

People & Culture Committee

Tue 11 February 2025, 13:30 - 16:30

Microsoft Teams



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Agenda

1. PRELIMINARY MATTERS

People and Culture February 2025.pdf (2 pages)

1.1. Welcome and Introductions

Oral *Chair*

1.2. Apologies for Absence

Oral *Chair*

1.3. Declarations of Interest

Oral *Chair*

1.4. Draft Minutes of the last Meeting held on 15th October 2024

Attached *Chair*

1.4 PCC Minutes 15.10.24. LW.docx v2.pdf (14 pages)

1.5. Committee Action Log

Attached *Chair*

1.5 People Culture Committee February Action Log.pdf (7 pages)

2. ITEMS FOR APPROVAL/RATIFICATION/DECISION

No items for this section

3. ITEMS FOR DISCUSSION

3.1. Review of ABUHB Values & Behaviours Framework

Attached *Director of Workforce & OD*

3.1 Review of ABUHB Values & Behaviours Framework Cover report.pdf (6 pages)

3.1 Appendix 1 Themes Identified from Feedback.pdf (1 pages)

3.2. Update on EDI Activity Update

Attached *Director of Workforce & OD*

- Patient Presenting at Hospital Requiring Extra Support

3.2 Equality, Diversity and Inclusion (EDI) Update Cover Report.pdf (7 pages)

3.3. Workforce Performance Dashboard incorporating Key Performance Indicators

Attached Director of Workforce & OD

- Deep Dive on Sickness Level

- 📄 3.3 - Workforce Performance Report Cover report.pdf (8 pages)
- 📄 3.3 Appendix 1 - Workforce Performance Report - Dec 2024.pdf (6 pages)

3.4. Violence & Aggression against Staff across ABUHB

Presentation Director of Allied Health Professions & Health Science

- 📄 3.4 Violence Aggression towards Staff - Presentation .pdf (11 pages)

3.5. People Plan 2022/25, Quarterly Review Objective 3 - Workforce Sustainability

Attached Director of Workforce & OD

- 📄 3.5 People Plan Objective 3 Update Cover Report .pdf (10 pages)
- 📄 3.5 Appendix 1 - JN13808_Care Brochure_vF_WELSH_Web.pdf (10 pages)
- 📄 3.5 Appendix 2 - JN13808_Care Brochure_vF_ENG_Web.pdf (10 pages)

3.5.1. Quality Report - Update on how support can be provided in the recruitment of volunteers

Attached Director of Workforce & OD

- 📄 3.5.1 Quality Report on Volunteering.pdf (7 pages)
- 📄 3.5.1 Appendix 1 - Final Volunteering Annual Report 28-04-24 ppt.pdf (39 pages)

3.6. Report from the Director of Workforce & OD, including Employee Relations & Suspensions over 4 months

Attached Director of Workforce & OD

- 📄 3.6 WOD Directors Report - Cover report.pdf (8 pages)
- 📄 3.6 Appendix 1 - Final Return Non Pay Elements of the collective pay deal 2022-23 and 2023-24.pdf (3 pages)

3.7. Staff Survey Results Report

Attached Director of Workforce & OD

- 📄 3.7 All Wales Staff Survey – Review of Response Rates Cover report.pdf (8 pages)

3.8. Speaking up Safely

Presentation Director of Workforce & OD

- 📄 3.8 Speaking Up Safely Presentation .pdf (5 pages)

4. ITEMS FOR INFORMATION

4.1. Review of Committee Programme of Business 2024/25

Attached Director of Corporate Governance

- 📄 4.1 People Culture Committee Forward Work Plan Cover Report v3.pdf (4 pages)
- 📄 4.1 Forward Work Plan- People and Culture February meeting.pdf (8 pages)

5. OTHER MATTERS

5.1. Items to be Brought to the Attention of the Board and Other Committees

Oral Chair

5.2. Any Other Urgent Business

5.3. Date of the Next Meeting: Wednesday 11th June 2025

**CYFARFOD BWRDD IECHYD PRIFYSGOL
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING
PEOPLE AND CULTURE COMMITTEE**

AGENDA

Date and Time	Tuesday 11th February 2025 13.30 -16:30
Venue	Microsoft Teams

Item	Title	Format	Presenter
1	PRELIMINARY MATTERS		
1.1	Welcome and Introductions	Oral	Chair
1.2	Apologies for Absence	Oral	Chair
1.3	Declarations of Interest	Oral	Chair
1.4	Draft Minutes of the last Meeting held on 15 th October 2024	Attached	Chair
1.5	Committee Action Log	Attached	Chair
2	ITEMS FOR APPROVAL/RATIFICATION/DECISION		
	<i>No items for this section</i>		
3	ITEMS FOR DISCUSSION		
3.1	Review of ABUHB Values & Behaviours Framework	Attached	Director of Workforce & OD
3.2	Update on EDI Activity Update <ul style="list-style-type: none"> Patients Presenting at Hospital Requiring Extra Support 	Attached	Director of Workforce & OD
3.3	Workforce Performance Dashboard incorporating Key Performance Indicators <ul style="list-style-type: none"> Deep dive on Sickness levels 	Attached	Director of Workforce & OD
3.4	Violence & Aggression against Staff across ABUHB	Presentation	Director of Allied Health Professions & Health Science
3.5	People Plan 2022/25, Quarterly Review Objective 3 - Workforce Sustainability	Attached	Director of Workforce & OD



	<ul style="list-style-type: none"> Quality Report – Update on How Support can be provided in the recruitment of volunteers 		
3.6	Report from the Director of Workforce & OD, including Employee Relations & Suspensions over 4 months	Attached	Director of Workforce & OD
3.7	Staff Survey Results Report	Attached	Director of Workforce & OD
3.8	Speaking up Safely	Presentation	Director of Workforce & OD
4	ITEMS FOR INFORMATION		
4.1	Review of Committee Programme of Business 2024/25	Attached	Director of Corporate Governance
5	OTHER MATTERS		
5.1	Items to be Brought to the Attention of the Board and Other Committees	Oral	Chair
5.2	Any Other Urgent Business	Oral	Chair
5.3	Date of the Next Meeting: <ul style="list-style-type: none"> Wednesday 11th June 2025 		

Motion to Exclude Members of the Public and the Press

There may be circumstances where it would not be in the public interest to discuss a matter in public. In such cases the Chair shall move the following motion to exclude members of the public and the press from the meeting:

“Representatives of the press and other members of the public shall be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest”.

Motion under Section 1(2) Public Bodies (Admission to Meetings) Act 1960



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN/ANEURIN BEVAN UNIVERSITY
HEALTH BOARD MEETING**

**MINUTES OF THE PEOPLE & CULTURE
COMMITTEE**

DATE OF MEETING	Tuesday 15 th October 2024 13:30-16:30
VENUE	Microsoft Teams

PRESENT	Louise Wright, Independent Member, Committee Chair
	Paul Deneen, Independent Member
	Helen Sweetland, Independent Member
IN ATTENDANCE	Sarah Simmonds, Director of Workforce & Organisational Development (OD)
	Rani Dash, Director of Corporate Governance
	Nicola Prygodzicz, Chief Executive
	Bryony Codd, Head of Corporate Governance
	Peter Brown, Assistant Director of Workforce & OD
	Shelley Williams, Deputy Director of Workforce
	Julie Chappelle, Assistant Workforce Director
	Kelly Downes, Deputy Director of Nursing (Item 3.9)
	Jerrie Serrell, Senior Clinical Psychologist (Item 3.6)
	Geraint Scott, Head of the Welsh Language Unit (Item 3.8)
Fern Cook, Committee Secretary	
OBSERVING	Laura Howells, NWSSP - Audit and Assurance Services
	Star Moyo, Health Inclusion Service Senior Nurse
	Vivek Goel, Endoscopy Consultant
	Lyn Puckett, Trade Union Representative
	Angela Palfrey, Senior Workforce Business Partner
APOLOGIES	Penny Jones, Independent Member
	Robert Holcombe, Director of Finance, Procurement & Value
	James Calvert, Medical Director

PCC/1510/01	Welcome and Introductions
	The Chair welcomed everyone to the meeting and introductions were made to the aspiring Board Members.



PCC/1510/02	<p>Apologies for Absence for Noting</p> <p>Apologies for absence were noted.</p>
PCC/1510/03	<p>Declarations of Interest for Noting</p> <p>There were no declarations of interest raised to record.</p>
PCC/1510/04	<p>Draft Minutes of the last Meeting held on 18th June 2024</p> <p>The minutes of the previous meeting held on the 18th June 2024 were agreed as a true and accurate record.</p>
PCC/1510/05	<p>Committee Action Log</p> <p>The Committee received the action log and was content with progress made in relation to completed actions and against any outstanding actions.</p> <p>Paul Deneen (PD), Independent Member, questioned why there had been a delay in the reporting of statutory and mandatory training. Sarah Simmonds (SS), Director of Workforce & OD, advised that due to additional questions being asked at a recent Board meeting, there was still work on going and a final report would be presented to the Committee in February, highlighting the Manual Handling and Safeguarding Level 3 training changes that had been made to increase the compliance. Peter Brown verbally updated on the work that been undertaken and completed to identify the time involved in completing the training for staff groups.</p>
PCC/1510/06	<p>Speaking Up Safely Report (SUS)</p> <p>Peter Brown (PB), Assistant Director of Workforce & OD, provided the Committee with an update, for assurance, on the Speaking Up Safely (SUS) programme and the work that had been completed to date; advising that the SUS framework launched in summer 2023 with the Health Board undertaking a self-assessment against the framework issued by Welsh Government.</p> <p>The Committee was advised that a process was now in place to support and guide staff on how they could raise a concern, with an internet page where staff could access</p>



the form which could be completed anonymously if preferred.

PB advised that a SUS Steering Group had been set up in March 2024 which would focus on the learning from the new process.

The Committee noted new posters had been developed. These would be presented to the SUS Steering Group for approval with the aim to be display across sites in the next few weeks.

The Committee was advised of the following risks currently impacting the ability of the programme to move forward: -

- Data storage and manually assessing the submission forms;
- Financial, investment was currently at £8K per year; would require more investment of 200k;
- Increase in HR activity;
- Lack of training available.

PB advised the Committee that the next steps for the SUS programme was to submit a report to the Executive Committee on 31st October for approval and launch on 1st December with a communications plan for staff.

Sarah Simmonds (SS), Director of Workforce & OD, advised the Committee that the Health Board was still awaiting feedback from Welsh Government regarding the self-assessment to help guide the next steps, noting that since the framework launched there had been an increase in staff using the process.

The Committee was advised the Work in Confidence platform was being considered as an all-Wales platform and SS indicated the Committee may be keen to consider adopting that report mechanism.

Vivek Goel (VG), Endoscopy Consultant, asked if there was support for the staff that have complaints raised against them. PB assured the Committee that there were processes in place to support both sides of the complaint.

Shelley Willaims (SW), Deputy Director of Workforce, advised the Committee that there would be a new Workers Protection Act coming into force from 26th October place an obligation on the Health Board to put in place



	<p>reasonable steps to prevent sexual harassment within the workplace. The Committee NOTED the update on the progress made on the Speaking Up Safely programme.</p>
<p>PCC/1510/07</p>	<p>Equality, Diversity and Inclusion - Update</p> <p>Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an overview of the Equality, Diversity and Inclusion (EDI) activities and the progress made over the last quarter for assurance, advising that the Head of Equality, Diversity and Inclusion post interviews had been arranged for 17th October with the role temporarily being covered within Workforce and OD.</p> <p>The Committee was advised that SS and Nicola Prygodzicz (NP), Chief Executive, had met with Anton Emmanuel and Welsh Government regarding the Workforce Race Equality Standard (WRES) data, highlighting that there were areas for further improvement across the Health Board including the following:-</p> <ul style="list-style-type: none"> • Absence of Ethnic Minority Board Membership • Progression to Senior Grades • Ethnicity Declaration Rates • Likelihood of Appointment (after shortlisting) and Capability Processes • Experience of Discrimination and Harassment <p>SS assured the Committee that the areas requiring improvements would be a main focus of the Health Board in the coming months to improve the current position.</p> <p>LW asked how the Health Board was supporting patients presenting in hospital that need extra support. SS assured the Committee there was work currently being completed and would provide an update at the next Committee meeting in February. Action: Director of Workforce & OD</p> <p>The Committee NOTED the Equality, Diversity and Inclusion Update.</p>
<p>PCC/1510/08</p>	<p>Workforce Performance Dashboard incorporating Key Performance Indicators</p> <p>Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an overview of the Workforce Performance Dashboard for assurance, advising the dashboard had a new format and provides the latest data</p>



on workforce sustainability and training, workforce supply and variable pay.

The Committee noted the following key areas from the performance Dashboard:-

- Sickness levels remaining high.
- Turnover in staff had reduced and was one of the lowest compared to other Health Boards.
- Variable pay was on target.
- Reduction in time to hire which was now below the 71 day target.

SS advised the Committee that the Health Board was not seeing an impact on sickness absence despite the positive work with managers and the WoD team were providing staff to return to work and noted that there was a divisional day next week where they plan to look at how things could be done differently to reduce the sickness levels.

The Committee requested that a deep dive on the sickness levels be included within the Workforce Performance Dashboard at the next Committee meeting in February.

Action: Director of Workforce & OD

SS advised the Committee there had been a decrease in Performance reviews on ESR most likely due to staff not having the capacity and provided assurance that there was work being undertaken to streamline the process, including a revised proforma focussing on key questions and wellbeing.

Helen Sweetland (HS), Independent Member, questioned if the Health Board had seen an impact due to the reduction of administration roles. SS advised an assessment had been undertaken and the findings were that there had been no negative impact as numbers remain small and spread across areas.

The Committee **NOTED** the content of the Workforce Performance Dashboard.

PCC/1510/09

People Plan 2022/25, Quarterly Review Objective 2 - Employer of Choice

Shelley Williams (SW), Deputy Director of Workforce, provided the Committee with assurance on the progress made against a series of actions which support people's



choice objective 2 of the People Plan. SW advised that the People Plan for 2022-2025, outlined the 3-year forward view of the priorities for the Workforce and Organisational Development (WOD) Division.

The Committee was advised the next iteration of the People Plan was due in 2025 and would be informed by a comprehensive engagement process, whilst utilising intelligence from other sources such as staff surveys, national drivers and future horizon scanning to ensure that the Health Board remains a chosen employer, providing the best experience for staff and patients.

SW advised the Committee that the People Plan had 8 overarching actions with 88 sub actions that sit under the people's choice objective and highlighted the positive progression of the actions.

The Committee was advised that the medical and dental workforce recruitment strategy had taken longer than expected but was assured the strategy would be ready to share across the Health Board early next year.

The Committee noted there had been a positive change over this year with the Junior Doctors, based on the feedback and the learning taken from the previous year.

SW advised that 100 apprenticeships had started within the Health Board since the scheme launched in 2021. It was highlighted that, in the last 6 months, the Health Board had needed to reduce the number of apprenticeships available due to the additional support required by the apprentices and the financial position.

Peter Brown (PB), Assistant Director of Workforce & OD, advised the Committee of the work that had been undertaken to streamline the work experience process as the option was a popular choice for students wanting to join the Health Board after studying.

Sarah Simmonds (SS), Director of Workforce & OD, offered to share the career brochure with the Committee which had been shared with the Gwent Workforce Board and aligned with career pathways for people coming into the Health Board to work. **Action: Director of Workforce & OD**



Paul Deneen (PD), Independent Member, asked if there was an option for students to volunteer to gain experience. SS advised there was volunteering undertaken within the Health Board but would need to check the age limit with the Director of Nursing who leads this work. **Action: Director of Workforce & OD**

PB advised the Committee that the talent management programme was now live online for staff members to access to view development opportunities. To date there were 6 sessions available with 3 sessions fully booked for this year.

The Committee noted that funding had become available to allow the Health Board to conduct the Health Care Support Worker induction training in-house.

The Committee **NOTED** the progress made to date on the People Plan in objective 2 people's choice.

PCC/1510/10

Annual Assurance Report on Job Planning and Assurance of Implementation of Medical E-Systems

Julie Chappelle (JC), Assistant Workforce Director, presented, for assurance, an update on the roll out of e-Job Planning, e-Rostering and e-Locum bank/agency medical systems.

The Committee was advised that a revised approach to managing medical workforce information and processes had been agreed by the Executive Committee in 2021 for the procurement of electronic workforce systems.

JC advised the Committee of the roll out timelines of the systems:-

- Roll out of the e-Job Planning system commenced on 22 January 2024 with this date being postponed due to delays in the procurement process and Industrial Action by Junior Doctors;
- Implementation of the e-Roster system commenced at the beginning of January 2024 with a pilot in Family and Therapies;
- The locum system was implemented on 1st December 2023 and was rolled out to all services across the Health Board;
- The existing Agency Retinue system was replaced and rolled out with an interoperable



Patchwork agency system in May 2024 when the contract with Retinue expired.

The Committee was advised that work was underway to get the job plans signed off to over 70% with job plans being added the system and medical leader's meetings in place to work on how the compliance could be increased.

JC advised that the challenges to rolling out the system included working with the divisions and the capacity of the teams to undertake the training of the use of the new system. Sarah Simmonds (SS), Director of Workforce & OD assured the Committee there had been positive feedback and highlighted that 50% of the consultants had been trained.

JC confirmed that the new system had a function available to prevent locums working too many hours and once all staff were set up on the system, they could ensure staff were not working over the legal working hours.

Louise Wright (LW), Chair, voiced her disappointment that the Health Board were not further ahead with the roll out of the job planning for this part of AHUHB work force but acknowledged it was new and change takes time. LW hoped that next time that P&CC were presented with an update that there would be a much higher percentage on the up take at the next Committee meeting.

Action: Director of Workforce.

The Committee **NOTED** the progress made and received assurance that work was progressing.

PCC/1510/11

Feedback on Employee Experience Survey

Jerrie Serrell (JS), Senior Clinical Psychologist, provided the Committee with an overview of the feedback of this year's Health Board Employee Experience Survey, advising there was also a national HEIW NHS survey that allowed the Health Board to compare to other Health Boards feedback.

The Committee was advised the Health Board's Employee Experience Survey consist of the following areas of questions: -

- Safety and speaking up
- Experience of discrimination



- Bullying and harassment psychological safety
- Burnout
- Intention of leave
- The employee experience framework

The Committee noted that the approach for this year's survey had changed from wellbeing to an experience survey to allow the Health Board to understand staff experience within the working environment.

JS presented the findings from the survey advising there had been an increase in responses of 24% in 2024 compared to July 2023 and a reduction in reporting of Discrimination to 13% from 19% in 2023.

The Committee was advised that there had been a reduction in response rate from surgery and complex care with overall engagement increase of 24% this year. Sarah Simmonds (SS), Director of Workforce & OD, highlighted that the reduction in surgery and complex care may be due to pressures within these areas.

JS advised the Committee that 56% of respondents indicated that they had considered leaving the Health Board, with 32% taking action to leave.

The findings of the survey had also highlighted 63% of respondents were satisfied working in the Health Board, 27% were experiencing burn out symptoms and 16% reporting severe burnout.

The Committee was advised that a summary of the survey results had been drafted to share with all staff members with a follow up article shared via SharePoint with the in-depth findings.

Paul Deneen (PD), Independent Member, asked what the difference was between the Health Board and National NHS survey. JS advised the Health Board survey consisted of different questions to allow a greater understanding of the staff members experience.

The Committee **NOTED** the feedback on Employee Experience Survey for 2024.



**Report from the Director of Workforce & OD,
including Employee Relations & Suspensions over 4
months**

Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an overview of a range of activities of the Workforce & OD Team, key issues locally, regionally and in NHS Wales.

The Committee was advised that 11 employees were currently suspended 5 employees have been suspended for over 12 months, one has been suspended for over 6 months, and 5 have been suspended for less than 3 months and were assured that each employee had regular suspension review meetings and were signposted to support services.

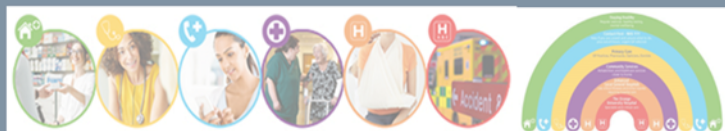
SS advised that, during the reporting period there were 2 new employment tribunal requests received, bringing the total number of active Employment Tribunal claims to 7. 1 case had been withdrawn by the claimant, 2 claims were unsuccessful and had been dismissed at hearing, the remaining 4 cases continued to be defended by the Health Board.

The Committee was advised that the Human Resource team, alongside nursing colleagues had won two awards at the HPMA UK awards for action taken in relation to the application of workforce data to reduce agency and variable pay and Christian Hawkes and Andrew Cooper had won a Rising Star award.

SS advised that the policy for consultant grade pay pathway was progressing positively with the policy going to LNC in September for discussion and the Executive Committee for Approval.

The key focus was to provide a softer induction programme for international medical graduates to allow the Health Board to support the new employees in a targeted way, with the approach having an interest from HEIW and other organisations.

The Committee was advised that, due to the new pay award there could be a regrading route for specialist grades and the Health Board was awaiting details from NHS employers on how they should progress.



SS highlighted to the Committee that there were issues with members of staff progressing through their increments, and provided assurance that workforce were supporting the individuals to ensure they were receiving their pay step.

The Committee **NOTED** the information within the Director of Workforce & OD report.

PCC/1510/13

Assurance Report on Compliance with Welsh Language Standards – More than Just Words

Geraint Scott (GS), Head of the Welsh Language Unit, provided the Committee with an overview of the Health Board's compliance with regards to the Welsh Language Standards and the progress in relation to the targets set out in the Welsh Government's, More Than Just Words plan for increasing service delivery through the medium of Welsh.

The Health Board had completed a questionnaire for the Commissioner's office which included the level of compliance in relation to different groups of Welsh language standards and was required to provide evidence as to why the Health Board had made the assessment.

Following the assessment, the Welsh language unit has generated an action plan based on the Commissioner's grouping of the standards to ensure a greater level of compliance in the Health Board.

The Committee was advised that the Health Board had shared the 5 year plan with Welsh Government and was awaiting Welsh Government guidance and the resources for the more than just words programme plan to move forward.

The Committee was advised that, when writing the Welsh language annual report, the compliance of ESR training was above 80%.

GS advised that there had been an increase in staff members undertaking Welsh language training with the Health Board now having a tutor available to support small cohorts.



The Committee was advised that there had been a small number of complaints received around social media which the Health Board had resolved quickly.

The Committee **NOTED** the work undertaken to ensure compliance within the Welsh language standards, achievement against the More Than Just Words targets.

PCC/1510/14

Nursing Midwifery & SCPHN Workforce Annual Report

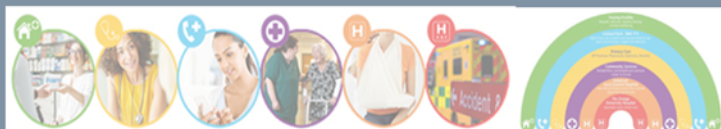
Kelly Downes (KD), Deputy Director of Nursing, provided the Committee with an overview of the 2023/24 annual report for the nursing, midwifery, and SCPHN workforce that included initiatives and outcomes from the past year and addressed critical areas such as workforce strategy, professional regulation, recruitment, retention, and professional development, with a forward-looking approach to priorities for 2024-2025.

The Committee was advised that the Health Board's 2023/26 strategy had been created with the aim to deliver care by a skilled workforce and to recruit effectively based on experience with the implementation of best practice, adherence to professional standards, workforce stability and patient care.

KD highlighted to the Committee some of the achievements throughout the year, advising 93 international nurses had been employed to help increase the workforce and the Future Nurses Academy was available as a pathway for school leavers wanting to become nurses using the model "earn as you learn".

Louise Wright (LW), Committee Chair, asked how the team was sharing the resources with other professions within the Health Board regarding international recruitment and retention. KD advised there was opportunity to look at how they share the information across the Health Board as this was still new and improvements were still ongoing.

The Committee was advised that the Leadership Academy was progressing with 58 graduates over the 12month period, with many of the graduates being promoted within the Health Board.



	<p>Helen Sweetland (HS), Independent Member, asked if the Leadership Academy was made available externally. KD advised the Committee the academy had been opened externally alongside internal staff members.</p> <p>KD advised that the flexible route to nursing had been successful with the Health Board supporting Health Care Support Workers to work towards obtaining their registered nurse qualifications, with an increase in uptake within this year's report.</p> <p>The Health Board held a nursing and midwifery conference in 2023. The theme was nursing and midwifery being a profession of excellence and lifetime of compassion with 300 attendees. Plans were progressing for the next conference in 2025.</p> <p>The Committee NOTED the current position and future directions for the Nursing, Midwifery, and SCPHN workforce within the Health Board.</p>
<p>PCC/1510/14</p>	<p>Committee Risk Report</p> <p>Rani Dash (RD), Director of Corporate Governance, provided the Committee with an overview of the Committee's risks that they were responsible for monitoring on behalf of the Board.</p> <p>RD confirmed that the key risks relating to recruitment and retention and staff wellbeing had been discussed during the meeting.</p> <p>The Committee NOTED review of SRR 001 A and B to ensure that the risks are effectively managed.</p>
<p>PCC/1510/15</p>	<p>Review of Committee Programme of Business 2024/25</p> <p>The item was for information and no questions were raised from the committee.</p>
<p>PCC/1510/16</p>	<p>Consultant Private Practice policy</p> <p>The item was for information and no questions were raised from the committee.</p>



PCC/1510/17	<p>Items to be Brought to the Attention of the Board and Other Committees</p> <p>Items to brought to the attention of the Board were:-</p> <ul style="list-style-type: none"> • Number of suspensions • Welsh Language standards • Consideration is likely to be required for the Health Board to have a mature and sustainable Speaking up safely frame work.
PCC/1510/18	<p>Any Other Urgent Business</p> <p>There was no urgent business.</p>
PCC/1510/19	<p>Date of the Next Meeting: Tuesday 11th February 2025, 13.30-16.30pm</p>

DRAFT





Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

CYFARFOD BWRDD IECHYD PRIFYSGOLN ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD MEETING

Outstanding	Overdue: In Progress	Not Due	Completed	Transferred to another Committee
--------------------	-----------------------------	----------------	------------------	---

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
December 2023	MHMAC/06/12/5.1 Transferred from MHAMC	Items to be Brought to the Attention of the Board and Other Committees An item to be placed on the FWP for the People & Culture Committee assessing violence towards staff within the Mental Health Division and the appropriate support that is in place.	Director of Therapies & Health Science	October 2024	Complete <u>January</u> Violence & Aggression against staff will be included on February agenda under item 3.2. <u>October</u> Violence & Aggression against staff has been deferred to February 2025 meeting.
February 2024	PCC 2202/3.2	Assurance on Compliance with the Equality Act 2010, including Equality Impact Assessment Further work required to ensure consistent and comprehensive Equality	Louise Wright, Chair	October 2024	Complete <u>January</u> An update on EDI activity will be included in February 2025 agenda under agenda item 3.3.



Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		Impact Assessments, which brought a risk of a potential for challenges in respect of the Health Board's policies and decisions. LW confirmed that she would raise this matter with the Board at its meeting in March 2024.			<u>June</u> Chair of Committee has confirmed that progress is being made and an update will be provided at the next Committee meeting.
February 2024	PCC 2202/3.8	Report from the Director of Workforce & OD, Including Employee Relations & Suspensions over 4 Months Outcome of work being undertaken to understand how long it takes different job roles to complete mandatory training to be shared at a future Committee meeting.	Director of Workforce & OD	October 2024	Complete <u>January</u> Paper on S&M training reported to Board in January <u>November update</u> The action is complete in terms of time and Peter Brown verbally updated the committee However, since this action was noted the Board had requested other information and therefore



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
					<p>a paper was being prepared for Board</p> <p><u>October Update</u> Following discussion at the July 2024 Board, a paper addressing wider comments regarding statutory and mandatory training to progress to Executive Committee in October 2024 and Board later this year. To share with next Committee in February 2025.</p> <p><u>June Update</u> Work continues in responding to this action and an update will be provided at the next Committee meeting.</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
February 2024	PCC 2202/3.10	<p>HEIW Report</p> <p>HEIW had concerns with new staff members being put on call on their own without support. It was advised that work was being undertaken to ensure this did not occur. The Committee requested a further update on this at a future meeting.</p>	Medical Director	June 2024	<p>Complete</p> <p><u>January</u> HEIW report will be reported to the Committee in June 2025.</p> <p><u>June</u> HEIW update was deferred from June meeting and an update will be presented at the February 2025 meeting.</p>
June 2024	PCC/1806/3.3	<p>Assurance Report on the Development and Delivery of the Agile Working Framework</p> <p>Future reports on this item, to include an update on savings generated through the move to agile working.</p>	Director of Workforce & OD	February 2025	<p>Complete</p> <p><u>January</u> Workshop is being held in March and report on the agile working agenda will be presented to the Committee in June.</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
June 2024	PCC/1806/3.7	<p>Talent and Succession Planning Progress Update</p> <p>Committee to receive an annual update in respect of talent and succession planning.</p>	Director of Workforce & OD	June 2025	<p>Complete</p> <p><u>October</u> Annual talent and succession planning update has been included in the Committee forward work plan for June 2025.</p>
October 2024	PCC/1510/07	<p>Equality, Diversity and Inclusion – Update</p> <p>Update on Patients presenting in hospital requiring extra support to be presented to the Committee in February 2024.</p>	Director of Workforce & OD	February 2025	<p>Complete</p> <p><u>January</u> patients presenting at hospital requiring extra support will be included within the EDI Activity Update under agenda item 3.3.</p> <p><u>October</u> Report on patients presenting at hospital</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
					requiring extra support has been included on the Committee forward plan.
October 2024	PCC/1510/08	<p>Workforce Performance Dashboard incorporating Key Performance Indicators</p> <p>Deep dive on Sickness levels to be included within the Workforce Performance Dashboard and presented to the Committee in February 2024</p>	Director of Workforce & OD	February 2024	<p>Complete</p> <p><u>January</u></p> <p>Deep dive on sickness levels included within the Workforce Performance Dashboard under agenda item 3.4.</p> <p><u>October</u></p> <p>Deep dive on sickness levels has been included on the Committee forward work plan.</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
October 2024	PCC/1510/09	People Plan 2022/25, Quarterly Review Objective 2 - Employer of Choice Career brochure to be shared with the Committee outside of the meeting.	Director of Workforce & OD	February 2024	Complete <u>October</u> Career Brochure was shared via email with the Committee on 15 th October 2024.
October 2024	PCC/1510/10	Annual Assurance Report on Job Planning and Assurance of Implementation of Medical E-Systems An update on the percentage up take of Job Planning at the next Committee meeting	Director of Workforce	February 2024	Complete <u>November</u> Update on the percentage uptake on job planning has been added to the Committee forward work plan to be presented at June's meeting.

All actions in this log are currently active and are either part of the Committee's forward work programme or require more immediate attention, such as an update on the action or confirmation that the item scheduled for the next Committee meeting will be ready.

Once the Committee is assured that an action is complete, it will be removed. This will be agreed at each Committee meeting.



DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Review of Aneurin Bevan University Health Board's Values and Behaviours Framework
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Executive Director of Workforce and Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Matthew Bidgood, Senior Organisational Development Practitioner

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Values and Behaviours Framework is currently under review to ensure alignment with the organisational culture and strategic priorities. This report outlines actions taken, progress achieved, and plans to refresh the Framework, including next steps in conjunction with, and aligned to, the development of the Health Board's long-term strategy 2035.

This paper provides an update and information on the work completed to date and plans for further development in 2025 of the Health Board's Values and Behaviours Framework.

The People and Culture Committee is asked to note the progress and to provide comments and views in support of future work.

Cefndir / Background

As part of the Health Board's [Conversation for a Healthy Future Strategy 2035](#) development, we are undertaking a review of our [organisational values and behaviours](#) which are shown below in Figure 1.



Figure 1. Health Board's values

The Health Boards' Values and Behaviours Framework was developed prior to the pandemic in June 2016 with the aim of making the Health Board an enjoyable and fulfilling place to work. With so many technological, social and political changes over the past 9 years, it is timely and appropriate for a refresh. The current Health Board values and behaviours complement the values of the NHS constitution which include:

- Working together for patients
- Respect and dignity
- Commitment to quality of care
- Compassion
- Improving lives
- Everyone counts

We have asked colleagues, patients, service users and other key stakeholders to help shape **Our Purpose, Our Vision, Our Goals** and **Our Values**, specifically, the values and behaviours that help us work together to be the very best we can be and deliver excellent services to our patients and service users.

To date, 6,930 people have provided feedback via 2,240 survey responses and 4,690 people across 225 events as part of the listening phase. These insights have been analysed and thematically organised, **(Appendix 1)** and will form development of a revised Values and Behaviours Framework to serve us into 2035 and beyond. This paper provides an update on work undertaken so far, along with plans to provide the Health Board with a refreshed and attainable Values and Behavioural Framework that links directly to our new Health Board Strategy.

The People and Culture Committee is invited to participate in the [Values Engagement Questionnaire](#) by clicking the link or by scanning the QR code below.



Asesiad / Assessment

All NHS Wales organisations make a strategic choice to engrain a certain set of values within their culture. These values convey strong messages as to what the organisation stands for and believes in and all staff are expected to demonstrate and patients should observe.

Much has changed since the original Values and Behaviours Framework was launched in 2016. In order to develop the Health Board's new long term plan the Health Board is asking the people of Gwent for their opinions and ideas on where the strategy should focus. This provides an opportunity to ask our communities and

staff, of which many staff belong to the communities we serve, if our values are helping us work together to be the very best we can be and reflect the context of work in the present day.

Alongside this wider-strategy engagement, a multi-disciplinary Values and Behaviours Working Group was established to discuss, consult and shape the work. Through this, a multi-methodology, inclusive approach is being taken to ensure our people have an opportunity to contribute as follows:

- Development of new [Values 2035 SharePoint hub](#)
- Deployment of a [Values Based Questionnaire](#)
- Drop-in sessions across the Health Board
- 7 x In-person Values Engagement Sessions have been completed across the Health Board
- 7 x Virtual Values Engagement Sessions have been completed across the Health Board
- Design and development of a range of [promotional materials](#) (poster, Microsoft Teams Background, E-mail signature)
- Design and development of a 'People Managers Engagement Pack' to allow leaders and managers to engage their teams in a Values-Based conversation
- Design and development of a 'One-Page Values Engagement Briefing' for those clinical leaders and managers who are more time-pressed.

In addition, a range of communication articles have been published with advocacy from Senior Leaders (including Peter Brown, Jamie Marchant, Sarah Simmonds, Jennifer Winslade) describing the importance of this work and encouraging staff to get involved and view a [public blog](#) in November 2024 on the Health Board's website.

Values-based insights from public and key stakeholders gathered from the wider strategy engagement responses will be included. This extensive and inclusive engagement will provide rich insight into whether people feel our Values and Behaviours Framework is working effectively to support a healthy workplace culture in our organisation, along with insights as to how we can improve this for our people. This includes a gauge as to whether people 'see, know, feel and demonstrate' our values and behaviours, how connected they feel and what needs including to see us into 2035 and beyond.

This work was paused from October 2024 - February 2025 for two clear reasons; to allow the NHS Wales Staff Survey to run from October 2024 to December 2024 and to make allowances for winter and system pressures. The work will re-commence in February 2025, with a publication from Nicola Prygodzicz, reminding colleagues of this important work and encouraging them to get involved, primarily through the Values Questionnaire.

Next steps in 2025

February – Organisational wide engagement via Cross-Divisional meetings. This can be done via:

- People Manager's Values Engagement Pack
- People Manager's One-Page Values Engagement Briefing

- Promotion of the Values Questionnaire and link
- Sign-posting Colleagues to the Values 2035 Hub

March - A series of workshops co-hosted by Planning and Organisational Development colleagues to present insights from analysis and hear feedback.

April - Use all data and insights to formulate a revised Values and Behaviours Framework.

May – Test the revised Values and Behaviours Framework widely across the organisation in existing forums (e.g. Executive Committee, Trade Union Partnership Forum, People and Culture Committee, Divisional Team Meetings, Values and Behaviours Working Group, Cross Divisional Meetings and existing learning and development forums) alongside bespoke planned Values and Behaviours sessions, both online and in-person that all staff can attend (specific dates to be confirmed).

June – Publish and launch our revised Values and Behaviours Framework in conjunction with the launch of the Health Board’s long-term strategy.

July – Embed phase commences. This phase includes a range of evidence-based approaches to embed our values and behaviours into our policies and processes and allow teams to understand and engage with the values and behaviours on a much deeper level. This will involve Values Based Workshops with leaders and teams across the organisation and support teams in truly understanding what the values and behaviours mean for them, engendering local ownership and empowering people to fully embrace our behavioural Framework and role model our values.

16 October 2025 – World Values Day Celebration Event. Details TBC.

Cultural change takes time, and it is anticipated that the ‘embed’ phase of this work will take 12 to 36 months. During this period, individuals and teams across the organisation need the opportunity to understand and live our values and behaviours noting that embedding these behaviours requires patience, practice, and consistent reinforcement. Research on organisational change, such as Kotter's 8-Step Change Model, highlights that fostering a shared understanding and aligning personal values and behaviours with those of the organisation is essential for lasting transformation but cannot be rushed without risking superficial adoption.

Changing behaviour is challenging and not always easy to measure, but it’s key to creating a workplace where everyone feels inspired and supported to be their best. This is about more than just ticking boxes—it’s about shaping a culture where our values are second nature and guide everything we do. Measurement will take place via a bespoke evaluation criteria and progress can be measured through existing mechanisms such as our internal Employee Experience Survey, as well as the NHS Wales Staff Survey. There will also be indirect correlations through Workforce metrics (number of Employee Relations cases, retention figures, sickness absence levels for example)

Once launched, the design and production of some values-based materials will enable people to see the new Framework and allow our values to be part of everyone’s daily work. This is likely to consist of:

- Values branded pens

- Values branded lanyards
- Infection control friendly Values posters
- Design imagery and wording across the Health Board Estate
- Values branded roller banners
- Values based people manager guides

Argymhelliad / Recommendation

The People and Culture Committee is asked to note the progress and to provide comments and views in support of future work.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Board's assurance framework.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	6.3 Listening and Learning from Feedback 7.1 Workforce Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Workforce and Culture
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	Not Applicable
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau)

Impact: (must be completed)

Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
<ul style="list-style-type: none"> • Workforce 	Not Applicable
<ul style="list-style-type: none"> • Service Activity and Performance 	Not Applicable
<ul style="list-style-type: none"> • Financial 	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	<p>No does not meet requirements</p> An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Involvement - The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves. Collaboration - Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives.

Appendix 1 – Themes Identified from Feedback

	Themes	Areas of Focus
Better Health	Make healthy choices easier	Enabling coaching to improve health outcomes
		Enabling affordable and accessible exercise
		Enabling affordable and accessible good food
Better Care	Listen and take action	Developing a culture of listening, recognising people are experts in their own health
		Making our services accessible for all
		Supporting our staff to make the best choices and respect each individual's needs
	Improve care	Improving access to deliver care at the point of need
		Giving people the information they need to proactively manage their own health
Achieve excellence	Delivering care closer to home in community locations	
	Positive employee experience supporting our staff wellbeing and local communities	
	Driving improvement in all that we do	
Better Lives	Build healthy places	Ensuring we are future focused, evidence driven and agents of change
		Enabling a better transport infrastructure
		Enabling access to pleasant green spaces
	Grow healthy communities	Enabling homes that keep us healthy
		Supporting communities to feel connected
		Working with others so people feel safe in their communities and their homes
		Growing our local economy by creating opportunities for local people and businesses



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Equality, Diversity and Inclusion (EDI) Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Director of Workforce and Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Joanne Gubbings, Assistant Director of Workforce and OD

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)
Er Gwybodaeth/For Information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The purpose of this paper is to provide the People and Culture Committee with a brief overview of the Equality, Diversity and Inclusion (EDI) activities and the progress made since the last meeting in October 2024.

The People and Culture Committee is asked to note the latest update on EDI activities and progress.

Asesiad / Assessment

Team Capacity

Star Moyo has commenced in post as Head of Equality, Diversity and Inclusion from 01 February 2025.

David Chaffey has moved from a two-day secondment to full time in the EDI Team and will lead on the disability and accessible communication aspects of the Programme of work.

Mikaela Swindon has commenced in post as Armed Forces Covenant and EDI lead and will support the LGBTQ+ elements of the Programme of work.

Workforce Race Equality Standard (WRES)

The new All Wales mandatory e-learning Anti-Racism module was released in December 2024 and we are currently waiting for the national competency to be added to the local competency on ESR. There is a deadline of December 2025 for 100% compliance. News circulars have gone out to all staff around this requirement.

Following the receipt, the Health Board's WRES report and further discussion the Race Advisory Group meeting in September 2024, a deeper analysis was carried out on our workforce demographic data. The analysis looked at the demographic population basis on ethnicity and religion for England and Wales, Wales, Gwent and the Health Board's workforce. The idea of the analysis was to consider if our workforce population is representative of our local, regional and national population, and then to consider further actions for improvement.

Population	White	Black, Asian and Minority Ethnic
England & Wales	81.7%	18.3%
Wales	93.8%	6.3%
Gwent	94.2%	5.9%
Aneurin Bevan University Health Board*	76.4%	10.4%

*13.2% not disclosed in the Health Board

The data was analysed further by staff group:

1. Administrative and Clerical:

- 86% white workforce population
- 4.5% Black, Asian and Minority Ethnic
- 8.9% not stated
- 80% of the Black, Asian and Minority Ethnic group are in A4C bands 2 - 6
- 80% of the white group are in bands 2- 6
- 87% of the population in bands 7 - 9 are white

2. Additional Clerical Services (Health Care Support Workers):

- 80% white population
- 7.5% Black, Asian and Minority Ethnic
- 12.4% not stated

3. Nursing and Midwifery

- 72% white population
- 13.5% Black, Asian and Minority Ethnic
- 14.5% not stated
- 91% of the Black, Asian and Minority Ethnic group in bands 5 and 6
- 72.8% of the white group in bands 5 and 6
- 86% of the population in bands 7 -9 are white

The outcome actions from considering this analysis will focus on:

- Continuing to drive a culture where staff feel safe to disclose their ethnicity data.
- Considering dedicated talent pathways for minority groups, i.e., Access to Nursing, Management pathways. That mirrors the organisation's ethnic minority % demographic and the local population i.e., 6% of Gwent Population and min 10% of the Health Board's population are not within the white demographic category.
- Considering unconscious bias training.

LGBTQ+

To take forward the priorities outlined in the All Wales LGBTQ+ Action Plan, a workshop has been arranged for 06 February 2025, for staff who represent the LGBTQ+ community and staff who deliver the services outlined in the action plan. A further update will be presented to People and Culture Committee following the workshop.

Accessible Information and Disability

Eye Clinic – Royal Gwent Hospital (RGH)

David Chaffey is currently supporting the Eye Clinic with an action plan to improve the overall patient experience within the service. The action plan has been developed in partnership with the clinical leads following an audit. The action plan includes:

- The service has committed to become the Health Board's first Visually Better Spaces which is awarded by the Royal National Institute for the Blind (RNIB).
- Works and Estates are carrying out improvements on colour contrast.
- In conjunction with the RNIB, David Chaffey will be attending the unit audit day on 11 February 2025 and delivering Visual Awareness Training to all staff (60 in total) over a number of days. This training will be CPD recognised with the RNIB.
- The Eye Clinic have committed to the trialing of Room Mate, which is an electronic wall mounted device, which offers blind and visually impaired individuals bespoke audio descriptions in an accessible toilet.
- Following completion of the action plan at the RGH, the work will be replicated at Nevill Hall Hospital and Ysbyty Ystrad Fawr (YYF).

Audiology

A project has commenced and is in the early stages of planning with Audiology to improve the service for our deaf patients and those with hearing loss, which will include:

- Introducing the ability for patients to contact the service with the use of sign language.
- To work more in partnership with the Wales Council for the Deaf.
- To set up a hard of hearing participation group which will share feedback and allow for collaborative working across the sectors, with a focus on patient involvement.

GUH Emergency Department (ED)

Following a number of concerns raised by the British Deaf Association on behalf of patients who have visited our ED department at the Grange, the team are working with the clinical leads to improve the experience for individuals with accessibility needs.

Currently there are iPads available via switchboard with signlive available on them, which are booked out for use in ED and all interpreters are booked via switchboard. We cannot accurately state how many patients arrive at our front door services with accessibility needs as this is not always recorded at source on our electronic patient records. But we do know the demographic data for the Gwent region for individuals with sensory loss who may come into contact with our services.

The demographic data is outlined as follows:

Sight Loss - Locality Overview (2022)

Locality	Mild Sight Loss	Moderate Sight Loss	Severe Sight Loss	Total Sight Loss	% of Population with Sight Loss
Blaenau Gwent	1,490	520	310	2,320	3.30%
Caerphilly	3,810	1,340	790	5,940	3.30%
Monmouthshire	2,680	930	570	4,180	4.40%
Newport	3,040	1,060	620	4,720	3.00%
Torfaen	2,130	740	450	3,320	3.50%
Wales Total	72,000	25,100	15,100	112,000	3.50%

Projected Regional Sight Loss (2032)

Locality	Mild Sight Loss	Moderate Sight Loss	Severe Sight Loss	Total Sight Loss	% of Population with Sight Loss	% Change (2022–32)
Blaenau Gwent	1,680	590	350	2,610	3.80%	13%
Caerphilly	4,480	1,550	950	6,980	3.80%	18%
Monmouthshire	3,290	1,120	720	5,130	5.20%	23%
Newport	3,520	1,230	730	5,480	3.30%	16%
Torfaen	2,490	860	530	3,880	4.00%	17%
Wales Total	85,600	29,500	18,200	133,000	4.00%	19%

Hearing loss/ deafness

Locality	Moderate /Severe hearing loss	Profound hearing loss	Dual Sensory Loss	Total
Blaenau Gwent	6830	585	370	7785
Caerphilly	17530	1490	960	19980
Monmouthshire	11040	990	660	12690
Newport	14060	1165	720	15945
Torfaen	9360	825	520	10705
Wales	660000	20530	21400	701930

Health Board Wide Visual Awareness Training

These sessions continue to run on a monthly basis and to date, 9 sessions have been delivered and 67 members of staff trained.

Several departments have requested dedicated training sessions for their teams, which include antenatal at YYF, Endoscopy at RGB and D3 West. All of which are in the process of being arranged.

Gwent Police have recently expressed an interest in the training, and 3 colleagues from Gwent Police are attending the training session in February 2025 with a view to us developing a bespoke package for them.

Advisory Groups

A new Accessible Information Advisory Group has now been set up and the first meeting was held in December 2024. This will oversee the priorities outlined in the All-Wales Accessible Information Action Plan. As part of this work, consideration is being given to the development of a Gwent wide stakeholder group to work in partnership to deliver against the All-Wales plan.

A new Disability Advisory Group is currently in the process of being set up with the Terms of Reference currently being agreed. This group will oversee the priorities outlined in the upcoming All-Wales Disability Action Plan.

Health and Well-Being Passport for Staff

A new Health and Well-Being Passport has been developed in collaboration between Equality, Diversity and Inclusion, Occupational Health and Trade Unions, and is currently being piloted.

The purpose of the passport is to help and support individuals working in the Health Board who have concerns managing their health and wellbeing or carer responsibilities whilst in the workplace. The passport offers a structured framework for employees and managers to hold positive conversations around reasonable support that can be put into place.

A feedback form is being developed for employees and managers to complete to support the further role out of the passport.

HEIW have also expressed an interest in the project with a view to adopt the concept.

Armed Forces Covenant

The new Armed Forces Covenant Lead commenced in post at the end of November 2024 on a fixed term contract for 12 months. The priorities for the 12-month period include:

Priority	Status
Review and enhance the Health Board's Programme of work against the Armed Forces Covenant and The Defense Employer Recognition Scheme Gold Award.	Commenced
To revitalise the Armed Forces Staff Network.	Commenced
Develop a Gwent partnership group to support Armed Forces personnel and Veterans in Gwent.	Commenced

Meet with regional armed forces units and dedicated charities to work more collaboratively.	Commenced
Review and improve the data quality for Armed Forces / Veterans in the Health Board.	Commenced
To further support Reservists who are employed by the Health Board to progress and gain further experience from their Armed Forces commitment.	Commenced
Carry out a training needs analysis for the Health Board and develop appropriate training resources.	Pending start
To develop an Armed Forces / Veterans clinical pathway.	Pending start
Enhance our recruitment offer to individuals leaving military service via "Steph Into Health".	Pending start
Consider the role of Champions across the Health Board.	Pending start

In addition to the above, the Health Board is also working collaboratively with Cardiff and Vale, whose Armed Forces Lead post will work with us to lead on regional strategic priorities to further enhance the Programme of work.

Argymhelliad / Recommendation

The People and Culture Committee is asked to note the latest EDI activities and progress.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Board's assurance framework.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	4. Dignified Care 3. Effective Care 6. Individual care 7. Staff and Resources
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Adults in Gwent live healthily and age well Getting it right first time for children and young people.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Partnership First
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve patient experience by ensuring services are sensitive to the needs of all and priorities areas where evidence shows take up of services is lower or outcomes are worse. Work in partnership with carers to continue awareness raising, provide information and improve practical support for carers .

	<p>Gender pay - Develop a fuller understanding of the reasons for any differences in pay and take the necessary action to address this.</p> <p>Improve the wellbeing and engagement of our staff</p>
--	--

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	EDI – Equality, Diversity and Inclusion RGH – Royal Gwent Hospital YYF - Ysbyty Ystrad Fawr
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Yes, outlined within the paper
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Involvement - The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves. Prevention - How acting to prevent problems occurring or getting worse may help public bodies meet their objectives

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Workforce Performance Dashboard – December 2024 with focus on Sickness Absence
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Executive Director of Workforce and Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Julie Chappelle, Assistant Director of Workforce and OD; Kate Davies, Workforce Performance Manager; Ruth Madine, Deputy Head of HR

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

To provide the December 2024 Workforce Performance Dashboard, **Appendix 1**, incorporating key performance indicators for information and assurance. In the report there is a focus on absence and the actions the Health Board are taking to reduce absence and improve staff health and wellbeing.

The People and Culture Committee is asked to note the content of the Workforce Performance Dashboard and information contained within this paper and provide any additional comments.

Cefndir / Background

The Workforce Performance Dashboard is produced monthly and provides the latest data on workforce sustainability and training, workforce supply and variable pay.

Asesiad / Assessment

The Workforce Performance Dashboard is shared widely across the Health Board and the information is updated to be responsive to the workforce priorities. The data is used to inform the workforce and organisational development support we provide and inform immediate and long-term workforce plans.

The key highlights from the December 2024 Workforce Performance Dashboard, Appendix 1, include:

- The 12-month total % for turnover was 9.01% compared to 9.22% at the same time last year, a decrease of 0.21%. Nursing and Midwifery have the lowest turnover rate of 6.21%.
- PADR remained below the target of 85%, with compliance for December 2024 at 74.56%, an increase of 0.02% from last month (74.54%). PADR compliance has improved by 0.93% when compared to 73.63% in December 2023.
- Statutory and Mandatory training decreased from 81.94% in November 2024 to 81.60% in December 2024. Statutory and Mandatory training compliance has seen an increase by 1.56% compared to 80.04% in December 2023.
- Staff in post in December 2024 was 13,223wte (16,856 people) compared to 13,048wte (16,619, people) in December 2023. The top staff group increases in December 2024 were in Estates & Ancillary by 20.81wte, Healthcare Scientists by 3.00wte and Additional Professional Scientific & Technical by 2.95wte.
- Administration and Clerical staff in post decreased from 2,702.83wte in November 2024 to 2,701.56wte in December 2024, a decrease of 1.27wte.
- Variable pay bank and agency usage decreased in December 2024 to 856.87wte in comparison to 1,130wte in November 2024, a decrease of 273.13wte.
- Work to reduce bank and agency usage continues with the main reasons for Registered Nurse and Health Care Support Workers usage to cover vacancies, sickness and enhanced care.
- Medical bank and agency usage in December 2024 was 142.94wte, an increase of 38.4wte compared to 104.54wte in November 2024. The current usage split is 45% Locum and 55% agency.
- Since the e-Locum bank implementation on 01 December 2023 the usage has remained consistent, on average 50-60wte per month, 48% of locum usage is within resident grades.
- The new Medical Agency Management System was implemented on 01 May 2024. Agency usage remains fairly static, however, in December 2024 usage was 38.15wte, a decrease of 7.54wte when compared to November 2024.
- The Workforce & OD Team are continuing to work with Divisions to input their job plans onto the new Job Planning E-System. Currently, overall job planning compliance is 32%, Consultants is at 33%, an increase of 6% from 27% in November and SAS Doctors 29% an increase of 4% from 25% in November 2024.
- 216 job plans have been completed in the new system. However, there are 373 job plans that are work in progress and 56 job plans awaiting signatures.
- Reducing time to hire – the time to hire was below the target of 71 days at 68.3 days.
- Medical Recruitment February 2025 Changeover – we are 84% filled with Health Board and Single Lead Employer (SLE) doctors covering any gaps. Currently we have 7 vacancies out live, 5 posts in shortlisting and 4 in interview to cover any gaps.
- The HR team are working closely with NWSSP-SLE and Medical Education to improve processes and recording of sickness for resident doctors. Reports will be provided monthly from SLE for validation by the Health Board through

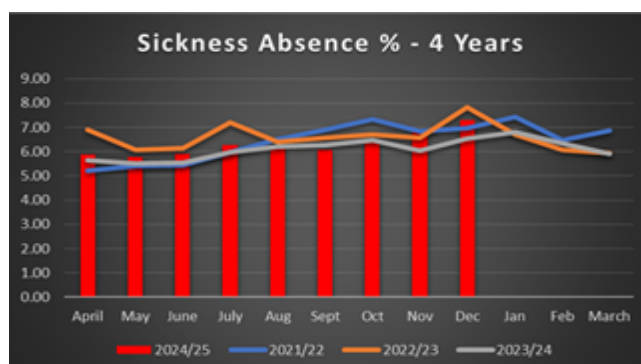
divisional and medical staffing teams, which will enable us to provide better clarity on resident doctor absence and ensure appropriate management with policy.

Occupational Health Update

- The performance against the KPI target of 80% for the first offered appointment date to be within 29 calendar days of the date the referral was received has decreased from 39% in October 2024 to 18.2% in November 2024. The reason for this decrease was attributed to a number of senior clinical vacancies and senior clinician sickness. Recent appointment has been made to one vacancy and the other is in the process of being appointed to.
- The performance against the KPI target of 80% where consent is agreed during consultation for the report to be sent to the manager on the same day of the appointment was 99.4% in October 2024 but decreased slightly to 98.8% in November 2024. Completion of pre-placement health assessment within 7 calendar days has increased from 85.3% in October 2024 to 86.1% in November 2024 against an 80% target, this improvement relates to stabilisation of Band 5 registered nursing workforce.
- Waiting times for Occupational Health as of the end of w/c 20th January 2025 were OH Physicians 5 weeks, a reduction of 4 weeks since September 2024; Occupational Health Nurses practitioners 6 weeks, an increase of 2 weeks since September 2024; Occupational Therapist 6 weeks, a decrease of 1 week since September 2024 and Pre-placement Health clearances 4 days, a decrease of 3 day since September 2024.
- To address a reduction in waiting times, we have purchased an additional 3 days physician cover and an additional 2 days Nurse Advisor weekly between January and March 2025. We are extending this until May 2025 to ensure stabilisation of the service whilst analysis of capacity and demand is in progress to ascertain cover aligned to vacancies.

Sickness Absence

- In December 2024, sickness absence increased to 7.30% a 0.50% increase compared to November 2024 (6.80%). This equates to 965 WTE staff absent compared to 852 WTE staff absent in December 2023. Whilst there has been an increase this year (both in terms of total number of staff and percentage of the workforce), it is with noting that the overall number of staff in post has increased from 13,029 in December 2023 to 13,223 in December 2024. The sickness absence trend is demonstrated below:

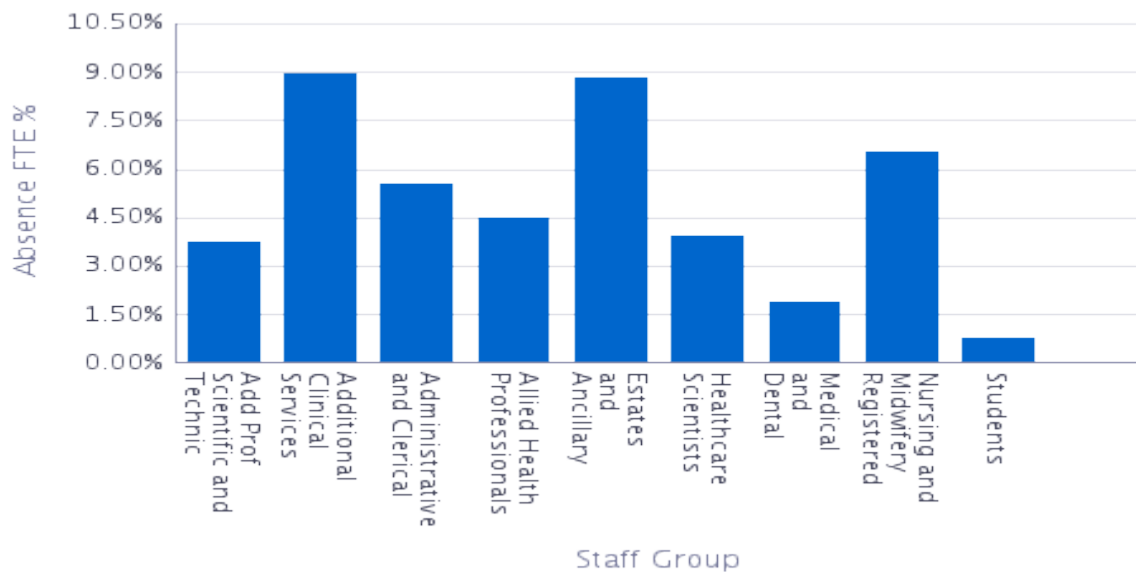


- The 12-month cumulative sickness absence was 6.40%, which is similar to previous years. The three highest sickness groups were, Additional Clinical Services (HCSW) 11.02%, Estates and Facilities 10.98% and Nursing and Midwifery 7.53%.
- The 3 top 5 reasons for absence were

Absence Reason	Headcount	Abs Occurrences	Abs Days	%
S10 Anxiety/stress/depression/other psychiatric illnesses	2286	2,796	123,224	33.5
S12 Other musculoskeletal problems	829	945	33,067	9.0
S13 Cold, Cough, Flu - Influenza	4316	5,189	27,918	7.6
S25 Gastrointestinal problems	3739	4,674	27,140	7.4
S98 Other known causes - not elsewhere classified	1091	1,224	26,715	7.3
S28 Injury, fracture	657	704	22,718	6.2

- In December 2024, there were an additional 200 episodes of cold, cough, flu compared to the previous month, which is consistent with previous trends for the winter months.
- 'Other known causes' accounts for 7.3% and we are taking steps to address this as part of the Sickness Action Plan for 2025.
- Short term sickness saw a marginal reduction in December 2024 to 2.56% compared to November 2024 (2.57%), although long term sickness increased to 4.74% (compared to 4.23% in November 2024) attributed mainly to Stress, Anxiety and Depression.

Absence by Staff Group



Additional Clinical Services (e.g. HCSW's), Estates and Facilities and Nursing and Midwifery have the highest levels of sickness absence. Promotion of temporary adjustments and short-term temporary deployments are being considered as a supportive measure to ensure that opportunities to support a return to work are being fully explored.

Sickness deep dives are being completed in the departments with the highest levels of sickness absence with a view to understanding the reasons for absence, considering how well the managing attendance at work policy is being utilised, and to promote early interventions such as Vivup, Employee Well Being, and stress risk assessments. We are also triangulating data with local retention data and plans to improve the retention of specific staff groups (e.g. HCSW's) and reduce absence, recognising that engagement and positive experience in work, is likely to result in increased attendance and performance.

Stress, Anxiety, Depression

A deep dive into Stress, Anxiety and Depression (SAD) was completed in November 2024 via the Sickness Absence Focus Group. SAD absences were found to be related to bereavement, relationship breakdowns, employee relations processes, and work-related stress.

There was an interesting correlation between age profile and SAD absences potentially linked to menopause (age bracket 41-55) and for staff who were supporting caring commitments (parents and children). Both these scenarios resulted in staff reporting as sick with the reason of SAD. The actions being taken to improve and support staff facing these challenges are:

- Improving signposting to support services and appropriate policies from day one of absence (e.g. carers/menopause policy) to consider alternatives to sickness absence.
- Targeted improved compliance and promotion of stress risk assessments.
- Ensure initial meetings take place within seven days when stress related absence is reported.
- Ensure managers are exploring options to return to work in an alternative area or role.
- Bespoke sickness training to include guidance on the above scenarios.

Employee Wellbeing Service

In 2024, the Employee Well-being Service received a total of 550 self-referrals, although lower than 2023 (623), however the service has seen a significant increase in complexity, acuity and risk as measured by CORE 10. 70% have been given support face to face, 19% online and 11% via the phone. 2024 has seen an increase in demand for face-to-face support. Of this group, 59 people received trauma focused therapy within the psychological trauma pathway), and 30 were supported via the psychology pathway, the remaining were allocated to the general pathway (Counselling). 148 people were supported by the Employee Assistance Programme Vivup. In addition there were a total of 26 individual Team referrals, 12 post incident psychological debrief sessions and over 40 consultations with managers and team/ward leads.

Wellbeing Empowerment Passport

A wellbeing empowerment passport has been developed to support employees to share information about their health and wellbeing, with a view to approaching a

conversation regarding reasonable adjustments, role modifications and ultimately supporting them to remain in work. This is currently being piloted. Early indications suggest that this has been a positive tool to assist employees to remain in the workplace and may also be used as a 'passport' when moving into new roles (or with new managers).

Sickness Absence Monitoring

The Sickness Absence Focus Group meet monthly with representatives from divisional teams, HR and trade unions. The purpose of the group is to monitor sickness absence levels, with oversight and management of sickness deep dives and local sickness absence action plans, including promoting support available to staff and managers to improve attendance at work.

There were 18 hotspot areas identified between January - December 2024 and sickness absence 'deep dives' were conducted to understand the specific issues and challenges facing the department.

A localised action plan to address the relevant findings was developed and shared with local management for implementation. For example, this included improving compliance with the Managing Attendance at Work Policy, understanding primary and contributory reasons for absence, promoting a culture of attendance and improving managers knowledge and skills in relation to employee health, wellbeing, attendance and support services. Regular 'check-ins' have been conducted with hot spot areas and follow-up 'deep dives' will take place throughout 2025 to conduct a 12-month evaluation of the action plan, recognising annual trends of sickness absence.

The sickness absence focus group continue to meet on a monthly basis and will be focusing on improved recording, promotion of bespoke support and information (e.g. physiotherapy/MSK/mental health), expanding the roll-out of the Wellbeing and Empowerment Passport following the pilot and sharing best practice across the Health Board.

Sickness Absence Activity

During October to December 2024, the HR team supported 64 formal sickness meetings. There have been no dismissals related to health. There has been one mutual ill health termination, and two staff have been redeployed to alternative roles to support their attendance.

The Health Board has recently introduced a Health and Wellbeing passport which has been developed in partnership with Trade Union colleagues. The passport empowers employees to hold constructive conversations with management regarding their personal requirements and identify any suitable adjustments that will support their attendance at work and maximise their contribution to the workplace.

Temporary Injury Allowance and Sick Pay Extension

Six temporary injury allowance applications were considered between October - December 2024. A third of the applications were supported.

Argymhelliad / Recommendation

The People and Culture Committee is asked to note the content of the Workforce Performance Dashboard and information contained within this paper and provide any additional comments.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	All Workforce and OD risks are updated through the Health Board's risk register.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7. Staff and Resources 7.1 Workforce Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Providing an appropriate governance to support a workforce to deliver safe, quality care.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Workforce and Culture
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the wellbeing and engagement of our staff

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	Not Applicable
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)

Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Not Applicable

<ul style="list-style-type: none"> • Financial 	Not Applicable
<p>Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed</p>	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
<p>Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working</p> <p>https://futuregenerations.wales/about-us/future-generations-act/</p>	<p>Long Term - The importance of balancing short-term needs with the needs to safeguard the ability to also meet long-term needs</p> <p>Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies</p>



GIG
CYMRU
NHS
WALES

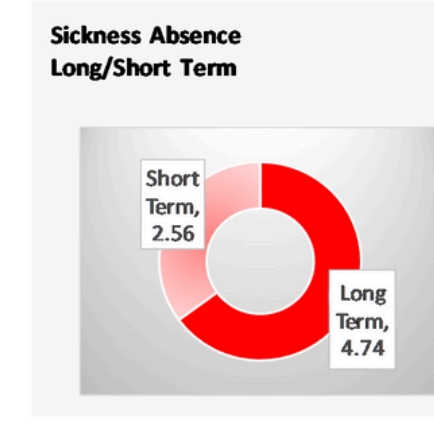
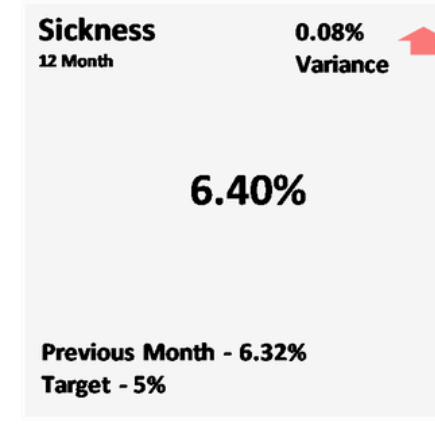
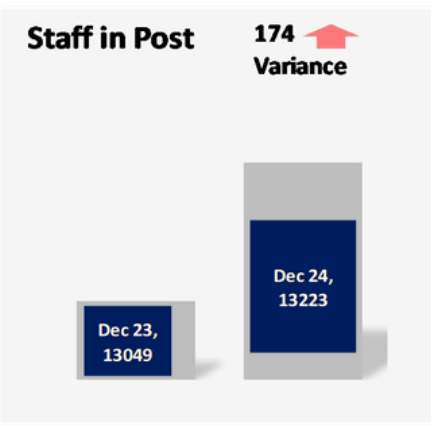
Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

ABUHB Workforce Performance December 2024

Top 3 reasons for absence by FTE days lost

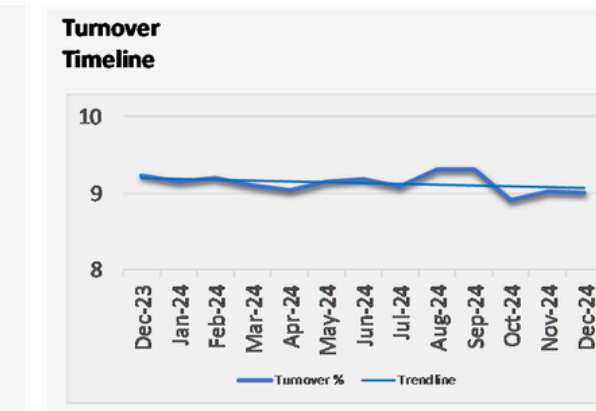
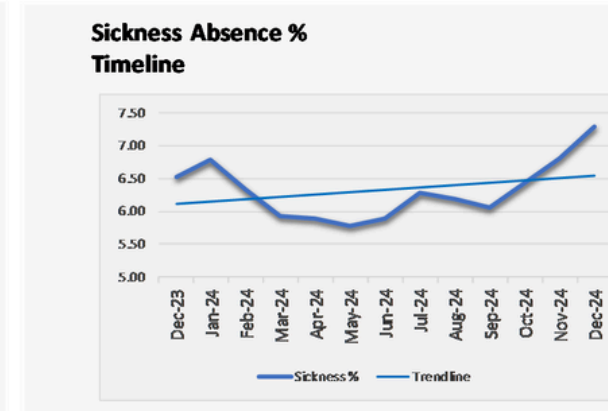
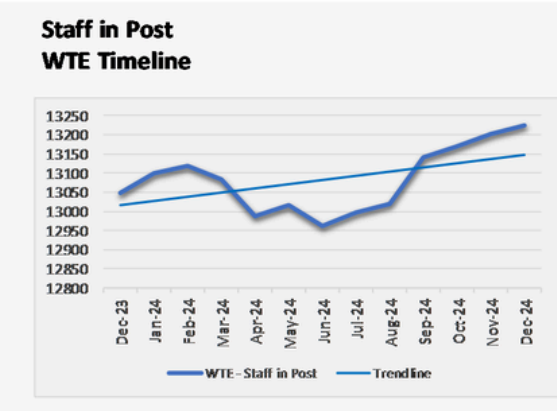
- 1. Anxiety/Stress/Depression/Other Psychiatric illness - 33.4%**
- 2. Cold, Cough, Flu - Influenza - 11.4%**
- 3. Other musculoskeletal problems - 8.5%**

Staff in Post has increased from 13203wte in Nov 24 to 13223 wte in Dec 24. The main increase is within Estates & Ancillary 20.81wte (2.01%)

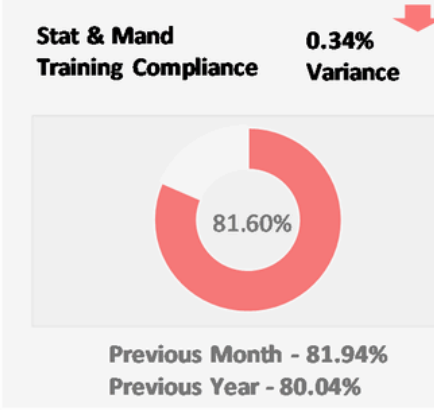
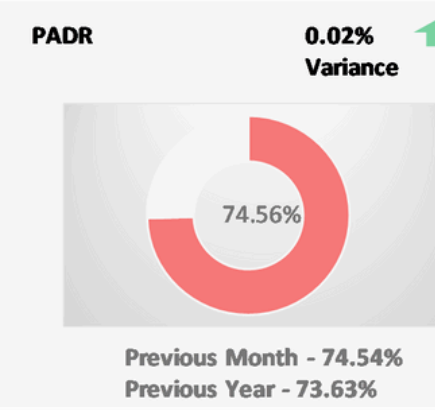


Top 3 highest sickness by staff group

- 1. Estates & Ancillary- 10.98%**
- 2. Additional Clinical Services- 11.02%**
- 3. Nursing & Midwifery - 7.53%**



Turnover rate is 9.01% a decrease of 0.21% compared to last year rate of 9.22%. Nursing and Midwifery have the lowest turnover rate of 6.21% whilst Admin & Clerical have the highest 12.38%. The Stability Rate is 89.33%, the health board has retained 13479 staff.

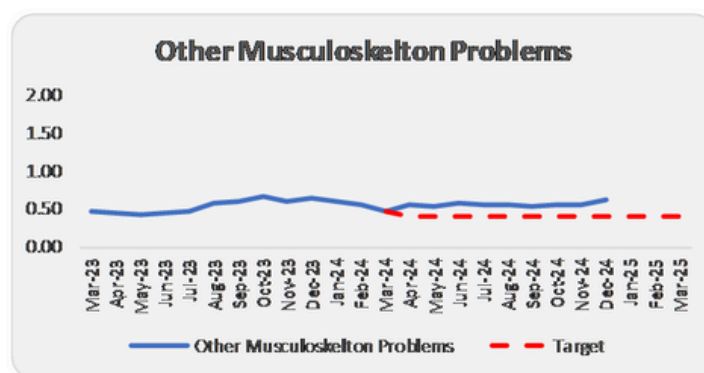
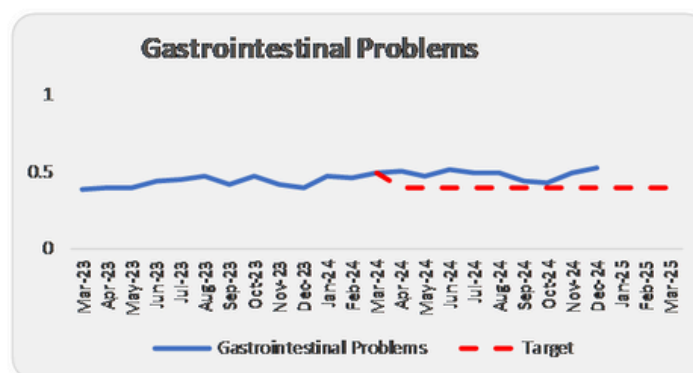
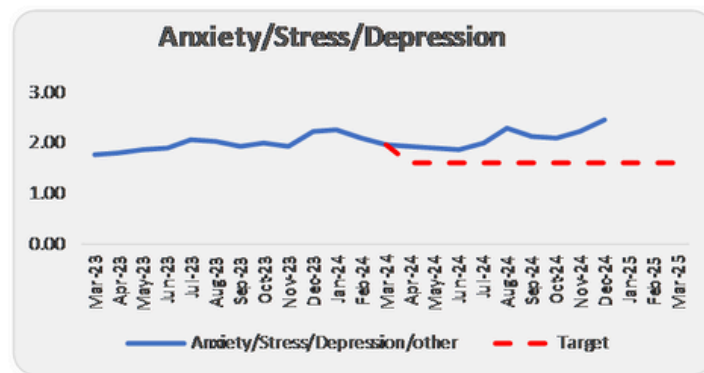
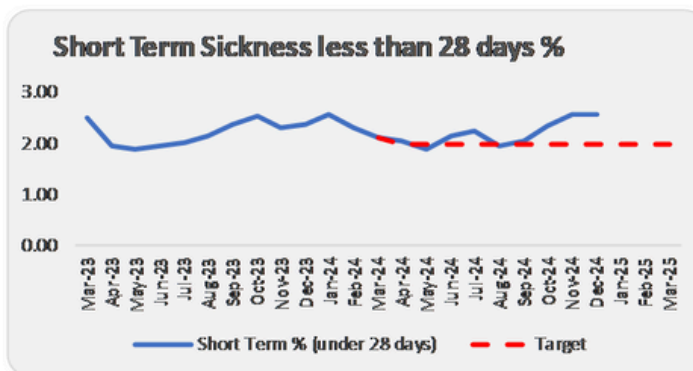
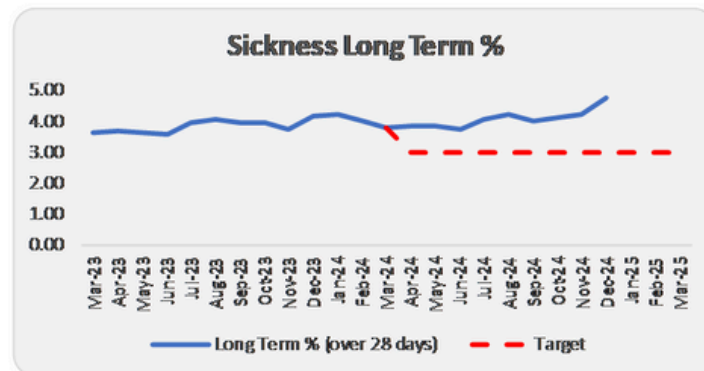
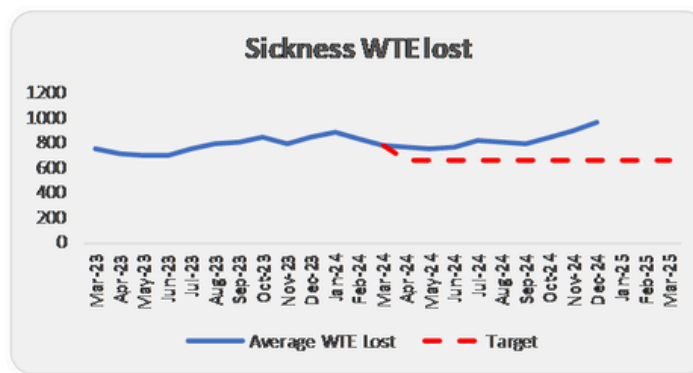
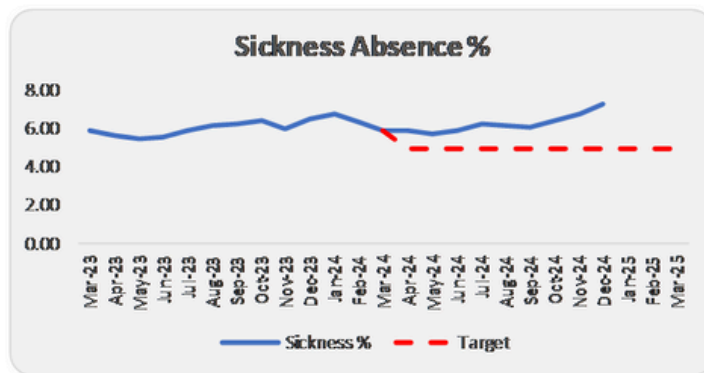


Data Source: ESR/Health Roster/Bank Staff. The targets set within this report are derived from various sources: IMTP Process/Statutory Targets/ Assessment of trends

Sickness Absence in Dec 24 is 7.30% (965wte lost) which has increased by 0.50% (67wte) compared to Nov 24.

65% of sickness is long term which has increased from 4.23% to 4.74% in Dec 24. Short Term sickness has decreased from 2.57% to 2.56% in Dec 24.

Sickness Absence	Current Value	Deviation from Target	Monthly Change	Target - March 25
Sickness %	7.30	2.30	0.50	5.00
Average WTE Lost	965.29	311.29	67.46	654.00
Long Term % (over 28 days)	4.74	1.74	0.51	3.00
Short Term % (under 28 days)	2.56	0.56	-0.01	2.00
Anxiety/Stress/Depression/other	2.45	0.85	0.22	1.60
Other Musculoskelton Problems	0.62	0.22	0.05	0.40
Gastrointestinal Problems	0.53	0.13	0.04	0.40



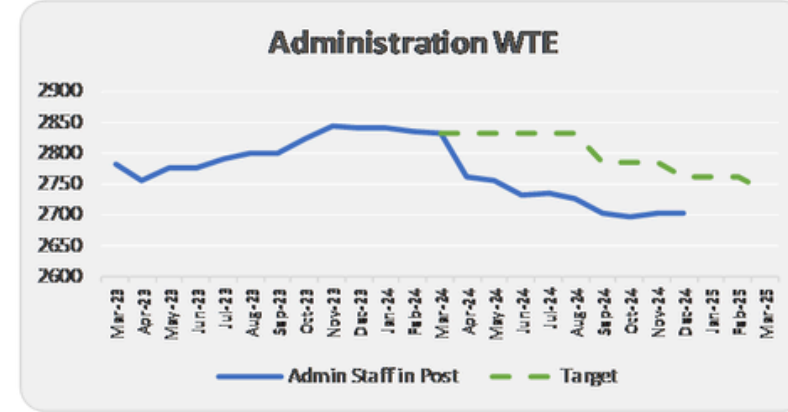
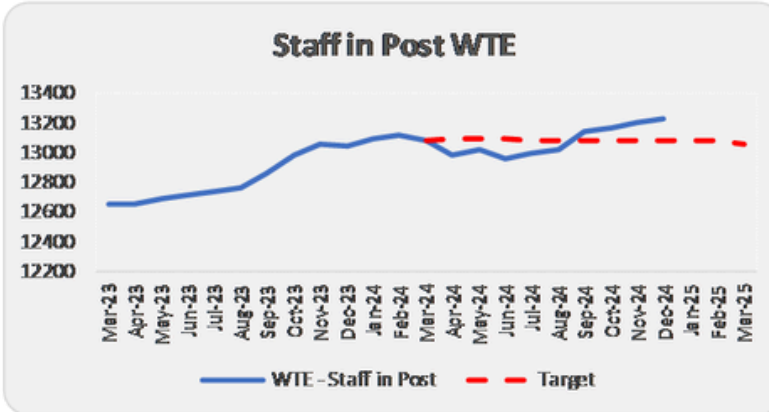
In month sickness absence percentage by division

Division	Nov-24	Dec-24	Change
040 CLINICAL SUPPORT SERVICES	6.41	6.54	0.13
040 CONTINUING HEALTH & FUNDED NURSING CARE	11.16	12.63	1.47
040 CORPORATE SERVICES	4.52	4.24	-0.28
040 ESTATES AND FACILITIES DIVISION	9.18	10.85	1.67
040 FAMILY & THERAPIES DIVISION	6.53	6.32	-0.21
040 MEDICINE	7.00	7.28	0.28
040 MENTAL HEALTH & LEARNING DISABILITIES DIVISION	8.21	8.72	0.51
040 PRIMARY CARE & COMMUNITY SERVICES	7.34	8.14	0.80
040 SURGERY	5.14	6.07	0.93
040 URGENT CARE	5.59	7.69	2.10
Total	6.80	7.30	0.50

2 Divisions/Corporate Services reduced sickness in Dec 24.

Staff in Post	Current Value	Deviation from Target	Monthly Change	Target - March 25
WTE - Staff in Post	13223.20	169.20	19.77	13054.00
Admin Staff in Post	2701.56	-35.44	-1.27	2737.00
Turnover %	9.01	-0.19	-0.01	9.20
Flexi Working Requests Approved %	54.54	-24.00	-7.36	100.00

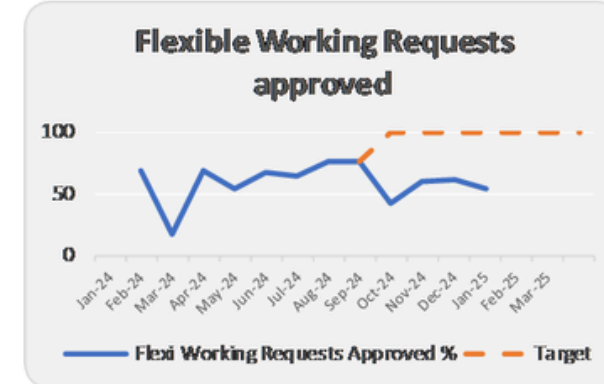
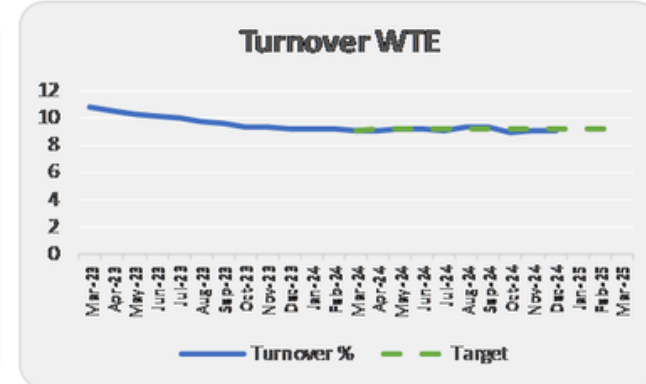
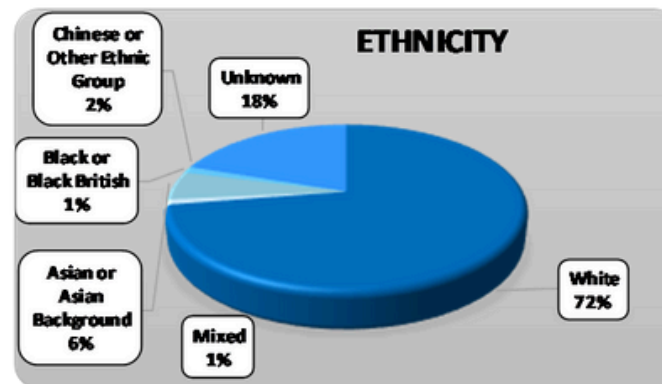
Staff in post has increased by 19.77wte. Estates & Ancillary has increased by 20.81wte and Healthcare Scientists has increased by 3.00wte and Add Prof Scientific & Technic by 2.95wte.



Staff Group	Nov-24	Dec-24	Change
Add Prof Scientific and Technic	432.89	435.84	2.95
Additional Clinical Services	852.76	853.52	0.76
Healthcare Support Workers	2031.24	2025.28	-5.96
Administrative and Clerical	2702.83	2701.56	-1.27
Allied Health Professionals	972.57	971.76	-0.81
Estates and Ancillary	1030.56	1051.37	20.81
Healthcare Scientists	255.23	258.23	3.00
Medical and Dental	880.47	882.65	2.18
Nursing and Midwifery Registered	4038.38	4036.48	-1.90
Students	6.50	6.50	0.00
Total	13203.43	13223.19	19.76



Over the last five years to date staff in post has increased by 1502wte (12.81%) pre covid comparison. The main increases are within Admin & Clerical 393wte, Nursing & Midwifery Registered 540wte and Additional Clinical Services 255wte.



From Jan 24 to Dec 24 flexible working requests approved have decreased to 54.54% (NB the data is sourced from ESR - new process)

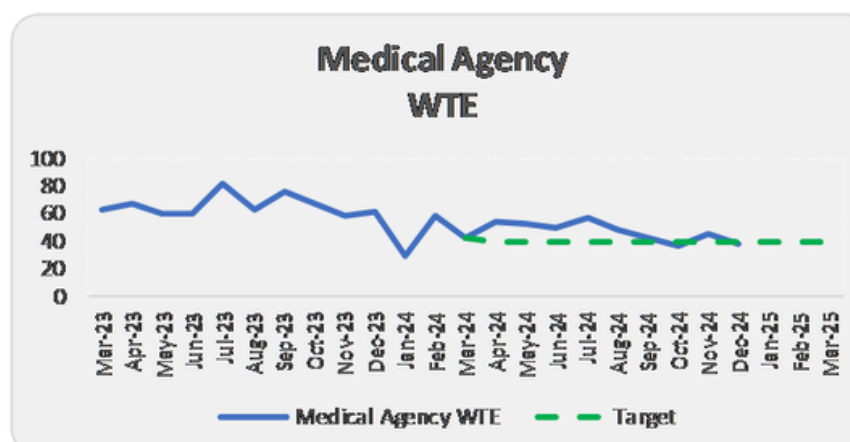
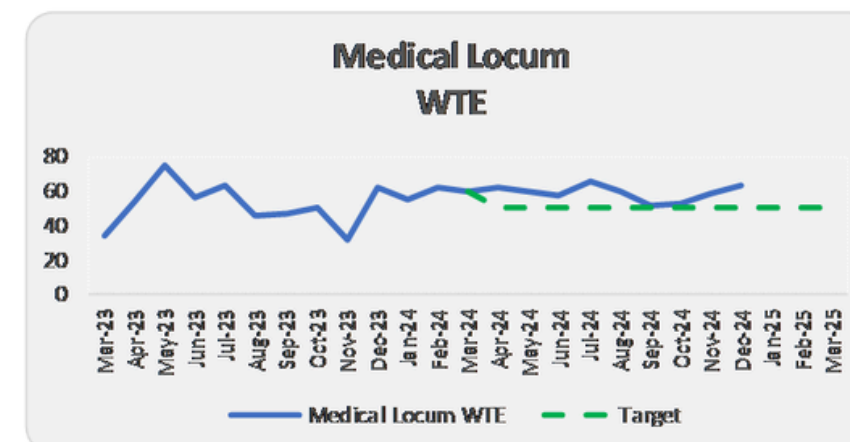
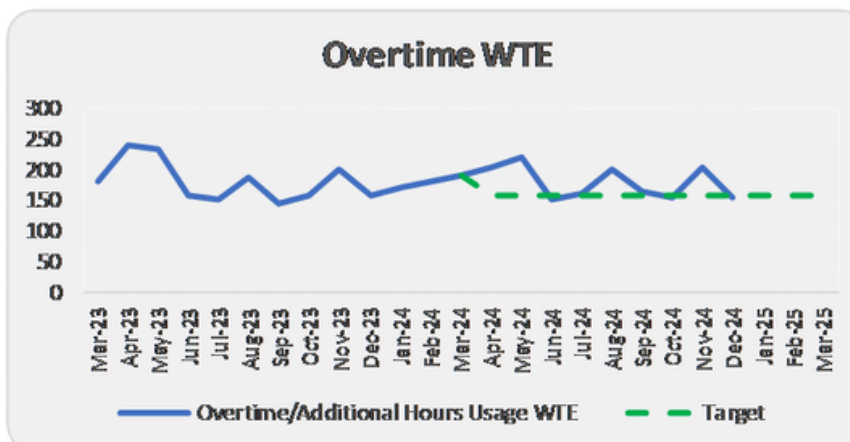
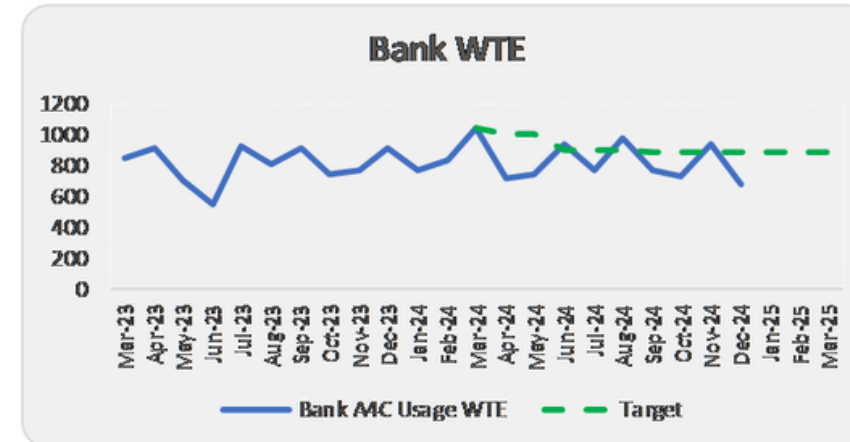
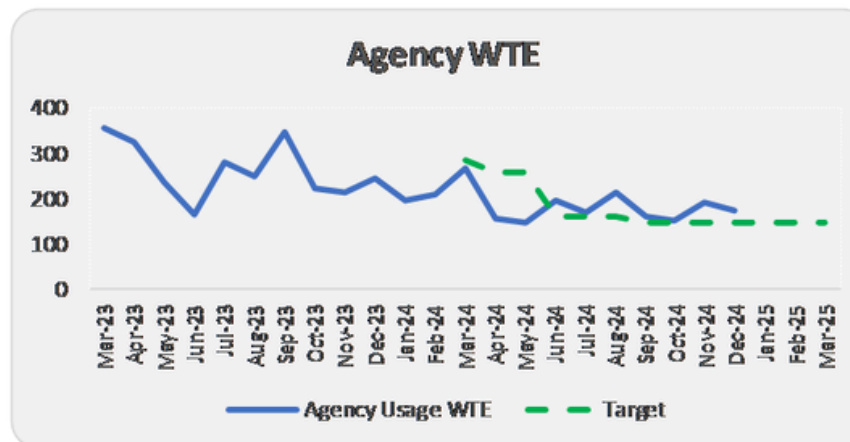
Variable Pay	Current Value	Deviation from Target	Monthly Change	Target - March 25
Bank A4C Usage WTE	679.86	-204.14	-256.00	884.00
Agency Usage WTE	177.01	27.01	-17.16	150.00
Overtime Usage WTE	157.09	-2.15	-46.86	159.24
Medical Locum WTE	63.77	13.77	4.92	50.00
Medical Agency WTE	38.15	-1.85	-7.54	40.00

Agency usage has decreased by 17.16wte and is currently 27.01wte higher than the year end target. In Dec 24 21.94wte was used for HCSW and 155.06wte for Nursing and Midwifery. The top three reasons for usage are vacancies 51.26wte (29%), Sickness 46.87wte (26%) and Enhanced Care 37.69wte (21%)

Overtime usage remains fairly static peaking in May 24 but has decreased to 157.09wte a decrease of 46.86wte in Dec 24

Medical Locum and Agency Usage Total has increased in Dec 24. Locum usage has increased by 4.92wte and Agency usage has decreased by 7.54wte. The highest reason for usage is Vacancies 37.21wte (36%).

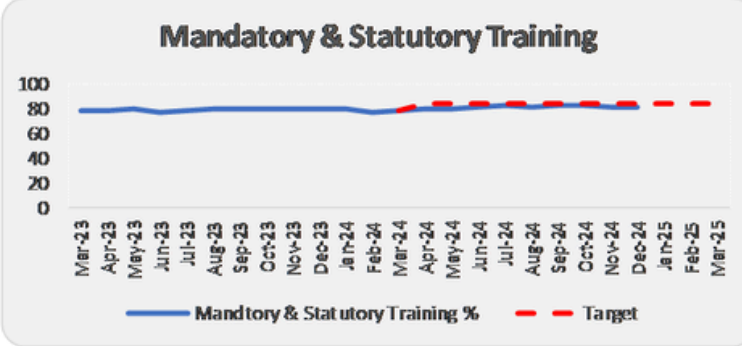
Bank usage has decreased by 256wte and is currently 204.14wte lower than the year end target. In Dec 24 the three highest users were HCSW 374wte (55%), Nursing & Midwifery 209.80wte (31%) and Facilities 69.41wte (10%). Highest reason for usage is Vacancies 234.22wte (34%)



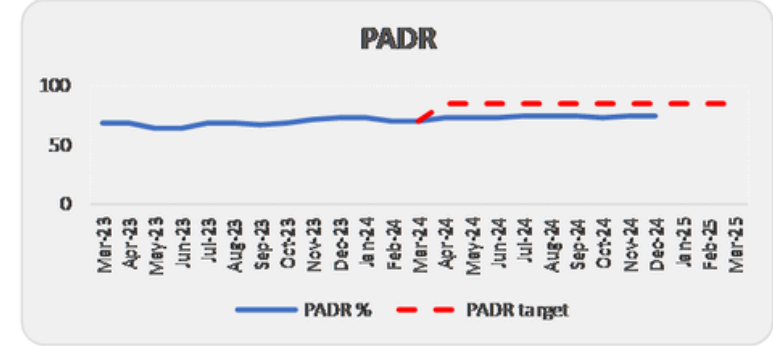
Mandatory & Statutory Data By Division/Corporate Services	Nov-24	Dec-24	Change
040 CHIEF EXECUTIVE/NON EXECUTIVE	46.86	48.39	1.53
040 CHIEF OPERATING OFFICER	71.99	74.25	2.26
040 CLINICAL SUPPORT SERVICES	82.02	81.98	-0.04
040 CONTINUING HEALTH & FUNDED NURSING CARE	54.18	84.08	29.90
040 DIGITAL, DATA & TECHNOLOGY	95.16	95.27	0.11
040 DIRECTOR OF CORPORATE GOVERNANCE	84.31	84.94	0.63
040 DIRECTOR OF PLANNING	69.65	70.35	0.70
040 DIRECTOR OF PUBLIC HEALTH	89.26	90.97	1.71
040 ESTATES AND FACILITIES DIVISION	68.20	66.86	-1.34
040 FAMILY & THERAPIES DIVISION	86.51	86.27	-0.24
040 FINANCE DIRECTOR	91.23	92.44	1.21
040 MEDICAL DIRECTOR	84.38	82.44	-1.94
040 MEDICINE	78.79	78.63	-0.16
040 MENTAL HEALTH & LEARNING DISABILITIES DIVISION	83.86	83.36	-0.50
040 NURSE DIRECTOR	82.58	83.21	0.63
040 PRIMARY CARE & COMMUNITY SERVICES	87.84	87.81	-0.03
040 SURGERY	76.02	75.80	-0.22
040 THERAPIES & HEALTH SCIENCES DIRECTOR	88.89	87.88	-1.01
040 URGENT CARE	80.35	78.63	-1.72
040 WORKFORCE & ORGANISATIONAL DEVELOPMENT	86.42	86.74	0.32
Total	81.94	81.60	-0.34

Vacancy creation to unconditional offer is 68.3 days which is 2.7 days lower than the target of 71 days. Conditional offer letter to completed PECS was 5.5 days higher than target but has reduced over the last 10 months.

Training	Current Value	Deviation from Target	Monthly Change	Target - March 25
Mandatory & Statutory Training %	81.60	-3.40	-0.34	85.00
PADR %	74.56	-10.44	0.02	85.00
Recruitment	Current Value	Deviation from Target	Monthly Change	Target - March 25
Vacancy creation to unconditional offer	68.30	-2.70	-7.60	71.00
Conditional offer letter to completed PECS	30.50	5.50	-5.20	25.00
Job Planning	Current Value	Deviation from Target	Monthly Change	Target - March 25
Job Planning - Consultants	33.00	-52.00	6.00	85.00
Job Planning - SAS	29.00	-56.00	4.00	85.00

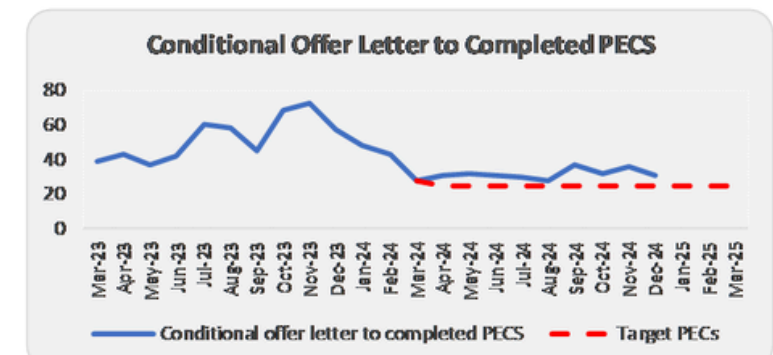
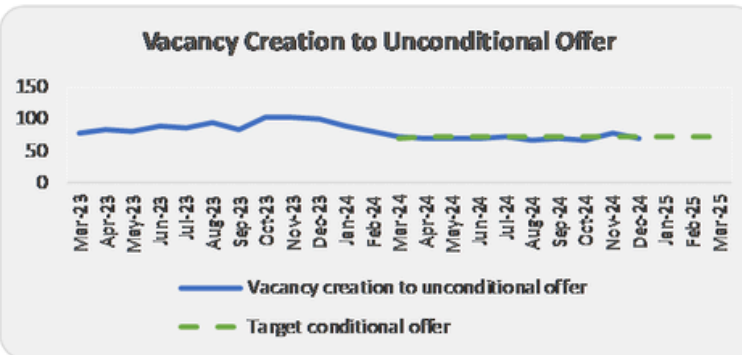


Mandatory & Statutory Training has decreased to 81.60% which is only 3.40% off the target. There are 7 Divisions/Corporate Services that have reached/higher than the target of 85%.

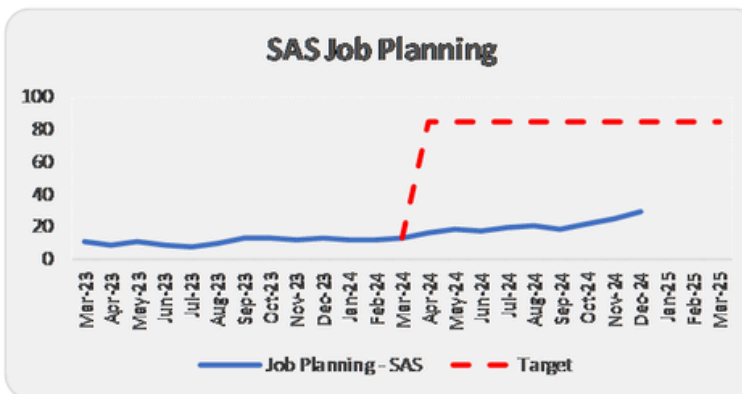


PADR has increased to 74.56% which is 10.44% lower than the target. 1 Division/Corporate Service have reached/higher than the target of 85%.

PADR Data By Division/Corporate Services	Nov-24	Dec-24	Change
040 CHIEF EXECUTIVE/NON EXECUTIVE	55.56	65.71	10.16
040 CHIEF OPERATING OFFICER	60.00	62.50	2.50
040 CLINICAL SUPPORT SERVICES	77.87	77.88	0.01
040 CONTINUING HEALTH & FUNDED NURSING CARE	82.13	83.39	1.26
040 DIGITAL, DATA & TECHNOLOGY	85.83	86.00	0.17
040 DIRECTOR OF CORPORATE GOVERNANCE	55.56	47.06	-8.50
040 DIRECTOR OF PLANNING	80.00	82.00	2.00
040 DIRECTOR OF PUBLIC HEALTH	73.21	73.21	0.00
040 ESTATES AND FACILITIES DIVISION	76.17	75.66	-0.51
040 FAMILY & THERAPIES DIVISION	75.18	75.76	0.58
040 FINANCE DIRECTOR	76.27	69.49	-6.78
040 MEDICAL DIRECTOR	72.04	69.15	-2.89
040 MEDICINE	79.36	79.27	-0.08
040 MENTAL HEALTH & LEARNING DISABILITIES DIVISION	67.23	68.59	1.37
040 NURSE DIRECTOR	61.33	57.62	-3.72
040 PRIMARY CARE & COMMUNITY SERVICES	74.33	74.14	-0.19
040 SURGERY	74.32	74.34	0.02
040 THERAPIES & HEALTH SCIENCES DIRECTOR	60.87	56.52	-4.35
040 URGENT CARE	52.41	53.40	0.99
040 WORKFORCE & ORGANISATIONAL DEVELOPMENT	68.52	59.88	-8.64
Total	74.54	74.56	0.02



Consultant Job Planning increased by 6% in Dec 24 however is off target by 57% and SAS Job Planning increased by 3.1% in Dec 24 and off target by 60%.



People & Culture Committee
11 February 2025

Violence & Aggression Against Staff Across ABUHB

Presented by:

Lidia Palmer - Violence Prevention & Reduction Lead



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Legislation

The Health and Safety at Work Act 1974

The Health and Safety Executive (HSE) defines work-related violence as: 'Any incident in which a person is abused, threatened or assaulted in circumstances relating to their work.' This includes incidents which are sexually or racially motivated and can involve verbal abuse or threats, including face to face, online and via telephone.

The Assaults on Emergency Workers (Offences) Act 2018

All ABUHB Employees are classified as 'Emergency Workers' under this Act

Anti-Violence Collaborative (AVC)

Supports partners to comply with the direction of the Welsh Health Circular

Obligatory Response to Violence (ORV)

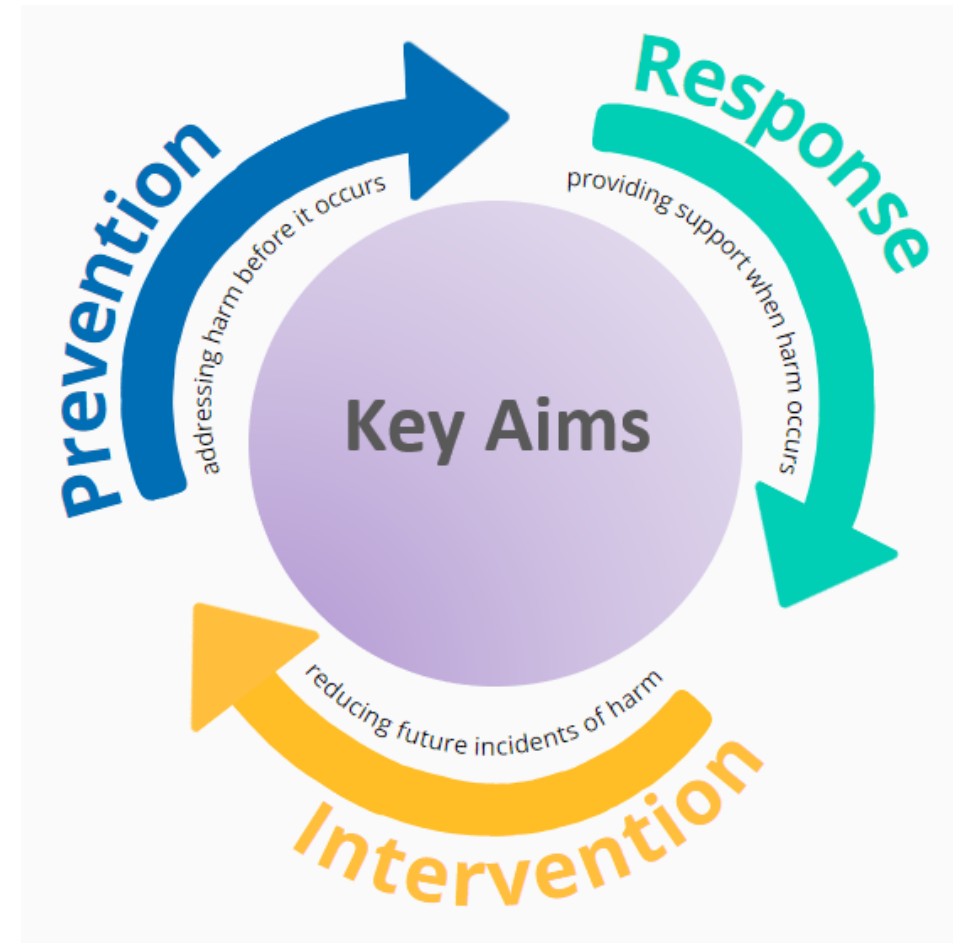
Aims to achieve effective and efficient communication across partners



ABUHB Policies Preventing and Responding to Violence

- Violence Prevention & Reduction Policy
- Handling Violence and Aggression (Internal Sanctions) Policy and Procedure
- Use of Restrictive Physical Intervention Policy
- Lone Working Policy

In the process of developing guidance documents for Complex Cases including vexatious complainants with the support of the AVC



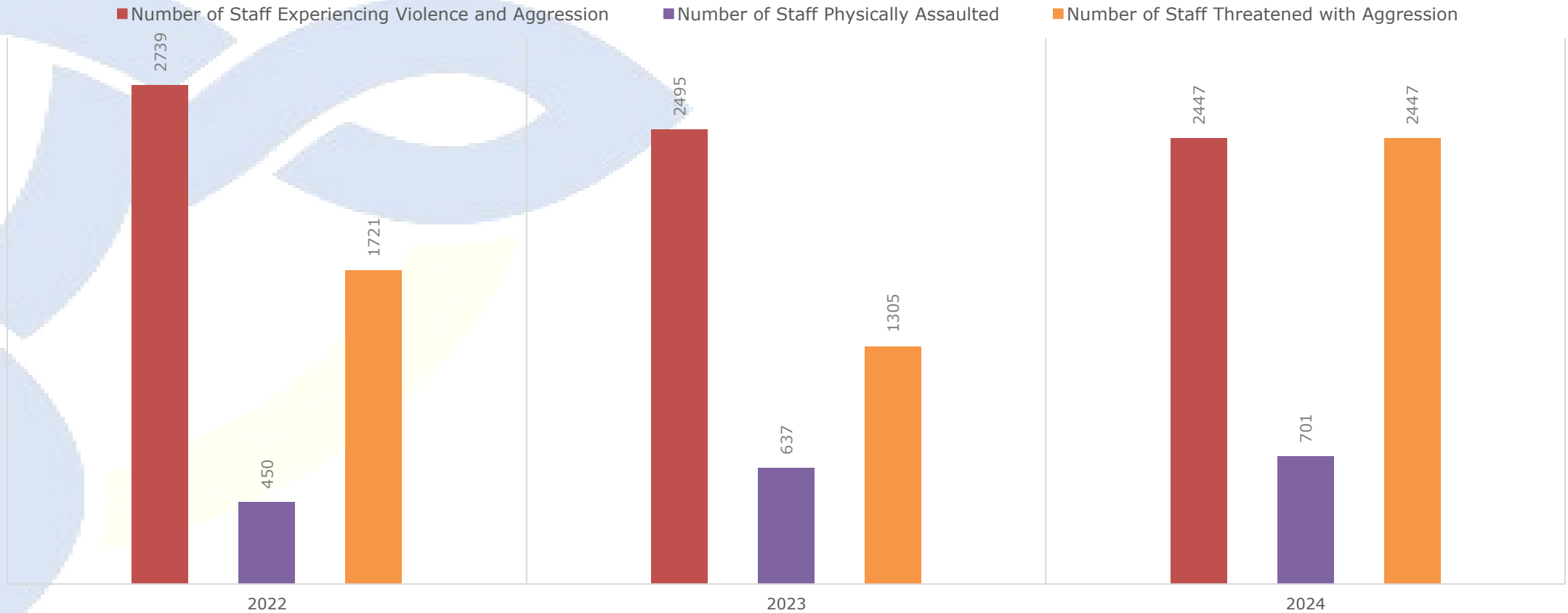
What are our objectives?

- Ensure we have appropriate resources to support management of violent incidents
- Ensure all incidents are reported on Datix and to the police where appropriate
- Provide immediate and ongoing support to staff
- Maintain transparent communication
- Provide training and education to all staff
- Complete timely and appropriate risk assessments
- Apply a multi-disciplinary approach including partnership working



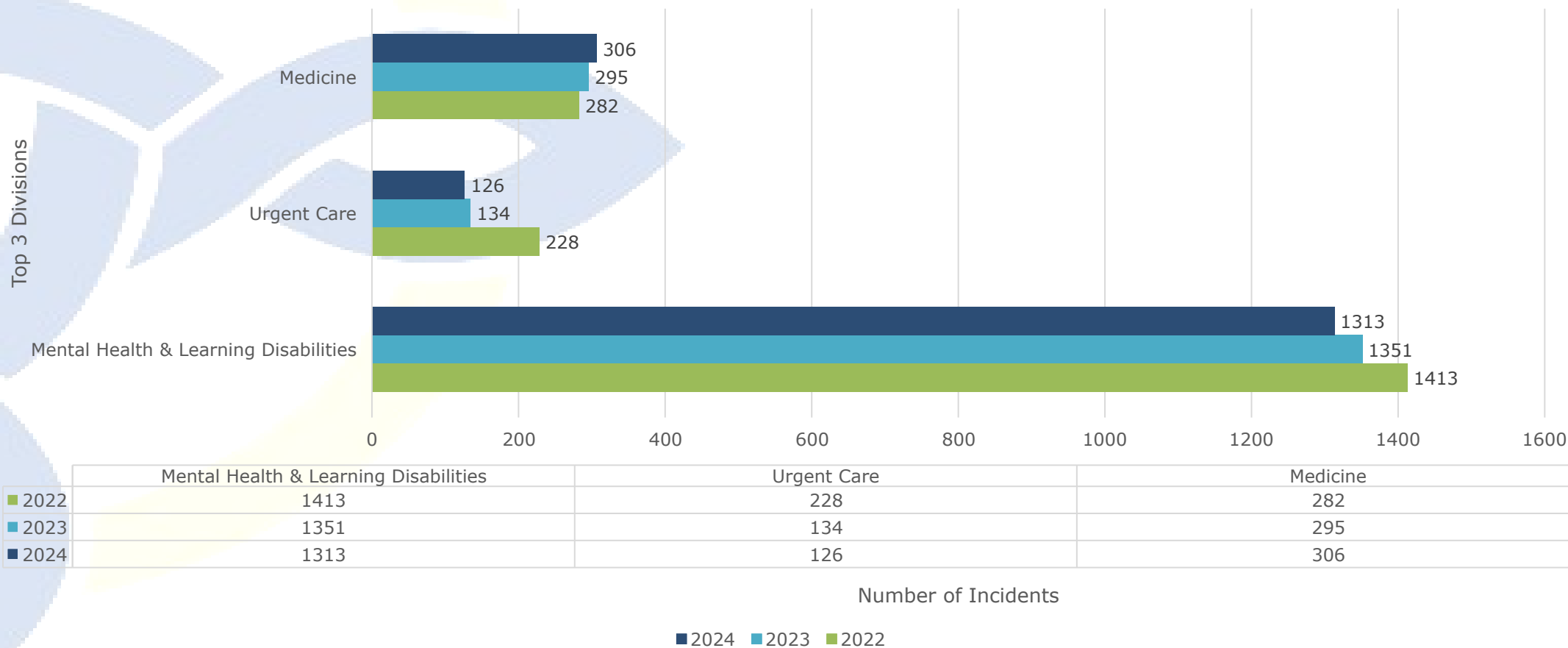
Quantitative Data

VIOLENCE & AGGRESSION AGAINST ABUHB STAFF 2022-2024



Quantitative Data

Number of V&A Reported Incidents against ABUHB Staff in Top 3 Divisions from 2022 to 2024



Mental Health & Learning Disabilities

2022

MH & LD contributed to 51% of all VA Incidents

2023

MH & LD contributed to 54% of all VA Incidents

2024

MH & LD contributed to 54% of all VA Incidents

Incidence Rates

2022
4 in 20
ABUHB Staff
Experienced V&A

2024
3 in 20
ABUHB Staff
Experienced V&A

*Incidence Rate of ABUHB Experiencing **Physical Assault** has Remained **1 in 20** since 2022*

The Violence Prevention & Reduction (VPR) Team

- Appointed in November 2024 – Violence Prevention & Reduction Lead
- Violence Prevention & Reduction Advisor (previously known as V&A Case Manager)
- Partnership working with local stakeholders including Local Authorities, Gwent Police and third sector charities.

The team attend meetings such as the RCRP, chair monthly incident meetings, 115 meetings, initiate and attend community trigger meetings.



GIG
CYMRU
NHS
WALES

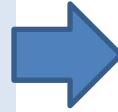
Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Case Study – Qualitative data

Patient against staff assault on PICU – Refusal to return to the ward from the garden



Kicked staff in shin, resulting in PMV holds, grabbed staff by hair – causing hair loss

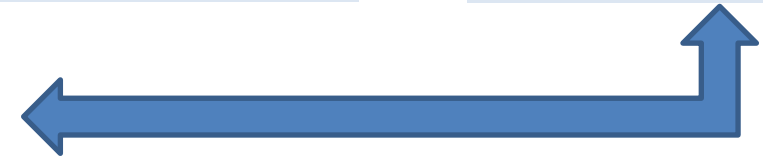


Operational managers – debriefed staff, completed Datix, reviewed care management



VPR Team reviewed Datix – contact made 3 days after incident

VPR TEAM ACTIONS COMPLETED



Police Work:

- Supported staff to report to police
- Prompted completion of Annex G form
- Liaised with MH Officer to update warning markers on police system to prevent barriers to investigation and prosecution

Victim Work:

- Offered connect Gwent support – victim services
- Staff felt listened to
- Reiterated zero tolerance to staff and patients

Operational support:

- Person centred approach
- Trauma informed
- Explored different tactics for managing patients in the garden areas

"Thank you for your support and for checking in again – having great support from my colleagues and manager too."



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Next Steps

- **Violence Prevention & Reduction Standards for Wales**

ABUHB is one of the key partners working with the AVC and Betsi Cadwaladr UHB to create a set of Welsh standards.

- **ABUHB Violence Prevention & Reduction Strategy**

To align our policies to recognise the needs and priorities of our Health Board this will including a full V&A staff survey.

- **Training and Education**

Develop a Training Framework for VPR and complete a Training Needs Analysis.

- **Strengthening Partnership Working**

Expanding on the current WASPI with Gwent Police to allow warning markers to be shared on patient admission, working with Shared Services, AVC to simplify Datix reporting for frontline staff.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	People Plan 2022/25 – Objective 3 – Workforce Sustainability
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Executive Director of Workforce and Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Cathy Brooks, Head of Workforce Planning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Health Board's People Plan 2022 -2025, Putting People First, outlines a three year forward view of the priorities for the Workforce and Organisational Development Division. It sets out how the organisation will be driven, led, and supported to build on Health Board successes in relation to its values, workforce improvement, capability, and expertise with a clear focus on wellbeing, inclusion, and engagement of our people.

The People Plan has 3 core objectives:

- 1) **Staff Health and Wellbeing:** Creating an environment for staff to feel proud to work for the Health Board and are included, engaged, and have a sense of belonging.
- 2) **Employer of Choice:** Building on the reputation of the Health Board as a great place to train, work and grow.
- 3) **Workforce Sustainability:** Ensuring we have the right workforce models that embed innovative thinking.

Delivering our People Plan centres on having people with the right skills, expertise, in the right place and with the right capacity to deliver the health and care needs of our population.

This paper provides an update on the delivery of actions and activity to support Objective 3 of the People Plan – Workforce Sustainability.

The People and Culture Committee is asked to review and provide comments on the progress to date and next steps.

Cefndir / Background



Workforce Sustainability

The People Plan 2022-25 is a fundamental component of the organisations Integrated Medium Term Plan (IMTP), setting out the key actions to support the organisation meet its challenges and delivery of the Health Board priorities.

The Plan aims to ensure longer term sustainability of the workforce for the future. It is based on the building blocks within Healthier Wales: Our plan for health and social care (2020) and most recently the National Workforce Implementation Plan 2023, which outlines a series of practical actions that will act as enablers to accelerate the ten-year vision fully recognising the organisational response as part of the work of the Workforce Strategy.

A Delivery Framework to support the implementation of the People Plan has been essential to Workforce and Organisational Development colleagues to map out core actions and measure progress towards the delivery of key objectives. Since the implementation of the People Plan in May 2022, a defined reporting structure has been developed to enable the actions to be monitored, good practice shared, and updates provided on performance at the Workforce and Organisational Development Divisional Day. Regular updates are also provided on each of the objectives to the People and Culture Committee.

The monthly Workforce and Organisational Development Performance Dashboard has also been aligned to reflect the key workforce metrics of the People Plan objectives with notable improvements in sickness absence, vacancies, turnover and recruitment targets.

Objective 3 - Workforce Sustainability Actions

The Workforce Sustainability objectives focus around 9 overarching actions which are summarised in Table 1 overleaf with the key achievements.

Since the launch of the People Plan an additional action has been implemented on agency reduction sustainability focussing on reducing agency costs and the reliance on a temporary workforce.

Asesiad / Assessment

Workforce Sustainability - Key Achievements for Objective 3 – Year 3

The Workforce Sustainability objectives enable the actions to support delivery of the right workforce models which embed innovative thinking. It also focuses on maximising information technology to support the effective workforce intelligence and deployment of staff to support service planning decisions.

Table 1 – Workforce Sustainability objectives and key achievements

Objective	Key Achievements
<p>Action 12 - Workforce sustainability - to develop strategic workforce planning across our systems focussing on skill mix, development of new roles, extended roles and maximising the contribution of the unregistered workforce</p>	<ul style="list-style-type: none"> • Nursing Strategy SCHPN agreed and being implemented. • In the last 12 months registered nurse vacancies have reduced from 279.28wte to 173.62wte a reduction of 105.66wte. • Medical & Dental Workforce Plan in development. • Workforce planning capabilities improving, 32 staff in the progress of completing level 1 programme, 15 have enrolled for level 2 commencing in February and 5 have enrolled on bespoke Mental Health Workforce Planning training.
<p>Action 13 - Partnership Board Transformation - to extend working collaboratively to deliver the workforce dimensions to support new models of care and the outcome framework for the Regional Integration Fund.</p>	<ul style="list-style-type: none"> • Co-produced a Strategic Action Plan for the Gwent Partnership Board and ratified in December 2023. The plan gives a strategic direction for collaborative working in Gwent in line with The Healthier Wales Strategic Workforce Plan, between Health, Social Care and Education. • Programme of work under the Gwent Workforce Board and the College Consortium has continued to develop and evolve, with a key focus on driving forward initiatives in line with foundational economies approach within Gwent. • The Integrated Schools Programme pilot took place in December 2023, with St Cynned School in Caerphilly. Since then, we have in total carried out events in 7 secondary schools in Gwent, reaching over 1,000 pupils.
<p>Action 14 - Accelerated Cluster Development ACD - programme and the alignment of investment plans under the RPB with greater investment in collaborative work with other networks and groups and the plans for the <i>Care Closer to Home</i> models.</p>	<ul style="list-style-type: none"> • Technical workforce document completed for Primary Care to understand workforce gaps and challenges and transformation projects. • To take this forward, Blaenau Gwent offered to pilot a more detailed Workforce Planning approach. • Next steps include finalising the pilot, analysing the results, and integrating findings into the IMTP, with anticipated delivery timelines aligning with the upcoming IMTP submission deadlines.
<p>Action 15 - Workforce analytics and E- Systems - to introduce a suite of workforce analytics to underpin and inform decision making. We will scope and plan to implement interoperable medical workforce E-Systems, which includes</p>	<ul style="list-style-type: none"> • Safe care (Nursing staffing levels tool) roll has completed across all Clinical divisions with Mental Health & Learning Disabilities next. • Regular reports on progress to medical leaders and the monthly Value and Sustainability Programme Board.

<p>systems for job planning, rostering and locum and agency.</p>	<ul style="list-style-type: none"> • Roll out of Job Planning, Locum and Agency E-Systems. • Job Planning compliance showing improvement month on month. A forward trajectory is in place to achieve 90% compliance by September 2025. • E-Rostering rolled out to Family and Therapies and Mental Health and Learning Disabilities. • Development and implementation of Job Planning Procedure and Guide, Distance Learning Training supporting documents. • Implementation of a Health Board medical locum rate card.
<p>Action 16 – Agile/Hybrid Working - to continue to build on areas of good practice in terms of agile working.</p>	<ul style="list-style-type: none"> • Agile Vision and principles agreed by Executive team. • Agile assessments completed for Nevill Hall to support the Estate plan. • Utilised agile principles to implement Ty Gwent and transfer of circa 560 staff with positive feedback.
<p>Action 17 - Variable Pay Reduction - aligned to the Agenda for Change pay deal and National Workforce Implementation plan we are committed to further reducing the variable pay spend. We will continue to build on the work that we have undertaken to date to reduce the agency spend to ensure that our staff are able to provide quality and safe patient experience care through the delivery of its own workforce.</p>	<ul style="list-style-type: none"> • Programme management approach continues. • Improved governance. • The 2024/25 Workforce annual plan savings are £9.8M, the year to date achieved is £7.66M.
<p>Action 18 - Medical Workforce – Systems /Governance and Policies - to support the development of the Health Boards Framework for Physicians Associates, remuneration and policies.</p>	<ul style="list-style-type: none"> • Development and introduction of Job Planning Guidance and Training. • Development and introduction of medical locum rate cards. • Demand and capacity modelling commenced by HEIW to support Nursing supply pipelines with Health Board engagement.
<p>Action 19 - Establishment Controls - to link funded posts to the financial ledger and ESR to support reporting of vacancies, workforce planning and recruitment</p>	<ul style="list-style-type: none"> • A pilot was undertaken within Primary Care and Community to determine the appropriate process to implement establishment controls within the Health Board and enable full roll out across the Health Board. • The pilot is currently being evaluated and control processes are being put in place to roll out to the next Division within the Establishment Control Programme. • Planned completion of the Health Board establishment controls for November 2025 in line with future NHS Solution requirements.

Action 20 - Administration Review - to support the Health Board delivery of the financial plan and ministerial targets.

- Report to Value and Sustainability Board, administration staffing has reduced in line with targets and planned service plans.

Workforce Sustainability Plans for the next 12 Months

Action 12 - Workforce Sustainability Plans

This year's IMTP education commissioning has commenced with draft proposals due to be submitted to HEIW by 31 January 2025. Final proposals are due 31 March 2025.

Following the National Workforce Planning audit report in 2024, the Health Board has responded positively and various levels of training programmes have been offered to Health Board staff as well as integrating workforce planning into existing leadership training programmes.

To support service sustainability, in the past year the Health Board has introduced roles in new areas such as Paramedics in Primary Care, Physicians Associates in Family and Therapies and Mental Health & Learning Disabilities.

We have continued to develop Health Care Support Workforce with the introduction of assistant practitioners in Children's Community Nursing which has reduced the need for increasing band 5 to deliver increasing demands and elevating the role of pharmacy assistants. Within Pharmacy the effective utilisation of skills has continued through the development of the pharmacy technician role which include site lead roles, pharmacy led wards and providing expertise in new service areas such as Complex Health Care. Public Health have continued to review their structures to support the prevention agenda and with so the introduction of new strategist roles and healthy lifestyle advisors. Allied Health Professionals continue to support medical sustainability through releasing consultant capacity in areas such as hand therapy, urology radiography.

We start the advent of new digital solutions with the training of consultants in surgical robotics and utilise RPA to support release of processed administration tasks. Technology will continue to be an important focus to support workforce productivity and efficiency through administration reviews and ensuring through National Workforce Plans, the workforce is digitally ready to support Technology advancements.

Over the next year there will be a continued focus working collaboratively with HEIW to support seamless training pathways including the introduction of the Registered Nursing Associate.

The recent Cardiff University Consultation proposal included a cessation of the Nursing Programme at Cardiff University. The Health Board is in full discussions with HEIW and the Chief Nursing Officer and is receiving regular appraisals. The Health Board has developed local communication to support existing students. The Executive Director of Nursing and Executive Director of Workforce and OD have formally written to Cardiff University outlining its significant concern and impact on future nursing graduates to the Health Board.

Action 13 - Partnership Board Transformation

In July 2023, we co-produced a Strategic Action Plan for the Gwent Partnership Board, which was subsequently ratified in December 2023. The aim of the document was to give a strategic direction for collaborative working in Gwent in line with The Healthier Wales Strategic Workforce Plan, between Health, Social Care and Education.

Since then, our programme of work under the Gwent Workforce Board and the College Consortium has continued to develop and evolve, with a key focus on driving forward initiatives in line with foundational economies approach within Gwent. In August 2024, a celebration event was held by Coleg Gwent to celebrate the work achieved, and a brochure developed, **Appendix 1**.

One key project in this space is our Integrated Schools Programme. The pilot for this took place in December 2023, where we held our first Integrated schools Programme with St Cynned School in Caerphilly. Since then, we have in total carried out events in 7 secondary schools in Gwent, reaching over 1,000 pupils.

The idea of the project is to offer a collaborative Health and Social Care event to pupils aged 12 year plus in an integrated way to showcase the broad range of roles and professions within the sector. The programme has received extremely positive feedback from pupils, teachers and partners and was recently nominated for an award by Careers Wales. St Cynned School in Caerphilly have announced that since the programme their Health and Social Care programme is full for the first time, and the number of applicants for medical school has increased for the first time.

The programme will continue to be rolled out across Gwent ensuring all secondary schools including Welsh Language schools receive a consistent offering.

Action 14 - Accelerated Cluster Development (ACD)

The Health Board is currently supporting workforce planning in the NCN's. A technical document has been drafted outlining workforce analytics; population needs. A pilot is underway to work through a detailed workforce planning process with Blaenau Gwent and is reporting to the Primary Care Sustainability Board. The pilot is progressing and has informed this year's Blaenau Gwent IMTP plans. There are current challenges with GMS practices' capacity to dedicate to the pilot and this has been reported to the with the Primary Care Divisional team who are considering how they can support this and integrate into other transformation programmes to ensure capacity restraints.

Action 15 - Workforce analytics and E- Systems

The Health Board continued to utilise its suite of data collection methods and the integration of data streams. The Workforce and Organisational Development monthly dashboard was reviewed, and a workforce analytic dashboard developed to underpin and inform decision making and support a framework for measuring the benefits of the People Plan actions.

Additional resources have been invested in the team to provide additional workforce analytic capacity.

The implementation of Safe Care is nearly complete across 4 of the Health Board's major sites that use rostering for inpatient capacity (88% complete). Safe Care helps organisations embrace a real-time staff deployment, providing live visibility of staffing levels by matching with patient demand and highlighting areas which are short on workload-based care hours.

The roll out programme for our Medical E-Systems (Job Planning and E-rostering) will continue to be our priority. Increasing Job Planning compliance and developing efficient and effective electronic rosters will link to our Locum Bank and Agency systems to enable us to workforce plan and forecast our medical workforce. Building on our job planning procedure, we aim to ensuring that > 90% of all Consultants have an agreed job plan in place at all times by 30 September 2025.

Job Planning, Medical Locum and Medical Agency systems have all been rolled out. E-Rostering has been rolled out to Family and Therapies and Mental Health and Learning Disabilities. However, the project plan to rollout to other areas is currently being adjusted to provide additional support to the divisions to achieve the 90% compliance target for consultants. Divisional trajectories have been developed are being agreed with the Divisions.

The Workforce and Organisational Development Team are continuing to work with Divisions to input their job plans onto the new Job Planning E-System. As of 31 December 2024, overall job planning compliance was 32%, Consultants was at 33%, an increase of 6% from 27% in November 2024.

Action 16 - Agile/Hybrid Working

The Agile/Hybrid Working Vision and principles have been formally approved by the Executive Team and have supported rollout and implementation of Ty Gwent in Cwmbran. This has been undertaken with a successful IT programme which has enabled agile working practices e.g. soft phone, room booking systems, Flex App. A workshop is planned in March 2025 with divisional representatives and workstream leads to reflect and review the next programme of work for the Agile Programme Board. More detail is available in the Director of Workforce and Organisational Development report within the agenda.

An all Wales Agile/Hybrid Working Network has been established and led by the Health Board and will be finalising a good practice Agile working guidance for Wales.

Action 17 - Variable Pay Reduction

Aligned to the Agenda for Change pay deal and National Workforce Implementation plan, we are committed to further reducing the variable pay spend. We will continue to build on the work that we have undertaken to date to reduce the agency spend to ensure that our staff are able to provide quality and safe patient experience care through the delivery of its own workforce.

The Health Board set out an ambitious programme of work to reduce its reliance on agency workers and high variable pay usage. It achieved this through programme management led by the Workforce and Organisational Development Director and resulted in a decrease in variable pay of circa £18m in the last two financial years, increased bank fill rate, improved roster performance and a decrease in vacancies.

Our ambition is to reduce agency expenditure further with no off-contract agency and no agency being used for Health Care Support Workers, Admin and Clerical and Estates and Ancillary by September 2025. This will be delivered through the existing Programme Management structure with a detailed action plan which concentrates on, scrutiny on data and governance, roster management, recruitment, retention, flexible working, establishment control and sickness absence management.

We will continue to reduce our vacancies through international and local recruitment programmes to key roles, particularly those that impact on variable pay. Over the next 12 months we will focus on the retention of HCSW including reviewing data of HCSW undertaking level 2 to 4 qualifications to identify key gaps, promotion of the HCSW role and impact using roadshows and conduct deep dives into areas of high turnover and high HCSW agency use. To support organisational retention, we will continue to share national resources from HEIW and local resources on the intranet, deliver Talent and Succession planning training to managers and support in the development of skills to have impactful career conversations and focus on data analysis and triangulation from key workforce performance metrics, exit interviews and agency usage.

Action 18 - Medical Workforce – Systems/Governance and Polices

As part of the Specialty Doctor and Clinical Fellow Framework two key policies have been developed within the last year. These are :-

- a policy to support SAS doctors to achieve specialist registration via the portfolio pathway, formally known as CESR.
- Autonomous Practice policy.

As part of the support for specialist registration an education programme has been developed this includes bespoke leadership sessions designed to meet the GMC competency requirements. These policies and the programme support the development of SAS doctors and assist in maximising their potential with the Health Board.

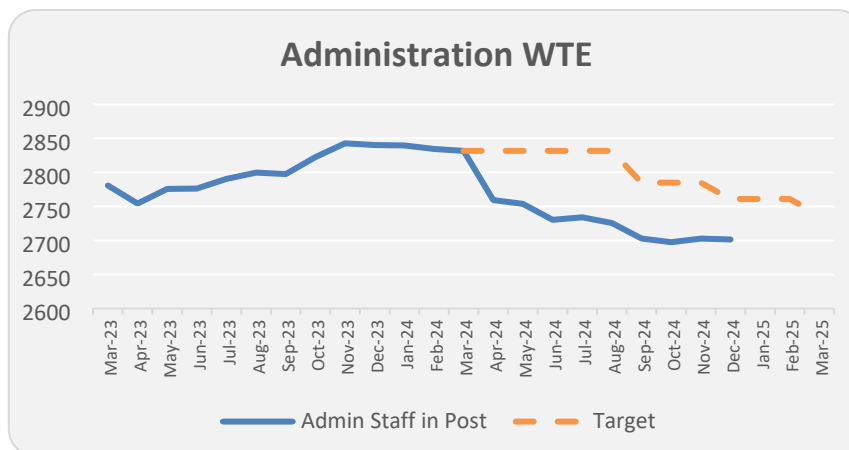
The work undertaken on the Speciality Doctors will be pulled together into one framework for publication this year.

Action 19 - Establishment Controls

Given establishment controls is new to the Health Board and an All Wales approach has not been agreed, a pilot was initiated to determine the appropriate process to implement establishment controls within the Health Board. The pilot has enabled the development of an agreed process, guidelines for agreeing and approving changes and communications to support roll out across divisions this early this year. A programme plan is being developed to support the phasing of establishment controls across divisions along with timescales. Divisions will be prioritised with high variable expenditure.

Action 20 - Administration Review

The number of administration posts has exceeded projected trajectories which include TUPE and targeted reductions. This has been achieved through divisional and corporate vacancy controls processes and divisional reviews.



The next steps will be determined in line with IMTP requirements and will continue to scrutinise vacancies, benchmark and how to optimise digital solutions.

Next Steps - Plans to support People Plan objectives in 2025-26

The objectives within the People Plan have been reviewed to ensure, the Health Board attracts new staff and retains existing staff by supporting their wellbeing and providing managers with the necessary tools to deliver effective leadership.

Argymhelliad / Recommendation

The People and Culture Committee is asked to review and provide comments on the progress to date.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Board's assurance framework.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7. Staff and Resources 7.1 Workforce Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Workforce and Culture
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff. Improve the experience of lesbian, gay, bisexual and trans (LGBTQ+) service users and staff Gender pay - Develop a fuller understanding of the reasons for any differences in pay and take the necessary action to address this.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	ACD - Accelerated Cluster Development DESR - Certificate of Eligibility for Specialist Registration HCSW - Healthcare Support Worker IMTP - Integrated Medium Term Plan NCN - Neighbourhood Care Network RN - Registered Nurse
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Yes, outlined within the paper
• Service Activity and Performance	Yes, outlined within the paper
• Financial	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Long Term - The importance of balancing short-term needs with the needs to safeguard the ability to also meet long-term needs. Involvement - The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.



GWERTH PROFIAD GOFAL

ADOLYGIAD BLYNYDDOL 2023-24



Bwrdd Iechyd Prifysgol Aneurin Bevan
University Health Board

Wedi'i sefydlu ym mis Awst 2018, mae Consortiwm Coleg Gyrfa Gwent (y Consortiwm) yn ddull partneriaeth o gefnogi recriwtio, datblygu a chymwysterau gweithwyr iechyd a gofal cymdeithasol yng Ngwent. Mae'r Consortiwm wedi datblygu strwythur newydd o gydweithio rhwng Coleg Gwent, Prifysgol De Cymru, Bwrdd Iechyd Prifysgol Aneurin Bevan, Awdurdodau Lleol a Darparwyr Gofal sydd wedi addo gweithio mewn partneriaeth i ddatblygu gweithlu iechyd a gofal cymdeithasol medrus a thosturiol ar draws Gwent. Ers ei sefydlu mae'r Consortiwm wedi anelu at ddatblygu a chryfhau lleoliadau gwaith perthnasol, dysgu drwy brofiad a datblygu llwybrau di-dor i yrfaoedd iechyd a gofal cymdeithasol ar gyfer ein carfan leol o fyfyrwyr yng Ngwent.

Mae'r Consortiwm wedi datblygu cyfres o brosiectau drwy ei raglen 'Gwerth Profiad Gofal' a fabwysiadwyd yn 2023 fel brand ymbarél cyhoeddus amrywiol brosiectau'r Consortiwm a phartneriaeth barhaus.

Mae pob prosiect o dan y brand 'Gwerth Profiad Gofal' yn rhannu tri phrif nod:

»» 1

Helpu i gyflwyno ffynhonnell newydd o staff sydd eisoes yn gysylltiedig â'r sector, gan gyflenwi cyflenwad cynaliadwy o dalent i awdurdodau lleol, ysbytai a darparwyr gofal lleol.

»» 2

Cefnogi egwyddorion yr Economi Sylfaenol drwy ddatblygu sgiliau a thalentau o fewn cymunedau lleol tra'n cyflawni gweledigaeth strategaeth gweithlu ar y cyd Addysg a Gwella Iechyd Cymru (AaGIC) a Gofal Cymdeithasol Cymru (GCC).

»» 3

Sicrhau bod gofal yn gyfredol ac yn werthfawr yn y rhanbarth i ystod eang o bobl a allai fod yn ceisio ymuno â'r gweithlu iechyd a Gofal Cymdeithasol neu symud ymlaen o'i fewn.

Mae cwmpas y Consortiwm yn uchelgeisiol, ac yn parhau i fod, ac yn dod â sefydliadau mawr, amlochrog at ei gilydd ar ôl troed rhanbarthol. O'r cychwyn cyntaf mae aelodau'r Consortiwm wedi rhannu angerdd i weithio mewn partneriaeth er budd datblygiad dysgwyr iechyd a gofal cymdeithasol lleol a chanlyniadau iechyd a chymorth ehangach dinasyddion Gwent.

Mae'r adroddiad hwn yn rhoi trosolwg o'r rhaglen 'Gwerth Profiad Gofal' hyd yma, ei llwyddiannau, dysgu a'i dyheadau ar gyfer y dyfodol. Mae'r Consortiwm yn parhau i fod yn ymrwymedig i'w ddull partneriaeth arloesol o ymgysylltu â thalent leol a'i datblygu i ddiwallu anghenion gweithlu iechyd a gofal cymdeithasol Gwent yn y dyfodol.

» MYNEDIAD I FEDDYGAETH



AMCAN ALLWEDDOL

“Ehangu mynediad i lwybrau gyrfa i feddygaeth a phynciau cysylltiedig.”

Partneriaid arweiniol: Bwrdd Iechyd Prifysgol Aneurin Bevan (BIPAB), Prifysgol Caerdydd a Coleg Gwent (gyda chymorth Agored Cymru)

CEFNDIR A MATER A NODWYD:

Yn hanesyddol bu prinder parhaus o fyfyrwyr o Went sy'n dilyn gyrfaedd mewn meddygaeth. Mewn symudiad arloesol tuag at gynhwysiant a chyfle cyfartal, mae Coleg Gwent wedi ymuno ag Agored Cymru a'r Athro Paul Edwards (BIPAB) i gynnig cyfle i fyfyrwyr o gefndiroedd llai breintiedig astudio cwrs Mynediad i Feddygaeth.

Y cwrs, sy'n paratoi myfyrwyr ar gyfer Gradd Llwybr Meddygol yw'r cyntaf o'i fath yng Nghymru, gan ddileu rhwystrau i unigolion talentog, lleol sydd yn draddodiadol wedi wynebu rhwystrau i fynd i mewn i faes meddygaeth.

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Mae datblygiad y rhaglen hon wedi'i arwain gan yr Athro Paul Edwards (BIPAB) a Guy Lacey (Pennaeth Coleg Gwent).

Gan weithio ar y cyd ag Ysgol Feddygaeth Caerdydd ac Agored Cymru, mae rhaglen Diploma Mynediad i Addysg Uwch (Meddygaeth) Coleg Gwent (Campws Crosskeys) wedi'i dilysu'n llawn yn 2023. Gwnaeth y garreg filltir hon Coleg Gwent y Coleg Addysg Bellach cyntaf yng Nghymru i gael caniatâd i redeg y cwrs hwn ar ôl gweithgaredd peilot cychwynnol yn Lloegr.

Ym mis Medi 2023, recriwtiwyd y garfan gyntaf o ddysgwyr, ac mae pedwar unigolyn bellach wedi cwblhau'r cwrs peilot cychwynnol yn llwyddiannus. Er bod y garfan gychwynnol o ddysgwyr yn fach, mae'r cwrs hwn bellach wedi'i sefydlu a bydd yn parhau i dyfu a chynnig cyfleoedd i'r rheini yng Ngwent sydd â dyheadau gyrfa mewn meddygaeth.

DYHEADAU AR GYFER Y DYFODOL:

Archwilio cyfleoedd gydag ysgolion prifysgol berthnasol i ehangu'r ddarpariaeth cysiau i'r rhai sy'n chwilio am le ar gyrsiau gradd berthynol fel deintyddiaeth.

» LLEOLIADAU GWAITH GOFAL CYMDEITHASOL AWDURDODAU LLEOL



AMCAN ALLWEDDOL Y CONSORTIWM:

“Datblygu mwy o gyfleoedd ar gyfer Lleoliadau Gwaith Awdurdodau Lleol i ddysgwyr.”

Partneriaid arweiniol: Awdurdodau Lleol Gofal Cymdeithasol Blaenau Gwent, Caerffili, Mynwy, Casnewydd a Thorfaen a Coleg Gwent

CEFNDIR A MATER A NODWYD:

Wedi'i lansio ym mis Medi 2022 i fynd i'r afael ag anghenion dysgu drwy brofiad dysgwyr iechyd a gofal cymdeithasol, yn ogystal â gofynion recriwtio awdurdodau lleol, sefydlwyd menter lleoliadau cydweithredol gyda phob un o'r pum awdurdod lleol ar draws Gwent. Bydd cynyddu cyfleoedd ar gyfer profiad ymarferol yn nodau'r sector gofal cymdeithasol lleol yn helpu i bontio'r bwlch rhwng addysg a chyflogaeth, cefnogi dilyniant dysgwyr ac ehangu gwybodaeth myfyrwyr am lwybrau gyrfa lleol.

“Pobl a chyfleoedd gwych. Dysgais gymaint a chael cymaint ofewnwelediad i'r hyn y mae'r rôl yn ei olygu.”

Dysgwr Lefel 3 Iechyd a Gofal Cymdeithasol

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Ers cyflwyno'r fframwaith lleoliadau awdurdodau lleol, mae cynnydd sylweddol wedi'i wneud o ran hwyluso lleoliadau dysgwyr o fewn timau gwasanaeth awdurdodau lleol. Yn ystod blwyddyn academaidd 2023/24, cafodd 30 o ddysgwyr iechyd a gofal cymdeithasol o Goleg Gwent fynediad i leoliadau mewn lleoliadau Awdurdod Lleol amrywiol.

DYHEADAU AR GYFER Y DYFODOL:

Ehangu cyfleoedd lleoliad gwaith ar draws ystod amrywiol o leoliadau a thimau Awdurdodau Lleol, gan roi gwybodaeth hanfodol i ddysgwyr am gyfleoedd gofal cymdeithasol lleol a'u galluogi i wneud penderfyniadau mwy gwybodus am eu gyrfaedd yn y dyfodol.

Mae pwyslais cynyddol hefyd ar ddarparu cyfleoedd dilyniant addas i ddysgwyr sy'n dymuno cael gwaith ar ôl cwblhau eu hastudiaethau yng Ngholeg Gwent. Mae sicrhau bod dysgwyr yn meddu ar y sgiliau a'r wybodaeth sydd eu hangen arnynt i ddilyn llwybrau gyrfa ystyrlon lleol yn hanfodol ar gyfer llwyddiant hirdymor y fframwaith lleoliad gwaith.

» LLEOLIADAU GWAITH CLINIGOL BIPAB

AMCAN ALLWEDDOL Y CONSORTIWM:

“Datblygu mwy o gyfleoedd ar gyfer lleoliadau gwaith clinigol i ddysgwyr.”

Partneriaid arweiniol: Bwrdd Iechyd Prifysgol Aneurin Bevan a Coleg Gwent



CEFNDIR A MATER A NODWYD:

Amlygodd pandemig COVID-19 yn 2020 yr heriau recriwtio sy'n wynebu byrddau iechyd ledled Cymru, yn enwedig y galw am nyrsys a gweithwyr cymorth gofal iechyd. Pwysleisiodd hyn bwysigrwydd darparu lleoliadau gwaith ystyrlon o fewn Bwrdd Iechyd Prifysgol Aneurin Bevan (BIPAB) i fyfyrwyr iechyd a gofal cymdeithasol ar draws y coleg, gan ganiatáu iddynt gael profiad uniongyrchol o weithio mewn lleoliadau clinigol.

Datblygwyd y rhaglen gyntaf mewn partneriaeth â BIPAB ym mis Chwefror 2022, gan roi 100 awr o leoliadau clinigol ar draws yr ysbytai i ddysgwyr ail flwyddyn sy'n dilyn Diplomâu Estynedig Lefel 3.

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Roedd y peilot cychwynnol yn cynnwys 22 o fyfyrwyr. O'r rhain, symudodd 16 o fyfyrwyr ymlaen i brifysgolion i ddilyn gyrfaedd cysylltiedig ag iechyd, sicrhodd 4 gyflogaeth o fewn y bwrdd iechyd, a 5 yn y sector gofal cymdeithasol lleol.

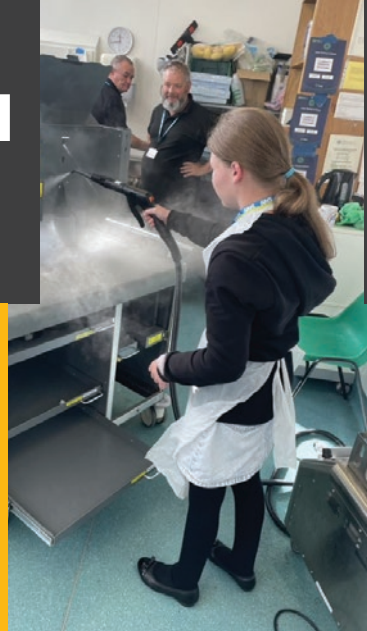
Ym mlwyddyn academiaidd 2022/23 cwblhaodd 23 o ddysgwyr leoliadau clinigol. O'r rhain, aeth 12 ymlaen i brifysgol, pedwar i gyrsiau addysg uwch yn y coleg, a sicrhodd chwech gyflogaeth o fewn y bwrdd iechyd.

Y flwyddyn academiaidd hon mae 38 o ddysgwyr ar draws pob un o'r pedwar campws coleg wedi sicrhau lleoliadau clinigol. Ar hyn o bryd, mae dau ddysgwr wedi sicrhau swyddi parhaol fel gweithwyr cymorth gofal iechyd yn BIPAB.

DYHEADAU AR GYFER Y DYFODOL:

Ehangu'r rhaglen i gynnwys mwy o fyfyrwyr bob blwyddyn, gan sicrhau bod mwy o ddysgwyr o gefndiroedd amrywiol yn cael y cyfle i gael profiad clinigol gwerthfawr. Drwy ehangu cyrhaeddiad, gwella'r cwricwlwm, a darparu systemau cymorth cadarn, nod y Consortiwm yw grymuso mwy o fyfyrwyr i gyflawni eu llawn botensial yn y sector gofal iechyd lleol.

» INTERNIAETHAU Â CHYMORTH AR GYFER DYSGWYR SGILIAU BYW'N ANNIBYNNOL (ILS)



AMCAN ALLWEDDOL Y CONSORTIWM:

“Cynnig interniaethau â chymorth i Ddysgwyr Sgiliau Byw'n Annibynnol o fewn y sector iechyd a gofal cymdeithasol lleol.”

Partneriaid arweiniol: Bwrdd Iechyd Prifysgol Aneurin Bevan (BIPAB), Engage to Change, a Coleg Gwent

CEFNDIR A MATER A NODWYD:

Ym mis Chwefror 2022, lanswyd y rhaglen interniaeth â chymorth gyntaf ar y cyd â BIPAB, Engage to Change, ac Anabledd Dysgu Cymru. Mae'r dull arloesol hwn yn cyfuno dysgu seiliedig ar waith â rhaglen astudio bersonol sy'n ymgorffori elfennau o Lwybr 4 y cwricwlwm Sgiliau Byw'n Annibynnol (ILS). Nod y rhaglen yw cefnogi dysgwyr ILS gyda'r sgiliau a'r cymwysterau angenrheidiol i sicrhau cyflogaeth leol, gynaliadwy â thâl. Treuliodd y garfan gychwynnol o ddysgwyr tri diwrnod yr wythnos yn yr adran cyfleusterau yn Ysbyty Nevil Hall.

“Dw i'n teimlo'n gyffrous, a dw i'n edrych ymlaen at weithio yn yr ysbyty a chwrdd â phobl newydd. Hoffwn adeiladu ar fy hyder.”

Dysgwr ILS

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Mae'r rhaglen wedi dangos twf a llwyddiant cyson flwyddyn ar ôl blwyddyn. Yn ei flwyddyn gyntaf, cwblhaodd chwech myfyriwr yr interniaeth â chymorth, gyda pedwar yn sicrhau cyflogaeth ran-amser ac un yn symud ymlaen i raglen goginio broffesiynol.

Yn 2022/23, cwblhaodd wyth dysgwr y rhaglen yn llwyddiannus, sicrhaodd un brentisiaeth gyda'r tîm cofnodion iechyd yng Nghasnewydd a chafodd dau ddysgwr brentisiaethau gyda'r tîm cyfleusterau yn Ysbyty Brenhinol Gwent. Yn ogystal, cafodd un dysgwr brentisiaeth gyda'r tîm cofnodion iechyd yn Ysbyty Nevill Hall, a sicrhaodd un arall swydd â thâl rhan-amser nad oedd yn gysylltiedig â'r sector iechyd. Cyfrannodd gweddill y dysgwyr at brosiectau gwirfoddoli amrywiol.

Bellach yn ei thrydedd flwyddyn, mae'r rhaglen yn parhau i ffynnu, gyda saith o ddysgwyr wedi cofrestru ar hyn o bryd ac yn elwa o leoliadau gyda'r timau cyfleusterau yn Nevill Hall.

DYHEADAU AR GYFER Y DYFODOL:

Datblygu partneriaethau ag adrannau a sefydliadau gofal iechyd ychwanegol y tu hwnt i gydweithrediadau presennol, gan helpu i amrywio'r mathau o leoliadau sydd ar gael, gan ddarparu cyfleoedd i ddysgwyr archwilio ystod ehangach o lwybrau gyrfa. Gweithio gyda phartneriaid i sicrhau bod holl raddedigion y rhaglen yn cael cyfweliad gwarantedig ar gyfer agoriadau swyddi perthnasol, gan bontio'r bwlch rhwng hyfforddiant a chyflogaeth.

» CYNLLUN CADETIAID COLEG BRENHINOL Y NYRSYS

AMCAN ALLWEDDOL Y CONSORTIWM:

“Cefnogi cyflwyniad Tywysog Cymru o'r Cynllun Cadetiaid Nyrsio y Coleg Nyrsio Brenhinol.”

Partneriaid arweiniol: Coleg Nyrsio Brenhinol (RCN), Bwrdd Iechyd Prifysgol Aneurin Bevan (BIPAB), Coleg Gwent a Phrifysgol De Cymru



CEFNDIR A MATER A NODWYD:

Gyda chefnogaeth Ei Uchelder Brenhinol Tywysog Cymru, mae Cynllun Cadetiaid Nyrsio y Coleg Nyrsio Brenhinol (RCN) yn cefnogi pobl ifanc rhwng 16 a 25 oed i ddatblygu eu sgiliau ar gyfer gyrfa mewn nyrsio. Mae'r cynllun yn darparu 60 awr o hyfforddiant sy'n cynnwys 20 awr o brofiad arsylwi o fewn y Bwrdd Iechyd Lleol. Unwaith y bydd cadetiaid wedi cwblhau'r cwrs, byddant yn derbyn tystysgrif, trawsgrifiad modiwl a phin cyn-fyfyrrwr arbennig. Mae dysgwyr sy'n cwblhau'r cwrs hefyd yn sicr o gael cyfweiliad ar gyfer rôl fel gweithiwr cymorth gofal iechyd.

“Mwynheais y cwrs hwn oherwydd ei fod wedi fy helpu i ddod allan o'm cragen, dysgu sgiliau newydd, cwrdd â phobl newydd ac adolygu astudiaethau achos i baratoi ar gyfer y byd go iawn. Dw i'n argymhell y cwrs hwn yn fawr i bob darpar nyrs gan ei fod yn ffordd wych o ddarganfod a yw nyrsio yn addas i chi mewn gwirionedd!”

Cadet RCN

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Mewn cydweithrediad â Chadetiaid Nyrsio'r RCN a BIPAB, mae dau gynllun cadetiaid wedi'u cyflwyno'n llwyddiannus er budd 36 o ddysgwyr iechyd a gofal cymdeithasol o gampws Crosskeys Coleg Gwent.

Cwblhaodd y garfan gyntaf y cynllun yn y flwyddyn academaidd 2022/23, gyda 19 o ddysgwyr yn cael cyfweiliadau prifysgol. Yn ogystal, mae 1 dysgwr wedi sicrhau rôl fel gweithiwr cymorth gofal iechyd. Mae'r garfan arall o gadetiaid yn aros am ganlyniadau o'u cyrsiau.

Mae'r ail garfan, sy'n cynnwys 17 o ddysgwyr, yn y broses o gwblhau'r rhaglen ar hyn o bryd. Dechreuodd y drydedd garfan o Gadetiaid Nyrsio'r Coleg Nyrsio Brenhinol ar eu hyfforddiant ddydd Llun 13 Mai ac ehangwyd y rhaglen i gynnwys dysgwyr o Flaenau Gwent, Casnewydd a Crosskeys.

DYHEADAU AR GYFER Y DYFODOL:

Ymestyn y cynllun i fwy o gampysau a chymunedau, gan sicrhau bod mwy o bobl ifanc rhwng 16 a 25 oed yn cael y cyfle i elwa ar y rhaglen drawsnewidiol hon.

Hyrwyddo cynhwysiant trwy geisio denu mwy o gadetiaid o gefndiroedd amrywiol, gan feithrin carfan gyfoethog ac amrywiol sy'n adlewyrchu'r cymunedau rydym yn eu gwasanaethu.

» Y RHAGLEN YSGOLION INTEGREDIG

AMCAN ALLWEDDOL Y CONSORTIWM:

“Datblygu a chyflwyno rhaglen llwybr gyrfa integredig ar draws ysgolion Gwent.”

Partneriaid arweiniol: Bwrdd Iechyd Prifysgol Aneurin Bevan (BIPAB), Awdurdodau Lleol Gwent, Prifysgol De Cymru (PDC) a Coleg Gwent



CEFNDIR A MATER A NODWYD:

Lansiwyd y rhaglen ysgolion integredig ym mis Rhagfyr 2023 ac mae'n dod ag ymarferwyr ac addysgwyr o bob rhan o'r sector iechyd a gofal cymdeithasol lleol yng Ngwent ynghyd ac mae'n cynnig cyfle i ddisgyblion ysgolion uwchradd gymryd rhan mewn gweithgareddau sy'n ymwneud â gyrfaedd iechyd a gofal cymdeithasol penodol ac archwilio cymwysterau a llwybrau gyrfa lleol.

Mae'r Rhaglen Ysgolion Integredig yn ddull cydweithredol ehangach o ymgysylltu ag ysgolion drwy'r consortiwm, sy'n ategu meysydd eraill y rhaglen waith 'Gwerth Profiad Gofal'.

Nod y rhaglen yw:

- Codi ymwybyddiaeth ymhlith pobl ifanc 14 i 16 oed o ehangder llwybrau gyrfa/addysg iechyd a gofal cymdeithasol lleol a chyfleoedd gwaith.
- Codi dyheadau pobl ifanc 14 i 16 oed, gan roi'r hyder a'r wybodaeth iddynt ddilyn gyrfa ym maes iechyd a gofal cymdeithasol.
- Cefnogi egwyddorion yr Economi Sylfaenol trwy ddatblygu sgiliau a thalentau o fewn y gymuned leol.
- Cynyddu presenoldeb ac amlygrwydd llwybrau gyrfa iechyd a gofal cymdeithasol ym mhob ysgol ar draws Gwent.

LLWYDDIANNAU A BUDDIOLWYR HYD YMA:

Mae'r rhaglen wedi targedu ysgolion sydd wedi'u lleoli mewn ardaloedd o amddifadedd uchel i godi dyheadau'r disgyblion hyn a, hyd yma, mae wedi darparu ar gyfer tua 190 o ddisgyblion ar draws y lleoliadau canlynol:

- St Cenydd, Caerffili
- Bryn Mawr, Blaenau Gwent
- Lliswerry, Casnewydd
- Abersychan, Torfaen
- Uned Cyfeirio Disgyblion Torfaen

“Roedd y digwyddiad a gynhaliwyd gennych yn ysgol St Cenydd yr wythnos diwethaf yn wych, roedd yr holl ddisgyblion a staff wedi mwynhau yn fawr ac yn ei weld mor fuddiol. Roedden ni wir yn gwerthfawrogi'r cyfle ac yn gobeithio y gallwch chi ei gynnig eto yn y dyfodol.”

Cynghorydd Gyrfa Cymru, Caerffili

DYHEADAU AR GYFER Y DYFODOL:

Ymestyn y cynnig i unedau cyfeirio disgyblion, ysgolion Cymraeg ac i'r bobl ifanc hynny sy'n cael eu haddysgu gartref. Seilio gweithgarwch y dyfodol ar rolau penodol a nodwyd sy'n wynebu prinder gweithlu yng Ngwent.

UCHELGEISIAU I'R DYFODOL?

RYDYM AR HYN O BRYD YN GWEITHIO AR:

- › Darpariaeth cyrsiau coleg newydd gyda'r nod o gyflwyno unigolion i yrfaedd mewn nyrsio deintyddol, hylendid deintyddol, technoleg ddeintyddol ac estheteg.
- › Darpariaeth coleg newydd Agored gyda'r nod o roi cyfle llwybr cyflym i unigolion wneud cais i ymuno â gradd nyrsio tra'n gweithio fel Gweithiwr Cymorth Gofal Iechyd.





CRYNODEB

Mae gwaith Consortiwm Coleg Gyrfa Gwent a'i raglen 'Gwerth Profiad Gofal' yn ymateb ymarferol i fynd i'r afael â materion gweithlu iechyd a gofal cymdeithasol ar draws Gwent. Nod y mentrau a amlinellir yn yr adroddiad gwerthuso hwn yw datblygu, cynyddu ac integreiddio'r gweithlu iechyd a gofal cymdeithasol, gan sicrhau bod pobl leol yn cael cyfleoedd lluosog i ddysgu, hyfforddi a dod o hyd i waith yn y GIG a gofal cymdeithasol ar bob lefel.

Hoffem ddiolch i'r holl bartneriaid o fewn Consortiwm y Coleg am yr hyn sydd wedi'i gyflawni hyd yn hyn ond hoffem gloi gyda chais am ragor o gymorth a chefnogaeth gan unrhyw bartion â diddordeb.

Er mwyn hybu gwaith y consortiwm hwn, rydym yn awyddus i gael cymorth penodol i nodi cyfleoedd ariannu pellach yn y dyfodol i gefnogi'r rhaglen waith 'Gwerth Profiad Gofal' ac i ddileu rhai o'r rhwystrau sy'n ein hwynebu.

Rydym hefyd yn chwilio am fwy o sefydliadau sy'n barod i gynyddu ymgysylltu â'r rhai mewn addysg yn enwedig trwy gynnig cyfleoedd lleoliad gwaith.

Hoffem ni hefyd gydnabod y cyllid a ddarparwyd gan Lywodraeth Cymru eleni drwy'r Rhaglen Trosglwyddo Gwybodaeth.

Cynlluniwyd y Rhaglen Trosglwyddo Gwybodaeth (Knowledge Transfer Programme - KTP) i gefnogi colegau yng Nghymru i gyflwyno gweithgareddau a dyluniwyd i gyflymu a magu arbenigedd aelodau staff a chynyddu gwybodaeth a phrofiad dysgu'r dysgwyr. Mae Iechyd a Gofal Cymdeithasol yn flaenoriaeth yn y rhaglen hon.

Diolch am eich cefnogaeth.



CARE AS CURRENCY

ANNUAL REVIEW 2023-24



Bwrdd Iechyd Prifysgol Aneurin Bevan
University Health Board

»» BACKGROUND

Established in August 2018, the Gwent Career College Consortium (the Consortium) is a partnership approach to supporting the recruitment, development and qualification of health and social care workers in Gwent. The Consortium has developed a new structure of collaboration between Coleg Gwent, University of South Wales, Aneurin Bevan University Health Board, local authorities and care providers who have pledged to work in partnership to develop a skilled and compassionate health and social care workforce across Gwent. Since its inception the Consortium has aimed to develop and strengthen relevant work placements, experiential learning and develop seamless routes into health and social care careers for our local student cohort in Gwent.

The Consortium has developed a suite of projects through its 'Care as Currency' programme which in 2023 was adopted as the public facing, umbrella brand of the Consortium's various projects and continuing partnership.

All projects under the 'Care as Currency' brand share three principal aims:

»» 1

To help introduce a new source of staffing already engaged within the sector, supplying a sustainable pipeline of talent to local authorities, hospitals, and local care providers.

»» 2

To support the principles of the Foundational Economy through the development of skills and talents within local communities while meeting the vision of the Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW) joint workforce strategy.

»» 3

To ensure that care has currency and value in the region to a broad range of people who may be seeking to enter or progress within the Health and Social Care workforce.

The scope of the Consortium is, and remains, ambitious and brings together large, multi-faceted organisations on a regional footprint. From the outset, members of the Consortium have shared a passion to work in partnership to benefit the development of local health and social care learners and the wider health and support outcomes of Gwent citizens.

This report provides an overview of the 'Care as Currency' programme to date, its successes, learning and future aspirations. The Consortium remains committed to its innovative, partnership approach to engaging with and developing local talent to meet the future health and social care workforce needs of Gwent.

» ACCESS TO MEDICINE



KEY OBJECTIVE

“To widen access to career pathways into medicine and related subjects.”

Lead partners: Aneurin Bevan UHB, Cardiff University and Coleg Gwent (with support from Agored Cymru)

BACKGROUND AND ISSUE IDENTIFIED:

Historically there has been a continued shortage of Gwent based students pursuing careers in medicine. In an innovative move toward inclusivity and equal opportunity, Coleg Gwent joined forces with Agored Cymru and Professor Paul Edwards (ABUHB) to offer students from less advantaged backgrounds an opportunity to study an Access to Medicine course.

The course, which prepares students for a Medical Pathway Degree is the first of its kind in Wales, removing barriers for talented, local individuals who have traditionally faced obstacles to entering the field of medicine.

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

The development of this programme has been led by Professor Paul Edwards (ABUHB) and Guy Lacey (Principal of Coleg Gwent).

Working in collaboration with Cardiff Medical School and Agored Cymru, Coleg Gwent (Crosskeys Campus) the Agored Access to Higher Education Diploma (Medicine) programme was fully validated in 2023, making Coleg Gwent the first further education college in Wales to gain permission run this course after initial pilot activity in England.

In September 2023, the first cohort of learners were recruited, and four individuals have now successfully completed the initial pilot course. Although the initial cohort of learners was small, this course is now established and will continue to grow, offering opportunities to those in Gwent who aspire to a career in medicine.

FUTURE ASPIRATIONS:

To explore opportunities with relevant university schools to expand course provision to those seeking places on allied degree courses such as dentistry.

» LOCAL AUTHORITY SOCIAL CARE WORK PLACEMENTS



CONSORTIUM KEY OBJECTIVE

“**Develop more opportunities for Local Authority Work Placements for learners.**”

Lead partners: Blaenau Gwent, Caerphilly, Monmouth, Newport and Torfaen Social Care Local Authorities and Coleg Gwent

BACKGROUND AND ISSUE IDENTIFIED:

Launched in September 2022 to address the experiential learning needs of health and social care learners, as well as local authority recruitment requirements, a collaborative placement initiative was established with all five local authorities across Gwent. The goal is to increase opportunities for hands-on experience in the local social care sector, to bridge the gap between education and employment, support learner progression and expand student knowledge of local career pathways.

“**Fantastic people and opportunities. I learnt so much and gained so much insight into what the role entails.**”

Health and Social Care level 3 Learner

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

Since the introduction of the local authority placement framework, significant progress has been made facilitating learner placements within local authority service teams. Within the academic year 2023/24, 30 health and social care learners from Coleg Gwent accessed placements within various local authority settings.

FUTURE ASPIRATIONS:

Widen work placement opportunities across a diverse range of local authority settings and teams, providing learners with essential knowledge about local social care opportunities and enabling them to make more informed decisions about their future careers.

There is also a growing emphasis on providing suitable progression opportunities for learners who wish to enter employment upon completing their studies at Coleg Gwent. Ensuring that learners are equipped with the skills and knowledge they need to pursue, local meaningful career pathways is vital for the long-term success of the work placement framework.

» ABUHB CLINICAL WORK PLACEMENTS

CONSORTIUM KEY OBJECTIVE

“Develop more opportunities for clinical work placements for learners.”

Lead partners: Aneurin Bevan University Health Board and Coleg Gwent



BACKGROUND AND ISSUE IDENTIFIED:

The COVID-19 pandemic in 2020 highlighted the recruitment challenges confronting health boards throughout Wales, especially the demand for nurses and healthcare support workers. This emphasised the importance of providing meaningful work placements within Aneurin Bevan University Health Board for health and social care students across the college, allowing them first-hand experience of working within clinical settings.

The inaugural programme was developed in partnership with ABUHB in February 2022, providing second-year learners pursuing Level 3 Extended Diplomas with 100 hours of clinical placements across the hospitals.

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

The initial pilot included 22 students. Of these, 16 students advanced to universities to pursue health-related careers, four secured employment within the health board, and five within the local social care sector.

In the 2022/23 academic year, 23 learners completed clinical placements. Of these, 12 progressed to university, four to higher education courses within the college, and six secured employment within the health board.

This academic year 38 learners across all four college campuses have secured clinical placements. Currently, two learners have secured substantive positions as healthcare support workers within ABUHB.

FUTURE ASPIRATIONS:

To expand the programme to accommodate more students each year, ensuring that more learners from diverse backgrounds have the opportunity to gain valuable clinical experience. By expanding reach, enhancing the curriculum, and providing robust support systems, the Consortium aims to empower more students to achieve their full potential in the local healthcare sector.

» SUPPORTED INTERNSHIPS FOR ILS LEARNERS



CONSORTIUM KEY OBJECTIVE

“To offer supported internships for Independent Living Skills Learners within the local health and social care sector.”

Lead partners: Aneurin Bevan UHB, Engage to Change, and Coleg Gwent

BACKGROUND AND ISSUE IDENTIFIED:

In February 2022, the supported internship programme was launched in collaboration with ABUHB, Engage to Change, and Learning Disability Wales. This innovative approach combines work-based learning with a personalised study programme, incorporating elements from the independent living skills (ILS) Pathway 4 curriculum. The programme aims to support ILS learners with the skills and qualifications to secure local, sustainable paid employment. The initial cohort of learners spent three days a week within the facilities department at Nevill Hall Hospital.

“I am feeling excited, and I am looking forward to working in the hospital and meeting new people. I would like to build on my confidence.”

ILS Learner

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

The programme has shown consistent growth and success year after year. In its first year, six students completed the supported internship, with four securing part-time employment and one sional cookery programme.

In 2022/23, eight learners completed the programme successfully, one secured an apprenticeship with the health records team in Newport and two learners gained apprenticeships with the facilities team at The Royal Gwent Hospital. Additionally, one learner obtained an apprenticeship with the health records team at Nevill Hall Hospital, and another secured part-time paid employment unrelated to the health sector. The remaining learners contributed to various volunteering projects.

Now in its third year, the programme continues to flourish, with seven learners currently enrolled and benefiting from placements within the facilities teams at Nevill Hall.

FUTURE ASPIRATIONS:

To develop partnerships with additional healthcare departments and organisations beyond current collaborations, helping to diversify the types of placements available, providing opportunities for learners to explore a broader range of career paths. Work with partners to ensure that all programme graduates are guaranteed interviews for relevant job openings, bridging the gap between training and employment.

» ROYAL COLLEGE OF NURSING CADET SCHEME



CONSORTIUM KEY OBJECTIVE

“To support the introduction of the Prince of Wales, Royal College of Nursing Cadet scheme.”

Lead partners: RCN, Aneurin Bevan UHB, Coleg Gwent & USW

BACKGROUND AND ISSUE IDENTIFIED:

Supported by HRH Prince of Wales, the Royal College of Nursing (RCN) Cadet Scheme supports young people aged 16 to 25 develop their skills for a career in nursing. The scheme provides 60 hours of training which includes 20 hours of observation experience within the local health board. Once cadets have completed the course, they receive a certificate, module transcript and a special alumni pin. Learners who complete the course are guaranteed an interview for a role as a healthcare support worker.

“I enjoyed this course because it helped me to come out of my shell, learn new skills, meet new people and review case studies to prepare for the real world. I highly recommend this course to all budding nurses as it is a great way to find out if nursing is really for you!”

RCN Cadet

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

In collaboration with the RCN Nursing Cadets and ABUHB, two cadet schemes have been successfully delivered benefiting 36 health and social care learners from the Crosskeys campus of Coleg Gwent.

The first cohort completed the scheme in the academic year 2022/23, with 19 learners securing university interviews. Additionally, one learner has secured a role as a healthcare support worker. The remaining cohort of cadets are awaiting outcomes from their courses.

The second cohort, consisting of 17 learners are currently in the process of completing the programme. The third cohort of RCN Nursing Cadets began their training on Monday, 13th May. The programme was expanded to include learners from Blaenau Gwent, Newport and Crosskeys.

FUTURE ASPIRATIONS:

To extend the scheme to more campuses and communities, ensuring that a greater number of young people aged 16 to 25 can benefit from this transformative programme.

Promote inclusivity by seeking to attract more cadets from diverse backgrounds, fostering a rich and varied cohort that reflects the communities we serve.

» THE INTEGRATED SCHOOLS PROGRAMME

CONSORTIUM KEY OBJECTIVE

“To develop and deliver an Integrated Career Pathway Programme across Gwent schools.”

Aneurin Bevan UHB, Gwent local authorities, USW and Coleg Gwent



BACKGROUND AND ISSUE IDENTIFIED:

Launched in December 2023 the integrated schools programme brings together practitioners and educators from across the local health and social care sector in Gwent. The programme offers the opportunity for secondary school pupils to get involved in activities related to specific health and social care careers and explore local qualification and career options.

The Integrated Schools Programme is a wider collaborative approach to engaging with schools via the consortium, which supplements other areas of the 'Care as Currency' work programme.

The programme aims to:

- Raise awareness amongst 14 to 16 year olds of the breadth of local health and social care career/education pathways and work opportunities.
- Raise aspirations of 14- to 16-year-olds, providing them with the confidence and knowledge to pursue a career in health and social care.
- Support the principles of the Foundational Economy through the development of skills and talents within the local community.
- Increase the presence and visibility of health and social care career pathways at all schools across Gwent.

ACHIEVEMENTS AND BENEFICIARIES TO DATE:

The programme has targeted schools located in areas of high deprivation to raise the aspirations of these pupils and has, to date, delivered to approximately 190 pupils across the following locations:

- St Cenydd, Caerphilly
- Bryn Mawr, Blaenau Gwent
- Lliswerry, Newport
- Abersychan, Torfaen
- Torfaen Pupil Referral Unit

“It was such a fantastic event last week that you ran here at St Cenydd school, all pupils and staff really enjoyed it and found it so beneficial. We really appreciated the opportunity and hope you can offer this again in the future.”

Careers Wales Adviser, Caerphilly

FUTURE ASPIRATIONS:

Extend the offer to pupil referral units, Welsh language schools and to those young people who are home schooled. Base future activity on identified, specific roles facing workforce shortages in Gwent.

WHAT IS COMING NEXT?

WE ARE CURRENTLY WORKING ON:

- New college course provision aimed at introducing individuals to careers in dental nursing, dental hygiene, dental technology and aesthetics
- New college Agored provision aimed at providing individuals with a fast-track opportunity to apply to join a nursing degree whilst working as a Health Care Support Worker





»» SUMMARY

The work of the Gwent Career College Consortium and its 'Care as Currency' programme is a practical response to addressing the health and social care workforce issues across Gwent. The initiatives outlined in this evaluation report aim to develop, increase and integrate the health and social care workforce, ensuring that local people have multiple opportunities to learn, train and find work in the NHS and social care at all levels.

We would like to thank all the partners within the College Consortium for what has been achieved so far but would like to conclude with a plea for further help and support from any interested parties.

To further the work of this consortium we are specifically seeking help to identify future funding opportunities to support the 'Care as Currency' work programme and to resolve some of the barriers we are facing.

We are also seeking more organisations who are willing to increase engagement with those in education particularly by offering up work placement opportunities.

We would also like to acknowledge the funding provided by Welsh Government for this year through the Knowledge Transfer Programme.

The Knowledge Transfer Programme (KTP) is designed to support colleges in Wales in the delivery of activities designed to accelerate and build expertise for staff and increase the learner's knowledge and learning experience. Health & Social Care is a priority within this programme.

Thank you for your support.

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Volunteering and Volunteer to Career
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jennifer Winslade, Executive Director of Nursing
SWYDDOG ADRODD: REPORTING OFFICER:	Tanya Strange, Head of Nursing, and Kathryn Thomas, Programme Manager Patient Experience and Involvement Team

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

Volunteering is recognised by the Welsh Government and the Third Sector Partnership Council as a 'good thing' for Wales, to be supported and promoted. It has benefits for the individual, for organisations and movements in which they are involved, and for communities more widely (Welsh Government Volunteering Framework Supporting Communities, Changing Lives, August 2015).

Aneurin Bevan University Health Board recognises the important and valuable contribution made by volunteers who give freely of their time to enhance the services provided by paid staff, with the aim of improving the experience for patients, their families, and carers whilst ensuring volunteer experience is also positive. Through a governance focussed Volunteer Framework, the Patient Experience and Involvement Team manage all volunteering activity as it relates to volunteers directly engaged by the Health Board. As the only Health Board in Wales to be successful in securing grants to take forward Volunteer to Career pathways, there is now real opportunity for volunteers to gain paid employment.

The People and Culture Committee is asked to discuss the achievements for assurance, discuss the challenges to expansion and approve the actions for 2025 onwards.

Cefndir / Background

The Health Board considers the safety of patients and service users to be paramount and expects that the standard of care and conduct of volunteers to be of the same high quality as that of paid staff, embedded within the Health Board Values and

Behaviours Framework. Within the Health Board, the ethos of volunteering supports:

- The Integrated Medium-Term Plan
- Organisational People Plan.
- Workforce Planning
- The Equality Act 2010.
- The Welsh Language (Wales) Measure 2011.
- Patient Experience and Involvement Strategy, Quality Strategy and The Care Aims Framework.
- The Wellbeing of Future Generations Act (Wales) 2015.
- Health and Care Standards (Wales) 2015.
- A Healthier Wales 2019
- The Health and Social Care (Quality and Engagement) (Wales) Act 2020 (including the Duty of Candour).

The Health Board has published a revised Volunteer Framework. The purpose of this Framework is to provide a governance focussed and structured process that enables volunteers to be engaged safely and effectively by the Health Board. Acting as a point of reference for staff, volunteers, potential volunteers and interested partners, the Framework supports the Health Board in embedding a model of engagement that provides a range of opportunities for people within our communities to volunteer. The Patient Experience and Involvement Team work closely with divisional teams and external partner organisations to increase volunteering across the geographical area.

During 2023/24, the Health Board were successful in working with Helpforce Cymru to pilot a Volunteer to Career Pathway. This has been a great success with 12 volunteers gaining paid employment. The Team are currently piloting a Volunteer to Career Pathway for people with lived experience (mental health and learning disabilities). Aligned to workforce planning, the Volunteer to Career pathway is a real opportunity to enhance recruitment whilst also supporting people with additional needs to gain meaningful employment.

Asesiad / Assessment

COVID-19 and visiting restrictions meant that volunteering activity was significantly impacted during the pandemic, and some volunteers sadly chose not to return. However, 2022 - 2024 has seen the very welcome return of many of our volunteers and the recruitment of volunteers is now increasing, particularly around befriending, meaningful activities, lived experience roles and end of life support.

Volunteer Profiles

The Health Board considers the recruitment of volunteers through a multi-generational, life course approach which enables volunteering opportunities for children and young people (intergenerational practice), adults, older adults, and retirees. People who have additional needs, those whose voices are seldom heard and those with protected characteristics are also supported to volunteer through reasonable adjustments and additional support. All role profiles are discussed with Staff Side to ensure there are no conflicts with paid roles.

Several new volunteer roles have been developed over a number of years and to date we have extended from purely hospital befriending and Therapy Dogs, to extending both hospital and community volunteering roles which includes:

- Home visits
- Friendship groups
- Peer support/lived experience groups, End of life Companions
- Telephone befrienders
- Care Home volunteering.

A list of volunteer role profiles is included in the accompanying presentation. These roles have all been created based on people’s feedback (staff and patients). Today, we can offer people who want to volunteer the opportunity to choose from **20** volunteer role profiles. There are currently **267** volunteers recruited (with a significant number still going through recruitment). The Volunteer Co-ordinators manage and supervise around 60 volunteers each. Their responsibility under the Framework includes interviewing, recruitment, undertaking the relevant checks (e.g. DBS, Occupational Health, reference checks), training, undertaking risk assessments and induction. Interest in volunteering has increased over the past 4 months and the team has now had to increase the core volunteer training from one to two sessions a month. Additional training is provided depending on the role the volunteer is engaged in. Bespoke training sessions delivered in 2023-24 are identified below:

Bespoke Training	No. of Sessions	No. of Attendees
Dementia Friends	15	97
Dementia Awareness, Meaningful Activities and Engagement	8	54
Psychological Support for People with Cancer	3	29
Food and Safety Awareness Level 2	4	45
End of Life Communication	4	18
Moving and Handling	2	10
Total	36	253

Alongside the management of Volunteers, the co-ordinators also attend promotional events in schools, colleges, and at public events. Two of the co-ordinators also directly support the Options, Advice and Knowledge (OAK) patient education sessions, for people suffering with long term conditions (e.g. osteoarthritis and menopause).

Life Course Approach to Volunteering

The Patient Experience and Involvement Team, strive to provide volunteering opportunities across the life course and through our Cultural Competence accreditation, embed equality, diversity and inclusion in all volunteer activity. Although the majority of our volunteers are above retirement age, we have seen a significant increase in volunteers from younger age groups (particularly health and social care and pharmacy students), an increase from people with additional needs and protected characteristics and an increase from people whose first language is not English. To date we have 20 volunteers whose first language is not English. Additionally, specialist services are now requesting support for volunteers with lived

experience (cancer, stroke, cardiac and alcohol services) and this is extending into increased peer mentoring initiatives.

Patient, Staff and Volunteer Experience.

The Volunteer Annual Report (attached) outlines the positive impact on patient, staff and volunteer experience. Partner organisations are engaged and there is much collaborative working. More and more teams are now realising the benefit of volunteer support and referrals for volunteer support are increasing.

Volunteer activity is becoming more diverse and more inclusive. This can be demonstrated by the development of the Babi Volunteers in the maternity services, who, with a range of different languages, support mothers who do not speak English. Some case studies reflecting diversity are included in the Annual Report

Discussions are now taking place around the establishment of Volunteer Hubs on each hospital site, who will work closely with PALS and clinical teams. This will require the identification of dedicated hub space.

Volunteer to Career Pathway

The Patient Experience and Involvement Team has been successful in securing two grants from Helpforce to take forward the Volunteer to Career (V2C) Programme. The Aneurin Bevan University Health Board are the only Health Board who has secured these grants. The first grant allowed the Team to pilot a 'generic' V2C pathway for any volunteer wishing to join the programme and seek paid employment. The second Grant (awarded in April 2024) was to focus on a dedicated V2C pathway for people with lived experience (mental health and learning disabilities). This grant has allowed us to employ a dedicated Mental Health and Learning Disability V2C administrator for 15 hours a week and the post was secured by an employee with lived experience. Grant funding expires April 2025, and unfortunately, this post would then be at risk.

To support the recruitment of volunteers, volunteers are now classed as 'internal' in a similar way that bank staff are. This means that when vacancies that are advertised internal to the Health Board only, they are eligible to apply. Vacancies can be advertised internal only for a number of reasons; one, to support the progression of internal staff. This approach provides career development pathways helping us achieve our ambition of becoming and maintaining an Employer of Choice reputation, provides us with an internal pipeline and provides opportunities to advertise entry level roles, thus achieving Foundational Economies obligations.

Since the inception of the V2C Pathway:

156 people have expressed an interest in the V2C pathway and of these:

- **45** volunteers are either in recruitment or working towards their 30hrs volunteering hours.
- **18** volunteers are being supported as part of V2C pathway
- **15+** have requested Work Experience opportunities
- **11** have obtained paid employment outside of ABUHB
- **8** have obtained employment in the Health Board

- **5** have entered university or taking additional courses

In addition to this, over the last two years the Patient Experience and Involvement Team have supported almost 200 students from the Cardiff School of Pharmacy, Monmouth Boarding School and Coleg Gwent by providing students with patient experience placements. The Team is working closely with Coleg Gwent supporting health and social care students to become volunteers as part of their course.

Risk Assessment

The co-ordinators current workload means that they are unable to progress at pace new volunteering initiatives. Grant funding has enabled the piloting and embedding of new volunteer initiatives. However, posts employed through this funding are fixed term, meaning the co-ordinators then need to absorb the work.

Financial Assessment

With the exception of the 3.3 WTE Volunteer Co-ordinators, funding for directly engaged volunteers is met through Charitable Funds. These funds pay for volunteer 'out of pocket' expenses. Grants have supported the fixed term employment of some administrative staff to test and embed new models (Volunteer to Career and End of Life Companions).

Commissioning of Voluntary Sector volunteering is met by ring fenced budgets specific to the area the volunteers are engaged in (Age Cymru Robins). Where additional external volunteering has been requested, this has traditionally been met through time limited Charitable Funds.

Training more volunteers to engage in meaningful activity and encouraging more volunteers to consider the Volunteer to Career pathway would have a positive impact on patient experience, the potential to reduce the financial impact on enhanced care provision and increase uptake of paid employment within the Health Board. The existing volunteer co-ordinator workload would need to be increased to take this forward at pace.

Going Forward

The Patient Experience and Involvement Team intends to continue with all volunteering activity and, supported by Helpforce and the Workforce and Organisational Development Leads, will look to embed V2C pathways through the Organisational Volunteer Framework and People Plan.

To ensure sustainability of the V2C pathway, support from Workforce and Organisational Development Leads to:

- Explore roles that volunteers who have not worked for some time or people with protected characteristics could secure would be very much appreciated.
- Many of our volunteers have short term visas or skills, knowledge and qualifications that are not recognised in the UK. Accreditation of Prior Learning (APL) is a process whereby students, who have already gained relevant skills and knowledge prior to the start of their course, may be granted a partial credit exemption from their programme instead of unnecessarily repeating work. Support and guidance of how we best consider these skills, knowledge

and qualifications through our V2C pathway would also be very much appreciated.

- Consideration of a 'fast track' process for work experience placements and apprenticeships.
- Consideration of 'reasonable adjustments' for people with protected characteristics prior to terminating a work experience placement.

Argymhelliad / Recommendation

The Volunteer Annual Report 2023-24 celebrates volunteering and outlines the key volunteering achievements. This paper also highlights the success of the Volunteer to Career pathway.

The People and Culture Committee is asked to DISCUSS the achievements for assurance, DISCUSS the challenges to expansion and APPROVE the actions for 2025 onwards.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	4.1 Dignified Care 6. Individual care 6.2 Peoples Rights 6.3 Listening and Learning from Feedback
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Getting it right for children and young adults Older adults are supported to live well and independently
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Experience Quality and Safety
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Work in partnership with carers to continue awareness raising, provide information and improve practical support for carers Improve the access, experience and outcomes of those who require Mental Health and Learning Disability Services Improve the access, experience and outcomes of those who require mental health and learning disability services

	Choose an item.
--	-----------------

**Gwybodaeth Ychwanegol:
Further Information:**

Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

**Effaith: (rhaid cwblhau)
Impact: (must be completed)**

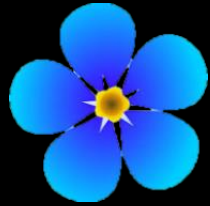
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Yes, outlined within the paper
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	Yes not yet available An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Involvement - The importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves Collaboration - Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives



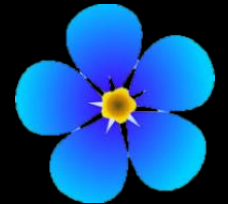
GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Volunteering
Aneurin Bevan



Volunteering Annual Report January – December 2023



Executive Summary

I am delighted to present the Volunteering Annual Report 2023 to our Board and our communities. This report outlines the valuable contribution volunteers make to patients, clinical services, and the wider community.

I am proud to be the Strategic Lead for Volunteering and to have the opportunity to work with so many wonderful people. Volunteering across Aneurin Bevan University Health Board is managed within our Patient Experience and Involvement Team and is supported by Volunteer Leads, Volunteer Project Co-ordinators, dedicated patient experience staff, voluntary sector partners and our wider workforce who contribute significantly to volunteering within their service and across the Health Board geographical area.

COVID-19 and visiting restrictions meant that volunteering activity was significantly impacted during the pandemic, and some volunteers sadly chose not to return. However, 2022 and 2023 has seen the very welcome return of many of our volunteers and the recruitment of volunteers is now increasing, particularly around befriending, meaningful activities, and end of life support. This year, we have recruited 92 new volunteers and several new roles have been developed. These new roles have all been created based on people's feedback. Today, we can offer people who want to volunteer the opportunity to choose one of 20 volunteer role profiles.

I am very grateful to our Patient Experience and Involvement Volunteering Team who proactively collaborate with several Third Sector and Voluntary organisations, taking every opportunity to promote and celebrate the valuable contribution that volunteers bring. Their dedication in encouraging people to consider volunteering, recruiting, training, and supporting volunteers as well as responding to clinical teams' requests for volunteering support is admirable. I am grateful too to those external organisations who support volunteering for the benefit of our population whether they are in hospital or in the community.

This year, we held a Volunteer Celebration Event that showcased the valuable contribution that volunteers make. It was truly humbling to witness how volunteers spend their time making things better for our patients, their families, and staff. Each volunteer brings so many benefits to people's experiences and their lives and the celebration event honoured that contribution. I would like to personally thank each and every volunteer for the difference that they make by giving the most precious gift of all, the gift of time. Through their unfailing dedication and personal desire to make society a kinder place, I am sure that 2024 onwards will bring many more benefits to people, communities, staff, and the volunteers themselves.



Jenny Winslade
Executive Director of Nursing



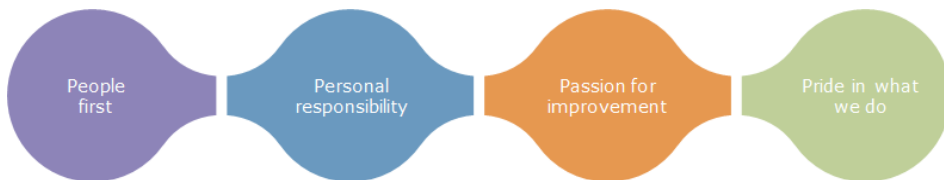
Introduction

Volunteering is recognised by the Welsh Government and the Third Sector Partnership Council as a **'good thing'** for Wales, to be supported and promoted. It has benefits for the individual, for organisations and movements in which they are involved, and for communities more widely (Welsh Government Volunteering Framework Supporting Communities, Changing Lives, August 2015).

Volunteering is an important expression of citizenship and an essential component of democracy. It is the commitment of time and energy for the benefit of society and community and can take many forms. It is undertaken freely and by choice, without concern for financial gain (Welsh Council for Voluntary Action Cymru).

Aneurin Bevan University Health Board recognises the important and **valuable contribution** made by volunteers who give freely of their time to enhance the services provided by paid staff, with the aim of improving the experience for patients, their families, and carers. The Health Board is committed to ensuring that volunteers are treated consistently and with respect throughout the organisation, to ensure that the volunteering experience is positive.

The Health Board considers the **safety of patients** and service users to be paramount and expects that the standard of care and conduct of volunteers to be of the same high quality as that of paid staff, embedded within the Health Board **Values and Behaviours Framework**.



The Aneurin Bevan University Health Board's Volunteer Framework considers all relevant aspects of the **Health and Care Standards (2015)** with particular reference to the importance of delivering person centred care and standards:

- **1.1 Health Promotion Protection and Improvement**, as volunteers make a significant impact on reducing isolation and loneliness and reconnecting people with communities.
- **4.1 Dignified Care**, as volunteer role profiles are designed specifically to meet the needs of those people who may have unmet needs.
- **7.1 Workforce**, as volunteers are trained and supported in order that their roles directly impact patients.

Within the Health Board, the ethos of volunteering supports:

- The Integrated Medium-Term Plan and Organisational People Plan.
- Patient Experience and Involvement Strategy, Quality Strategy and The Care Aims Framework.
- The Wellbeing of Future Generations Act (Wales) 2015.
- The Equality Act 2010.
- A Healthier Wales 2019.
- The Welsh Language (Wales) Measure 2011.
- The Health and Social Care (Quality and Engagement) (Wales) Act 2020 (including the Duty of Candour).
- Health and Care Standards (Wales) 2015.

Volunteering Framework

The Health Board has published a revised **Volunteer Framework**. The purpose of this Framework is to provide a governance focussed and structured process that enables volunteers to be engaged safely and effectively by the Health Board. It ensures:

- The volunteer can access the experience most beneficial to them, using their skills and experience to benefit others.
- The volunteer is recruited, trained, and supported appropriately.
- That all staff in ABUHB can be fully involved in the engagement of volunteers.

Acting as a point of reference for staff, volunteers, potential volunteers and interested partners, the structured Framework supports the Health Board in embedding a model of engagement that provides a range of opportunities for people within our communities to volunteer. The Framework intends to improve the wellbeing of people, whether they are receiving healthcare, working in healthcare, or volunteering with us by enhancing:

- A **sense of purpose** and wellbeing for the volunteer.
- A **positive experience** for those people receiving volunteer input, including patients within acute and community hospital settings, residents in care homes and people living in their own home.
- **Staff confidence** in supporting volunteers as part of the team.
- **Public confidence** in knowing that volunteers are trained and skilled to undertake their role.

Benefits of Volunteering

There are many benefits to volunteering, including benefits to people who are supported, benefits to the organisation, benefits to staff, benefits to wider society and importantly, benefits for volunteers themselves.

Volunteer feedback has demonstrated:



- Improvements in self-worth through making a difference.
- A sense of purpose/feeling valued.
- Sense of belonging/reduced loneliness for volunteers.
- Life satisfaction.
- Increased self-confidence and self-esteem.
- Learning new skills and future employability.



Our Inclusive Life Course Approach to Volunteering

The Health Board considers the recruitment of volunteers through a multi-generational, **life course** approach which enables volunteering opportunities for children and young people (intergenerational practice), adults, older adults, and retirees. People who have additional needs, those whose voices are seldom heard and those with protected characteristics are also supported to volunteer through reasonable adjustments and additional support.

Whilst the minimum age for volunteering within the Health Board is 16 years of age, department managers may decide that certain voluntary roles are unsuitable for volunteers under the age of 17 or 18. The Volunteer Framework sets out the **governance arrangements** when recruiting young volunteers (people aged 16-18 years). There is no upper age limit and our eldest volunteer to date was 93 years old.

Assurance and Governance



Overall responsibility for volunteering within the Health Board rests with the Executive Director of Nursing, as delegated by the Chief Executive. **Volunteer governance** is managed by the Patient Experience and Involvement Team who work closely with divisions, **Therapy Dog Service Lead** and **Chaplaincy** to support informal interview and selection of volunteers. The nurse in charge of the ward or person in charge of the department takes responsibility for all active volunteering within their area.

Some volunteer roles include supporting people within the community. This includes people who live in their own homes, independent living schemes and care homes. To ensure the safety and **safeguarding** of both volunteers and clients, risk assessments are completed. This includes an environmental risk assessment to ensure the building and surroundings are suitable for a volunteer to visit and a **risk assessment** of the client themselves to ensure that they are suitable for a volunteer to visit in view of lone working. Clear guidelines around volunteer **accountability** are provided in the Core Volunteer Training and Information Booklet, a copy of which is provided to all volunteers. Each volunteer has access to a volunteer lead within the Patient Engagement and Involvement Team.





Relationship Between Volunteers and Paid Staff

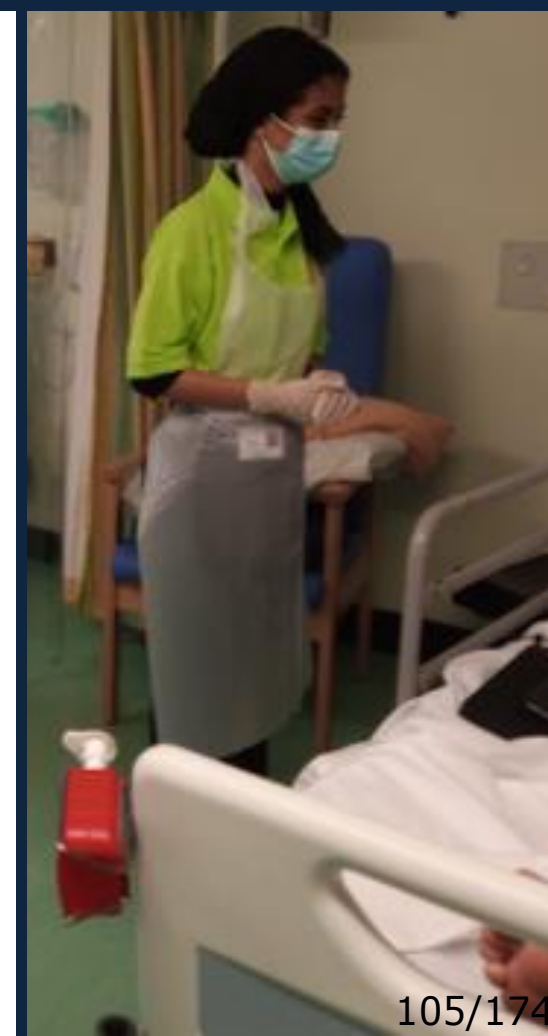
The Patient Experience and Involvement Team work closely with **Staff Side** to ensure volunteer roles do not conflict with roles that are undertaken by employed staff. The role of the volunteer is **complementary**, not supplementary to the role of paid staff.

Volunteers are never employed in times of industrial action to do the work of paid staff but may continue with their regular, complementary role. Volunteers are made fully aware of their role when engaged with ABUHB.

Employed staff are supported to have a clear understanding of the nature, **boundaries**, and limits of volunteer involvement.

The engagement of volunteers will always seek to **match** the volunteers' skills, talents, and interests with those of the people they are supporting.

To date, we have **210** volunteers directly engaged by the Health Board and are supported by external volunteers engaged through our arrangements with Age Cymru Gwent, League of Friends at Ysbyty Aneurin Bevan (YAB) and Nevill Hall Hospital (NHH), Blood Bikes, Bridges Centre, Sparkle, Walled Garden and British Red Cross.



Recruitment and Selection of Volunteers⁺ •

0

The Patient Experience and Involvement Team are responsible for the operational **recruitment** and core training of volunteers engaged within the Health Board.

There is a robust recruitment and selection process to ensure that anyone wishing to volunteer is **suitable** for a volunteering role. This includes:

- Application Form and Interviews
- Identity and Signature Checks
- Right to Work Process Checks
- References
- Disclosure and Barring Service (DBS)
- Occupational Health Clearance
- Young Volunteers (Governance and Supervision)
- Information Security and Confidentiality Agreement
- Expectations of the Organisation
- Volunteer Agreement

Where people may require additional support to complete the application process, this is undertaken on a 1:1 basis.



During 2023, **92 new volunteers** were recruited and in addition to our recruited volunteers, we also trained and inducted approximately **75 Pharmacy Students** who gained valuable patient experience placements.

Volunteer Training and Development

All Volunteers receive an **induction** into their volunteer roles and training to support the role they will be undertaking.

Mandatory/Core training for all volunteers include:

- Communicating with people experiencing a hearing loss.
- Equality, Diversity, and Inclusion.
- Safeguarding.
- Infection Control.
- Safe Working.
- Welsh Language 'Active Offer'.
- Confidentiality.
- Dementia Friends.



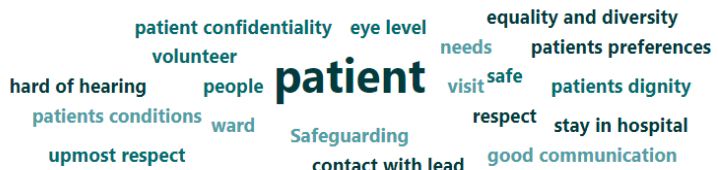
Over the past 12 months **206** volunteers have attended the core and refresher training. Volunteers told us that following the induction training they felt more prepared to begin volunteering. They also told us they found the group work, videos, and scenarios sessions very useful. Feedback from the training sessions include:

What were the most useful sessions today?



“Loved the training! Very friendly and informative. Excited to volunteer in ABUHB.”

What messages will you definitely remember from today's training?



“The training session was an amazing experience, well planned out and expressed.”

Volunteer comments related to core training.

Thoroughly enjoyed, lovely group of people and the trainers were exemplary. Very friendly, very down to earth, and really made me feel welcome, so thank you.

Thoroughly enjoyed the course made very good by the presenters.

Really enjoyed the training and looking forward to starting befriending. Thank you!

Good course with lots of interesting information.

I enjoyed the session, it was presented in a way everyone could understand.

Bespoke Training

Some volunteering roles require **additional training**. These include the End-of-Life Companions, Dementia Companions, service specific volunteers (e.g. maternity) and roles where volunteers have lived experience and wish to support others with the same conditions (e.g. cancer, stroke). Where volunteers support at mealtimes, **Food Safety Awareness** training is provided, supported by a Dietician.

The Patient Experience and Involvement Team work very closely with **clinical leads** and external partners to develop or participate in the training required to support service areas. This has included the development of an end-of-life companion training course, developed in partnership with **Marie Curie** and **Helpforce** and a full day Meaningful Activity training programme developed with the Lead Nurse for Dementia and Clinical Skills Trainer. This training is also offered to staff.

In 2023, we held the following additional **bespoke** training sessions:

Bespoke Training	No. of Sessions	No. of Attendees
Dementia Friends	15	97
Dementia Awareness, Meaningful Activities and Engagement	8	54
Psychological Support for People with Cancer	3	29
Food and Safety Awareness Level 2	4	45
End of Life Communication	4	18
Moving and Handling	2	10
Total	36	253

Valuing and Supporting Volunteers

The Patient Experience and Involvement Team proactively support volunteers once engaged. This support includes:

- Introduction to the clinical area or to the person living in the community.
- Accompanied induction.
- Placement review.
- Wellbeing checks.
- Named 'buddy'-point of contact.
- Informal supervision and advice - group and one-to-one.
- Engagement and involvement at all times - seeking views, listening, offering new role opportunities.
- Dedicated email communication channel.
- Psychological wellbeing 'check in' and monthly support sessions.
- Annual training updates.
- Provision of out-of-pocket expenses.
- Offer of immunisations.
- Involvement in local promotional events.
- Annual celebration events.
- Letters of thanks.
- Award nominations.
- Involvement in presentations (local and national).

"To make patients smile is a reward."

- Hilary Maynard, Volunteer -

Feedback from Volunteers

It has made me feel wonderful being told I do an amazing job, need ego boosts. Visitors opposite joined in on conversation, visitors also said that I do an amazing job visiting people
~ David Wright ~

Seeing the smile on people's faces is just the best thing. I just want to make everyone happy. (Latisha, Volunteer)

I sat with a lovely lady from Tredegar who lost her husband who she adored 6 months ago. We had a nice long chat about him and her family. She said what I do, volunteering, is a kind thing.
~ Peter Mitchell ~

Feedback from Staff

The volunteer service has been amazing for the patients at YYF. The hospital is comprised of predominantly single rooms which can be very lonely. The volunteer service has brought a lot of joy and company to those who have desperately needed it. I'm sure the patients would agree that it is an excellent service that goes along way.
~ Jody-Marie, Ward Manager ~

Speaking for Central Monmouthshire Integrated Services, I can confirm that we are privileged to work alongside volunteers across the full gamut of Health & Social Care. From regular visits by therapy dogs (and their owners) on Trefynwy Ward, to volunteers supporting day activities for people living with dementia; GAVO-inspired befrienders helping people overcome social isolation, to volunteer drivers helping people overcome gaps in rural transport systems and attend appointments; from volunteers such as the 'Friends of Monnow Vale', who undertake year-long fundraising and help keep the Health & Social Care Facility connected to the local community, to people volunteering in the Secure Estate (HMP Usk & Prescoed). The wealth of experience, dedication and skills that people continue to contribute is both impressive and humbling in equal measure. Clearly Health & Social Care is enhanced by the altruism of a large group of volunteers, and we rightly value their respective contributions and achievements and take pride in our strong association.
~ Andrew Burford, Integrated Service Manager ~

Our volunteer can offer her perspective from being a past client herself and this is so validating for people to hear. She is warm and friendly and is a consistent person that people meet each time they come to the group. She gives people hope that whilst at the present moment they are struggling, things can change and they can be in a very different place in the future. Our volunteer is very committed to the group and supports our ability to offer this intervention. We are most grateful to her.
~ Liz Galle, Psychological Therapist ~

Feedback from Partners

Personally, I feel working in collaboration with you and Jane Pearce eases my anxieties, as I know I can gain clarity for those that I am supporting in most contexts. The positions being offered at the hospital are great for all ages, students to gain experience alongside their studies, key to gaining social skills to increase employability success and an amazing setting for those retired and having the time to give back to their community and enabling them to remain active in the promotion of self-care. All key in the reduction of area social isolation figures. I always feel confident and at ease when I request support for those that I am working with. I also find our regular catch-up meetings very helpful and informative, keeping me up to date with all new additions being offered around the volunteering context. We compare our personal settings and needs.
~ Caren White GAVO Caerphilly ~

The partnership between TVA and Ffrind i Mi is crucial in facilitating the support and volunteering efforts for individuals seeking companionship for various reasons. We highly recommend these organisations due to their unwavering commitment and well-established policies that effectively support and nurture volunteers in their befriending roles.
~ Katie Davies TVA ~

Feedback from Volunteers

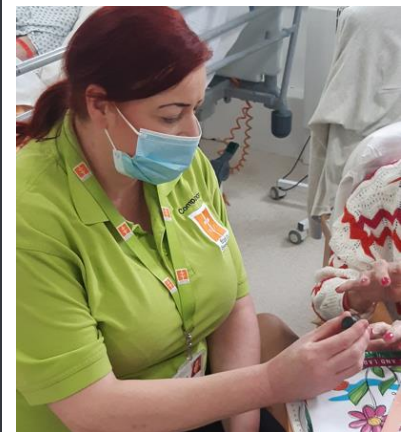
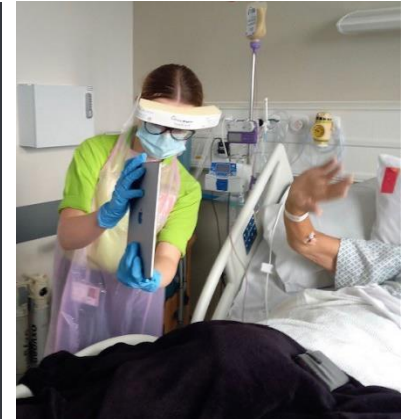


“I want to say that I see this organisation not only helping people sick and dying, but it works as a lifeline to workers like me who were sinking fast but now have a purpose, something to hold on to”
- Volunteer Feedback -



ffrind i mi

*I have loved today's visit, interesting chats, felt helpful and that I made a difference. Its humbling, what a difference a volunteer can make.
(Sarah Prince, Volunteer)*



Volunteer Role Profiles

Listening and learning from feedback, the Health Board is now able to offer people the opportunity to volunteer through **20** dedicated role profiles. Volunteers engaged by the Health Board are able to undertake a number of roles both within the organisation and across the community. This array of profiles means that people can consider volunteering in those areas that interest them the most, where they feel they could best use their life skills or indeed, where they would like to gain experience if considering paid employment. Volunteer role profiles are constantly being developed. Below is a summary of our current role profiles.

Adverse Weather Drivers

Volunteers who transport essential staff to and from work and drive staff to patients' homes to provide care during extreme weather conditions.

Ffrind i Mi Befriender Volunteers (Hospital Based)

Hospital Befrienders provide a number of valuable support functions including visiting patients who may be lonely, supporting meaningful activities, connecting patients with family members through digital means, undertaking patient experience surveys, supporting patients to access the hospital gardens, supporting visiting and visitors, supporting mealtimes, raising queries with clinical staff and providing information to patients and families.



Case Study (Active Offer/Welsh Language)

"This was my first visit with 'I' whose first language is Welsh, and she was delighted that I spoke Welsh. She was very grateful for her care as she was only able to move a little. Spoke about her childhood and where she is from originally. Spoke about her child and her family circumstances. Very humorous and humble despite her circumstances, she is looking forward to going home." (Sylvia, Hospital Befriender)

The volunteer was actually visiting the patient's childhood home village the same weekend and intended to take pictures to share with her at her visit the following week.

Chaplaincy Faith Volunteers

Chaplaincy Faith Volunteers support the Chaplains at our larger hospitals predominantly by helping patients with their pastoral, spiritual and religious care. Patients can refer themselves, or be referred by families, churches, staff, or met when various wards are visited.



Telephone Befrienders

Telephone befrienders provide telephone calls to people in their own homes, care homes and supported living who may be lonely and socially isolated.

Ffrind i Mi Friendship Group

Run by Ffrind i Mi volunteers, a friendship group has been established in the Newport locality. This group provides an opportunity for people who are lonely to meet with others, engage in meaningful activity and enjoy stimulating conversation.

The group has spent days out together, either going on trips or meeting up for meals. Since re-establishing following Covid the numbers attending are continuing to grow.



**Newport & Caerleon
Friendship Club**

Every Wednesday

Westgate Court
Lodge Road Caerleon NP18 1NB

2:00pm - 4:00pm (no charge)



Come along for a chat, meet new
Friends and have a cuppa.
Everyone Welcome!

For more information contact:
01495 768645 or
ABB.ffrindimi@wales.nhs.uk

Welcomers (YYF & NHH)

The Welcomer Volunteers play a pivotal role in making patients and visitors welcome when they enter hospitals, directing them to the department or service they require. Welcomers are either directly engaged by the Health Board, League of Friends or are provided through our commissioned contract with Age Cymru.



Community Befrienders

Community Befrienders visit people in their own homes, in care homes or in supported living premises. They provide several valuable support functions including visiting people who may live alone or are lonely, supporting meaningful activities, connecting people with family members through digital means, supporting people to access the wider community, dog walking etc. Community support also includes telephone befriending or accompanying people to friendship clubs.

End of Life Companions

The End-of Life Companion Volunteers undertake additional psychological support training which enables them to provide emotional and practical support. This includes companionship, informal advocacy, and signposting to other relevant services for those at risk of dying alone. Social isolation, often felt by the patient, their family and friends can be alleviated by a Companion Volunteer. Companions can also support the family, allowing them to take a break.

End-of-Life Companions provide patients and families with an opportunity to share their stories, worries and concerns by listening and comforting them at this very difficult and personal time.



Case Study: End of Life Care

The End of Life (EoL) Companion volunteer service at ABUHB commenced at the very start of the pandemic, March 2020. Companions were recruited and trained so they were ready to support any patient that was at the end of their life and at risk of dying alone. End of Life Companions have supported patients both as befrienders and provided support to patients who are in the last days of their lives. Late last year, the Team had a request for the EoL Companions to support a family in providing some additional company for their relative. The family members were exhausted. They had been sitting with their relative 24-hours a day and they needed some rest. However, they did not want their relative to be alone.

The EoL Clinical Skills Trainer met with the family to explain the Companion role. She then arranged for 3 Companions to visit the following day so that the family could have some much-needed rest. The Clinical Skills Trainer also met with the ward staff so that they were aware of the support that had been put in place.

The Companions know they may be contacted at short notice and were very pleased that they could support both the patient and the relatives. It was during one of the Companion visits that the patient peacefully died and importantly they were not alone which was a comfort to both the patient and their relatives.

Therapy Dogs

During 2023 the Therapy Dog Service continued to make a strong recovery from a very low base after nearly 2.5 years away due to the pandemic. Considerable effort goes into recruiting and retaining each Therapy Dog Team (owner and dog) as they are a rare and valuable resource for the Health Board. 12 new teams joined the service during the year, with 20 total active at year end.

The team may be small, but it makes a broad and deep impact with regular visits to hospitals including the Grange University (including Critical Care), Royal Gwent, Nevill Hall, St Woolos, County, Ystrad Fawr, Tri Chwm and St Cadoc's.

Therapy dog visits significantly benefit patients but also lift staff morale. Demand for ad hoc Wellbeing Visits for staff increased during the year with incredible feedback. For more information on Therapy Dog Volunteers, please contact Rhian Lewis. rhian.lewis2@wales.nhs.uk

Case Study: Therapy Dogs

"One child had been having tantrums all day and was not taking her medication or drinks; I made a deal that for every 5 sips she drank she could have a photo with Tikki – it worked, and everyone was so impressed!"

On several occasions staff on the children's ward have requested emergency therapy dog visits to support a child or young person in distress. The photo shows Tikki bringing Christmas joy on the Children's Ward.



Therapy dog volunteer Stephen and Finn with Pharmacy staff



Tikki

Staff Feedback

"It made me feel at peace I forgot about the stresses of the day."

"The visit was talked about all week."

"The best day of work ever, why isn't this available in EVERY workplace? It's SO beneficial."

Mass Vaccination Volunteers

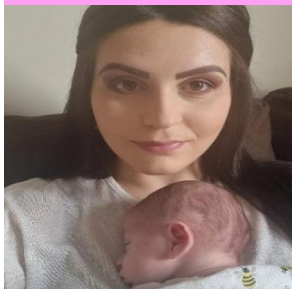
Covid Vaccination Volunteers are often the first point of contact in what can be a very busy environment. Volunteers support the teams, offering direct support to people, providing information and signposting.

Patient Experience Survey Volunteers

As part of the wider Patient Related Outcome Measures (PROMS), these Volunteers support patients to complete online patient experience questionnaires (through i-Pads) in outpatient clinics.

BABI Volunteers

In 2023, maternity services have been lucky enough to be supported by four volunteers as part of a wider equity, diversity and inclusion project within maternity. Four volunteers who speak English as an additional language, and who have recently had a baby within ABUHB, come from Romania, Russia, Poland and Afghanistan. Although individual aspects of the volunteers' roles vary, collectively they meet with women who do not speak English to direct to further NHS resources, for emotional support and friendship, represent the voices of their local communities within BABI (the ABUHB maternity family engagement group), provide a welcome/meet and greet within antenatal clinics, have established a breast feeding support group, have established a Hungarian mothers online forum, and assist maternity services with reviewing patient information, posters and surveys for appropriateness and culturally respectful language and terminology.



Feedback from the volunteers include feeling that they have made friends, felt a sense of value and contribution to ABUHB maternity and communities, personal development and learning and stimulating new experiences.

A vertical poster in Romanian. At the top is a heart with the Romanian flag colors (blue, yellow, red). Below it is a blue banner with white text: "Suport pentru viitoarele mamici". Underneath is a yellow banner with a question mark icon and text: "Esti insarcinata si ai nevoie de ajutor pentru a accesa serviciile si resursele de maternitate in limba romana?". To the right is a portrait of a woman. Below that is a red speech bubble with white text: "Numele meu este Mihaela Boulean, sunt voluntar pentru serviciile de maternitate ale ABUHB si iti pot oferi sprijin logistic dar si emotional in limba romana ,gratuit pe toata durata sarcinii tale.". To the left is an illustration of a pregnant woman in a pink dress. A white speech bubble next to her says: "Sunt aici ca te ajut oricand ai nevoie!". At the bottom right is a red envelope icon and text: "Ma poti contacta la adresa de e-mail mihaela.maternityvolunteer@gmail.com".

Dementia Companions

Dementia Companions undertake additional dementia training and spend quality time with patients in the ward or agreed areas supporting them in meaningful activity. This may include examples such as: walking, reading, chatting, singing, games and other activities. They are skilled to use the meaningful activity resources and through this, support people to be engaged within their environment, providing meaningful interaction to both orientate and minimise distress.



Case Study

Frieda has late stage dementia and so was not really able to communicate.

After I had spoken to her for several minutes without any obvious response, I decided to try playing some quiet music to her on the i-Pad that I had brought along for the purpose. That had a dramatic effect. She opened her eyes and took the i-Pad from me so that she could concentrate on the music. When the piece that I had selected came to an end, I tried something else that I thought she would like. However, after a few minutes, I gathered from her facial expressions that this selection was not being well received. I consequently stopped that and tried instead the beginning of Richard Burton's reading of Under Milk Wood.

Fortunately, that choice seemed to be to her taste because she listened to it for about 30 minutes before drifting off to sleep. As I was packing up to leave, she woke again, took my hand and kissed it. I could see that she was mouthing 'Thank you' even though no sound came out" (Barry – End of Life Volunteer)

Cancer Services Volunteers



With support and coordination from the Patient Experience and Involvement Team who deliver the core volunteer training, the cancer service have delivered cancer specific training to **20 cancer volunteers**. They have learned about the effects of cancer, its impact on people, communication skills and self-care, and will be offered ongoing supervision. Two volunteer role profiles have gone live in 2023:

1: Cancer Café Support Volunteer

Supported by a volunteer, this is a group which offers a friendly and relaxed opportunity for anyone with a cancer experience - patient, carer/ family to meet and share experiences with others who truly understand. Hosted in 3 boroughs, Caerphilly, Blaenau Gwent and Newport with Monmouthshire and Torfaen being launched January 2024.

An attendee at a cancer café said: *'Finding out truths from othersand how we feel about dealing with cancer on a daily weekly basis, was invaluable'*.



2: Meet and Greet in Cancer Departments

Volunteers help make patients and visitors to cancer clinics and departments feel welcome, providing peer support, befriending and a listening ear. Launched – Llanwenarth Suite (endoscopy) and plans to start in the Haematology day unit and the breast centre early in 2024.

3: Gynaecology Support Group

In addition to the above, in January 2024 we hope to launch our first gynaecology support group via What's App and the Cancer Telephone Befriending referral scheme

Hear in Your Community Volunteers

Hear in Your Community Volunteers support people with hearing loss in the community by running hearing aid maintenance clinics. They work alongside audiology and other sensory services where patients have hearing and other sensory losses.

The restrictions of Covid saw the closure of the community clinics and since then the vast majority of our audiology volunteers decided not to return. However, we were finally able to reopen our monthly Volunteer Community Clinic in Risca Library in September 2023; the volunteers provide a valuable service in the local community, carrying out basic hearing aid maintenance and repairs and offering advice and peer support to patients. This is such a useful service, especially for those who struggle to access the main hospital sites on a regular basis.

We hope to reopen a second community clinic soon, potentially in Caerphilly Library, there is one volunteer currently active at YYF that lipreads and the process of recruiting and training new volunteers in audiology is ongoing.



Starting From September 2023

HELP WITH NHS HEARING-AIDS

Do you wear an NHS hearing aid?
Drop into our volunteer hearing aid clinics

- New ear mould tubing
- Cleaning & using advice
- Information on hearing loss

Risca Library

Risca Palace, 75 Tredgar St, Risca. NP11 6BW
4th Wednesday of every month 2.00 - 4.00pm

For more information please contact: 0300 303 5651
Text: 07814 610 009 Email: ABB.GwentRGHAud@wales.nhs.uk
Website: Gwenthearing.co.uk



Bundd Iechyd Prifysgol
Aneurin Bevan
University Health Board



Expert by Experience – Stroke Peer Support Volunteers

In the Community Neurological Rehabilitation service, we have been working with people with lived experience of stroke and brain injury to develop peer partner roles and encourage people living with stroke and brain injury to support each other. This has led to the development of some self-supporting groups in our community including a group who have an interest in Volunteering to provide support to others who have experienced a stroke.

Members of this group have now trained as ABUHB Volunteers through the Volunteer service and three people have been regularly volunteering by reaching out to the Stroke Ward in YYF and County Hospital with others hoping to complete the training in 2024. At a recent meeting of the peer partners several more people expressed interest in becoming volunteers.

The volunteer stroke survivors have been in-reaching to the new consolidated Stroke Ward in YYF and have reported some very good interactions with people currently staying on the ward for stroke rehabilitation. These volunteers also support some of the groups we run supporting people living with Stroke and Brain injury in our community and provide a valuable link between NHS services and local community groups including those supported by the Stroke Association.



Experts by Experience – The Alcohol Care Team (ACT)

This was a new volunteers role introduced in 2023.

Following the success of an ACT group, discussion took place with the Patient Experience and Involvement Team to commence a volunteer led group.

To date one volunteer has been recruited and is actively attending GUH to encourage patients to attend the group for further support. The group will commence once further volunteers are recruited.

Expert by Experience – Mental Health

The Expert by Experience Volunteers co-facilitate groups for service users accessing secondary mental health services. As an expert patient, a key part of the role is sharing one's own lived experience of mental health difficulties to inspire hope in others and belief that recovery is possible. The role includes the delivery of group material to enhance learning and skill development.

Case Study

Coleg Gwent Independent Living Programme Volunteer Placement

The Coleg Gwent Independent Living Programme course provides the opportunity for those with **Additional Learning Needs** (ALN) to further their skills towards an independent life in the community. It is designed to help build confidence in everyday living and to prepare learners for employment. The Patient Experience and Involvement Team have been working with Coleg Gwent, supporting two students as volunteers at Monnow Vale Hospital.

Our Project Co-ordinator said of the volunteers:

'A' is a quiet young lady for the first few sessions just sat quietly only answering when we spoke to her, but I was pleased to see the last time on the ward they initiated a conversation with one of the gentlemen we had engaged with the week before whilst I was befriending another gentleman. This was a really good achievement for 'A' and I felt she has made good progress with volunteering and will, after a few more supported sessions, be capable of visiting without our support. 'A' was tasked with taking the lead for the session e.g. introducing themselves, explaining about the volunteering and starting conversations which, she did very well".

'P' had a lovely chat about Cruising /holidays with a gentleman in the dayroom back on one of the sessions. This is something 'P' loves so he engaged really well. 'P' entered the bay and engaged in the conversations with patients introducing himself and finding out about them and did really well. I have set him the task so that next week he knows he will be taking the lead when we go for the session. One lady remembered him from the very first session he did on the ward so that was lovely to hear. A few of the ladies said they hoped to see him again next week.

Comments from Janelle Worrell, Coleg Gwent:

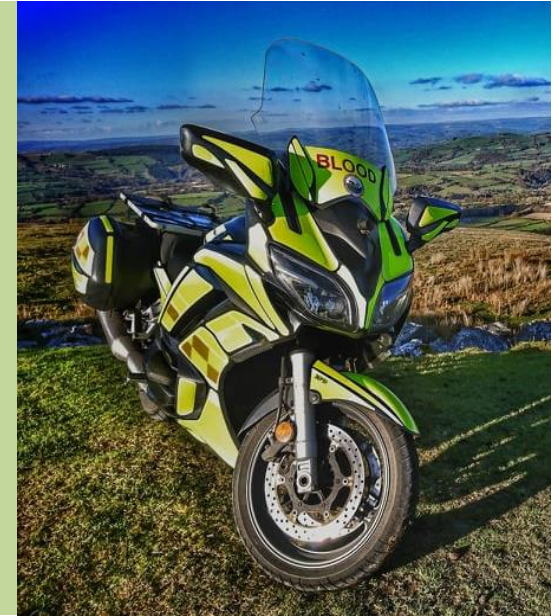
"What a great first term our learners have had with you all. A huge thank you from me and the team at ILS at Coleg Gwent for your continued support. Our wonderful learners have enjoyed the varied opportunities with you all and have gained such a valuable insight into the world of work. It's lovely to read such lovely comments and to see progress, thank you for all your patience and hard work."

Charities and Partners Supporting the Health Board

Blood Bikes

Blood Bikes Wales is a 100% **volunteer charity** based in Wales, providing a free courier service to the NHS, delivering blood samples, plasma, donated human milk, documents and other items all over Wales.

The service is free of charge and operates on weekdays for some health board areas and across Wales from 7pm on a Friday evening until Midnight on Monday morning including bank holidays.



League of Friends NHH

The Coffee Shop at NHH is open every weekday. New friendships are formed, and you have the satisfaction of knowing that you are helping others.

The funds generated are used to purchase much needed equipment for the Hospital, which since formation in today's money is over £4 million. This year we have dominated just short of £60,000 to Nevill Hall Hospital for equipment.

However, key to it all is the fact that we not only dispense to our customers one of the best and cheapest cuppas in Abergavenny but also an invaluable friendly word and a smile.



Charities and Partners Supporting the Health Board

League of Friends (LoF) Ysbyty Aneurin Bevan (YAB)

The LoF at YAB used the funds generated to purchase much needed equipment for the Hospital. They provide a very valuable service to our patients and staff. Just some of the photos of our presentations during 2023:

- Easter eggs for every patient in the hospital and a box of chocolates for every department in the hospital.
- Chocolate selection box for every patient in the hospital and a tin of sweets for every department for them to have a little thank you for their caring in our hospital, a personal Christmas card for everyone.
- The equipment LoF purchased for the staff to use in a project to help train patients to help themselves when they go home, and make a speedier recovery, items like perching chairs, walking frames trays, long pick up tools, long shoehorns, back scrubbers/sponges and leg lifts.



British Red Cross – Emergency Department (ED): Wellbeing and Home Safe Service – Grange University Hospital

The service aims to complement the role of hospital staff by assessing and attending to patients' non-clinical needs. The primary objectives are to:

- Support the patient experience whilst in ED;
- Improve patient flow through the ED.
- Facilitate safe and timely resettlement of the patient in their own home;
- Connect patients into community-based services to support their well-being and reduce their risk of readmission.

A team of staff and volunteers will have a presence within the ED department itself and seek to enhance the patient experience by:

Supporting patients and their families while they are waiting for, during or between treatments and examinations by providing emotional and practical support to help reduce anxiety and promote their mental well-being.

Emotional support such as sitting with someone who is confused, distressed, or disorientated (providing supervision to minimize risk); talking to someone about their concerns; being a friendly face or a supportive listening ear.

Practical support such as finding a resource to address someone's immediate physical needs such as a blanket or providing refreshments, i.e. a cup of tea, a sandwich or a hot meal.



Sparkle Volunteers – Serennu, Nevill Hall and Caerphilly Children’s Centre

The guiding principle for the Sparkle Appeal is to ensure that children and young people with disabilities and/or developmental difficulties and their families are fully supported and able to participate in valued childhood experiences, with access to the same range of opportunities, life experiences, activities and community services as any other child and their family. Sparkle is always looking for regular and occasional volunteers to extend our reach and impact. There are a wide range of opportunities available to you in areas such as fundraising, supporting our leisure activities and more. Some of the volunteer roles regularly available at Sparkle are listed below:

- **Fundraising Volunteer** – Support the Fundraising Team with a range of options that help to raise vital funds for Sparkle. It’s an opportunity to use your skills and local knowledge to engage further support for our cause.
- **Swim Volunteer** – Offer assistance to children/young people with disabilities and/or developmental difficulties from within the swimming pool, under the supervision of a swimming teacher. The role may also entail offering support to the swimming teacher in a poolside capacity, by observing the children/young people within the lesson, and also assisting with administration duties.
- **Sports and Activities Volunteer** – Assist with sport & activity sessions for children & young people with a disability and/or developmental difficulty providing them with the opportunity to take part in activities, meet new people and develop skills.
- **Café Volunteer** – Support our Café Supervisor to serve drinks and snacks at our Serennu Children’s Centre café.
- **Gardening Volunteers** – Seasonal volunteering to help maintain the garden in our outdoor play area at Serennu Children’s Centre. This is an ideal volunteering opportunity for small corporate teams.





Archie's Journey

"I don't know what we would do without the Sparkle club. Archie has the best time when he comes to Sparkle, he really does. The Sparkle team really know him, so they understand his little quirks and we just trust them."

Autism is just something Archie lives with and he's the most beautiful boy for it.

Sparkle helps him embrace his individuality and makes sure he has the most opportunities he possibly can".

(Janet, Archie's Mother)

Sparkle ensures Gwent children and young people with disabilities and/or development difficulties, along with their families are fully supported and able to participate in valued childhood experiences, with access to the same range of opportunities, life experiences, activities and community services as any other child and their family.

**Friends of Llanfrechfa
Grange Walled Garden
Registered Charity No.
1176172**

<https://llanfrechfawalledgarden.wordpress.com>

<https://www.facebook.com/LlanfrechfaGrangeWalledGarden>



Volunteers are committed to redeveloping and maintaining the **Victorian Walled Garden at Llanfrechfa Grange** as a welcoming green space for all to enjoy. There are volunteers in the garden every day, with each giving whatever time they can, from a few hours to a few days each week. Others come in to support social events and working parties held throughout the year.

Activities range from **traditional gardening** task to landscape building work; maintenance of our greenhouse, tunnel, and little stone 'cottage', to **craft work**, baking or making preserves and building scarecrows. Volunteers run Christmas wreath making workshops and are looking for others workshop subjects to run in future, and for people able to lead them!

This friendly **community of volunteers** have a mixed bag of skills, knowledge, abilities and interests, and are always pleased to welcome new people. The garden is open when there are volunteers on site, with core hours between 10am-1:30pm. While we are open for longer on most days, we would love to extend these hours further.

As an independent **Registered Charity**, they are separate from, but feel very much a part of, the NHS community, and enjoying excellent relationships with numerous departments and staff members.



Robins Volunteer Service (Age Cymru Gwent)

Age Cymru Gwent provide a team of trained, managed, and supported volunteers to work specifically with patients and staff to deliver a ward service on agreed wards. The support provided enhances the experience of patients, alleviate feelings of loneliness and isolation and provide the opportunity for them to participate in social activities.

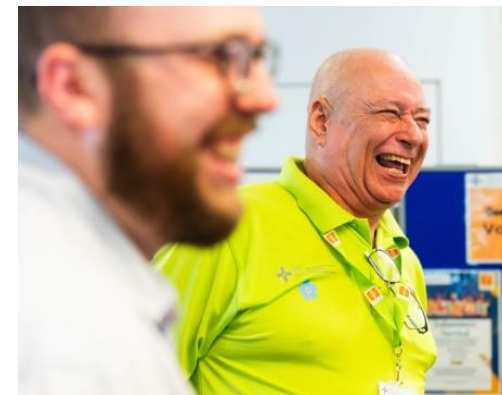
Age Cymru Gwent's **Robins Volunteer Service** has operated in partnership with the Health Board since its inception 15 years ago. The Robins Service aims to enhance the patient experience by contributing to their wellbeing, dignity, and independence, and focusing on their individual needs during an acute episode in their lives.

The service has also successfully built the skills and capacity of the volunteers, equipping them to be better prepared for the labour market. This is achieved by offering **accredited and non-accredited training**, work experience in a hospital setting, the opportunity to carry out varying roles.

The volunteers also benefit from social interaction with **other volunteers**, patients, families, and staff to increase their confidence.

Volunteer to Career

Helpforce UK is working with a number of Trusts in England to develop 'Volunteer to Career' initiatives, aimed at tackling the current health and social care workforce challenges. Aneurin Bevan University Health Board were **the only Health Board** at the time in Wales to be working with **Helpforce** to test and develop the model in Wales. Many of the ABUHB volunteers had never worked in a healthcare setting previously and in doing so, some have now expressed a wish to gain paid employment within ABUHB. With the current workforce challenges, it is timely to progress at pace this model.



Within the Health Board, a pathway for volunteers to NHS careers has been developed. This is a streamlined process that provides volunteers with the right support to seek employment within the NHS. Volunteer to Career opportunities could be introduced into all areas of the Health Board, whether this be direct patient care on wards, in the community, IT, facilities, administration etc. In order to test the concept, our current model focusses on **career opportunities** within a ward setting, with one focus for volunteers to gain employment as Band 2 Wellbeing Assistants.

This position is **open to all existing Volunteers** and will particularly support volunteers who may not hold or are unable to gain a formal care qualification (or who do not wish to pursue these) but have a passion for patient wellbeing and are seeking paid employment. For those new to the organisation, the expectation is that people applying for a career through this route would volunteer for a minimum of **30 hours**, gaining experience either in their preferred area or on other areas on a rotational basis to get a sense of where they may like to work. During their volunteering period, they will be assigned a 'mentor' and access relevant training. Following the 30-hour volunteer probationary period, they would progress through the 'volunteer to career pathway'. Opportunities to gain formal health and care qualifications will be in line with current career progression qualification pathways.

Working closely with Workforce and Organisational Development Leads, this model has been a great success and a number of volunteers have gained **paid employment**.

Volunteer to Career "Got the Job!"

RS- Successful in securing Wellbeing Assistant Role at RGH

TG- Successful in securing a paid position outside of NHS. Volunteering gave him the confidence to apply, and he still volunteers today.

CS- "It's a good opportunity as I can accommodate my daughters school hours and it's only a couple of hours each morning so the holidays will be ok. Plus, if I gain 450 hours with Social Care Wales, I can do a social work course with OU. I've found a health and social care course on there and the points can go towards that course." Got the job!

BT - Secured paid employment on ABUHB Bank

MG- Secured HCSW role in Mental Health and now considering Registered Nurse Training

LH- Secured full time employment in a Nursing Home



"GAVO has been working with Aneurin Bevan University Health Board closely throughout 2023. Kathryn has been informing us of new volunteering opportunities across the health board which supports patients' wellbeing and makes their time in hospital a less stressful experience. Working with ABUHB has highlighted a wide range of innovative opportunities for community members to engage with and we have been able to introduce many to the Ffrind i Mi team to begin their volunteering journey.

*We are particularly excited by the **Volunteer to Career** programme as it offers a path to employment which many other organisations cannot provide. We look forward to continuing to develop the relationship between GAVO and ABUHB in 2024."*

(Bethan Warrington GAV, Monmouthshire).



Working in Partnership

The **Patient Experience and Involvement Team** work very closely with Third Sector and Voluntary Organisations.

The Health Board are very grateful for the support these organisations offer our team, patients, family and staff.

Our partners include:





ffrind i mi
friend of mine



Partnership Feedback

"The partnership between TVA and Ffrind i Mi is crucial in facilitating the support and volunteering efforts for individuals seeking companionship for various reasons. We highly recommend these organisations due to their unwavering commitment and well-established policies that effectively support and nurture volunteers in their befriending roles".

(Katie Davies TVA)

Volunteer Promotional Events

Over the past 12 months, the Patient Experience and Involvement Team and several of our volunteers have attended numerous events across the geographical area to promote our **volunteering** and **Volunteer to Career** opportunities. These have included:



Month (2023)	Event
January	Blaenau Gwent Learning Zone Fayre
February	50+Forum Warm Space Hub Torfaen; Presented to WSMP ESOL and Employment Forum
March	Abergavenny Job's Fayre; TVA Volunteer Event
April	Gwent Jobs Fair and Refugee Support Event, Cwmbran Stadium; One Beat Event, GAVO Blackwood
May	St Woolos Hospital; Royal Gwent Hospital; Ysbyty Aneurin Bevan; Ysbyty Ystrad Fawr; Dementia Conference
June	New Volunteer Trade Fayre, Newport; Careers Fayre, Ysgol Gwynllyw, Trevethin
July	Sainsbury's Supermarket - Volunteer Promotion; The Tipping Point: Where next for health and care? Bevan Commission Conference
August	Torfaen Jobs Fayre; ASDA Cwmbran- Volunteer Promotion
September	Torfaen Leisure Zone Freshers Fayre; Abergavenny Jobs Fayre; Usk Freshers Fayre; Newport Freshers Fayre; Morrisons Abergavenny - Volunteer Promotion; Sainsburys Supermarket - Volunteer Promotion; Assembly Presentation - Ysgol Gyfun Gwent
October	Newport ESOL Freshers Fayre; Llanwern School Pathways and Network Event; ASDA Supermarket Brynmawr - Volunteer Promotion; ASDA Supermarket Pill Newport- Volunteer Promotion; Presented VtC to Helpforce Cymru
November	Let's Connect Jobs Fayre, Newport Market; Coleg Gwent Campus; Blaenau Gwent Learning Zone; Cwmbran Learning Zone; Crosskeys Learning Zone; Idris Davies School Health and Social Careers Event
December	TVA Forum, Cwmbran

Key Volunteer Highlights During 2023

Our volunteers have provided over 8183 unpaid volunteer hours.	Our Welcomer volunteers at NHH and YYF have supported over 3651 people since August 2023.	We have 20 spoken languages by 34 volunteers, including 9 Welsh Speaking Volunteers and 1 BSL Volunteer.	We have 27 Telephone Befrienders supporting 32 patients, mostly on a weekly basis.
We recruited 92 new volunteers in 2023 .	We have launched our Volunteer to Career Programme and are the first Health Board in Wales to do so.	7 volunteers have gained paid employment through our volunteer to career programme.	Listening to patients, staff and volunteers, we have created 7 new volunteer role profiles during 2023.
We have supported 5 people to become experts by experience. (Mental Health, Gastroenterology and Stroke).	We have provided 49 training sessions for volunteers.	We have provided volunteer and work experience opportunities for 3 people with additional needs.	We held an annual volunteer celebration event in June 2023.
We have attended 37 volunteer promotion events across the geographical area.	We now have 130 Hospital Befrienders and End of Life Companions. With our team supporting 321 volunteer inductions during 2023.	We have worked closely with Therapy teams to create Stroke Peer Support Volunteers.	We have worked closely with Cancer Services and created new volunteer roles including Befrienders, Welcomers and Peer Support.
We have worked closely with the Alcohol Care Team and are creating a volunteer led dedicated alcohol support group	Through our partnership with Cardiff University, over 75 pharmacy students will have gained patient experience volunteering opportunities this academic year.	52 volunteers have supported the Ukraine Resettlement and Mass Vaccination Centres.	We have delivered 9 Personal Wellbeing Sessions with over 51 volunteers attending
We have presented our Volunteering model at local and national events.	Helpforce Cymru and The Bevan Commission have published a national case study on our Volunteer to Career model.	Volunteer Long Service 26 completed 50 hours . 18 completed 100 hours . 12 completed 200 hours . 7 completed 300 hours . 4 completed 400 hours . 1 completed 500 hours . 1 completed 700 hours . 1 completed 800 hours .	In 2023, the Volunteer Service has won a Volunteer Award and have been finalists in 3 other awards.



Going Forward

Volunteering across the Health Board is constantly evolving. The more we understand what matters to people, the more bespoke volunteering opportunities are being developed. As well as building on our existing volunteering model, in 2024, we aim to:

- Develop **volunteering hubs** in each hospital site.
- Explore the potential to roll out our **End-of-Life Companions** model across community settings, including people's own homes and care homes.
- Train the End-of-Life Companions to have a more active role in the **bereavement** pathway, and particularly the keeping in touch offer.
- Through the NHS Charities Together funding, work with communities to grow the **Dementia Companion** model both in hospital and in the community.
- Recruit more volunteers and extend **work experience** opportunities from **seldom heard** groups and those with protected characteristics.
- Recruit more **Welsh** speaking volunteers and others whose first language is not English.
- Evaluate and grow the Cancer, Stroke and Alcohol **Peer Support** Volunteering model and explore other specialties to develop volunteering initiatives.

Going Forward (continued)



Engage more volunteers in **'what matters'** conversations with patients to inform the wider patient experience feedback systems.

Working closely with the Workforce and Organisational Development, Staff Side and Clinical Teams, grow our **Volunteer to Career model**.

Re-establish links with schools and colleges to re-invigorate **intergenerational practice** across the area.

Look at a new **software programme** to capture our volunteer data and enable rostering.

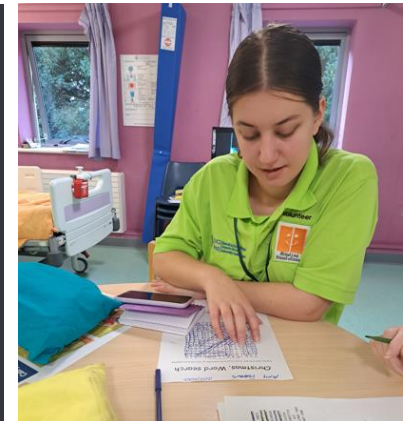
Undertake **Cultural Competence Accreditation** in the Volunteering and wider Patient Experience and Involvement Team.

Offer **sensory awareness** and BSL awareness courses for volunteers.

Increase **psychological support** sessions as more volunteers are engaged.

Develop dedicated **Volunteering webpage**.

Develop the Assertive Technology and **Digital Buddies** programme for volunteers



And Finally...

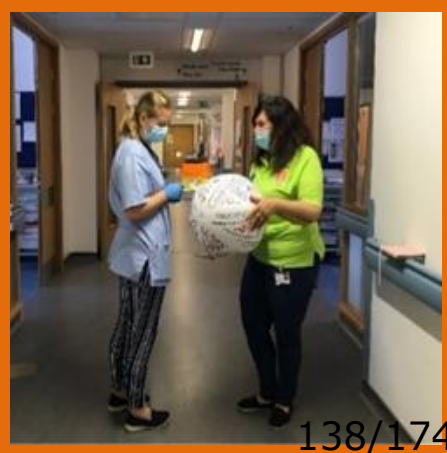
For more information on volunteering, please email the Patient Experience and Involvement (Volunteering) Team on abb.ffrindimi@wales.nhs.uk

We hope that you have enjoyed reading this Volunteering Annual Report that highlights the valuable contribution that volunteers make to our patients, families, staff, organisation and communities. As our volunteer numbers and roles expand, training and support for volunteers becomes more important. We are committed to supporting volunteers to undertake their roles safely and effectively and are very grateful to our wider workforce for the support they offer to those volunteers working across so many different areas.

Finally, to our wonderful volunteers, **THANK YOU**. This report wishes to recognise the vast support our health services receive from volunteers and our volunteer partners across the Aneurin Bevan University Health Board geographical area. We hope that it both reflects the commitment and kindness you bring to people, reflects our thanks and celebrates the contribution you make each and every day.



"It has been an absolute pleasure and honour to be a part of this volunteering service. As soon as I saw the advert, I knew it was for me and I will truly treasure each patient I sat with, either for a chat or to hold their hand as they neared end of life. To be involved during the covid pandemic was challenging but also so rewarding and I am so grateful for the opportunity. It is an absolute privilege to have been part of such an amazing team of hard working, committed and giving staff and volunteers and I really do wish you all well, and all the best for the future." (Natalie Johnson, Volunteer)



DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Director of Workforce & OD Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Director of Workforce & Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Workforce & OD Senior Team

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

This report provides the People and Culture Committee with an overview of a range of activities of the Workforce & OD Team, key issues locally, regionally and in NHS Wales.

The People and Culture Committee is asked to note this report for information.

Cefndir / Background

This report covers the period since the last Committee meeting on 15 October 2024 and includes a specific progress update on:

- Employee Relations, including:
 - Employee Relations Activity
 - Disciplinarys
 - Respect and Resolution (Grievances)
 - Suspension/Exclusion from the Workplace
 - Capability Management
 - Flexible Working Applications
- Employment Tribunals

- Organisational Change Processes
 - TUPE
 - Organisational Change
- Agile Working / Workshop
- Employee Experience Strategy
- Implementation of the Collective Agreement (2022 - 2024)

Asesiad / Assessment

This report demonstrates the Health Board’s current position in relation to a number of key items and areas of work.

EMPLOYEE RELATIONS

Employee Relations Activity

The table below outlines the employee relations activity undertaken or initiated for the period October – December 2024.

<i>Disciplinary Investigations</i>	<i>Fast Tracks</i>	<i>Disciplinary Appeals</i>	<i>Informal Resolution</i>	<i>Formal Respect & Resolution</i>	<i>Respect & Resolution Appeals</i>	<i>Capability</i>	<i>Raising Concerns</i>	<i>Sickness Meetings</i>	<i>Mutual Ill Health Termination</i>	<i>Final Formal Hearings</i>	<i>Extension to Sick Pay (ETSP)</i>	<i>Temporary Injury Benefit (TIA)</i>	<i>Employment Tribunal</i>
5	2	1	2	6	0	6	0	64	0	0	0	7	2

Disciplinary

During this period, there have been seven new disciplinary cases, with a combination of minor, serious and gross misconduct allegations.

The fast-track procedure was used in two cases (for minor misconduct). Fast track disciplinary is considered for cases that would not exceed a sanction of verbal or first written warning, and where the employee has admitted misconduct or where prima facie evidence exists. Fast tracks are completed quickly because they do not require a full investigation, and as a result, are less harmful to employees and those involved.

Avoidable employee harm continues to have a positive impact on the approach being taken to ensure that disciplinary action is appropriate and taken as a necessary or last resort. There has been reduction in disciplinary investigations compared to the last quarter from thirteen to five. Where appropriate, informal action is taken to resolve concerns locally and ensure that lessons are learnt with informal approaches being used.

Respect and Resolution (Grievance)

There has been a reduction in respect and resolution cases from eleven in the last quarter, to eight. Of the eight cases, six are being considered at the formal stage. Where appropriate, staff who raise a respect and resolution concern are encouraged

to consider informal action. This has resulted in two cases being resolved informally and avoiding the requirement for formal action.

Informal resolution involves coaching employees to adopt 'cuppa conversations' and by working together to find a resolution at facilitated discussions or mediation.

Respect and resolution investigations contribute to employee harm and rarely lead to further action being taken, including disciplinary, the outcomes are often 'resolution request not upheld.' The HR team actively promote alternative approaches to resolve concerns by ensuring that a robust assessment of facts is considered, before launching into investigation. If there is evidence to suggest that inappropriate behaviour, such as bullying or harassment has occurred, it may be more appropriate to use the disciplinary procedure.

Suspension/Exclusion from the workplace

Suspension from duty is a last resort and only occurs if there are serious risks associated with remaining in work. There are currently eleven employees suspended from duty. Six employees have been suspended for over four months. All suspensions are either linked to patient safety concerns or a criminal (police) investigation, which often elongates the period of suspension and can prevent us taking further employer action until the criminal process has concluded. Each employee is signposted to support services, with regular contact and suspension review meetings.

Capability Management

Six initial assessments in conjunction with the Capability Policy have commenced during this period. Historically, capability management has been low in the Health Board. Increased cases are demonstrative of improved initial assessments, and better, more person-centred decisions being made that support organisational and employees learning and development. Capability management is a supportive process that aims to identify training needs and focuses on setting clear, smart objectives for employees to improve performance.

Flexible Working

Flexible working requests continue to be monitored on ESR. Sixty-eight new requests were received in this period, of which thirty-nine were approved entirely. Twenty-three applications are pending decision, one has been rejected, and one is awaiting an outcome. The Workforce team contact Managers where a decision is outstanding to provide advice and request that a decision is communicated to the employee and ESR is updated.

EMPLOYMENT TRIBUNALS

Two new employment tribunal requests were received in this period. The Health Board continues to actively defend six employment tribunal claims.

ORGANISATIONAL CHANGE PROCESSES (OCP)

TUPE

Security staff previously employed by the 'OCS Security Group' (agency), transferred into the Health Board on 01 December 2024. 22 security staff who previously worked at Health Board sites via the agency are now directly employed by the Health Board, providing greater sustainability and a formal employment relationship.

The Health Board is also consulting on two further TUPE's;

- Transfer in of facilities support at Chepstow Community Hospital currently provided via a Private Finance Initiative (PFI), impacting on approximately 44 estates and facilities staff. The PFI arrangement is due to end in March 2025, with a planned TUPE date of 14 March 2025.
- Following the resignation of the GP partnership for the contract held at Brynmawr Medical Practice, a transfer has been agreed to take effect from 01 March 2025. The Health Board is collaborating closely with the staff at Brynmawr Medical Practice and the local community to ensure a smooth transition and maintain service access and provision.

Organisational Change

Six organisational change processes have commenced in this period relating to roster changes and structural reviews. This includes the consultation to relocate services and staff into the purpose built 19 Hills Health and Wellbeing Centre in Ringland. The Health Board will receive the handover of the building in January, with services including District Nursing, Health Visiting, School Nurses, Community Dental services and Park GP surgery occupying the site from mid-January.

During the reporting period, the Health Board successfully relocated a number of staff and services to Ty Gwent, Cwmbran. This change was enacted to support the maximisation of the Health Board Estates Strategy.

AGILE WORKING / WORKSHOP

Following formal consultation, staff moves to Ty Gwent from Mamhilad House and Caerleon House were undertaken during November and December 2024. Currently the Ty Gwent site is 85% occupied over the 3 floors with the Complex Care Team programmed to move from February 2025. The Executive Director of Workforce & OD visited the site on 16 January 2025 and undertook an informal walkabout.

There was a lot of positive feedback received during the visit:

- Staff welcoming being co-located with their teams who were previously based over multiple sites.
- Staff who were previously anxious working in Ty Gwent have been supported by their teams and seem to be settling in.
- Environment was great, open feelings and good décor. A number of staff reported they felt this reflected positively on the Health Board and that they felt looked after with these facilities.

- A number of services had received improved mobile IT equipment and access to Apps e.g. soft phone which had enabled them to be more agile.
- Good accessible online booking system for meeting spaces and agile working.
- Introduction of *Flex App* where site messages and information can be communicated and accessed.

The concerns raised, included:

- Car parking was problematic on busy days, this issue was foreseen with some mitigating actions in place. A proposal to increase car parking has been submitted and is currently awaiting a response.
- There were some initial teething problems in relation to additional fridges, divider screens, toilet flushes and delays with installing the vending machines – this is being resolved through the Ty Gwent Commissioning Group. A local mobile catering provider was now also visiting the site.
- Visitor access after 14:00 hours – this is being looked into with an IT pad and phone on entry and better navigation signs.
- Noise – given the open plan nature of the building there can be noise at times – A screen is being considered between the staff refreshment/breakout areas on each floor to reduce some noise. Screens were also being considered as well as promoting staff to use breakout rooms when required.

The Ty Gwent Commissioning Board continues to meet to take forward site issues and issues raised by staff will be ratified there. A process is being established where in the future staff can continue to raise concerns and support improvements to the environment.

The Agile Programme Plan will be updated following a workshop on 05 March 2025 where workstream leads and service leads are invited to offer their reflections on agile working practices and opportunities which will support the development and prioritisation of the 2025/26 Agile Programme action plan and align with the Estate Strategy/IT and service priorities.

EMPLOYEE EXPERIENCE STRATEGY

The Employee Experience Strategy continues to be developed incorporating existing initiatives and sources of workforce intelligence, including our Employee Experience Framework, People First, data from our internal survey as well as the All Wales Staff survey, the recently launched Speaking Up Safely process, our Compassionate Leadership Pledge, Avoidable Employee Harm Programme, and our broad Research & Development portfolio.

The purpose of the Strategy is to offer a guide to the many workstreams and initiatives currently active across Workforce and Organisational Development and to shape future work across IMTPs to ensure a consistent approach to work that needs to be undertaken and assessed over longer periods of time. The Strategy will be launched in the summer of 2025 in conjunction with the Employee Experience survey.

IMPLEMENTATION OF THE NON-PAY ELEMENTS OF THE 2022-24 COLLECTIVE AGREEMENT

We continue to implement the non-pay elements of the 2022-24 Collective Agreement Welsh Health Circular WHC (2024) 17 and have submitted the fourth and final progress return to the Welsh Partnership Forum (WPF), **Appendix 1**. As discussed at previous committees, the implementation plan has been developed in partnership, with actions prioritised at a Trade Union development session in September 2024.

Continuous Professional Development (CPD) was considered a priority action, and a dedicated partnership sub-group has been established to consider data analysis and improving opportunities for CPD, linked to service improvement for non-medical staff across the Health Board. There continues to be exploration of minimum CPD levels and a 36-hour working week on a national basis and we will continue to inform this review and discussion.

Positively, many aspects of the non-pay elements of the collective agreement are already aligned to the Health Board's People Plan and this will be a key focus when developing the next iteration of our People Plan (2025-2028).

The WPF will discuss the implementation of the Collective Agreement across NHS Wales at the next meeting in March 2025.

Argymhelliad / Recommendation

The People and Culture Committee is asked to note this report for information.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Boards assurance framework
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7. Staff and Resources 7.1 Workforce Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Workforce and Culture
Amcanion cydraddoldeb strategol Strategic Equality Objectives	Not Applicable

Strategic Equality Objectives 2020-24	
---	--

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	CPD - Continuous Professional Development PFI - Private Finance Initiative TUPE – Transfer of Undertakings (Protection of Employment) WPF - Welsh Partnership Forum
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Not Applicable
• Financial	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working	Not Applicable

<https://futuregenerations.wales/about-us/future-generations-act/>

Final Return: Non Pay Elements of the collective pay deal 2022/23 and 2023/24

Green = Complete; Amber = In progress / As agreed and prioritised in partnership

WHC Action	HB Lead	TU Lead	deadline	Delivered Y/N	If Yes - provide evidence	If No - Reasons off track?	If No - Plan to get back to Green	If No - Rate confidence on ability to get back to green by next month? (H/L - no medium)
REQUIRED ASSURANCE - Completion Report								
Review how Unsocial Hours Allowance is implemented to ensure fairness, industrial injuries are properly recognised, and that staff are not discriminated against in line with the Equalities Act 2010.	All		Jan-25	Y	As per previous response, we have agreed in partnership this action is complete with no further action required.			
Review the use of radiography on-call standby in out of hours arrangements to ensure that the frequency of on-call standby does not negatively impact an individual's work-life balance consistent with the twelve principles set out in Table 22, Annex 29 of the NHS Terms and Conditions of Service Handbook	Angela Palfrey	Jenny Shurmer	Jan-25	Y	As per previous response, we have agreed in partnership this action is complete with no further action required. Review completed and consistent with Annex 29.			
Confirm implementation of the all-Wales Occupational Health minimum service levels/KPIs (incorporating monitoring and support).	Helen Knight/ Elaine Lewis		Jan-25	Partially	<p>OH capacity continues to be the most significant challenge in delivering this action despite significant improvements made since the introduction of the Minimum Service Levels/KPIs. The service has experienced vacancies and unplanned absence of senior posts over recent weeks which has impacted the KPI's for this return, however this is considered a temporary reduction in performance as staff return to work and vacancies are recruited to.</p> <p>The OH action plan is attached detailing the actions being taken to fully implement and maintain the KPI's as outlined within the minimum standards. We have continued to work towards the consistent delivery of services aligned to the minimum service standards. However, these service standards and the commitment to work towards SEQOSH Accreditation by 2027/28 were agreed as part of a wider piece of work linked to the development of a fully funded business case by Welsh Government. As such, the ability of the organisation to progress and further improve is subject to this work progressing at pace.</p>	OH capacity	Action plan to increase capacity including insourcing and additional staffing. Regular demand and capacity reviews - next one planned for February 25.	

WHC Action	HB Lead	TU Lead	deadline	Delivered Y/N	If Yes - provide evidence	If No - Reasons off track?	If No - Plan to get back to Green	If No - Rate confidence on ability to get back to green by next month? (H/L - no medium)
EXPECTED ASSURANCE - Outcomes report - January 2025								
<p>In implementing and monitoring the following:</p> <ul style="list-style-type: none"> Welsh health circular (2024) 012 Nursing Preceptorship Health Education and Improvement Wales Nursing for the Future Strategic Workforce Plan Health Education and Improvement Wales Nurse Retention Plan Birthrate Plus Report and other professional group retention strategies - <p>Identify recommendations which may be transferrable across all Agenda for Change groups with the aim of improving the ability for individual progression in their professional field/staff group</p>	All		Jan-25		<p>As per our previous returns, we have aligned the various strategies and plans with existing ABUHB strategies and work programmes to avoid duplication and support prioritisation. This includes:</p> <ul style="list-style-type: none"> ABUHB Strategic Nursing Workforce Plan ABUHB People Plan and Local Retention Group ABUHB Preceptorship and RCS Implementation Plan ABUHB Variable Pay Programme Board to include the WHC (WHC/2024/031) ABUHB Strategic Nursing Workforce and Quality Group Birth Rate Plus Review/Recruitment - agreement to prudently recruit above current vacancies <p>All of the above have reporting structures to deliver the plans which correlate and support the majority of the actions required.</p> <p>The monitoring and reporting on the WHC (2024) 012 - Nursing Preceptorship is through the Strategic Nursing Workforce and Quality Group with a new policy awaiting ratification. We are supporting Practice Educators to be trained in Restorative Clinical Supervision (RCS) with the RCS implementation plan on track.</p> <p>We have discussed the various documents associated with this action in partnership and recognised that there are multiple actions contained within each of the strategies, reports and circulars. Therefore we have agreed (in partnership) to prioritise three elements to maximise achievability:</p> <ol style="list-style-type: none"> CPD improvements and accessibility Local improvements relevant to specific staff group and department Continued delivery of our ABUHB Strategic Nursing Workforce Plan which compliments the HEIW nursing plans. 	The actions contained in the various strategies and reports have been prioritised in partnership, recognising the capacity required for full implementation.	Our progress and actions have been agreed in partnership and these will continue for the foreseeable based on the breadth of actions requiring implementation. Specific themes and actions will also be included in the next iteration of the ABUHB People Plan (due for review 2025/26).	
<p>Implement appropriate to local circumstances the Health Education and Improvement Wales 'Staff Health and Wellbeing best practice guide' (incorporating nutrition and rest aspects of the staff welfare project).</p>	Peter Brown / Daniel Madge / Helen Knight	Louise Wright	Jan-25		<p>We have created an action plan with specific focus on the eight components of the HEIW Making Work Work best practice guide (Making Work Work; Workforce Design; Relationships: Strategy integration; Manager & Leader; Measuring Impact; Resources) and the relevant aspects of the aspects of the staff welfare project (hydration; Nutrition; Rest).</p> <p>This has been developed in partnership with Trade Unions and details areas of progress such as development of local Speaking up Safely processes, our ongoing commitment to leadership development offers across grades and professions, and creating environments for teams to succeed. The action plan contains further detail required to keep embedding best practice listed.</p> <p>We have agreed in partnership that given the broad range of actions contained within the best practice guide, we have prioritised accordingly (as above).</p>	The actions contained in the various strategies and reports have been prioritised in partnership, recognising the capacity required for full implementation.	Our progress and actions have been agreed in partnership and these will continue for the foreseeable based on the breadth of actions requiring implementation. Specific themes and actions will also be included in the next iteration of the ABUHB People Plan (due for review 2025/26).	

WHC Action	HB Lead	TU Lead	deadline	Delivered Y/N	If Yes - provide evidence	If No - Reasons off track?	If No - Plan to get back to Green	If No - Rate confidence on ability to get back to green by next month? (H/L-no medium)
Implement appropriate to local circumstances the Health Education and Improvement Wales continuing professional development strategy. Have the long-term goal for all staff protected time as parity with medics but set specific steps to achieving that which are realistic and achievable.	Peter Brown	Louise Wright, A	Jan-25		<p>We have established a partnership working group including workforce, trade unions, nursing and allied health professionals and an independent board member. The group has reviewed the HEIW CPD plan and prioritised key actions. Baseline data has been established by division and department including the proportion of study leave taken by individuals. The next steps are to triangulate this with Statutory and Mandatory training compliance, PADR, retention and quality and patient safety data and produce a status report with recommendations for consideration.</p> <p>We are also keen to align the HB's approach to Quality Improvement and Ward accreditation, recognising and promoting existing opportunities for improvement as CPD.</p> <p>This was agreed a priority area following a partnership development session in September 2024 and the group continue to meet regularly. Whilst we continue to work in partnership to support protected time for Continuous Professional Development, we have held off moving to a guaranteed minimum number of hours per annum pending the national tripartite negotiations</p>	Establishment of baseline data and opportunity for discussion and development via the CPD group.	Development of a status report with recommendations.	



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	All Wales Staff Survey – Review of Response Rates
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Simmonds, Executive Director of Workforce and Organisational Development
SWYDDOG ADRODD: REPORTING OFFICER:	Daniel Madge, Senior Education and Development Manager

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Ar Gyfer Trafodaeth/For Discussion

To examine and consider the activity that was undertaken to promote the Staff Survey and take necessary steps to increase future participation rates across Aneurin Bevan University Health Board.

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

There was agreement for NHS Wales to undertake an annual Staff Survey every October. The survey is identified as a key action within the Health Board’s People Plan and allows for effective monitoring of staff engagement and promotes compassionate leadership models that are correlated to improve organisational performance, clinical outcomes and patient experience.

The aspiration is to increase the level of participation year on year and to build a consistent data set relating to staff experiences across NHS Wales to enable effective action.

This paper reports the response rates to the 2024 Staff Survey. The paper also reviews the activities that were undertaken to promote the survey and the lessons that can be learned and initiated when planning for the launch of the next Staff Survey in October 2025.

The data from the 2024 survey will be made available from Health Education Improvement Wales (HEIW) on 31 January 2025.

The People and Culture Committee is asked to note the paper and provide views and comments on the list of next steps identified in this paper.

Cefndir / Background

In 2023, development and co-ordination of the survey was taken on by HEIW with the support from lead officers of each NHS Wales organisation. The purpose of the All Wales NHS Staff Survey is to collect feedback from NHS Wales colleagues to understand their experiences, perspectives, and insights in order to continually improve the Health Board.

Over the past 12 months, the All Wales Staff Survey and the Aneurin Bevan University Health Board's Employee Experience survey have been aligned in order to reduce confusion amongst staff about the two surveys, to create a level of routine in asking for views on a regular basis and to triangulate the responses. The national survey offers a broad brush understanding of our colleagues' experiences whilst the local survey offers us opportunity to understand key local issues in greater detail with rapid feedback to and action from, local teams.

It is now established that the Employee Experience survey will run every April/May and the national survey in October/November each year. The intention is that the results from each survey are reported back to the organisation prior to the next survey being run. Both surveys are run in partnership with Trade Union colleagues.

Asesiad / Assessment

The 2024 national survey was accompanied by more publicity both nationally and locally than 2023. Despite these efforts the response rate within the Health Board was lower.

Response rates

The Health Board is comprised of 15,318 staff members. Compared with 2023, the response rate for 2024 dropped from 18.1% (2,738 staff) to 13.2% (2,030 staff) a reduction of 708 Staff.

Other Health Boards also observed a reduction in response rates of a similar proportion (Swansea Bay and Betsi Cadwaladr) with some observing a rise (Cardiff and Vale, Cwm Taff and Hywel Dda).

Summary of Promotional Activities

Locally and nationally, there was increased activity aimed at promoting the national staff survey in 2024.

Figure 1 overleaf indicates the weekly response rate within the Health Board over the nine weeks that the survey was open.

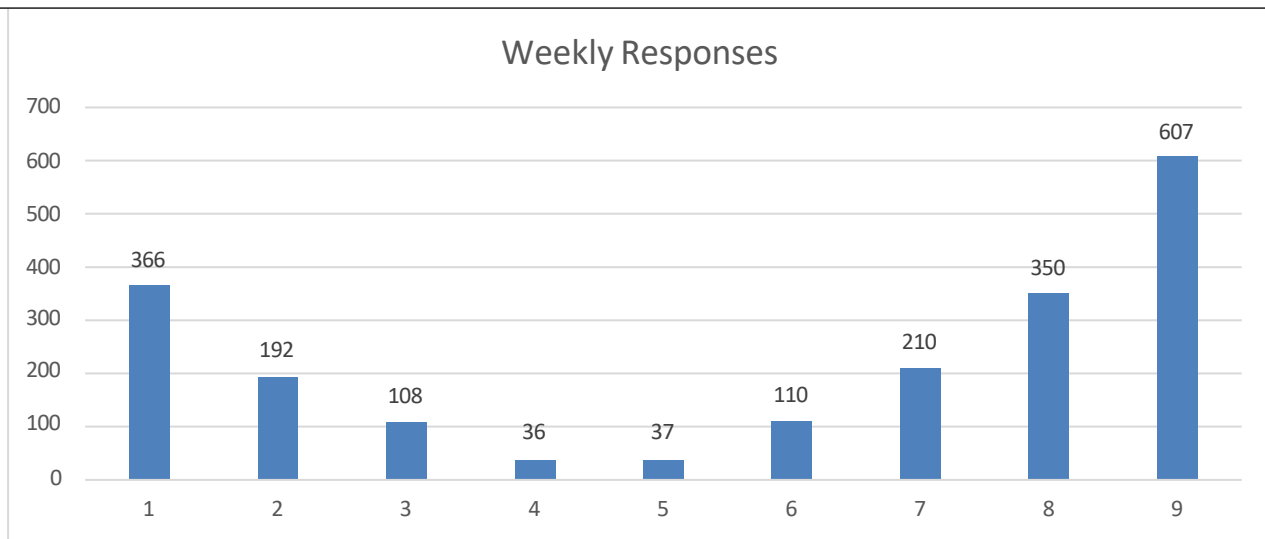


Figure 1. Weekly response rate for the Health Board up to the closing date excluding paper copies (total electronic responses: 2,016).

A summary of the promotional activities which were undertaken to improve the response rate each week were:

- Week one and week eight both included emails to all staff.
- Weeks one to eight included regular promotional events and walkabouts to promote the survey with staff and staff teams at all of the hospital sites. They included face to face discussions, promotional banners and the distribution of promotional pens.
- Promotional events also included using existing training, induction and flu clinics to promote the Staff Survey.
- Weeks one to nine included promotional messaging in all Organisation Development training events including Induction, HCSW training, Leadership programs and team development exercises.
- Weeks one to four included an extensive poster campaign with 250 posters being posted on staff and ward notice boards. The posters were all compatible with infection control for clinical areas and contained a QR code enabling staff to complete the survey on their personal mobile device.
- At week seven, the Health Board launched an incentive scheme offering staff the chance to be entered into a prize draw.
- Week seven also launched additional staff videos with a specific focus on the EDI forum leads.
- Weeks 7 to 9 included the distribution of ~1,000 promotional key rings with trolley coins attached to them. These were distributed through the HR Business Partners and at key events such as the HCSW Conference.

Key lessons from analysis of internal promotional activities

HEIW provided the Health Board with daily completion analysis. The daily monitoring of responses demonstrated that speaking with staff face to face was not effective and that a different approach to promotional activities was required.

The face-to-face events may have helped to raise the profile of the survey, however, evidence from a staff engagement event of 100 staff resulted in only 10 staff completing the survey.

The face-to-face meeting provided some valuable feedback as to why staff did not complete the survey. The two most common comments were that:

1. Staff thought that they had already done it when they had in fact completed a different internal survey (Departmental survey, wellbeing survey, service reorganisation survey etc.)
2. Staff were not convinced that anyone took any notice of staff engagement activities. Staff cited examples both of the staff survey but also of wider comments and feedback that they had provided that they felt had not been addressed.

The direct emails to all staff and the incentive scheme appears to have had a significant impact.

Teams with a high proportion of staff who have easy access to computers or predominantly worked in an office-based role had a higher response rate than others.

Key Lessons from other Health Boards

There were a number of common themes from other Health Boards. Most notably having an ongoing formalised, centralised action plan with a consistent implementation lead. In addition, promotional activities that are hosted by the CEO or Chair with strong Executive Team Support and local management support enhance response rates.

The key underlying message to improving response rates was building a reputation and evidence for listening to staff and acting on what they say.

Specific initiatives included:

Senior Management Visibility

- Chief Executive, Chair and Executive Team members hosting Staff Survey focus sessions throughout the year. These are used to maintain a sense of continual progress and for staff to identify with messages around “we said; we did” for future promotional activity.
- Executive Team activity to promote the survey through formal communications supported by the Communications Team and through regular verbal communications at team meetings and staff engagement events.

Building an infrastructure to deliver staff wellbeing and engagement all year

- Formal Staff Survey working group with agreed reporting structures attended by the Divisional Representatives and other key individuals.
- Divisional and directorate champions.

- Directorate representatives promoting the survey and coordinating local activity to act on the results.
- Directorate and EDI Action Plans updated annually and regularly monitored.
- Established links between the Staff Survey groups and inter-dependent areas of work such as retention, harassment and equality.
- An Action Plan Tool Kit to support divisional representatives to create and monitor their local action plans.

Survey Promotion

- Year-round communications offering regular updates and promotional activities.
- Easy Access to the Staff Survey:
 - Dedicated rooms with laptops and free coffee for staff to sit and complete the survey.
 - Tea and Engagement Trolley taken round to all wards offering staff hot drinks, biscuits and access to an iPad to complete the survey for staff.
- Incentive schemes:
 - Free Coffee Voucher for all staff who complete the survey to be explored.
 - Weekly staff competitions during the week linked to the Staff Survey with mini prizes.
- Restricting other surveys or engagement events in the weeks running up to and throughout the duration of the Staff Survey.

Key Lessons from a National perspective

HEIW describe a range of existing initiatives that will continue and consideration of new initiatives which the Health Board will influence through the national steering group. These include:

- Continued use of the QR Code linked to an updated HEIW Staff Survey web page.
- Continued use of the distribution of marketing materials including pens and key rings.
- Continued support for the organisational Staff Survey lead's community of practice.
- Continued encouragement for all staff to use the Teams Staff Survey background.
- Consideration of a national incentive scheme or support for local incentive schemes.
- Earlier planning.

Next Steps for the Health Board

The table overleaf describes the key actions for the Health Board.

What	Time Scales	Risks / Benefits
Distribution		
To share the organisational results with the WOD Director and CEO	31 January 2025	Dependent upon timely release by HEIW
Publish organisational results on the intranet detailing the key messages and the next steps	w/c 03 February 2025	
Distribute Divisional results to the Divisional Management Teams	w/c 10 February 2025	
Share Survey Results with the Trade Union Partnership Forum leads	31 January 2025	
Present key findings to Trade Union Partnership Forum	11 March 2025	
Share the EDI components with the EDI lead	w/c 10 February 2025	
Establish an organisational Staff Survey working group	End February 2025	Requires Executive support and Divisional engagement
Divisional & EDI Activity		
Support Divisions to prepare a local action plan in response to the key issues raised by their division	Through March 2025	Divisions are under pressure and this would require sensitive initiation and Executive Support
Request each Division to nominate a Staff Survey and engagement lead to drive local activity and report on the implementation of the local action plan	End of February 2025	A flexible approach may be required to support all Divisions to complete this. Acknowledgement of opportunity cost associated with this request.
Ensure that the key messages from the EDI report is considered with their local agenda / key Welsh Government action plans	End March 2025	Will support local Strategic, Equality Plan (SEP)
Engagement Plan		
Develop an enhanced promotion and engagement plan with the support of the Communications Team, Trade Union Partnership and Wellbeing Survey	April 2025	Avoids confusion between the national Staff Survey and the local wellbeing survey
Diarise early promotional speakers at key Divisional and Directorate meetings to ensure access	March / April 2025	The Staff Survey is during winter months and focus may be distracted from divisional teams
Diarise access to Divisional Team Meetings in advance of the next survey to optimise attendance	August / September 2025	
Cost and evaluate the incentivisation of the completion of the Staff Survey	31 March 2025	Additional finance required in 2025/2026 WOD budget
Alignment with Employee Experience Survey		
Triangulate the results with the latest Employee Experience Survey and identify key actions	February 2025	Reduce opportunities for duplication of effort

Argymhelliad / Recommendation

The People and Culture Committee is asked to note the paper and provide views and comments on the list of next steps identified in this paper.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Board's assurance framework.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	6.3 Listening and Learning from Feedback 7.1 Workforce Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Workforce and Culture
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	CEO – Chief Executive Officer EDI - Equality, Diversity and Inclusion HCSW – Health Care Support Worker HEIW – Health Education and Improvement Wales
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not Applicable

Effaith: (rhaid cwblhau)

Impact: (must be completed)

Resource Assessment:

A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy

	development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Yes, outlined within the paper
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
<p>Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working</p> <p>https://futuregenerations.wales/about-us/future-generations-act/</p>	<p>Long Term - The importance of balancing short-term needs with the needs to safeguard the ability to also meet long-term needs.</p> <p>Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies.</p>

Speaking up Safely

- Dr Peter Brown & Dr Adrian Neal
- Cross org steering group
- December 1st launch
- Sharepoint pages (654 views)
- Bilingual public website
- Worked nationally with SUS Board
- Collaborate with HEIW
- Co-create with Med Ed, Pharmacy



CODI LLAIS HEB OFN
PROSES SAFF AC ANHYSBYS AR GYFER STAFF I
GODI EU PRYDERON

Eich Rheolwr Llinell Os rydych angen codi unrhyw bryder lle gall diogelwch staff, timau neu gleifion fod mewn risg, siaradwch gyda'ch rheolwr llinell neu gydweithiwr y gellir ymddiried ynddo

Cais Codi Pryder Os nad ydych yn gallu siarad gyda rheolwr neu gydweithiwr, defnyddiwch y llwybr anhysbys a saff isod.

I GODI PRYDER

DARGANFOD MWY

ONE AB



SPEAKING UP SAFELY
A SAFE AND CONFIDENTIAL PROCESS FOR
STAFF TO RAISE CONCERNS

Your Line Manager If you need to raise any concern where staff, teams or patient safety may be at risk, speak to your line manager or a trusted colleague


Raise Concerns Submission If you can not speak to a manager or colleague use this confidential and safe route below:

RAISE A CONCERN

FIND OUT MORE

ONE AB

Speaking Up Safely

 Peter Brown (Aneurin Bevan UHBI - Workforce and Organisational Development)
Assistant Director of Workforce & OD


We know raising a concern can be difficult and we are here to support you all the way.


You are encouraged to speak up about anything that gets in the way of doing a great job.

From time to time when things go wrong, we need to make sure that lessons are learnt, and things are improved so that you and patients have the best experience possible.

Most Popular links

 [Get in touch](#)

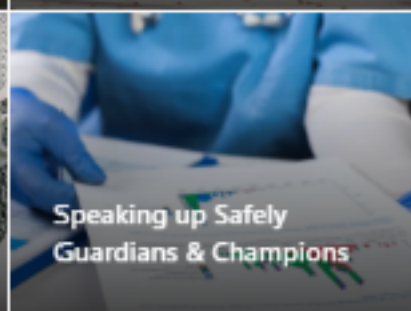
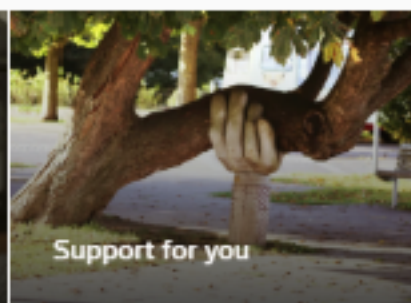
 [Timelines & Process](#)


 [Speaking Up Safely FAQ](#)

Click here to raise
a concern



Codi Llais heb Ofn
Speaking up Safely




 Bwrdd Iechyd Prifysgol Aneurin Bevan
 Aneurin Bevan University Health Board

Skip Navigation Accessibility Statement Contact Us Cymraeg


All... Search

Home About Us **Health Advice** Urgent Help Service Information

Home > **Speaking up Safely**


- About Us
- A conversation for a healthy future
- Speaking up Safely**
- The Health Board
- Nosocomial Covid-19 Review: Investigating and Learning from Cases of Hospital Acquired Covid-19
- Board and Committees
- Key Documents
- Thanking our Staff
- Complaints & Concerns
- Engagement
- The Duty of Candour
- FOIA

Speaking up Safely



Raising concerns is an important part of our work. We are committed to supporting you through this process.

If something is impacting your ability to work safely, this could be a process not being followed, or colleagues, or patients. By raising concerns, you are helping to make things better for everyone.


 Bwrdd Iechyd Prifysgol Aneurin Bevan
 Aneurin Bevan University Health Board

Osgo's Llywio Datganiad Hygyrchedd Cwylltachi & ni English


I ggd... Chwilio

Hafan Amdanom ni Cyngor Iechyd Cymorth ar Frys Gwybodaeth Newyddion Brechiadau Swyddi Rhagor

Hafan > Codi Llais Heb Ofn

- Amdanom ni
- Sgwrs ar gyfer dyfodol iach
- Codi Llais Heb Ofn**
- Y Bwrdd Iechyd
- Bwrdd a Phwyllgarau
- Dogfennau Allweddol
- Cwynion a Phryderon
- Dyletswydd Gonestrwydd
- Ymgysylltu
- FOIA
- Llywodraethu Gwybodaeth
- Diolch i'n Staff
- Cysylltwch â Ni
- Gwneud Rhodd

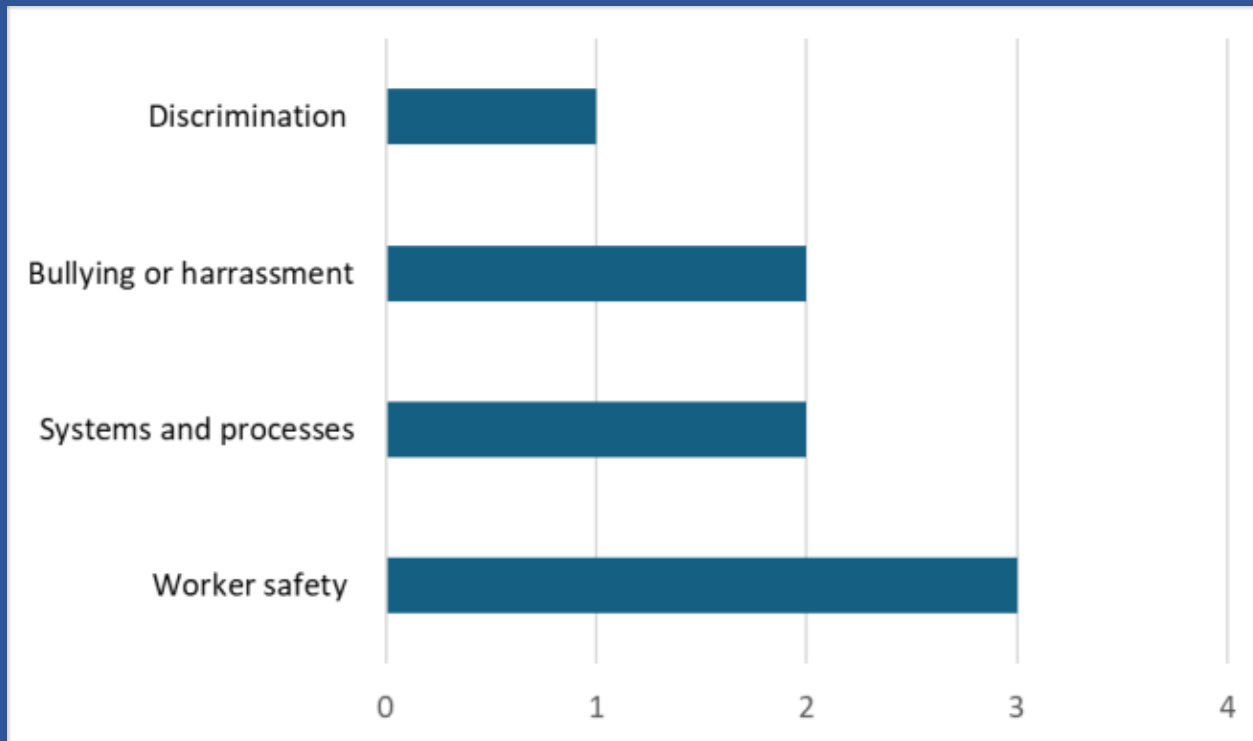
Codi Llais Heb Ofn



Mae codi pryderon yn rhan bwysig o gynnal amgylchedd gofal iechyd diogel ac effeithiol, ac rydym wedi ymwymu i'ch cefnogi drwy gydol y broses.

Os yw rhywbeth yn effeithio ar eich gallu i wneud eich gwaith gorau neu'n effeithio ar olaf cleifion, rydym yn eich annog i godi llais. Gallai hyn ymwneud â phroses nad yw'n cael ei dilyn, ffordd o weithio nad yw'n teimlo'n iawn, neu ymddygiadau sy'n effeithio amoch chi, eich cydweithwyr neu'ch cleifion. Drwy godi pryderon, rydych chi'n ein helpu ni i ddyngu, gwneud gwelliannau, ac yn sicrhau profiad gwell i bawb.

Data: 1st Dec 2024 to 17 Jan 2025



- All low risk
- No direct patient risks
- 2 x Anonymous (NHS Eng FTSU 10%)
- 2 x Protected Characteristics (Pregnancy, Disability)

- Subjective Confidence (out of 5):
 - Fair process: 2.3
 - Addressed effectively: 1.3

Next steps

- Reporting structure (TUPF, PCC, Board)
- Comms strategy
- Distribute infection control compliant posters
- Capture data – including time to respond
- Review capacity of guardian role
- Supporting different groups with speaking up:
 - IMG
 - Staff Networks
 - Cultural acceptance
 - Accessible comms
- Impact of the Worker Protection Act Amendment (October 2024)

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 February 2025
CYFARFOD O: MEETING OF:	People and Culture Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	People & Culture- Committee Forward Work Plan 2024/25
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Director of Corporate Governance
SWYDDOG ADRODD: REPORTING OFFICER:	Head of Corporate Governance/ Governance Support Officer

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The People and Culture Committee is asked to consider the draft Committee Forward Work Plan appended to this report for approval. The Forward Work Plan has been developed with due regard to recommendations from the Committee Self-Assessment 2023/24 to enable the Committee to: -

- Fulfil its Terms of Reference;
- seek assurance and provide scrutiny on behalf of the Board, in relation to those items identified within the Committees terms of reference, and,
- seek assurance that governance, risk, and assurance arrangements are in place and working well.

Cefndir / Background

In line with good governance practice, a committee forward work plan has been developed to ensure statutory requirements for items of Committee business are scheduled in across the year. The work plan can therefore be utilised as a tool for informing and pre-empting committee business and support the agenda setting function.

The Forward Work Programme Plan is designed to assist the Committee in the review of its programme of business. It captures the timing of report submissions, identifies items that have been deferred, and captures new requests for reports. The plan also allows the Committee to monitor and review its business at each meeting.

During the period of October to February the following requests and/or changes to the Forward Work Plan have been included:

Items deferred on the Forward Work Programme:

- Annual Review of Committee Effectiveness 2024/25 deferred to June 2025 meeting;
- Annual Review of Committee Terms of Reference 2024/25 deferred to June 2025 meeting;
- Update on the Percentage on the Up Take of Job Planning deferred to June 2025 meeting;
- Implementation of the Health Board's Communication Strategy deferred to June 2025 meeting;
- Annual Assurance Report on Job Planning and Assurance of Implementation of Medical E-Systems deferred to June 2025 meeting;
- Annual Review and Refresh of the People Plan and its Priorities deferred to June 2025 meeting;
- Employee Experience Strategy deferred to June 2025 meeting;
- Training, Development and Education - Assurance on Workforce Planning and Education Commissioning Numbers deferred to June 2025 meeting;
- Assurance on the Development and Delivery of an Agile Working Framework deferred to June 2025 meeting;
- Committee Annual Report 2024/25 deferred to June 2025 meeting.

Items removed from the Forward Work Programme:

- Internal and External Audit Recommendations Tracker removed from the programme.

Additions to the Forward Work Programme:

- Staff Survey Results Report added to forward work plan.
- Speaking up Safely presentation added as a standard item.
- Report on patients presenting at hospital requiring extra support to be reported in February 2025 meeting;
- Update on the percentage on the up take of Job Planning to be reported in June 2025 meeting;
- Deep dive on sickness levels to be reported in February 2025 meeting;
- Annual talent and succession planning update to be reported in June 2025 meeting

Asesiad / Assessment

The Committee is requested to approve the Committee forward work plan as outlined in **Appendix 1** noting that the work plan will be presented at each Committee meeting for oversight and noting.

Argymhelliad / Recommendation

The Committee is requested to:

- **RECIEVE** and **APPROVE** the proposed Committee work plan and **NOTE** that it will be brought forward to each future Committee meeting for oversight.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Boards assurance framework
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item. Choose an item. The Committee Forward Programme monitors delivery of objectives.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Governance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Not Applicable Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termau: Glossary of Terms:	N/A
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A

Effaith: (rhaid cwblhau)

Impact: (must be completed)

Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
<ul style="list-style-type: none"> • Workforce 	Not Applicable
<ul style="list-style-type: none"> • Service Activity & Performance 	Not Applicable
<ul style="list-style-type: none"> • Financial 	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Not Applicable Choose an item.

Annual Programme of Business for 2024-25

People & Culture Committee

This Annual Programme of Business has been developed with reference to:

- Aneurin Bevan University Health Board's Standing Orders;
- The Health Board's Integrated Medium-Term Plan and related Annual Delivery Plan;
- The outcomes of the Committee's self-assessment for 2023/24
- The Board's Strategic Risk Register; and
- Key statutory, national and best practice requirements and reporting arrangements.

Area of Focus as per Standing Orders:

The purpose of the People and Culture Committee is to provide assurance to the Board on:

- all matters relating to staff and workforce planning of the Health Board;
- plans to enhance the environment that supports and values staff in order to engage the talent and nurture the leadership capability of individuals and teams working together to drive the desired culture throughout the Health Board to deliver safer better health care;
- the direction and delivery of Organisational Development and other related frameworks to drive continuous improvement and to achieve the objectives of the Health Board.

Where required, the Committee will provide accurate, evidence based (where possible) and timely advice to the Board in respect of opportunities for its system of governance and assurance to be strengthened and further developed.

MATTERS TO BE CONSIDERED	Lead	Frequency of Report	Schedule of Meetings			
			QTR 1 Apr to June 18 th June 2024	QTR 2 July to Sept No Meeting	QTR 3 Oct to Dec 15 th October 2024	QTR 4 Jan to Mar 11 th February 2025
Preliminary Matters						
Attendance and Apologies	Chair	SI	✓		✓	✓
Declarations of Interests	All Members	SI	✓		✓	✓
Minutes of the Previous Meeting	Chair	SI	✓		✓	✓
Action Log and Matters Arising	Chair	SI	✓		✓	✓
Committee Governance						
Development of Committee Annual Programme of Business 2024/25	Chair DoCG	Annually	✓			
Review of Committee Programme of Business 2024/25	Chair DoCG	SI	✓		✓	✓
Annual Review of Committee Terms of Reference 2024/25	Chair DoCG	Annually				✓D
Annual Review of Committee Effectiveness 2024/25	Chair DoCG	Annually			✓D	✓D
Outcome of the annual review of Committee effectiveness 2024/25	Chair DoCG	Annually				✓D
Committee Annual Report 2024/25	Chair DoCG	Annually				✓D

Committee Risk Report	DoCG	SI	✓		✓	✓
Culture, Values & Behaviours						
Review and Refresh of ABUHB Values & Behaviours Framework	DoW&OD	Annually				✓
Annual Review and Refresh of the People Plan and its Priorities	DoW&OD	Annually				✓D
NHS Wales Staff Survey – Results and Action Plan including Employee Experience Survey	DoW&OD	Annually			✓	
Violence & Aggression against Staff across ABUHB	DoT&HS/C OO	Annually			✓D	✓
Speaking Up Safely Report	DoW&OD	Annually			✓	
Equality, Diversity and Inclusion - Assurance on Strategic Equality Plan	DoW&OD	Annually			✓	
Progress update on the Delivery of Welsh Government's Race Equality Action Plan for Wales	DoW&OD	Annually	✓			
Assurance on Compliance with the Welsh Language (Wales) Measure 2011 - More Than Just Words	DoW&OD	Annually	✓			
Employee Experience Strategy	DoW&OD	Annually			✓D	✓D
Update on EDI Activity PCC 2202/3.2	DoW&OD	Action				✓
Report on patients presenting at hospital requiring extra support.	DoW&OD	Action				✓

Update on the percentage on the up take of Job Planning PCC/1510/10	DoW&OD	Action				✓D
Speaking up Safely	DoW&OD	SI				✓
Staff Survey Results Report	DoW&OD					✓
Organisational Development						
Training, Development and Education - Assurance on Workforce Planning and Education Commissioning Numbers	DoW&OD	Annually				✓D
Assurance on the Development and Delivery of an Agile Working Framework	DoW&OD	Bi-Annual	✓			✓D
Annual Assurance Report on Medical Revalidation	MD	Annually	✓			
Progress report on Compliance of Bank and Agency Staff Electronic Reporting Blood Management System	DoW&OD	Annually	✓			
Talent and Succession Planning Progress Update	DoW&OD	Annually	✓			
Speciality Doctors and Clinical Fellows Framework PCC/1306/2.2	MD/DoW&OD	Action			✓	
HEIW Update PCC/2202/3.10	MD	Action	✓D			✓
Quality Report – Update on How Support can be provided in the recruitment of volunteers PQSOC 30004/2.1	DoN	Action				✓

"implementation of the Health Board's Communication Strategy" Communications and Engagement Update Report - update on outcomes of the Communication Strategy including top themes ABUHB 2205/22	Assistant Director of Communications	Bi-Annually				✓D
Consultant Private Practice policy	MD	Annually			✓	
Workforce Performance						
Annual Assurance Report on Job Planning and Assurance of Implementation of Medical E-Systems	DoW&OD	Bi-Annually			✓	✓D
Workforce Performance Dashboard incorporating Key Performance Indicators • Deep drive on Sickness levels - Action (Feb)	DoW&OD	Quarterly	✓		✓	✓
People Plan 2022/25, Quarterly Review Objective 1 - Staff Health & Wellbeing	DoW&OD	Annually	✓			
People Plan 2022/25, Quarterly Review Objective 2 - Employer of Choice	DoW&OD	Annually			✓	
People Plan 2022/25, Quarterly Review Objective 3 - Workforce Sustainability	DoW&OD	Annually				✓
Report from the Director of Workforce & OD, including Employee Relations & Suspensions over 4 months	DoW&OD	Quarterly	✓		✓	✓

Speciality Doctors and Clinical Fellows Framework	DoW&OD	Annually			✓	
Report on the Use of Single Tender Action - The People and Culture Committee to receive a detailed update on efforts to secure long-term accommodation for Nurses/International Nurses ARAC 1604/3.4	DoW&OD	Annually	✓			
Nursing, Midwifery & SCPHN Workforce Annual Report	DoN	Annually			✓	
Annual talent and succession planning Update	DoW&OD	Annually Action (June 2025)	✓			
Report on how long it takes different job roles to complete mandatory training PCC 2202/3.8	DoWOD	Action				✓

Lead Officer	
Key	

CEO	Chief Executive
DoCG	Director of Corporate Governance
DoF&P	Director of Finance & Procurement
DoSP&P	Director of Strategy, Planning & Partnerships
COO	Chief Operating Officer
DPH	Director of Public Health
DoT&HS	Director of Therapies & Health Science
DoW&OD	Director of Workforce & Organisational Development
DoN	Director of Nursing
MD	Medical Director
DOD	Director of Digital
Chair	Chair

Frequency of Inclusion	
Narrative of Reason why Included in the FWP – other reasons to be developed as part of FWP discussions	
SI	Standing Item
An	Annual
1/4ly	Quarterly
BI	!/2 yearly
Schedule of Meetings	
v	Scheduled agenda item in FWP
D	Deferred from this agenda
vD	Deferred Scheduled agenda item
W	Withdrawn from FWP
T	Transferred to another Committee
IC	Matter discussed In Committee