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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Strategaeth a Chynllun Pobl

Mewn Undod mae Nerth

People Strategy & Plan

Stronger Together



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Introduction

The Health Board's vision is to create a healthier North Wales, with opportunities for everyone to realise their full potential. This means that, over time, the people of North Wales should experience a better quality and length of life.

This vision is informed and shaped by the Welsh Government (WG) plan "**A Healthier Wales**", our own strategic overview document "**Living Healthier, Staying Well**", and our evolving Clinical Services Strategy, in North Wales.

The Covid-19 Pandemic has had a huge impact in many ways:

- Supporting individuals in North Wales with Covid-19 and/or symptoms of Covid-19.
- The impact upon those without Covid-19 who have experienced delays in treatment because of the need to deal with the Pandemic.
- The impact upon our staff, who have delivered a magnificent response over 2 years of continual Pandemic conditions.
- It has limited our ability to deliver some of our previously stated development priorities, through the need to reprioritise.
- It has reminded us all, if a reminder was necessary, that we will need to respond differently to the challenges of delivering healthcare in a sustainable way going forward.

These impacts have heavily influenced our priorities in the coming years.

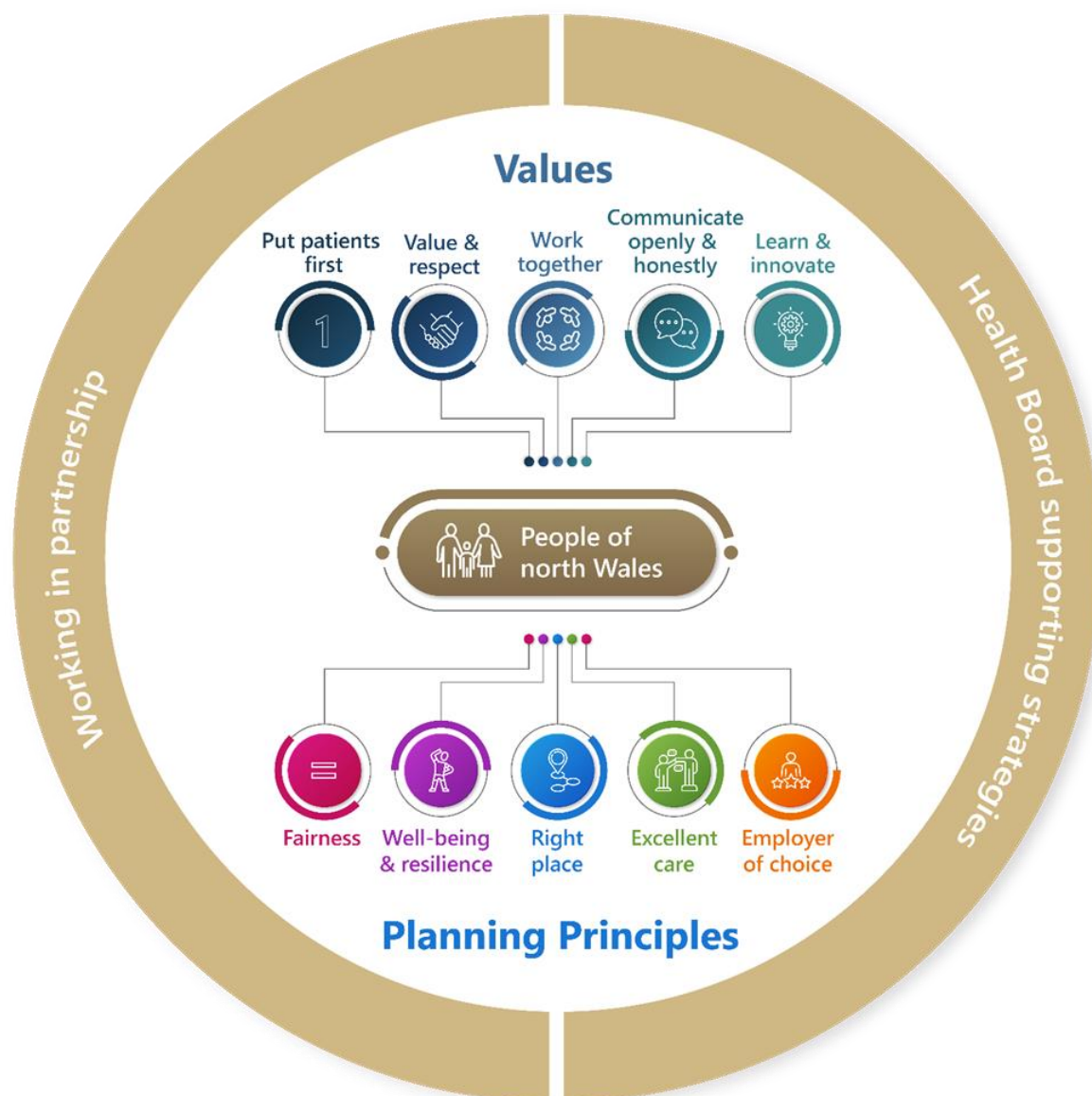
The Integrated Medium Term Plan (IMTP), and associated appendices, of which this People Strategy & Plan is one, lays out how we will do this by prioritising key areas of development that we will deliver with the resources available to us. The detail surrounding the actions we will undertake in the coming year with the IMTP also sets out, in indicative form, how we will build upon our actions in 2022/23 during 2023/24 and into 2024/25.

The majority of our focus for 2022/23 is upon:

- Returning to full core business, including addressing the pandemic-related backlog of work, and
- Consolidating developmental work that has already been begun but not yet finished, including work to deliver against the WG Targeted Intervention framework.

Our recently developed Plan on a Page simplifies our strategies into a smaller number of clear principles and values that we will follow. We are clear that by following these principles and values we will continue to move us towards delivering our vision. These apply as much to resetting core activity and consolidation as they do to new initiatives.

Plan on a Page – our 5 Planning Principles



- 
Fairness we will reduce avoidable and unfair differences in health
- 
Well-being & resilience we will maximise prevention, self-care, well-being, and strong community networks
- 
Right place we will provide services that are sustainable, delivered close to where people live where it is safe and effective to do so
- 
Excellent care we will design services that can deliver world-class outcomes and experience for patients
- 
Employer of choice we will work, and organise, improve and transform ourselves, to support our teams to flourish



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Section 1: Our People Ambition



Our ambition aligns to the ambition for healthcare across Wales in that we will have a motivated, engaged and valued, health care workforce, with the capacity, competence and confidence to meet the needs of the people of North Wales. Specifically this means that:

- Our people will have the right values, behaviours, knowledge, skills and confidence to deliver evidence based care, and support peoples wellbeing as close to their home as possible;
- We will have sufficient numbers of the right people to be able to deliver proactive and responsive health care that meets the needs of the people of North Wales;
- Our people will reflect the diversity, welsh language and cultural & community identity of the population we serve;
- Our people will feel and be valued.
- We will achieve this ambition through implementation plans co-designed and delivered in partnership with our people and partners.
- As the largest Health Board in Wales and one of the largest employers in North Wales, we recognise that the people who work with us to provide services and care (our workforce and volunteers) must be valued. Not just for their dedication and contribution to achievement of our purpose, but importantly, as members of our local communities, contributing to the wider socio economic prosperity and health of North Wales.

We will continue to build upon achievements to date to embrace the role that we play in both employing the right people with the right skills to provide services in the right place, and developing opportunities, together with partners across health, social care and education, for members of our communities to gain and maintain employment and to achieve their ambitions.

What Success will look like?

- ❖ A compassionate and inclusive culture, role modelled by excellent leaders and managers.
- ❖ Better and quicker recruitment and retention of staff through attractive and flexible working arrangements and career opportunities.
- ❖ Flexible education opportunities and career development.
- ❖ Very high levels of staff engagement, motivation, wellbeing and satisfaction.

- ❖ Intelligence led workforce planning enabling us to change our workforce to meet our population need.
- ❖ Increased levels of Welsh language skills in health and care workforce.

What will be different?

- ❖ Our workforce feels valued, are treated fairly and their wellbeing is supported.
- ❖ Recruitment challenges are discovered earlier and targeted effectively.
- ❖ Common competences are identified and underpin new and different ways of working.
- ❖ Widespread digital capability underpins care delivery.
- ❖ Workforce language, culture and diversity reflects our population.
- ❖ Widespread values based and inclusive recruitment used more consistently ensures we have the right people.
- ❖ Learning opportunities are for all staff and are delivered through flexible and accessible routes.
- ❖ Application of Improvement skills is a natural way of working.

Our People Strategy & Plan

This is our opportunity to create a restorative just and learning culture, to work together with our people and partners to address a number of long-standing challenges. The culture will fundamentally change the way we respond to incidents, patient harm and complaints against staff, prepare our organisation for the future, and to embrace and create opportunities for us to succeed.

Many of our future workforce are here today in various forms, and retaining, nurturing and developing them is as important as recruitment of more and new. Our learning and development opportunities including progression will be available for all staff at all levels in the organisation.

The actions under the five programmes of work set out within the strategy will work together to improve retention of our current workforce, as well as attracting new people into the workforce.

This cannot and will not be “more of the same”; we need to continue to transform traditional roles and ways of working to support new models of care through our local and the national transformation programmes.

A high-level annual delivery plan will support focussed prioritisation of the programmes of improvement. To support the delivery of the plan, detailed plans with objectives for delivery that are specific, measurable, attainable, relevant and time based will be developed and will be aligned with the Operational Governance and Assurance Framework, ensuring clarity of accountability and responsibility through the organisation.

The Strategy will be refreshed on an Annual basis, will respond to the learning from the Staff Survey and will be aligned with the refresh of the Integrated Medium Term Plan. This refresh will ensure:

- ❖ The programmes of work are delivering what is required and there is **evidence of tangible outcome improvement**
- ❖ Any critical **developments** (risks and opportunities) at **national and/or local level** are considered and addressed for the year ahead
- ❖ **Feedback** (both internal and external) through the year is **triangulated** to ensure the priorities within the programmes of work and plan are **relevant**
- ❖ The **workforce plan** is effectively aligned to the delivery of the priorities and is **affordable and achievable**

Strategic Alignment of National programmes for local delivery

Under our Clinical Services Plan – the local delivery of the Strategic Programme for Primary Care and Accelerated cluster development is aligned to the principles within the National Clinical Framework.

Bringing together the principles of the national **Strategic Workforce Planning Frameworks for Primary Care, Community Service and Mental Health** together for delivery at local level enabled by integrated and multi professional workforce planning and commissioning.

Future workforce skills

We will require an agile, flexible, multidisciplinary workforce for an increasingly digital workplace, able to develop the skills needed to adopt and exploit new technology.

We will need greater capacity and capability in digital and social media skills and cyber security. As data analysis becomes automated, we need to be better at framing the right questions and interpreting the information through a health and social care lens.

Role boundaries are changing and skill sets will alter e.g. roles in near patient testing in the community will be more about quality assurance and oversight of delivery than lab based skills. We must make better use of our medical and non-medical consultants enabling them to focus on their expertise. Multi-disciplinary teams and greater use of advanced practice will create opportunities for progression across all career pathways.

Our roles in advocacy, leadership and partnership working require direct contact and building personal relationships with stakeholders. There will be an increased need for ‘human’ skills such as influencing, relationship building, emotional intelligence and the ability to engage communities.

There is also a requirement for subject specialists with high-level Welsh language skills in frontline roles. As the demand for services increase, we will require a greater capability and capacity to deliver services through the medium of Welsh.

Managers and leaders will be key to creating a restorative just and learning culture and empowering a diverse workforce. Our leaders will be working across a range of current 'traditional boundaries' in public sector organisation and we need to be growing these leaders now through opportunities for placements and secondments.

With regard to technical skills, we will have the right balance of people with breadth of expertise and those with more depth or specialist skills. A range of skillsets will enable flexibility in the workforce but there will always be a need for access to specialist expertise, particularly to deal with emergencies.

Education and Learning

We will continue building on the fantastic work of the Primary Care Academy and to further develop our ambition to educate and train the very best professional and practitioners through the establishment of BCU Education & Learning Academy. We will use this infrastructure to provide the foundations for enhanced and innovative experiential learning and placement programmes in order to optimise the benefits of the Inter professional Medical & Health Sciences School and wider strategic education partnerships. Bringing together the programmes already in place, we will increase and widen access across the communities of North Wales to education, learning and employment, working in partnership with education providers and Health Education and Improvement Wales.



Fundamental Principles

This People Strategy & Plan is built upon the foundations of fairness and equity and as such, we expect to see the fundamental principles of wellbeing, welsh language and inclusion through all of our implementation plans.

Wellbeing - There is a significant body of evidence linking wellbeing, capability and engagement of a health care workforce to improved outcomes for the people we serve. We will ensure our people are treated fairly and are recognised for the contribution they make.

Welsh Language - Evidence of better clinical outcomes for people accessing care and support, as well as employment, highlights the vital importance we must place on delivery of health care in the first language of our country.

Supporting our people to enable the delivery of bilingual health care wherever possible is a fundamental principle as well as a statutory responsibility, which must underpin every area of this strategy.






Inclusion - Creating and nurturing a culture of true inclusion, fairness and equity across our organisation is at the heart of this strategy and reflective of the aims within our Strategic

Equality Plan. This will be a theme running through the five work programmes under this strategy, with strong focus on values based, compassionate and inclusive leadership.

Section 2: Context & Case for Change

National Programmes for Local Delivery

In October 2020, **A Healthier Wales: Our Workforce Strategy for Health & Social Care** set out a compelling case for change in emphasising that the current pattern of health and social care was not fit for the future. The Kings Fund identified key areas affecting future service delivery, highlighting:

-  the impact of growing and changing need,
-  more working age people living with complex conditions,
-  increasing public expectations,
-  advances in digital and medical technologies including genomics, and
-  the challenges of securing our future workforce.

The Strategy also recognises the potential and desire in Wales to improve health and wellbeing through a high quality health and social care system. Key to the **Parliamentary Review** and **A Healthier Wales** was the **Quadruple Aim** that set out four interdependent goals:

- Improve population health and wellbeing through a focus on prevention.
- Improve the experience and quality of care for individuals and families.
- Enrich the **wellbeing, capability and engagement of the health and social care workforce**.
- Increase the value achieved from funding of health and care through improvement, innovation, use of best practice, and eliminating waste.

A clear focus on **improving the wellbeing, inclusion, capability and engagement of the health and social care workforce** is at the forefront of national strategy and our **People Strategy & Plan**.

Evidence has shown that better staff experience contributes to a culture of compassionate care, with positive outcomes of better care for the people we serve. This Strategy will therefore provide an important foundation for improvements in quality and safety and delivery against both the **National Clinical Framework** and **Quality and Safety Framework: Learning and Improving**.



It is clear that A Healthier Wales: Our Workforce Strategy for Health and Social Care and social care services will be changing dramatically over the next 10 years and consequently our People Strategy and Plan needs to be flexible and agile so that we can respond.

It describes the ambition to bring health and social care services together, to deliver a seamlessly co-ordinated approach from different providers, and it reinforces the need to strengthen and expand services in primary and community settings, and commits to the development of a **National Clinical Plan**.

We need to transform the way we attract, train, continually develop and support our workforce through a culture of compassionate and inclusive leadership with a focus on wellbeing at the core.

This means we need to better understand the shape and supply of our workforce, including the ability to deliver bilingual healthcare where possible. We will need to transform the way we work by:

- expanding existing roles,
- developing new roles,
- building skills and capability in areas we have not done so previously, and
- embracing new technology in delivering our services.

Differences in terms and conditions, particularly in the lower paid areas are a significant issue, not just between health and social care, but also between professional groups in healthcare. We know we have identified significant deficits in key areas and the need for new workforce models, more training and digital solutions to improve the way we work are required.

We know from our IMTP that a key priority for us is to ensure that our planning for future services starts with Local Needs Analysis (LNA).

Using these LNAs to identify priority areas for improvement as well as our strengths upon which to build further, requiring us to reallocate resources to support transformation.



We are clear on our commitment to our current journey of rapidly boosting the role of our Health and Social Care Localities. This is aligned to the guidance within the national **Accelerated Cluster Development Programme** and will further enhance the role of Localities in shaping our planning priorities.

Our People Strategy & Plan, informed and supported by the **Strategic Programme for Primary Care**, an All Wales Health Board led programme that works in collaboration with Welsh Government and responds to A Healthier Wales.

The Programme aims to bring together and develop all previous primary care strategies and reviews at an accelerated pace and scale, whilst addressing emerging priorities highlighted within A Healthier Wales.

To achieve success, the Programme looks to all health, social and wellbeing providers, Health Boards and other stakeholders to work collaboratively in sharing local initiatives, products and solutions that could add value to the delivery of primary care services on a 'once for Wales basis'.



The People & Organisational Development (OD) Stream of this Programme sets out to address four key overarching themes within workforce and organisational development:

Activities to support these themes include:

- Workforce
- Resources
- Efficiency; and Leadership

- Workforce data and planning
- Addressing issues around employment and retention
- Role development (where identified) as required to support multi-disciplinary teams
- Education that increases exposure to primary care
- Fit-for-purpose training
- Means of sharing best practice that is evidenced based

Finally, in line with our commitment to secure sustainable improvement in provision of all mental health and learning disability services, this Strategy is aligned to the work underway at national level to develop a workforce plan for all the mental health provision across health and social care. The **Mental Health Workforce Plan for Health and Social Care** is in consultation stage until end of March 2022.

It will be a vehicle for driving radical change and comprehensive improvements in how we develop, value and support our specialist mental health workforce, in recognition of the critical role they play in supporting people with a range of mental health needs in a variety of settings. It also recognises that mental health, wellbeing is everyone's business, and so this plan is an opportunity to develop the skills and knowledge of our generalist health and social care workforce to better equip them to deal holistically with the mental health needs of the people needing their care.

The demands for mental health services will only increase as the pandemic continues to unfold and as such the scope of this work is wide ranging, encompassing multiple

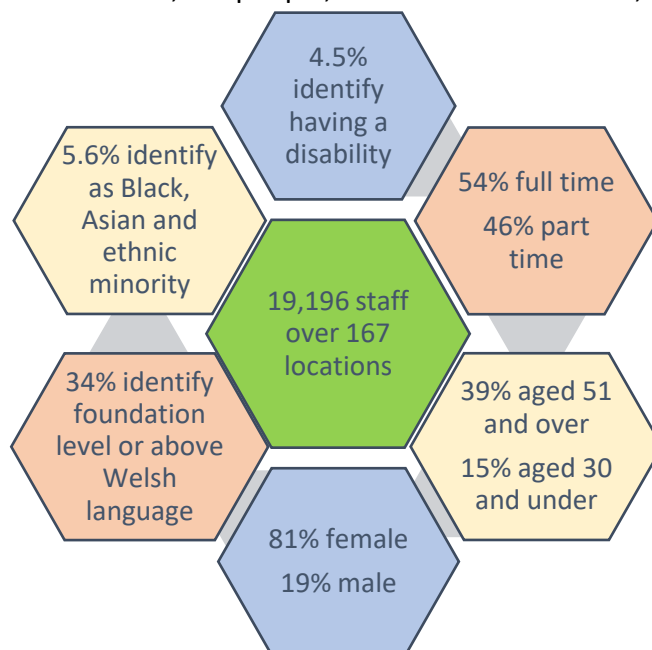


professions, services and settings, and underpinned with a person and family centred approach.

Our Current Workforce and Work Underway

Our key characteristics:

Our health and social care workforce makes up the largest Health Board in Wales, and one of the largest employers in North Wales. With over 19,000 people, and over 167 locations, the majority of whom are female, are employed in more than 350 different types of roles across health and social care, and together with volunteers and carers, our workforce hugely impacts on the social, cultural and economic prosperity of Wales.



Approximately 46% of our people work part time, and of these 91% are female. Information on the wider prevalence of flexible working patterns will require a step change following our experience during the pandemic and building on the development of an agile working organisation is a key priority. Greater transparency would help create a culture and mind-set where this being the norm, is encouraged and not resisted. We also need to better understand how people want to work and manage their responsibilities and lifestyle.

Our ambition is to being an inclusive and fair employer of choice. Our four staff networks (**BCUnity staff network, RespectAbility Network, Celtic Pride and Gender Equality Network**) continue to grow and are playing an active and important role in shaping our thinking and we have seen positive improvements in how some groups feel able to speak up.

Our newly established **Race Equality Action Group (REAG)**, although paused in November 2021 re-commenced in February 2022. The pending publication of the Welsh Government Race Equality Action plan, inclusive of a Workforce Race Equality Standard (WRES), will support the development of our internal REAG action plan.

Gender equality is important and we are working to address the gender pay gap which is currently **33%** despite the fact **81%** of the workforce is female.

We have set ourselves the challenge to significantly reduce the pay gaps for gender, ethnicity and disability within four years as part of our **Strategic Equality Plan**. Actions include ensuring all adverts have inclusive language, welcoming applications from part-time workers and job-shares, and enabling increased flexible working patterns from different locations.

We also have a way to go in terms of our ability to actively offer and provide comprehensive bilingual services. Currently **34%** of our workforce is able to speak Welsh at Foundation level or above, however many are not in front line roles. We will prioritise identification of skills gaps, recruitment and learning of Welsh to ensure that we have sufficient Welsh speakers in frontline roles.

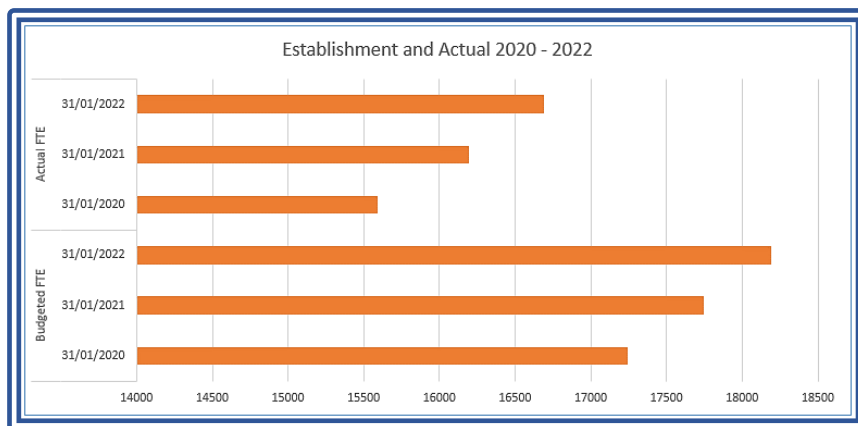
We have an aging workforce. **39%** of staff are aged 50+ and this is likely to increase as people expect to work longer. **5%** of the workforce is under 25 years of age, and **15%** is 30 years of age or younger.

Our over 50s are forecast to be to be the fastest growing group within the workforce. Flexible employment processes and ways of working that support their needs are important to them.

Those who have been in the same job for a long time would like opportunities to do something different, be this short-term involvement in projects or secondments or support for a permanent move or portfolio career. This can be a particular issue for those in senior roles who may feel 'stuck' in the current structure. Creating a more fluid approach to jobs for example rotations, and how we work, for example flexible/agile working across our generational workforce span is important to us and will support retention.

Building on the work undertaken through the pandemic, our focus is on improving the connectivity between service design and delivery, workforce shape and supply, and our ambition to be an Employer of Choice. This includes the clinically led reviews of existing delivery models that have informed the IMTP and the wider workforce plan to ensure the skills mix is correct for service delivery, sustainability, and triangulation of proactive workforce commissioning and placement opportunities across primary, community and secondary care settings. This allows us to continue to assess the longer-term impact of agile and flexible working on services from a workforce perspective.

Over the course of the last 3 years, our workforce has increased both in budgeted establishment (+6%) and in actual Full Time Equivalent (FTE) in post (+7.6%). This is in the main due to the number of new service and workforce improvements undertaken through 2021/2022.

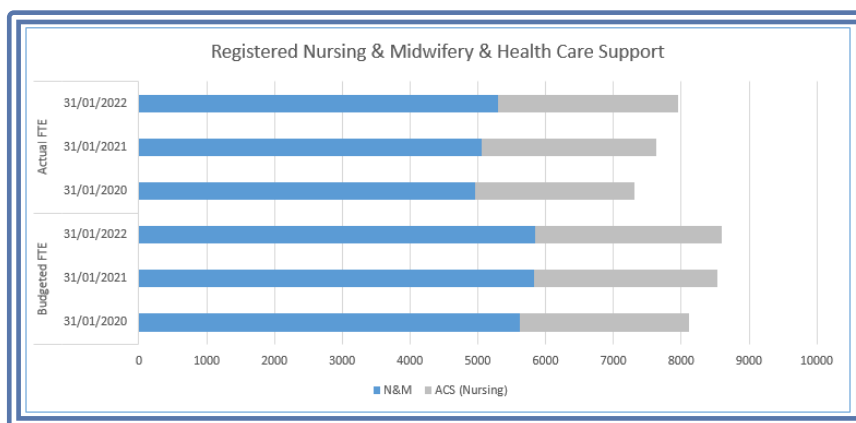


Across the year, we have seen an increase in new service provision across Test, Trace & Protect (TTP) and the Covid-19 Vaccination programme, whilst seeing new service investment across areas such as Emergency Medicine and Stroke.

Recruitment activity has significantly increased across the year as a result, with the number of FTE adverts placed in January '21 being 460 compared to 846 in January '22.

This is reflective of new service developments together with a focussed proactive approach to appointing to more roles on a substantive basis. The overall vacancy rate has stayed steady at around 8 - 9% across the same period.

This has led to the workforce teams taking a significantly different approach to recruitment across the year with the development of a new international workforce pipeline initially focusing on nursing which has seen over 100 new nurses come into the Health Board with plans over the next 2-3 years for another 350 to come on stream.



Registered Nursing & Midwifery has increased by 4% in budgeted establishment and 6.5% Actual FTE in post. When set together with Health Care Support Worker increases of 10% budgeted establishment and 11% actual FTE in post this provides a

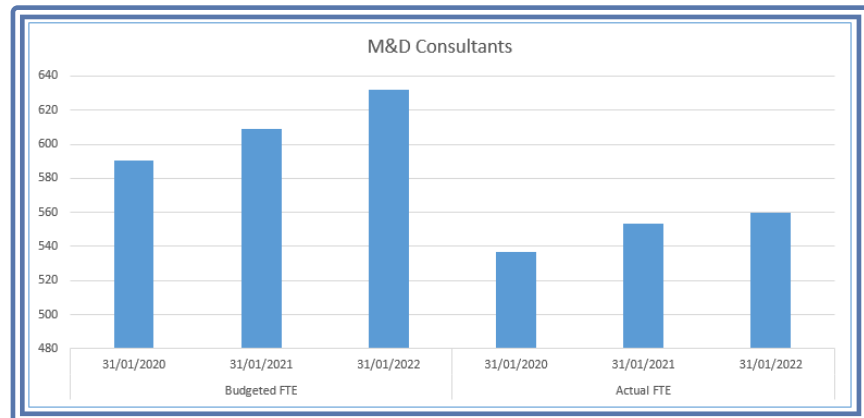
positive picture, albeit one that recognises there remains a significant gap of just under 600 FTE registered nurses and that retention remains a challenge.

Through the Nursing & Midwifery Recruitment & Retention group, there is a range of work streams to improve retention of nurses. In particular, there are three career pathways under review and are being enhanced to make a Nursing career in BCUHB more visible to our staff. The first scheme - Matron Development program, initiated earlier in 2021 received positive feedback. The next two schemes to be taken forward are the Ward Manager development program and Head of Nursing development programme. Whilst these two programmes are at this stage uni-professional, the commitment through this Strategy is to move to multi-professional development being the norm with uni-professional only for very specific topics or skills development.

There has been work undertaken to improve the exit questionnaire uptake to provide a better understanding why people leave BCUHB. From the 1 February 2022 all agenda for change staff terminations are completed via the ESR Self Service system, this process automatically triggers the Exit Questionnaire process. Using the process within ESR will allow us to monitor, identify key themes and review the leaver process more efficiently and enable us to expand on the learning from the "leaving well" departure process developed as part of the implementation support for the new Operating Model.

This methodology has been used to develop a medical pipeline, enabling the development of a proactive system for forward planning on medical recruitment, particularly at Consultant Level and as it progresses, plans are to roll this out across medical grades and specialities.

Our Medical & Dental Consultant workforce has increased by 7% budgeted FTE and 4.5% actual FTE in post. Whilst all other grades have seen an increase, by far the smallest increase has been in directly employed General Practitioners. Further development of a sustainable strategy for our primary care workforce is a key strategic priority for the term of this Strategy and beyond.



We have adopted new streams into our pipeline for medical staff and have been working to bring Junior Doctors who qualified abroad, but are English residents into the Health Board at a rate of 10-20 a year. We have recruited four as of January 2022.

Alongside this, to continue to run in parallel with national and UK recruitment we are working with partners to supply overseas doctors for areas such as Emergency Medicine, General Practitioners and other targeted specialities.

Clinical and Service areas, Finance and Workforce teams have all worked collaboratively to develop a new campaign approach to advertise service vacancies as a whole. This has been particularly successful in the case of the Stroke service, which traditionally has been a hard to recruit to area.

Our attraction approach over the last 12 months has been about moving away from singular transactional vacancies to a more holistic approach on two fronts. The first relates to the service-based roles as part of service-orientated recruitment campaigns for new service developments. Major investment has been made in services such as Stroke and Emergency Medicine, and where there has been historical challenges in recruiting such as Pharmacy and Child and Adolescent Mental Health Services (CAMHS). The second is around professional staff groups such as nursing and Medical & Dental staff where there has been recruitment challenges over a sustained period. The approach in this case has focused on the whole attraction package an individual can access working in North Wales in terms of lifestyle choice on a personal level alongside the professional opportunities such as involvement in the new Medical and Health Sciences School coming on stream in the near future.

There has been a specific focus recently on the Primary Care workforce, with the development of a detailed GP Workforce Recruitment & Retention Strategy. This includes current staffing positions and plans to attract and build sustainability across the workforce in this area.

As at September 2021, there were over 95 GP practices across North Wales, 11 of which being directly managed by the Health Board through its managed practice model (where the Health Board directly employs staff). The Health Board has achieved some level of success over the past 12 months in terms of recruitment across Primary Care and will continue to implement the plans described in the GP Workforce Recruitment & Retention Strategy.

From January 2021 to September 2021, 390 staff joined the Health Board against 270 who left. This is a net gain of 120. Across our GPs specifically we saw a net increase of 73 but this was mainly across the more junior grades whilst across salaried and partner GPs we saw a net loss of 6. This is a specific area of focus and we are working closely with the Primary care teams to build a sustainable GP workforce across North Wales going forward.

Clinical Workforce Service Review programme - As part of the evolving Workforce Planning approach the Health Board has commissioned a series of clinically led workforce reviews to look at what the workforce is now and what it needs to be in the future. These reviews provide a systematic way of evaluating current practice, to identify best practice, review compliance with existing policy, and making quality improvements required. This in turn will improve outcomes for patients and ensure we measure the impact of the changes made. An example of this approach is across Emergency Medicine and Stroke, allowing the Health Board to understand the current state of practice, and what needs to be actioned to deliver 21st Century care. This in turn informs our workforce planning, commissioning and recruitment, both now and going forward, with direct links to initiatives such as the North Wales Medical School and the integrated Health & Social Care Workforce Strategy development.

Working with the clinical service teams to produce a multi-year plan to support the service now and sustain it going forwards has involved looking at current patient activity levels, current and future clinical pathway options, and current and new workforce delivery models. This has been quite complex across the Health Board given the multi-faceted nature of the geography and the differing needs of the patient cohorts across North Wales.

Reviews are currently taking place in Colorectal, Emergency Medicine & Same Day Emergency Care (SDEC), Women's Services, Mental Health, General Surgery, Pharmacy and Stroke Services. There are plans to extend further with Anaesthetics and Critical Care in 22/23. Many of these schemes are longer-term developments and it is expected that for the majority of the services outside of Emergency Medicine and Stroke recruitment activity would only commence in year 2 of the plan.

Workforce Planning & Commissioning - We are taking major steps forward to utilise the data available to the Health Board to inform planning now and in the future.

The development and roll out of the Recruitment Pipeline dashboard, which is just one example, has allowed both workforce and operational teams to see at a glance a snapshot of

recruitment activity across the Health Board. This includes having the ability with Power BI technology to drill into this data to look at a specific area/ward within the Health Board to understand the current position and predict the necessary recruitment activity required to close any gaps. This, triangulated with over-arching trend data in, age profiles, turnover rates etc. and known service pressures, allows workforce information to be utilised in the short to medium term planning cycle which has previously has not been accessible. In addition, this information will support the monitoring our recruitment activity to inform strategies to create a more inclusive/diverse workforce which is reflective of the demographics of the North Wales population

To support the development of and prioritisation within the IMTP for 2022-2025 we have aligned the educational commissioning process in order to be able to triangulate the three elements of the workforce-planning triangle. This has allowed us to start to develop our plans to not only support in year 1, but also be able to identify any potential gaps across years 2 and 3 and also plan for year 4 and beyond. Below is the current position of the graduates across a 6-year profile.

Workforce Areas	Headcount of New Graduates & Year of output						
	2022	2023	2024	2025	2026	2027	Total
Allied Health Professionals	132	119	133	108	144	6	642
Healthcare Science	15	16	27	22	25	2	107
Nursing and Midwifery	757	768	773	838	686	81	3903
Other Professions	12	12	12	12	0	0	48
Pharmacy	37	34	15	23	4	0	113
Total	953	949	960	1003	859	89	4813

Occupational Health and Safety - Good Occupational Health and Safety (OHS) is good for all. A workplace that promotes staff wellbeing and the development of a strong safety culture is vital in achieving our vision of providing the best care we can for the people of North Wales.

Over the next three years, we plan to reduce avoidable harm to our staff and patients. We will do this by providing a safe and healthy environment free from violence and secure for all our staff and patients. We will as a minimum comply with relevant Health and Safety legislation and go beyond this where practicable to help our people achieve a healthy work life balance and improve their wellbeing through work.

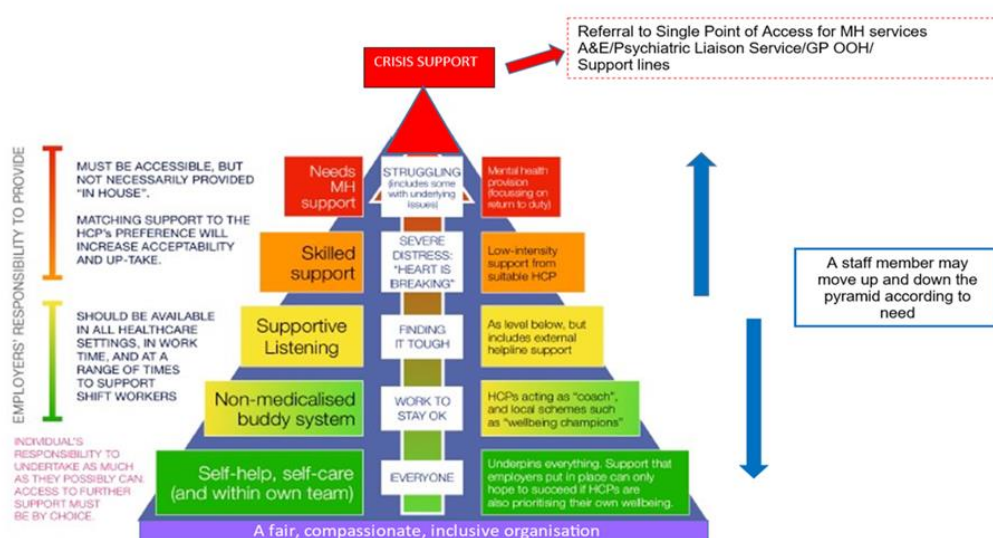
Our safety objectives support the building of a positive safety culture through effective leadership behaviour. We want all of our people to feel supported, empowered, resilient and safe. **The Strategic OHS and Security Improvement Plan** aligns to this strategy to enable the organisation to continue to develop and build on its people who are the organisations greatest asset.

Staff Wellbeing Support Service (SWSS) - It is acknowledged that the Covid-19 pandemic has had an impact on the emotional and psychological health and wellbeing of health care staff, over and above the day-to-day pressures of working in healthcare. This includes the potential for a post-pandemic increase in feelings of stress, anxiety and burnout amongst staff as they reflect on their experiences of working through a pandemic whilst also working to 'catch up' with backlogs of work generated during the pandemic, including those in planned care and cancer services.

We know that supporting staff to stay emotionally and psychologically well in work is essential to creating the right conditions for staff to flourish and enable them to deliver high quality care. We also know that the provision of emotional and psychological support for staff is central to creating a compassionate and psychologically safe organisational culture and crucially supports the recruitment and retention of staff as the Health Board continues with its ambition of becoming an employer of choice.

During 2021/22, we built upon and enhanced the emotional and psychological support available to our staff, bringing services together into a cohesive and integrated staff wellbeing support service model (SWSS). This included appointing a new Strategic Lead for Staff Wellbeing to oversee the development and delivery of the SWSS.

Our wellbeing service is created on a 'pyramid' model of support that encompasses five interconnected levels of support for staff's emotional health and psychological wellbeing providing a range of support to meet the differing needs of staff. SWSS provides support to all staff, (including locums), volunteers, students and trainees on placement.



Our wellbeing service provides staff with access to five levels of care:

- **Levels 1 and 2** support staff to self-care and to 'stay okay' and psychologically well at work with the support of wellbeing champions, coaches from the BCU Internal

coaching network, emotional resilience training, and wellbeing workshops provided through our Occupational Health and Wellbeing service.

- **Level 3** support provides counselling support for when staff are starting to 'find things tough' through our Occupational Health and Wellbeing service and through RCS, an external not for profit organisation with whom the Health Board has a contract to provide support for staff who prefer to access support in this way.
- **Level 4** is more bespoke support provided by a Clinical Psychologist (through our internal SWSS staffing with some provision also available from our external provider) for staff experiencing distress and who may have a degree of complexity that may not be appropriately seen by practitioners in Level 3.
- **Level 5** support is provided for staff who may be experiencing an acute crisis or are at risk of self-harm with the support of staff within our Mental Health and Learning Disabilities Division.

Importantly, our SWSS is underpinned by a 'no wrong door' policy with services working together to ensure staff are supported to access the level of support they need from the first point of contact without the member of staff needing to contact more than one service. Pathways into and between services within SWSS have been developed to ensure the delivery of a co-ordinated and cohesive service which is easier for our staff to access and navigate.

To develop our SWSS, we have recruited additional posts to better support and expand our network of Wellbeing Champions and to provide additional counselling and Clinical Psychology capacity. We have also secured supervision for internal coaches and undertaken pilots of other supporting initiatives including Wellbeing Blitz and Taking Care Giving Care, as well as continuing to provide emotional resilience training. We will soon be introducing our first phase of Schwartz rounds.

The evaluation of our SWSS is ongoing, which includes seeking anonymised feedback from staff who access support, including asking staff about the additional ways we can continue to develop our wellbeing service further.

We know that our staff with protected characteristics – including those who are from a Black, Asian and Minority Ethnic background, disabled staff or staff who experience socio-economic disadvantage – can face additional challenges in remaining emotionally healthy and psychologically well in work and may find it more difficult to ask for support when they need it.

We will continue to work with our staff networks to promote the availability of our SWSS and to identify ways we can make SWSS more accessible and tailored to their needs.

A further area of focus for development of our SWSS is to provide support for teams/groups of staff and their line managers whilst continuing to provide support for individual staff.

Our aim will be to replicate the five tier integrated 'pyramid' model of support (as above) to provide support to teams and line managers:

- ✦ for their emotional self-care and to remain psychologically well (Levels 1 and 2),
- ✦ early intervention support for when teams and line managers may be starting to find things tough emotionally (Level 3)
- ✦ as well as providing more intense support for teams and line managers who are experiencing difficulties (Levels 4 and 5).

Section 3: Our Priorities for Delivery 2022 – 2025

Considering our future work and the people requirements to deliver our strategic priorities, it is clear that to deliver this we need to:

Focus on our culture & employee experience striving to create an inclusive, healthy & empowering environment that actively recognises what matters most to our diverse and multi-generational workforce and reflects the communities we serve in support of our equality duties.

Understand and plan for the numbers and types of skills that we will require, developing clear build, buy, borrow and bot (automation approaches), alongside a more sustainable way of funding multi-year investments.

Embed succession planning & talent management to identify & grow internal talent for critical roles.

Develop innovative ways to attract and develop our talented people, addressing scarce skills & critical roles. Include a greater focus upon widening access to new and different labour markets, re-profiling roles & re-skilling people and contributing to a competitive & successful economy.

Organise ourselves to maximise agility & personal contribution by reducing silos & increasing collaboration across boundaries, recognising this requires better people data, processes & a shift in mind-set within the organisation and in partnership with our Trade Union colleagues & our staff.

Recognise the key enablers to our people strategy, optimising the use of data, technology & relationships. Support staff to exploit these opportunities, including building access to the skills and expertise we may not have, through an external commissioning approach.

Clarify educational requirements & their equivalence as well as agreeing the balance of breadth or generalist skills versus depth or specialism needed.

Influence the design, commissioning and sustainability of relevant education provision & embrace new & immersive ways of delivering education, training and development.

Shape work to fit the lives of our people through greater use of flexible working in its widest sense, & rethinking how we manage careers to respond to the changing needs and expectations of the next & future generations of staff.

Continue to invest in our managers and leaders who are critical to creating the climate in which their teams & colleagues can thrive.

Building greater understanding & alignment of our workforce planning processes & ensuring that all of our attraction, recruitment & appointment processes are value based & value adding, efficient, safe, & effective. Making it easier for people to do the right thing for their services

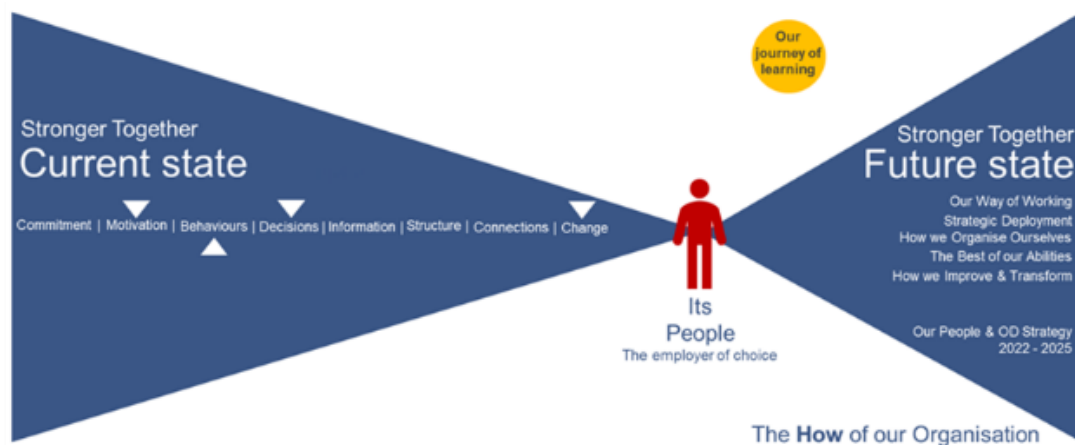
Align our People Services to the Operating model providing excellent customer focussed & outcome based services that are easy to access, consistent & reliable, forward thinking & innovative.



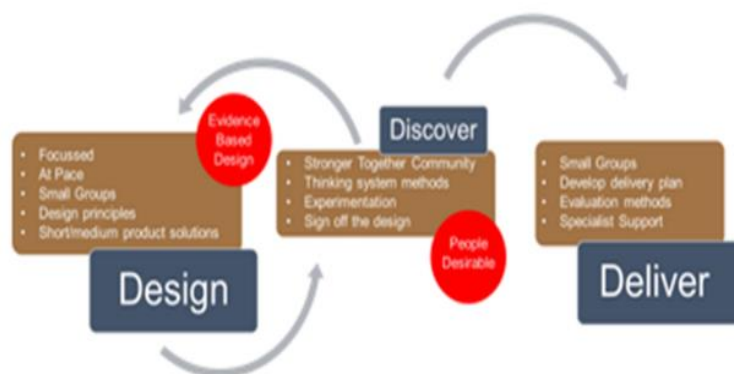
Discovery to Design to Delivery – 5 Programmes of Work

In 2021/2022 the Health Board embarked on an ambitious three year people and organisational development journey (Mewn undod mae Nerth/Stronger Together). This was and continues to be aimed at enabling the organisation to move forward and deliver its Long term Strategy – Living Healthier Staying Well and IMTP (the What) through delivery of its People Strategy and Plan – Stronger Together (the How).

This Route Map recognises that at the heart of the transformation will be our staff, partners and patients in short, 'Our People'.



Our methodology - Having received feedback from 2,000 staff as well as triangulating with internal and external reviews to inform our learning we have a mandate for change.








The overwhelming response supported the shared commitment to grasp the opportunity to:

- | | |
|---|---|
|  Purpose & Goals
Reset & connect |  Decision making
Establish clear framework to empower |
|  Behaviours
Develop our shared standards |  Leadership Development
Develop framework & increase opportunity |
|  Engagement & Communication
Learn from Discovery |  Structure
Aligned to our purpose |
|  Role & Responsibility
Establish clarity |  Change
Develop skills and capacity |
|  Multi Divisional Team working
Create conditions to encourage & enable |  Personal Contribution
Clear & recognised |

Using the key determinants for organisational health and success, we have and are committed to the principles of co design against a framework for improvement.

This framework has been aligned to five programmes of work

-  **Our Way of Working**
What we value and how we should treat each other – including how colleagues are listened to and supported
-  **Strategic Deployment**
The need for us all to understand how we are doing in our role and how the things we do connects to the Health Board's purpose and goals. Learning from the decisions we take
-  **How we organise ourselves (Operating model)**
Make it easier to get things done, improve how we organise and run the organisation.
-  **The Best of our Abilities**
Make it easier to get the skills and capacity we need from both within and from outside to support your work.
-  **How we Improve & Transform**
Collaboration and working together more effectively to address our most challenging issues and take advantage of improvement opportunities.



Our Way of Working

What we value and how we should treat each other – including how colleagues are listened to and supported

To deliver this, we will:

Values & Behaviours – Develop a behavioural compact for all professional groups. The behavioural compact will be embedded in every aspect of the employee journey from on-boarding, active employment and exit. Individuals and teams will be able to demonstrate how their behaviours are having a positive impact on individual and team performance in the provision of patient care.

Individuals will be able to describe being engaged in the organisation's health and performance. Customer focussed – ensuring patients, partners, contractors, and colleagues always receive the best service and are treated with respect and inclusivity.

Learning Culture – Building on the progress made with the introduction of Speak out Safely and learning from the feedback from discovery we will co design our “learning from” processes as part of the development of our transformation and improvement system.

Staff Support & Wellbeing - Building on the learning from our Staff Support and Wellbeing Services we will establish this comprehensive service focussed upon supporting staff when they most need it, developing strategies for self-management and prevention and supporting leaders and managers to identify and address early warning signs as well as creating the environment for colleagues to thrive.

Engagement & Communication - Building on the existing structures and incorporating new mechanisms to support individuals through their employee journey, strengthen existing and developing new two-way communication networks (Including leadership visibility) and linkage mechanisms, which break through internal boundaries to enable active engagement. Staff will be involved in service improvement through continuous improvement methods and connectivity to the innovation mechanisms, clinical & corporate networks, and the organisation's transformation & improvement function.



Strategic Deployment

The need for us all to understand how we are doing in our role and how the things we do connects to the Health Board's purpose and goals. Learning from our decisions

To deliver this, we will:

Goals – develop and deploy a clear set of organisational priorities and goals with outcome & process metrics aligned to the purpose based on the refreshed Strategy-Living Healthier, Staying Well & Clinical Services Plan.

Individual and team-based goals and supporting actions will be clearly aligned back to the purpose.

Improved system, team & personal performance contribution mechanisms will be rolled-out - designed to link purpose, goals, measures & actions.

Process & outcomes measures will be integrated into the internal operating framework and form part of the integrated performance reporting mechanism.

Business Planning Mechanism – develop and implement a revised Business Planning Mechanism to enable the organisation to deploy the discovery, co-design methodology and track delivery of short-term operational & improvement and long-term transformation plans. Plans based on population need and an evolving capacity across interdependent pathways of care to prevent, manage or meet that demand. Pathway improvement and transformation blueprints will be in continuous development as will service development plans for corporate services.

Information & Performance - Develop and deploy the digital infrastructure and information architecture alongside a capability development plan for operational leads and key users across the organisation. This will support the evolution towards predictive management of unplanned and planned demand, work in progress, processing capacity, activity & backlog across pathways of care at a service and whole system level.

A portfolio of bottom-up vertical outcome and horizontal process metrics which demonstrates achievement of organisational quality, performance & productivity goals at an individual, team, function and service level are developed, providing a single version of the truth in terms performance impact and evidence informed course correction interventions.

A measures framework, which mirrors the design of the organisation, forms a critical element of the performance-operating framework.

Course Correction - Escalation protocols (issue & risks), feedback & learning mechanisms - Performance feedback, risk management, clinical audit systems, complaints, serious incident reporting & management systems will be improved and integrated into the design of the organisations future model of operating.

Feedback loops will be improved to provide information & insight feeds into pathway and service design development activities, strategy development and business planning cycles. Complaints, risk's identification, mitigation development and risk management will be used as a critical aspect of the decision-making mechanisms through the organisation from board to ward.

Team & Personal Contribution - performance monitoring, measurement & learning

- Team and individual goal-based performance feedback mechanisms will be integrated into the design of the organisations future model of operating.

Team based daily performance and continuous improvement events, linked to the organisations continuous improvement intervention proposal will be developed, as will enhanced appraisal mechanisms.

Evaluation of the impact has identified the benefits associated with the adoption of these combined approaches and are built into a regular weekly, monthly annual cycle of review and learning.










How we organise ourselves (Operating model)

Make it easier to get things done, improve how we organise and run the organisation.

To deliver this, we will:

Design principles - Deploy the design principles agreed in collaboration across the organisation to inform development and implementation of a revised operating model including structure, governance, performance and accountability.

-  **Person Centred** – The person is at the centre of all that we do, with an equal focus on keeping people well and providing high quality care and treatment when needed.
-  **Clinically led, evidence based, empowered** organisation - Listening to and empowering colleagues, with quality and equity at the heart of decision-making.
-  **Community focus with regional networks** – Organised around the needs of our communities, with a local focus balanced with regional delivery for the best patient outcomes. Skills and resources organised and supported to provide seamless services and better outcomes.
-  **Consistent standards with equal access** to care and support for all communities across North Wales, following value based healthcare principles.
-  **Effective partnership working**, listening to our colleagues, partners and communities to develop and deliver services that support people to live healthily and stay well.
-  **Compassionate, learning** organisation - Continually improving, using technology and data to simplify systems and innovate.
-  **Processes and ways of working** that make doing the right thing easy.

Clinical, Operational & Corporate Service Design Standards - Implement a detailed and managed rollout that will see the organisation transition to the new design (structure) for operational delivery & large-scale change delivery. The principles of horizontal pathway/processes supported by vertical functions, managed interdependences, job role re-design (Board to ward); decision making architecture, performance monitoring & management, two-way feedback loops, local escalation protocols, service level agreements and risk management mechanisms are integrated into the design.

Decision Making Architecture (Design, Deliver & Assure) – Revise and improve the Board Assurance Framework (BAF)/Scheme of delegation to align with the operating model.

Develop a clear operational governance and assurance framework to ensure that the acts of service design (standards setting), operational delivery and assurance are transparent - with separation of responsibility set within the framework of collective ownership.

Develop and deploy clear guidance to ensure Staff understand who does what & why - across the organisation's leadership functions, with clarity of accountability and responsibility at all levels. Issues/risks/decisions are dealt with at the most immediate and

appropriate level that is consistent with their resolution, role, statutory governance, and boundaries.

Roles & Responsibilities- Deliver plans to ensure clarity of role (autonomy, scope, connectedness, and competency) within the organisations structure is clear for all (Levels 1+ & beyond).

Ensure pathway/process delivery is optimised as job design has aligned activities to the organisations purpose and goals.

Include within role descriptions and accountability agreements the requirement for Leaders to actively consider and promote effective job design within their teams and across the organisation as the benefits associated with this activity are visible through key organisational performance metrics; including e.g. staff surveys



The Best of our Abilities

Make it easier to get the skills and capacity we need from both within and from outside to support your work.

To deliver this, we will:

Education and learning – Using the size, breadth and depth of the organisation to establish the organisation as a key strategic leader in Inter/multi and uni professional learning and education.

Develop a BCU Education and Learning Academy. In the first phase, this will be enhancing the infrastructure in the Primary Care Academy and as we progress through to increase in students numbers across professional groups scaling this to cover the wider organisation.

Working across our clinical and operational networks, with our strategic education partners and with our community partners, build on existing and establish new programmes of education from specialist and postgraduate training to vocational and work skills development and on to life and health skills opportunities.

Talent and Career Development Framework – Develop the structures, processes supported by digital systems support leaders in the active management of talent from recruitment, talent pool building, succession planning, skills & competency development, leadership development, interim role deployment opportunities, welfare management, appraisal, and performance management.

Workforce Planning & Commissioning – Building on the progress made and learning from the pandemic as well as deploying new national frameworks and toolkits, establish a comprehensive workforce planning methodology and framework for deployment of scenario planning linked to demand and capacity and pathway/service transformation.

Using this - develop forward look commissioning plans for education and training to enable the organisation to not only develop the workforce of the future but also, to influence national strategy and planning.

In the first phase this will be focussed upon meeting the challenges of recovery and supporting the development of new models of care and delivery e.g. Accelerated Cluster Development, enhancing prevention and primary care services and delivery of planned care through Regional Treatment services.

High quality, reliable enabling services – recognising the need for efficient and effective, outcome focussed enabling services. Deploying improvement methodology and applying the design principles outlined above to roll out operating model reviews across “corporate” support services to ensure our clinical and operational services are able to focus on what they need to do and the Board to be assured that the organisation is meeting its statutory and regulatory responsibilities.

Safe environment – Building on the significant progress made in meeting core requirements under Health & safety legislation we will further embed safe systems of work across the organisation. Recognising the levels of harm to patients and staff as a result of violence and aggression across the NHS and in our own organisation, we will develop a new model for prevention of harm. Using evidence based measures to address the root causes of harm from violence and the support we provide for patients and staff who harm or are harmed in our care or employment.



How we Improve & Transform

Collaboration and working together more effectively to address our most challenging issues and take advantage of improvement opportunities.

To deliver this, we will:

Building Strong Foundations in Transformation & Improvement System and Structure

– Using the experiences of the people within the Health Board, together with exemplars locally, nationally and internationally we will establish a transformation, continuous improvement and portfolio management system. Optimising the synergies and expertise across key enabling functions e.g. education & learning, finance, planning, public health, research & Development and organisational development to create the environment for transformation and innovation to thrive and for systematic prioritisation and benefits realisation.

Improving the way we manage Large Scale Change – learning from the process of discovery, leveraging the benefits of a standardised approach to the discovery, design, sustainable delivery, and management of change.

Develop and deploy mechanisms to ensure and enable Clinical, operational, and corporate teams to be actively participating in evidence-based discovery and co-design of large-scale care pathway and service change.

Leadership & Management – Develop an integrated Leadership & Management Development Framework for all professional groups based on the principles of transformation and improvement, compassion, experiential practical learning, network development, distributed leadership, team communication, staff safety & wellbeing, systems and how they work, social movement and human factors practice, collaborative & shared decision making and peer to peer coaching.

Productive leader – Develop a suite of development interventions tactically aimed at the top 150 senior leaders and their secretaries/PAs to facilitate a dynamic shift in their working practices. In order to reduce non value adding personal management and administrative activities thereby releasing up-to 20% of their time to reinvest in more value-adding activities. Team based experiential learning encompassing: Meetings Management, E-mail Management, MS Team Management, Digital document management, Workload management, Programme and project status at a glance, Information processing and Thinking systems strategies.

Continuous Improvement & Coaching skills – Develop a Continuous Improvement development programme to enable the organisation to demonstrate measurable improvements in quality, performance, and productivity across both clinical and corporate services.

Ensure all induction, education, learning and contribution frameworks include Individual and team based continuous improvement knowledge, techniques at all levels of the organisation.

Section 4 Conclusion

This People Strategy & Plan sets the future direction for our workforce over the next 3 years aligned to, informed by and importantly positioning the organisation to influence the national context and policy and to deliver our Local Living Healthier Staying Well Strategy through our Integrated Medium Term Plan.

It sets out the fundamental building blocks needed to consolidate progress to date, address the opportunities and challenges facing the workforce and to align efforts across the Health Board and partners.

Much of what is set out in this Strategy is already underway, with issues being recognised and positive action taken. This Strategy endeavours to bring everything together so we do not lose this good work and progress, but build on it by deploying a prioritised approach using our Transformation and Improvement System.

It sets out the fundamental building blocks needed to address the opportunities and challenges facing the workforce and to align efforts across the Health Board.

Central to the delivery of this Strategy is the requirement for true collaboration and partnership at all levels internally and externally with our partners. Everyone will have a role in shaping and delivering improvement plans that take us closer towards achieving the ambitions of this Strategy, meeting the known and unknown challenges. This includes better alignment and integration across organisational and professional boundaries that too often get in the way of doing the right thing for the people at the centre of our services.

The themes within this Strategy have been developed in collaboration with corporate enabling services and clinical and operational teams in response to the feedback from Mewn Undod mae Nerth/Stronger Together Discovery and to enable delivery of the IMTP. This has been and continues to be a learning and improvement process, with each iteration highlighting additional learning and areas for inclusion and or further development.

The models used for assessment and prioritisation will continue to be refined and adapted to ensure it meets the needs of the organisation and is responsive to emerging risks and opportunities.

The detail within the Strategy and Plan will be refreshed on an annual basis aligned with the refresh of the Integrated Medium Term Plan.

This refresh will ensure:

- ❖ The programmes are work are delivering what is required and there is evidence of tangible outcome improvement

- ✦ Any critical developments (risks and opportunities) at national and/or local level are considered and addressed for the year ahead
- ✦ Feedback (both internal and external) through the year is triangulated to ensure the priorities within the programmes of work and plan are relevant
- ✦ The workforce plan is effectively aligned to the delivery of the priorities and is affordable and achievable

As we move through 2022/2023, the transformation underway at both national and local level in terms of workforce modelling, analysis and planning will only serve to further enhance the credibility and accessibility of workforce intelligence to support and inform decision-making and improvement.

Section 5 References and links

All of the documents below can be accessed [here](#)

- ✦ A Healthier Wales
- ✦ Living Healthier, Staying Well
- ✦ Strategic Workforce Planning Framework for Primary Care, Community Service
- ✦ Mental Health Workforce Plan for Health and Social Care
- ✦ A Healthier Wales: Our Workforce Strategy for Health & Social Care
- ✦ Parliamentary Review
- ✦ National Clinical Framework
- ✦ Quality and Safety Framework: Learning and Improving
- ✦ Local Needs Analysis (LNA)
- ✦ Accelerated Cluster Development Programme
- ✦ Strategic Programme for Primary Care
- ✦ Strategic Equality Plan
- ✦ The Occupational Health, Safety and Security Improvement Plan

- ✦ People Strategy & Plan Delivery Plan