and staff demographics. The Workforce Planning Team encourages services to review and triangulate service level data when conducting workforce planning exercises. However, there are gaps in data such as protected characteristics, and the Health Board is currently undertaking work to ensure that establishment data reported on the Electronic Staff Record system aligns with that on the financial ledger⁵.</p> <p>The Workforce Planning Team is taking steps to improve strategic workforce planning and in turn improve workforce data by encouraging service managers to use the workforce plan template developed by HEIW. The Health Board has also developed a document to help services summarise their workforce plans on one page. These resources are available on the Health Board's workforce</p>

⁴ This committee is now called the Workforce, Organisational Development and Digital Committee.

⁵ Establishment is the term for the workforce levels, staff roles and the NHS staff bandings that are financially budgeted for.

What we looked at	What we found
	<p>planning intranet page, which it launched in September 2023. To help share best practice, the intranet page also includes limited examples of completed workforce plans. However, the Health Board does not mandate services to use these templates. To ensure service level workforce plans are consistent, improve workforce data quality and understanding of service level capacity need, the Workforce and OD Directorate should train management teams across the organisation so that they can consistently apply the Skills for Health Six Step Methodology for Strategic Workforce Planning and its associated tools and templates as detailed in HEIW’s workforce planning toolkit⁶ (Recommendation 1.1).</p>
<p>We considered whether the Health Board is working with partners to help resolve current and anticipated future workforce challenges. We expected to see:</p> <ul style="list-style-type: none"> • effective and timely engagement and working with key internal and external stakeholders to tackle current and future workforce issues; and • shared solutions identified with key stakeholders to help address workforce challenges. 	<p>We found that the Health Board is working with external stakeholders to find shared solutions to workforce challenges.</p> <p>The Health Board is effectively engaging with internal and external stakeholders to develop its strategic workforce planning approach. This included feedback from the Health Board’s ‘Our Big Conversation’ staff and stakeholder engagement programme, trade union partners, staff networks and the Board. Operationally, the Workforce Planning Team and workforce business partners routinely meet service leads to support workforce planning and better understand their workforce challenges and needs. However, we understand that due to operational pressures, service level engagement in workforce planning is variable at times.</p> <p>The Health Board also recognises the importance of regional working to support the development of sustainable services. It actively works with a range of regional collaboratives to find shared</p>

⁶ Health Education and Improvement Wales has developed a workforce planning toolkit based on the following six steps: 1. Define your plan; 2. Map the service change; 3. Define the workforce; 4. Workforce supply; 5. Define actions required; and 6. Implement and monitor.

What we looked at	What we found
	<p>workforce solutions, such as A Regional Collaboration for Health (ARCH)⁷, the Regional and Specialised Services Provider Planning Partnership (SSPPP) with Cardiff and Vale University Health Board and the West Glamorgan Regional Partnership Board. We also note that there are several regional transformation projects at various stages, which have workforce implications requiring regional workforce modelling and plans. These include the development of a South-West Wales cancer centre and regional eye care and orthopaedics services. The Health Board also routinely engages with HEIW on local and regional workforce issues.</p> <p>To alleviate workforce shortages in some areas, there are examples of the Health Board working with partners to appoint joint roles. For example, the Health Board worked with the Welsh Ambulance Services NHS Trust to rotate palliative care paramedics to work within its Tŷ Olwen Specialist Palliative Care Team.</p>

Exhibit 3: operational action to manage workforce challenges

This section focusses on the actions the Health Board is taking to manage workforce challenges. Overall, we found that **the Health Board is proactively managing its workforce challenges with positive impact and has a good understanding of its workforce risks. However, its corporate workforce planning capacity and wider resources could impact on the Health Board’s ability to achieve some of the ambition set out in its People Strategy, and a more consistent approach to service workforce planning may identify new or change existing risks.**

⁷ A Regional Collaboration for Health (ARCH) is a partnership between the Health Board, Hywel Dda University Health Board and Swansea University.

What we looked at	What we found
<p>We considered whether the Health Board has identified sufficient resources to support workforce planning over the short, medium, and long term. We expected to see:</p> <ul style="list-style-type: none"> • clear roles and responsibilities for workforce planning; • appropriately skilled staff to ensure robust workforce planning; • sufficient workforce capacity across the organisation to plan and deliver the workforce strategy or plan; and • sufficient financial resources to deliver the workforce strategy or plan. 	<p>We found that the Health Board has limited dedicated corporate workforce planning capacity and is reliant on the capacity of business partners and operational managers to effectively workforce plan. The Health Board offers a range of training to increase workforce capacity but needs to evaluate this to ensure it is making a difference.</p> <p>Corporately, roles and responsibilities for workforce planning are clear within the Workforce and OD Directorate. The Directorate has a very small, dedicated workforce planning team, consisting of two Senior HR Managers. The team is responsible for strategic workforce planning, specifically strengthening the Health Board’s workforce planning approach and building capacity and capability across the organisation. Additional workforce planning capacity is provided by five business partners and seven assistant business partners, who are attached to Service Groups with a remit that includes supporting workforce plan development. However, this requirement on the business partners is in addition to responding to sometimes significant operational HR matters, which limits the amount of time that they can dedicate to workforce planning. The Workforce and OD Directorate has previously highlighted to the Workforce, OD and Digital Committee that the workforce planning resource is insufficient for the size of the organisation. These capacity issues jeopardise the Health Board’s ability to support workforce planning activities, both within the Health Board and the wider regional workforce planning agenda, potentially risking its ability to achieving the ambitions set out in its new People Strategy.</p> <p>The Health Board is clear that delivering the People Strategy is not the sole responsibility of the Workforce and OD Directorate. Theme three of the strategy aims to have a better planned workforce, including building workforce planning skills within the organisation. The Workforce and OD Directorate is strengthening the organisation’s workforce planning capability through a range of training offers. It signposts services to HEIW’s training on the six-step model, however the training is temporarily paused. The Health Board reported that HEIW’s training was well attended, but it does not keep an attendance log, target the training at specific roles or evaluate it. The team should evaluate whether training management teams across the organisation in workforce planning is achieving its intended benefit and making a difference to the quality of workforce plans</p>

What we looked at	What we found
	<p>(Recommendation 1.2). The Workforce Planning Team also runs training at the request of operational teams. Where this is provided, this focused training is evaluated.</p> <p>The Health Board’s workforce plan is costed as part of its annual IMTP planning cycle. Recognising the considerable financial constraints, the Workforce and OD Directorate aims to deliver a cost neutral approach for implementing the People Strategy but where additional resources are needed to deliver the strategy it will submit additional funding bids. The Health Board has a focus on developing a sustainable workforce, predicting a £10 million reduction in agency costs at the end of 2023-24. However, longer-term service sustainability will be dependent on financially affordable workforce models that are shaped to manage changing demand for services.</p>
<p>We considered whether the Health Board has a good understanding of the short and longer-term risks that might prevent it from delivering its workforce strategy or plan. We expected to see:</p> <ul style="list-style-type: none"> • a good understanding of the barriers that might prevent delivery of the workforce strategy or plan; • plans to mitigate risks which may prevent the organisation from achieving its workforce ambitions; and • clearly documented workforce risks that are managed at the appropriate level. 	<p>We found that the Health Board has a good understanding of the risks that might prevent the delivery of its workforce ambitions, but actions to mitigate these risks have had minimal effect to date, and there is potential for new risks or changes to existing risks to be identified as services develop more consistent workforce plans.</p> <p>The People Strategy clearly articulates the Health Board’s workforce ambitions, but there are a range of risks which may prevent its delivery. These relate to workforce shortages for certain professions such as maternity and neonatal services, therapies, and anaesthetists. But there are also wider challenges including high staff sickness rates, and the need to meet savings targets, noting that workforce costs are a significant element of the overall budget. The Health Board also clearly recognises through its IMTP, People Strategy and committee reports that there is a need to improve workforce planning skills and capacity, and to strengthen workforce data and intelligence.</p> <p>Corporately, the Board Assurance Framework and Health Board Risk Register appropriately reflect workforce risks. The Workforce, OD and Digital Committee is responsible for overseeing these risks, scrutinising mitigating actions every six months, informed by prior review by the Workforce Delivery Group. As of December 2023, there were three high-scoring corporate risks related to workforce,</p>

What we looked at	What we found
	<p>specifically the recruitment of medical and dental staff, the ability to comply with the Nurse Staffing Levels Act, and the critical staffing levels for midwifery.</p> <p>The Executive Team routinely discuss and address key workforce risks. It has established the Nursing and Midwifery Safe Staffing Assurance and Improvement Group and the Medical Workforce Board to address clinical workforce risks. Both report to the Workforce OD and Digital Committee. The actions that the Health Board is taking to mitigate workforce risks include recruitment of international nurses and doctors, working with head-hunters to recruit to medical vacancies, considering different nursing skill mixes and developing workforce plans. Its actions to reduce these risks are starting to make a difference in some areas. International nursing recruitment is reducing its reliance on bank and agency staff, and general nursing levels at Moriston Hospital is almost at full establishment. However, the scale of the workforce challenges often means that mitigating actions generally are not having the desired impact on substantially reducing workforce risks. As the Health Board encourages service areas to develop workforce plans in a more consistent way, there is the potential that this will expose or change workforce risk levels. The Health Board should strengthen its risk escalation process to ensure workforce risks are being appropriately raised by service groups and that action is taken to mitigate them (Recommendation 2).</p>
<p>We considered whether the Health Board is effectively addressing its current workforce challenges. We expected to see:</p> <ul style="list-style-type: none"> • effective reporting and management of staff vacancies; • action to improve staff retention; • efficient recruitment practices; 	<p>We found that the Health Board is taking appropriate action to address current workforce challenges, through a range of recruitment and retention activities. Whilst challenges remain, in some areas, its actions are starting to make a difference.</p> <p>The Health Board has relatively high vacancy rates (Exhibit 10) when compared to other health boards. Its turnover rate, whilst average compared to other health bodies, still presents a significant challenge (Exhibit 9). At the point we collected data across Wales, most staff were leaving because their fixed term contract ended, due to retirement and because of resignation. But there are gaps in the data and around a quarter of all staff left without a specific reason recorded. This means the Health Board may not fully understand why staff are leaving and consequently not be able to</p>

What we looked at	What we found
<ul style="list-style-type: none"> • commissioning of health education and training which is based on true workforce need; and • evidence that the organisation is modernising its workforce to help meet current and future needs. 	<p>develop bespoke retention initiatives. The Health Board is exploring, with NHS Wales Shared Services Partnership, approaches to record more meaningful categories on termination forms.</p> <p>Recognising its recruitment and retention challenges, the Health Board has established a working group to tackle these challenges with an aim of reducing variable pay. The Recruitment and Retention Group, which reports into the Workforce, OD and Digital Committee, has set up four task and finish groups focusing on key areas of work to improve staff retention. These include developing a mentorship or buddy system for new starters, developing a framework to conduct ‘stay interviews’ which will be linked to staff appraisal and development reviews, working with managers to help improve staff experience and exploring flexible working options. These actions alongside tighter controls on agency expenditure have now started to reduce temporary agency costs from a high of £43.4 million in 2022-23 to a forecast of £35 million in 2023-24 (Exhibit 8).</p> <p>The Health Board is also taking practical steps to improve recruitment. In 2021, it established a Central Resourcing Team to support nurse and health care support worker recruitment. As of October 2023, the team has successfully recruited 506 Band 5 nurses, including 376 from overseas and 488 health care support workers. As a result of this success, the Health Board has temporarily stopped its rolling recruitment activities for Band 5 general nurses to instead target recruitment in specialist areas. The Health Board has a similar focus on medical recruitment, with 34 new appointments made between September and October 2023, this figure also includes appointment of locum consultants. The Health Board has also rebranded its recruitment pages to attract more visits, which it reports has resulted in increased hits on its recruitment webpage. The Health Board also holds recruitment events, for example between April and October 2023 it held 12 events, attended by approximately 1000 people, aimed at schools, colleges, and ethnic minority groups.</p> <p>The Health Board has one of the highest sickness rates in Wales (Exhibit 11). The Health Board recognises this issue and has indicated that it is taking steps to proactively manage and promote staff wellbeing. Internal Audit's 2023 report on sickness absence gave reasonable assurance. The report identified a need to evaluate early intervention services that support staff wellbeing, improve</p>

What we looked at	What we found
	<p>feedback on the impact of attendance management training, conduct sickness absence audits, and strengthen reporting on sickness management improvement plans.</p> <p>The Health Board has adopted a pragmatic approach to inform commissioning numbers based on current turnover, retirement rates and future intent as set out in its Clinical Services Plan. In practice, the central team provides Heads of Service, and their workforce business partners guidance on the HEIW commissioning template, with the option for further central workforce planning team support if required. However, there are weaknesses in the education commissioning process that means that the pipeline of newly qualified staff does not always meet the Health Board's needs. The Health Board reported that this is a greater challenge for some professions such as nursing, pharmacy and allied health professionals.</p> <p>The Health Board is starting to seek alternative solutions to ensure a sustainable workforce. Prior to completing the education commissioning template, the workforce team encourages services to consider development opportunities for existing staff, as well as succession planning and staff retention strategies. The Health Board is also developing apprenticeship schemes, encouraging grow your own schemes and exploring the use of new roles such as Anaesthetic Associates, Surgical Care Practitioners and Physician Associates. Its analysis of its commissioning trends in recent years, highlights that services are starting to embrace different skill mixes. This is demonstrated by an increased request for health care support workers, which can act as an alternative entry into nursing.</p>

Exhibit 4: monitoring and oversight of workforce plan/strategy delivery

This section of the report focusses on the robustness of corporate oversight of workforce risks. Overall, we found that **while there is good oversight of workforce performance, opportunities exist to strengthen oversight of the workforce GMO plan and improve the Health Board’s approach to benchmarking.**

What we looked at	What we found
<p>We considered whether delivery of the Health Board workforce strategy or plan is supported by robust monitoring, oversight, and review. We expected to see:</p> <ul style="list-style-type: none"> • arrangements in place to monitor the progress of the workforce strategy or plan at management and committee levels; • effective action where progress on elements of the workforce strategy or plan are off-track; • performance reports showing the impact of delivering the workforce strategy or plan; and • the organisation benchmarking its workforce performance with similar organisations. 	<p>We found that the Workforce, OD and Digital Committee receives a good range of performance information, but there are opportunities to strengthen oversight of the workforce GMO plan, as it will support delivery of the new People Strategy, and an opportunity to improve the approach to benchmarking.</p> <p>The Workforce, OD and Digital Committee is responsible for scrutinising operational workforce performance. At each meeting, the Committee routinely receives a range of workforce reports to give a rounded view of workforce performance and issues. The Workforce Metrics Report gives a good overview of key workforce metrics such as sickness rates, training compliance, vacancies, turnover and appraisal rates alongside actions to improve performance. The Committee also has a programme of deep dives which include PADR compliance, medical revalidation, sickness absence and statutory and mandatory training compliance.</p> <p>There is a need to strengthen oversight arrangements with a focus on whether the impact of the workforce GMO plan, and moving forward the People Strategy, are having the desired improvement and addressing workforce challenges. Whilst the Board receives a quarterly update against IMTP deliverables which include workforce matters, this is brief in nature. The Workforce and OD Delivery Group, which reports to the Workforce, OD and Digital Committee, monitors delivery of the Workforce and OD Directorate’s GMO plan on a quarterly basis. Whilst the committee receives an update and the minutes from the delivery group meeting, the committee rarely receives detailed reports providing assurance on overall progress on workforce GMO actions. The Committee would</p>

What we looked at	What we found
	<p>benefit by receiving twice yearly progress reports against the agreed Workforce and OD Directorate GMO actions to highlight overall progress against milestones, and the outcomes and impact of the action taken (Recommendation 3). This will be especially important from 2024-25 as the GMO planning process will be used as a mechanism to implement the newly approved People Strategy.</p> <p>The Health Board reported that it benchmarks its performance against other health bodies in Wales and against industry best practice when setting workforce measures. It also uses benchmarking data when running workforce planning workshops with service leads. However, very few performance reports received by the Workforce, OD and Digital Committee contain benchmarking data. There is opportunity for the Health Board to use its workforce benchmarking to identify best practices and explore innovative approaches with health bodies within Wales and similar organisations across the UK (Recommendation 4).</p>

Appendix 1

Audit methods

Exhibit 5: audit methods

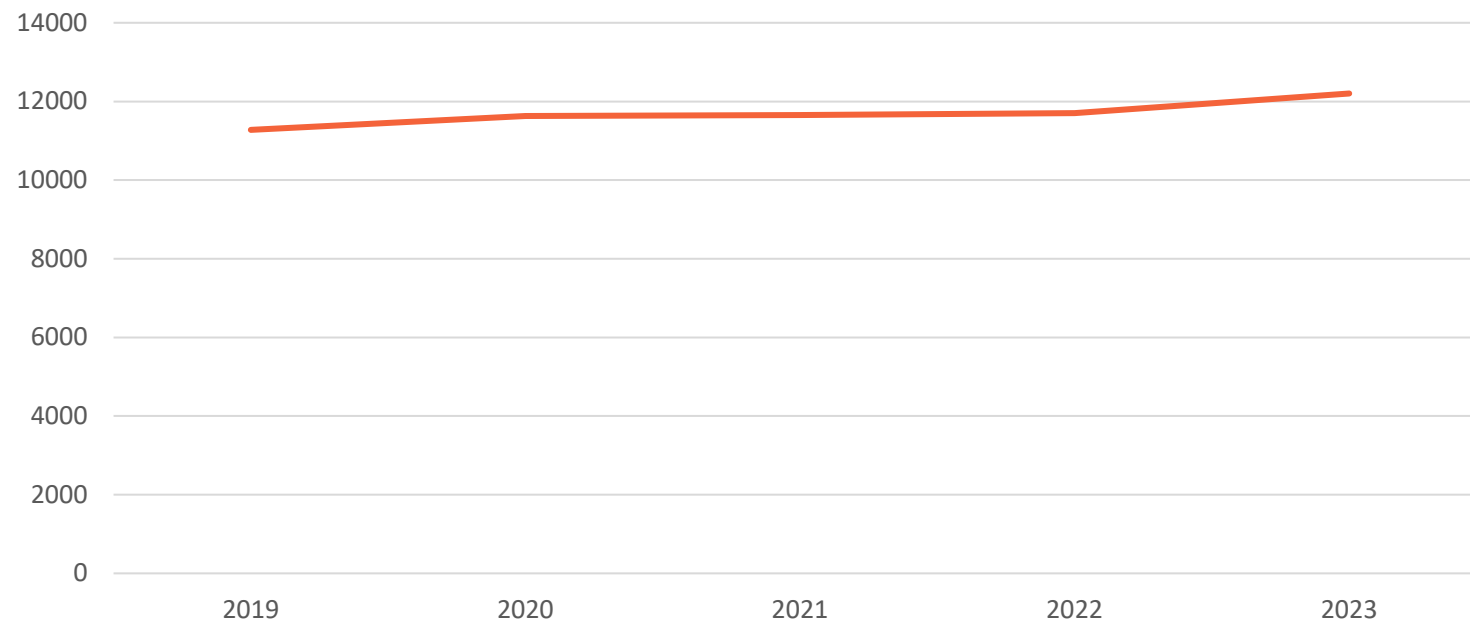
Element of audit approach	Description
Documents	<p>We reviewed a range of documents, including:</p> <ul style="list-style-type: none">• Workforce strategy and associated workforce plan(s)• Implementation/delivery plans for workforce strategy – high level and operational• Evidence of evaluation of workforce strategy and/or associated initiatives• Information feeding into workforce strategy development e.g., needs assessment, workforce data, benchmarking exercises, demand and capacity planning, skills gap analysis, horizon scanning.• Evidence of stakeholder engagement.• Structure charts for workforce planning functions.• Examples of workforce planning training offered to staff e.g., CIPD, other training formal or informal.• Workforce finance and resource plans• Corporate and operational risk registers• Document showing recruitment process and recruitment and retention initiatives.• Corporate and operational level oversight and monitoring of workforce metric and strategy delivery
Interviews	<p>We interviewed the following.</p> <ul style="list-style-type: none">• Executive Director of Workforce• Assistant Director of Workforce and OD• Deputy Director of Strategy & Head of IMTP Development and Implementation• Head of Strategic Workforce Planning

Element of audit approach	Description
	<ul style="list-style-type: none"> • Head of Strategic Financial Planning • Workforce Planning and OD Manager • Workforce Business Partners • Deputy Medical Director and Medical Workforce Manager • Executive Director of Nursing • Associate Head of Workforce • Chair of the Workforce, OD and Digital Committee
Focus groups	We ran a focus group with a selection of service leads involved in clinical workforce planning.

Appendix 2

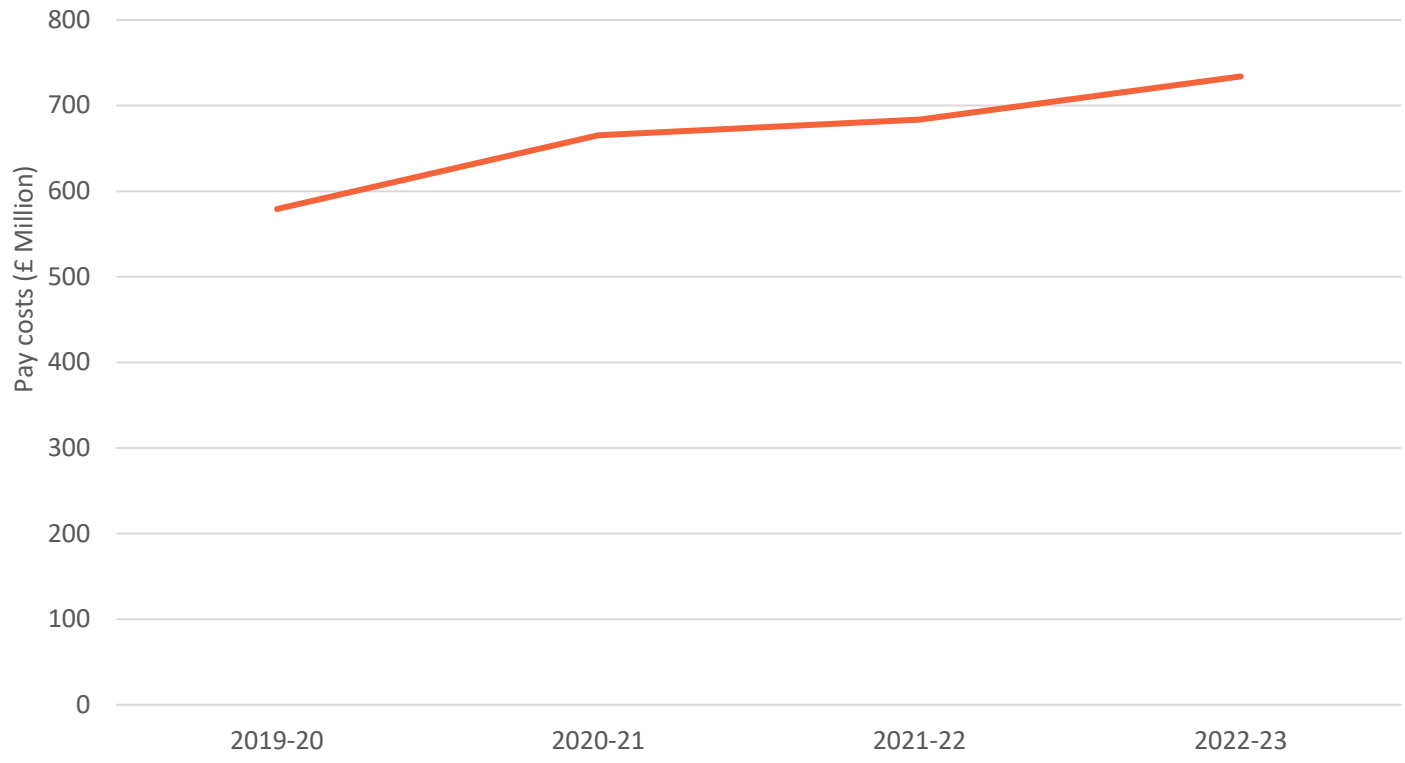
Selected workforce indicators

Exhibit 6: Trend in workforce numbers (full time equivalent), Swansea Bay University Health Board



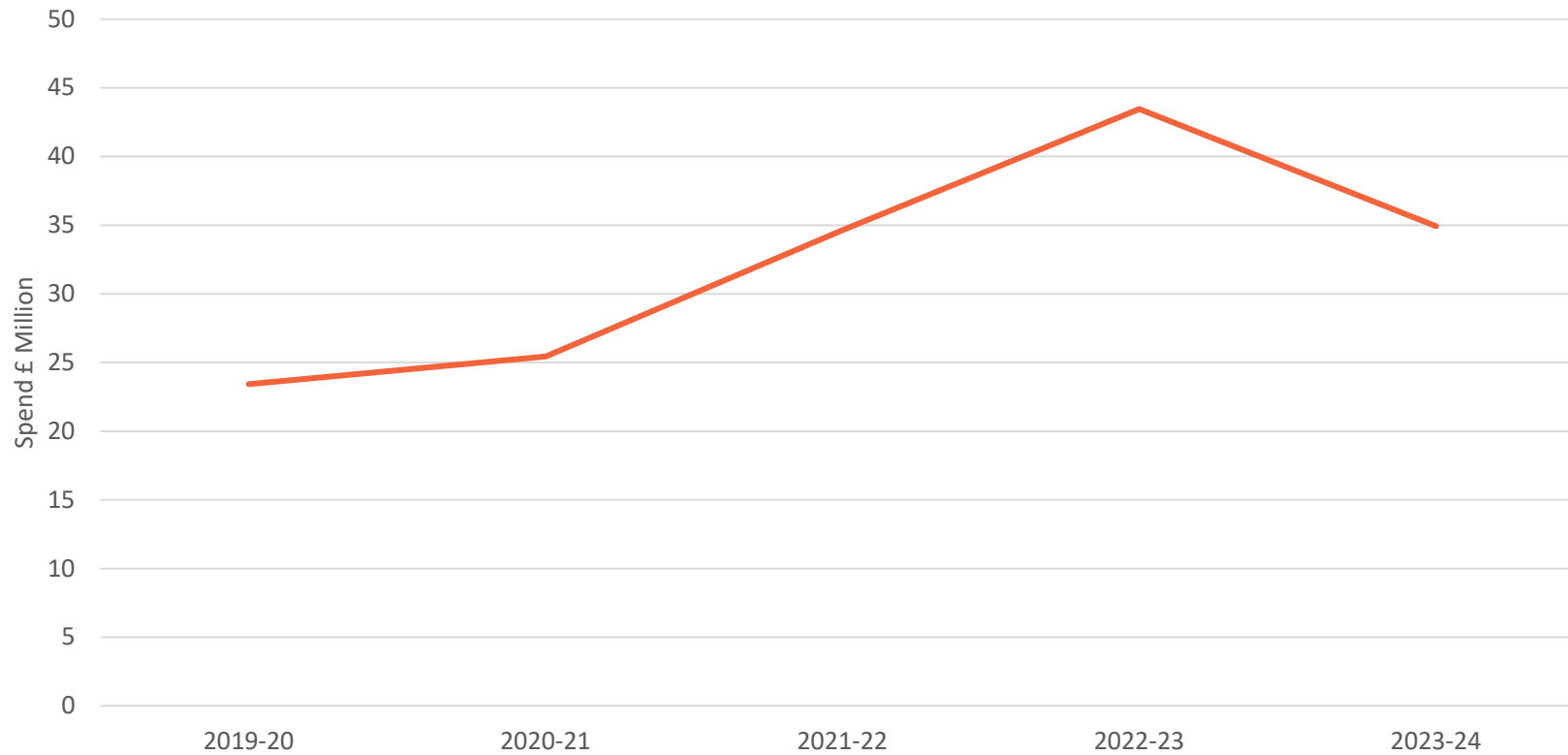
Source: Welsh Government, Stats Wales

Exhibit 7: Trend in actual workforce costs, Swansea Bay University Health Board



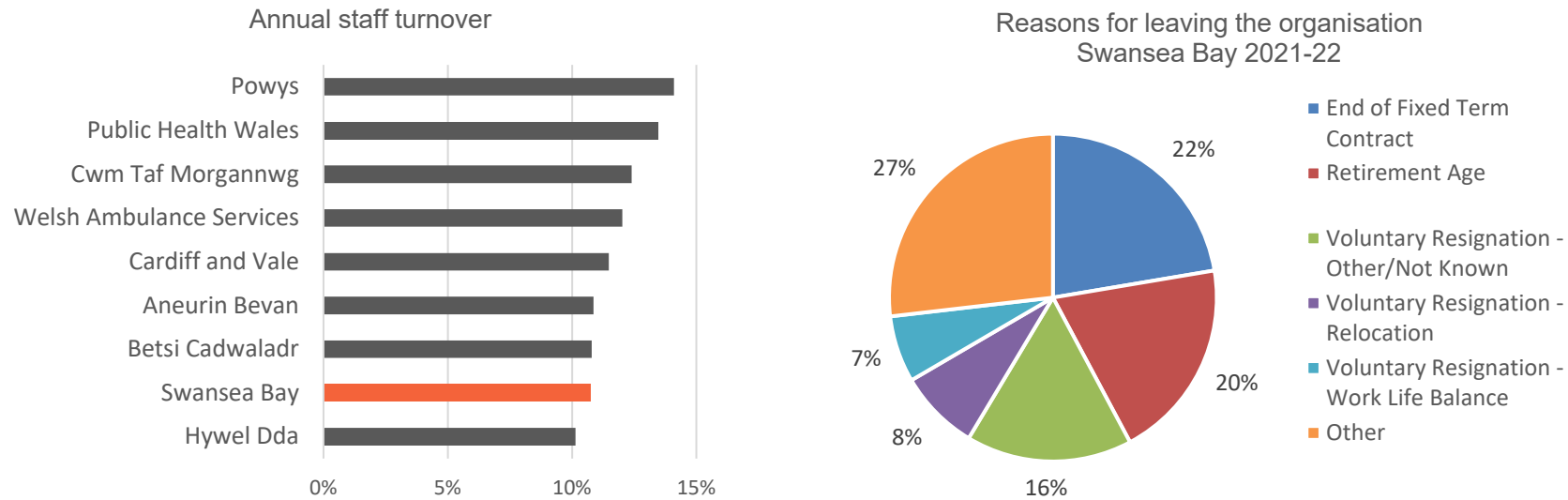
Source: Monthly Monitoring Returns reported to the Welsh Government

Exhibit 8: Trend of expenditure on workforce agency £ million (2023-24 data is based on the forecast as of Month 10), Swansea Bay University Health Board



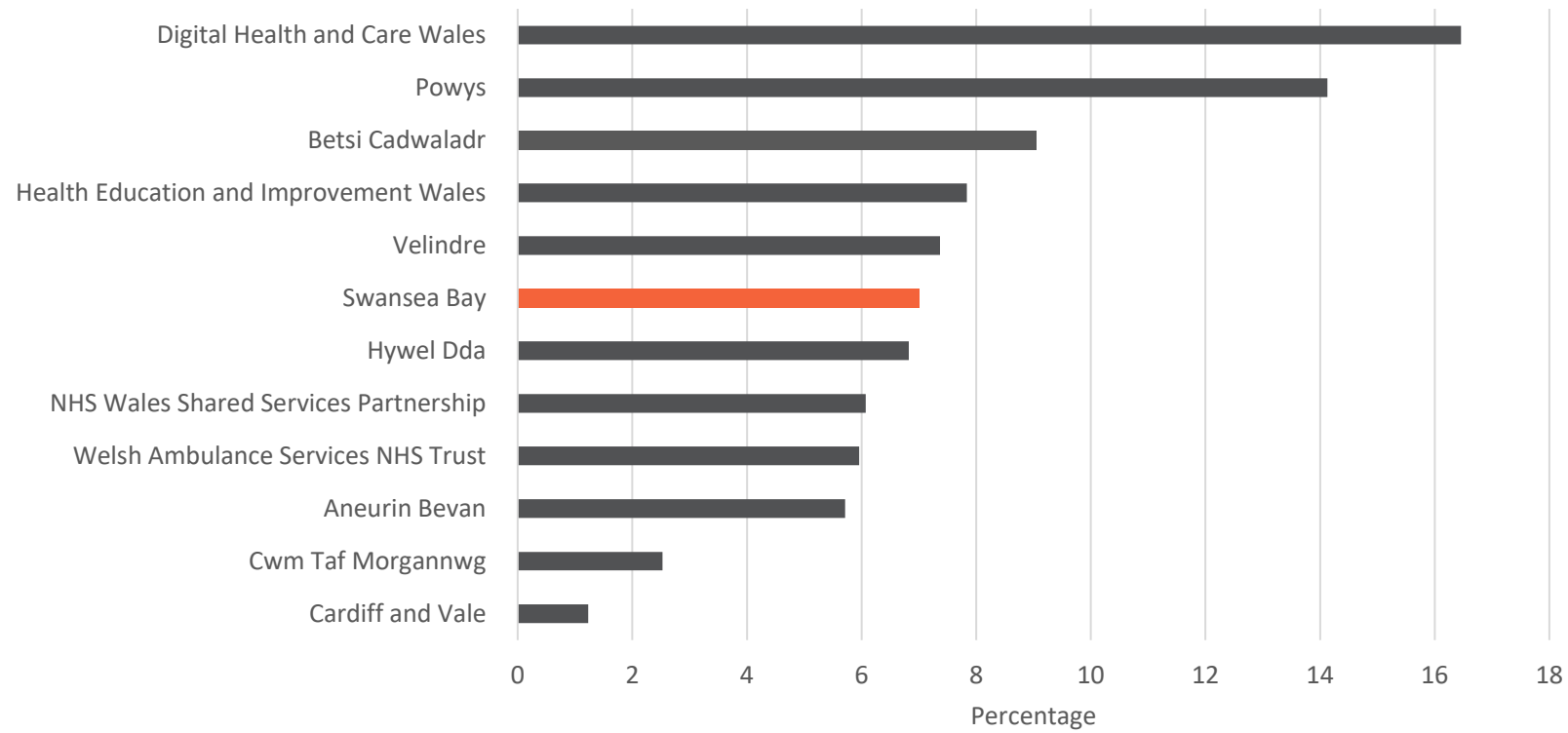
Source: Monthly Monitoring Returns reported to the Welsh Government

Exhibit 9: Annual staff turnover and reason for leaving, 2021-22, Swansea Bay University Health Board



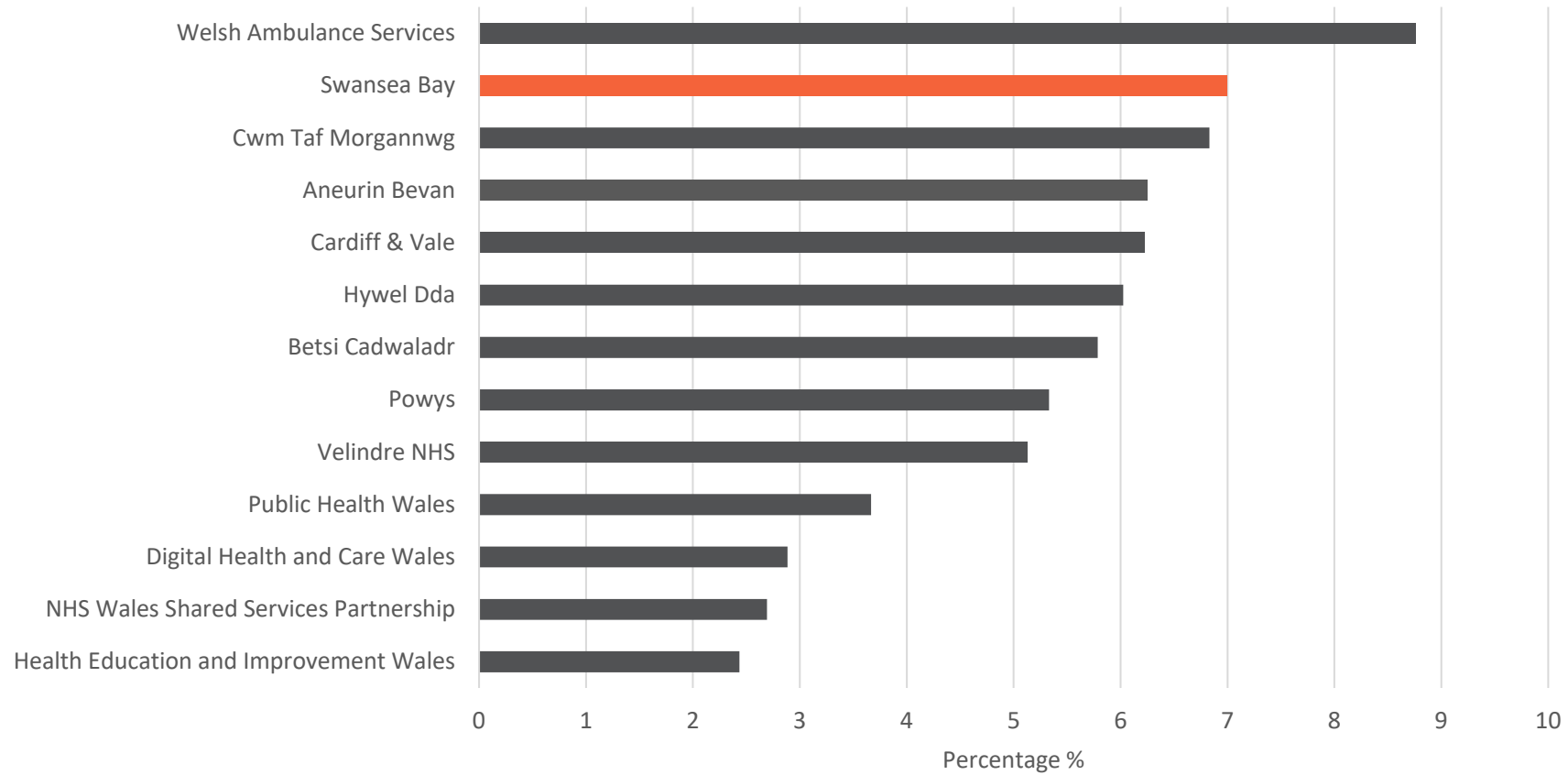
Source: staff turnover data sourced from Health Education and Improvement Wales. Reason for leaving data sourced from health body data request.

Exhibit 10: vacancy rate (percentage), September 2023



Source: Welsh Government, Stats Wales

Exhibit 11: sickness absence by organisation by percentage, 2023 Quarter 2



Source: Welsh Government, Stats Wales

Appendix 3

Organisational response to audit recommendations

Exhibit 12: Swansea Bay University Health Board response to our audit recommendations

Ref	Recommendation	Organisational response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
R1	<p>To ensure service level workforce plans are consistent, improve workforce data quality and understanding of service level capacity need, the Workforce and OD Directorate should:</p> <p>1.1 train management teams across the organisation so that they can consistently apply the Skills for Health Six Step Methodology for Strategic Workforce Planning and its associated tools and templates as detailed in HEIW's workforce planning toolkit (see page 11).</p>	<p>Training: The report recognises that in line with the “well planned” people aim in the Health Board’s (HB’s) new People Strategy, the Workforce and OD Directorate is strengthening the HB’s workforce planning capability through a range of training offers, including a workforce planning intranet page launched in September 2023. There is a small dedicated workforce planning team of <2FTE who currently offer workforce planning workshops to SBU management teams on a commissioned basis, based on level of risk/ service need. This is an ongoing programme of work, subject to a review</p>	<p>Complete current series of commissioned workshops by the end of Q3 2024 and review ongoing roll out of training as part of the people strategy progress report</p>	<p>Strategic Workforce Planning Team</p>

1.2 evaluate the quality of workforce planning, once recommendation 1.1 is progressed, to determine whether the training is achieving its intended benefit (see page 14).

of capacity to continue delivery (to be concluded by the end of Q3). The report mentions that SBU staff are also signposted to the HEIW Workforce Planning training options and resources.

Evaluation: The Directorate recognises there is a need to strengthen the evaluation of the impact of its overall training offer to assess whether it is meeting the aim of upskilling management teams in workforce planning. In the last 12 months, the HB's workforce planning team have kept records of attendance for SBU workforce planning training and have sought feedback via evaluation forms, however no information is currently provided on HEIW's training. Therefore following the recent launch of HEIW's new training offer, the Directorate will be seeking HB-specific attendance and evaluation feedback and will use all data to evidence progress against the "well planned" people aim within the HB's new People Strategy and to identify areas that might require additional support.

Data accuracy: The report recognises that the HB have taken some steps to improve data accuracy, such as developing new dashboards and encouraging services to access and review workforce data when developing their workforce plans. The Workforce Systems, Analytics and Insight team are also working closely with finance colleagues to ensure the HB's funded establishment is on ESR to enable more accurate reporting of HB vacancies in the future.

Bi-annual review, with the first review being based on Q2 2024 data

Funded establishment programme of work due to complete by the end of Q3 2024. Progress is currently reported in the quarterly Workforce GMO highlight reports

Head of Workforce Systems, Analytics and Insight

R2	As service level workforce plans improve in quality, there is the potential to expose new workforce risks. The Health Board should strengthen its risk escalation process to ensure workforce risks are being appropriately raised by service groups and that action is taken to mitigate them (see page 15).	The Workforce and OD Directorate will liaise with the SBUHB risk management team to discuss potential actions that could be undertaken to strengthen the risk escalation process for workforce risks and will continue to review escalated workforce risks at relevant meetings, ensuring appropriate mitigating actions are discussed and actioned to address the risks in a timely manner.	Discussion with risk team to take place by the end of Q2 2024	SBUHB Risk Management Team and Relevant Workforce and OD Directorate leads
R3	The Workforce, OD and Digital Committee should receive twice yearly progress reports against the Workforce and OD Directorate's GMO plan to highlight overall progress against milestones, and the outcomes and impact of the action taken (see page 19).	The report recognises that the Workforce and OD Directorate currently prepare quarterly highlight reports for their GMO plan as part of the Health Board's IMTP/annual plan governance process and these are shared with the Workforce, OD and Digital Committee. However following the launch of the HB's new People Strategy, a new bi-annual progress report against the 7 people aims in the strategy will also be prepared and shared with the above committee to provide assurance on overall progress and impact.	The first people strategy progress report will be prepared from 1 st July 2024 based on Q2 data and then it will become a business as usual activity.	Strategic Workforce Planning Team
R4	The Health Board should use its workforce benchmarking to identify best practice and explore innovative approaches with health bodies within Wales and similar organisations across the UK (see page 19).	The report recognises that the HB benchmarks its performance against other health bodies in Wales and against industry best practice when setting workforce measures, and uses benchmarking in workforce planning workshops, however it identifies there is a need for the HB to use its		

		<p>workforce benchmarking to identify best practices and innovation.</p> <p>The workforce planning team launched a workforce planning page on its intranet in September 2023 which includes examples of best practice workforce re-design case studies and also signposts users to other benchmarking resources (e.g. the HEIW benchmarking tools and compendium of roles). The aim is to continue to grow this resource and promote it via workforce planning workshops and local workforce teams.</p>	<p>Add at least 5 new best practice case studies to the intranet page by the end of Q3 2024. Continued growth/ maintenance will become a business as usual activity.</p>	<p>Strategic Workforce Planning Team</p>
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Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.