



AGENDA ITEM

4.6

PEOPLE & CULTURE COMMITTEE

STRATEGIC WORKFORCE PLANNING AND RETENTION

Date of meeting	08/02/2023
FOI Status	Open/Public
If closed please indicate reason	Choose an item.
Prepared by	Natalie Price, Assistant Director of Strategic Workforce Planning
Presented by	Natalie Price, Assistant Director of Strategic Workforce Planning
Approving Executive Sponsor	Executive Director for People
Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
(Insert Name)	(DD/MM/YYYY)	Choose an item.

ACRONYMS

CTM	Cwm Taf Morgannwg
IMTP	Integrated Medium Term Plan

1. SITUATION/BACKGROUND

- 1.1 Turnover and retention are areas of both challenge & priority within the NHS at an organisational, a local, and a national level. The context of ever-increasing pressures within our healthcare system makes it now more than ever vital that we retain and value our people.
- 1.2 Retention is crucial to our ability to deliver great care to our communities. It is a key pillar of our workforce plans - whilst we focus on strengthening our workforce supply, we must ensure that we continue to prioritise our existing teams – supporting them, developing them and encouraging them to remain within our employment.
- 1.3 This paper seeks to outline the local & national context with regard to NHS Turnover & Retention. It also updates on Cwm Taf Morgannwg (CTM) University Health Board's turnover and retention position: outlining a summary of the data, activities that are underway to support retention and the plans to expand this work. It reflects and reiterates our commitment to taking positive action – better understanding why people leave our employment alongside developing, implementing and reviewing plans to support our people to remain with us and help us to deliver our organisational objectives.
- 1.4 Unless otherwise specified, turnover is defined as the percentage of total number of leavers from CTM in a 12-month period, excluding doctors, dentists in training & Bank, Locum & Honorary staff. Leavers are staff whose employment from CTM has been terminated, so internal moves are not included. Unless otherwise specified the turnover position given is 12-month rolling.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

Strategic Workforce Planning & Retention

- 2.1 As an organisation we are embarking on an ambitious transformation programme, focused on ensuring that our services are delivered in the best way possible to our communities. Strategic workforce planning sits at the very heart of this and is one of our core 10 People Priorities. A robust, modernised and agile workforce will be

fundamental to our ability to deliver against our aims, both now and in the future. Workforce planning is in its essence the process of balancing our workforce supply (skills) with demand – both now and in the future. It's about getting the right number of people, with the right skills employed in the right place at the right time. Supply is not only how we recruit, but how we retain our current workforce – optimising their skills and maximising all opportunities to grow our own.

- 2.2 The importance of retention to both our People & organisational strategies is emphasised within 'A Healthier Wales: Our Workforce Strategy for Health and Social Care' (2020) and NHS England's 'People Plan & People Promise'. These reflect both a recognition of the importance of our staff, but also the challenges regarding retention at a local and national level.
- 2.3 Healthy turnover, monitored & understood through high quality data, will always need to be factored into our workforce plans, which in turn are integrated into our service & IMTP plans on a Care Group and organisational level. Maintaining quality service provision within the context of high turnover rates can be extremely challenging. If turnover rates in an organisation reach unsustainable levels the risks include: a negative impact on organisational performance, increased pressure on our existing workforce, a worsening employee experience, a reliance on high-cost temporary staffing and an urgent need to recruit in a challenging market. These risks are particularly high in our staff groups where we know there to be national, and in some cases international, skills shortages. In these areas finding and training new employees can be protracted, time consuming and costly – if indeed such new employees are found.

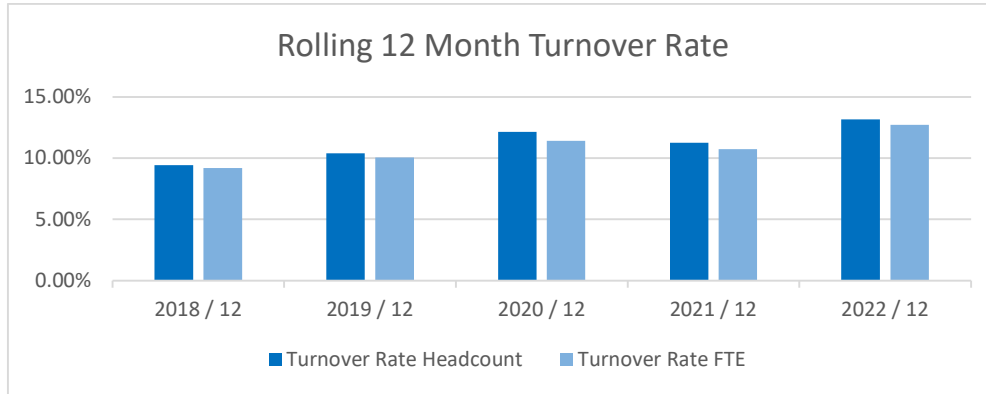
Turnover at CTM

- 2.4 There is a wealth of turnover data available within CTM, NHS Wales and the wider NHS. As outlined above, monitoring and understanding this data is fundamental to our ability to effectively workforce plan. Understanding the "who" and the "why" with regards to leavers will allow us to further develop, implement and refine evidence-based retention improvement plans. Outlined below is a high level summary of our data, a key next step in our retention work is a fuller analysis of this data and the story it tells.
- 2.5 When CTM turnover is taken in totality our overall organisational rate reached 12.71% in December 2022. A comparison of the years 2018-2022 is shown below:



Rolling 12 Month Turnover

	2018 / 12	2019 / 12	2020 / 12	2021 / 12	2022 / 12
Turnover Rate FTE	9.21%	10.05%	11.41%	10.73%	12.71%



By Staff Group

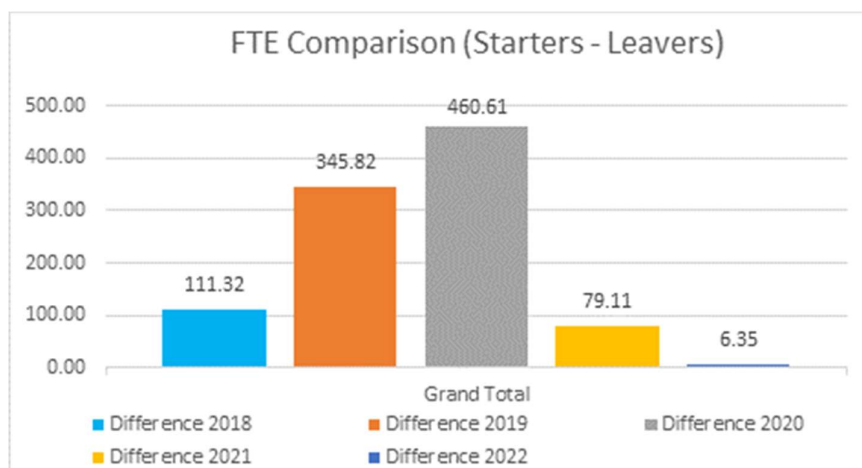
2.6 The table below shows our staff in post headcount, headcount turnover percentage and headcount for leavers for the years 2021-2022. A table including the data for the years 2018- 2022 is included in Appendix 1. Turnover has increased across our staff groups, with high numbers of staff leaving nursing and midwifery, additional clinical services (which includes Healthcare Assistants) and administrative & clerical staff groups. These represent our biggest staff groups and for each the turnover rate was worse in 2022 than in the previous four years, representing an increasing large volume of leavers. For some groups (e.g. healthcare scientists) the fluctuations in turnover rates are affected by the relatively small number of staff.

Staff Group	Headcount Staff in Post	Headcount Leavers	Headcount Turnover	Headcount Staff in Post	Headcount Leavers	Headcount Turnover	% change 2021 Vs. 2022
	31-Dec-21	2021	2021	31-Dec-22	2022	2022	
Add Prof Scientific and Technic	399	52	13.27%	424	59	14.29%	Up
Additional Clinical Services	2383	337	14.08%	2425	358	14.91%	Up
Administrative and Clerical	2540	263	10.58%	2574	374	14.66%	Up
Allied Health Professionals	802	93	11.86%	814	115	14.29%	Up
Estates and Ancillary	1435	147	10.24%	1404	153	10.79%	Up
Healthcare Scientists	205	39	18.44%	213	19	9.07%	Down
Medical and Dental	902	52	7.58%	797	78	11.10%	Up
Nursing and Midwifery Registered	3994	410	10.50%	4024	497	12.49%	Up
Students	19	4	6.84%	69	1	2.17%	Down



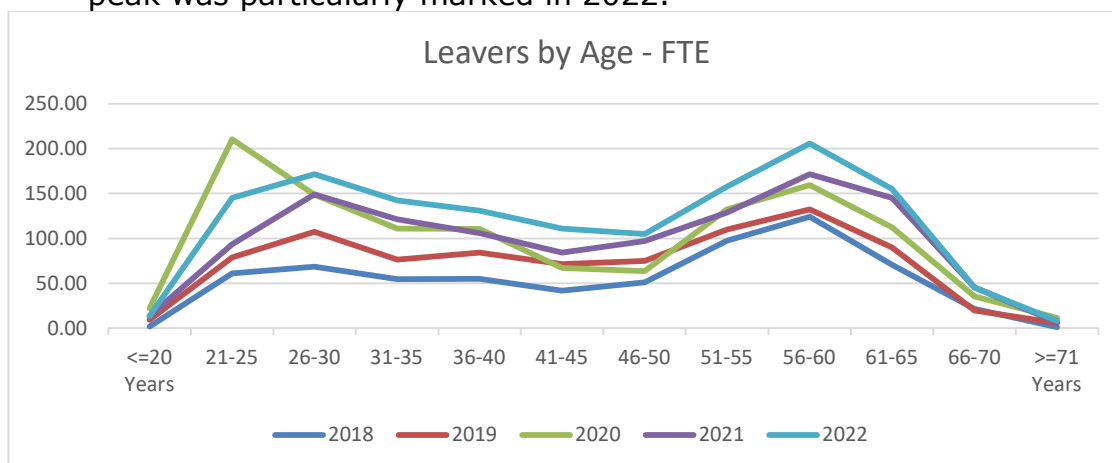
Starters & Leavers

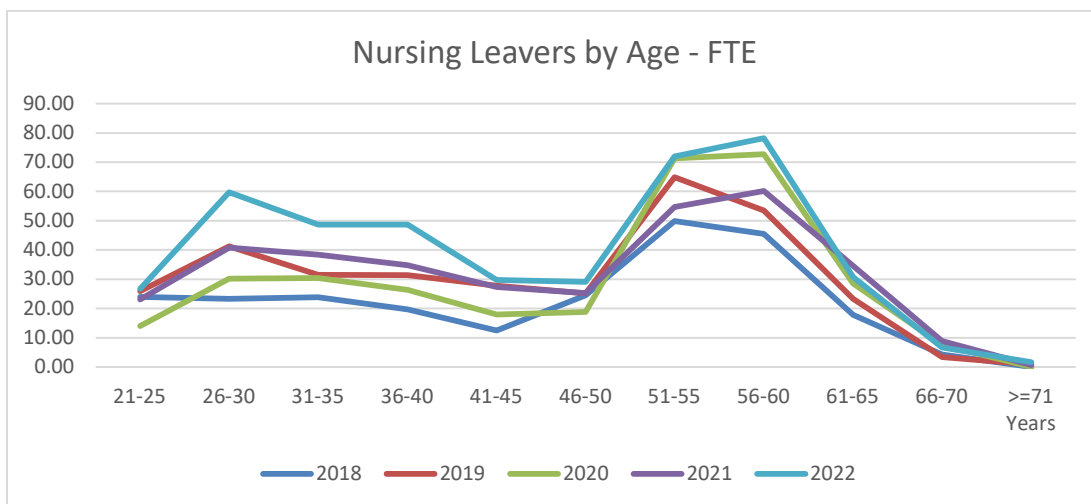
2.7 Within the graph below yearly new starters at CTM are offset against our leavers. In 2020 an increase in recruitment and a slight downturn in turnover led to an improvement in this position – we were gaining more members of staff than we were losing. However, 2021 saw a marked decrease and in 2022 when the number of leavers (FTE) is taken away from number of starters (FTE) it leaves only 6.35 fte. This emphasises that recruitment efforts alone will not suffice in improving our supply position.



By Age

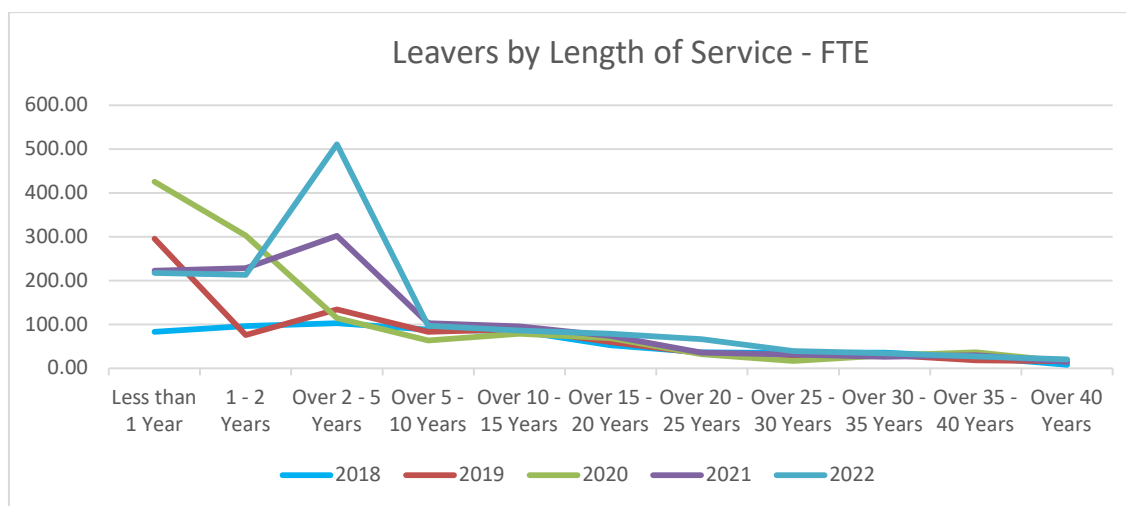
2.8 There has been an increase in leavers across our age bands from 2018-2022. Historically the volume of leavers peaked at the ages of 50-65, however a developing trend is a second peak at the ages 21-35, and particularly the age group 26-30. As shown in the second graph below within our nursing & midwifery workforce this second peak was particularly marked in 2022.

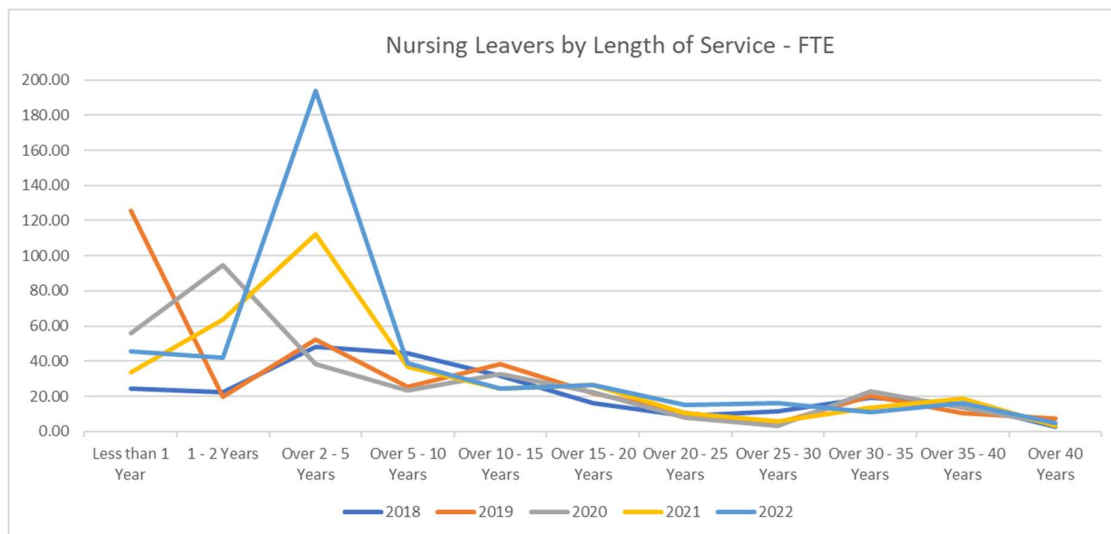




By Length of Service

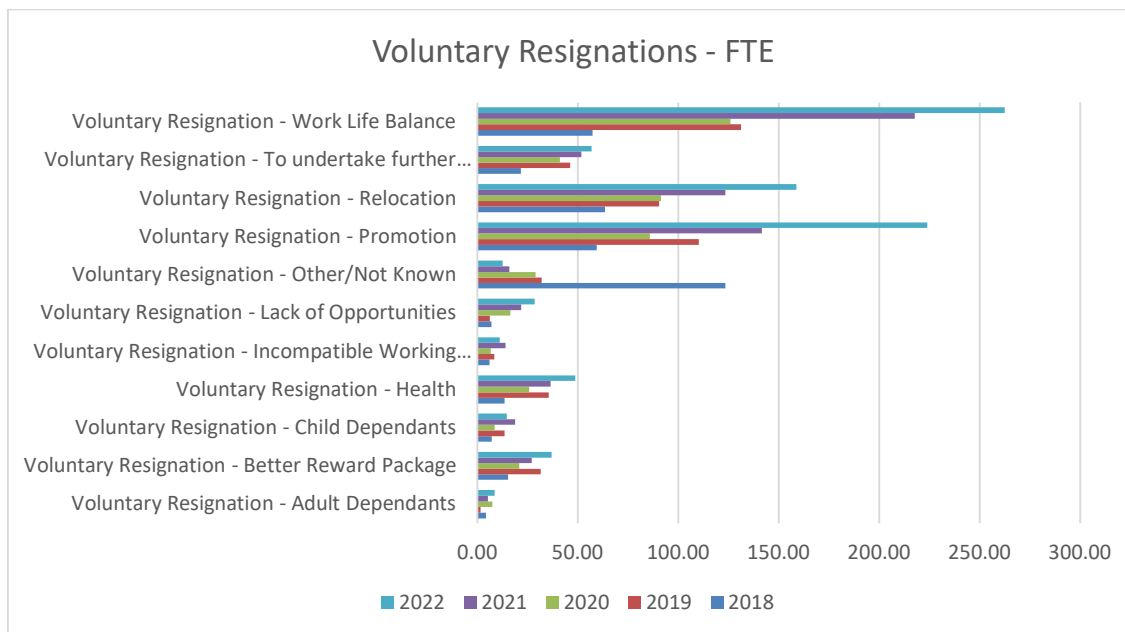
2.9 There has also been an increase in staff leaving within 5 years of joining CTM. Our number of leavers (FTE) is highest between 2-5 years, as is shown in the second graph this is particularly apparent with our nursing & midwifery workforce. There has been little change in the numbers of staff leaving after 5 years of service.



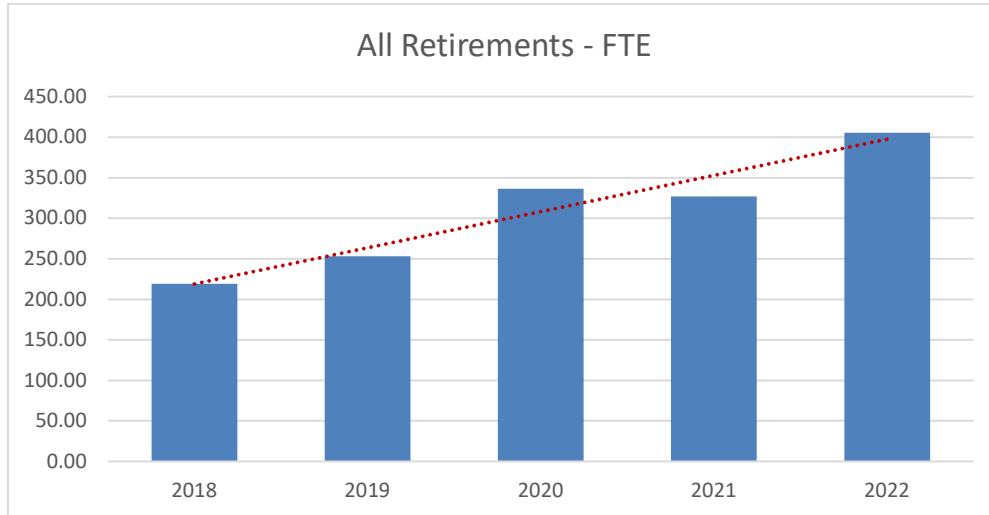


Reasons for Leaving & Retirements

2.10 Understanding why our staff leave is a key first step in refining our retention strategy. In 2022 the top 3 reasons for leaving captured within our ESR data were: work life balance (30%), promotion (26%) and relocation (18%). We must now look to expand our understanding of the reasons why our staff are leaving within each of these categories.

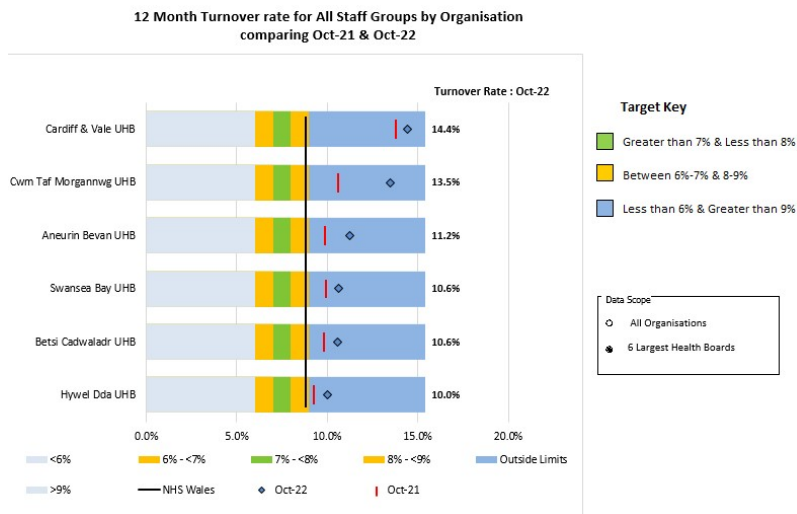


2.11 There has also been a year-on-year increase in the number of retirements. With over 35% of the workforce aged 51 and above this is a trend that is likely to continue to increase.



Turnover & Retention: The Local & National Context

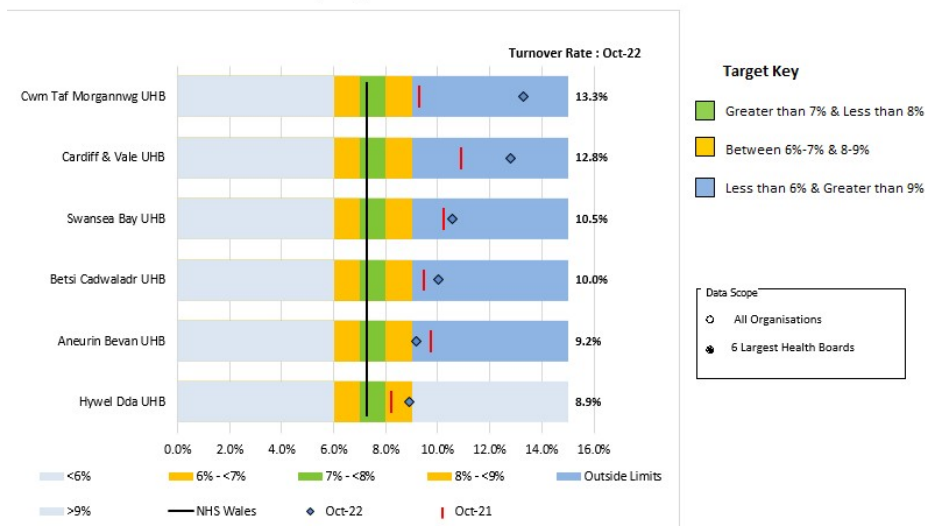
2.12 Our challenges with regards to turnover & retention are reflective of the local and national NHS picture. As shown below within Wales's six largest Health Boards in October 2022 the turnover range was between 10% - 14.4%. CTM at 13.5% had the second highest rate. Within the graph below the blue diamond is the position in October 2022 and the red line indicates 13 months previous.



2.13 Regarding the nursing & midwifery staff groups within those six Health Boards the CTM rate in October 2022 was the highest:



12 Month Turnover rate for Nursing and Midwifery Registered by Organisation
comparing Oct-21 & Oct-22



2.14 The NHS turnover rate in England is also increasing, with a rate of 12% at September 2022 (*NHS Digital NHS Hospital & Community Health Service workforce statistics*). Turnover in the U.K is set in a context where vacancies remain very high by historic standards (*Labour Market Statistics, December 2022*). Within the latest LMS report the Institute for Employment Studies emphasises the importance of retention, and the role of flexibility in the workplace for both retention and recruitment.

Retention Initiatives

2.15 At a local and national level, in the context of the challenges outlined above, there is a recognised need to focus on Retention strategies. An All Wales Nurse Retention Group has recently formed as part of the work on the All-Wales Strategic Workforce Plan for Nursing, recognising the specific national challenges with the nursing workforce. The purpose of this work is to develop a toolkit for use by Health Boards and Trusts. This will look to learn from the Nursing Retention Toolkit developed within England, which enables organisations to undertake a self- assessment against the seven elements of the NHS People Promise. NHS Wales is also also engaging with NHS England to understand the impact of their approach and share good practice.

2.16 Within CTM our People Priorities guide a range of work plans which are linked to retention. These pieces of work span across our teams and include well-being, employee experience, values & behaviours, leadership and management development, and strategic workforce planning. The work of the Employee Experience team is designed to improve our staff experience and support retention. A key piece of

work currently underway is the development of a new Moving On exit questionnaire. It has been recognised that exit questionnaires were previously not routinely completed. The new process will launch on the 30th January 2023, capturing both leavers and internal movements. This, along with our ESR data, will crucially enable us to have a better understanding of why our people leave – and what we could do to retain them.

2.17 Another recent key piece of work has been the scoping exercise by People & Nursing colleagues to assess our progress on retention against the NHS England Retention toolkit and produce a series of recommendations.

Next Steps on Retention

2.18 Our ambition is to further strengthen our approach to Retention through the formation of a Retention Steering Group. This would enable oversight of the full breadth of this complex agenda as we refine and further develop our strategy & programme of work.

This group would:

- Be formed in partnership between People, Nursing and Trade Union colleagues
- Ensure we access, monitor & understand all relevant data
- Assess the impact of retention initiatives
- Consider the learning from the implementation of the English Retention Model & what we adapt for use
- Learn from best practice across the NHS and beyond
- Ensure active participation in the All-Wales Retention group and influence on a national level

It is recommended that the initial focus of the group be Band 5 Registered Nurses and Healthcare Assistants.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 If the turnover position continues to worsen there is an increasing risk it will impact on our ability to delivery care to our communities, our employee experience and our financial position.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)



Related Health and Care standard(s)	Staff and Resources
	If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	Choose an item. If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Inspiring People

5. RECOMMENDATION

- 5.1 The Committee is asked to **NOTE** the contents of this paper, and **SUPPORT** the approach to developing a Retention Steering Group, which will develop a programme of retention activities to minimise turnover.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Cwm Taf Morgannwg
University Health Board

Appendix 1

Staff Group	Head-count Staff in Post	Head-count Leavers	Head-count Turnover	Head-count Staff in Post	Head-count Leavers	Head-count Turnover	Head-count Staff in Post	Head-count Leavers	Head-count Turnover	Head-count Staff in Post	Head-count Leavers	Head-count Turnover	Head-count Staff in Post	Head-count Leavers	Head-count Turnover
	31-Dec-18	2018	2018	31-Dec-19	2019	2019	31-Dec-20	2020	2020	31-Dec-21	2021	2021	31-Dec-22	2022	2022
Add Prof Scientific and Tech.	308	35	11.42%	363	55	16.44%	385	46	12.37%	399	52	13.27%	424	59	14.29%
Additional Clinical Services	1483	108	7.35%	2216	171	9.29%	2407	177	7.79%	2383	337	14.08%	2425	358	14.91%
Administrative and Clerical	1701	155	9.17%	2298	177	8.86%	2438	170	7.14%	2540	263	10.58%	2574	374	14.66%
Allied Health Professionals	477	48	10.18%	714	81	13.60%	766	78	10.40%	802	93	11.86%	814	115	14.29%
Estates and Ancillary	988	72	7.31%	1457	94	7.69%	1436	117	8.09%	1435	147	10.24%	1404	153	10.79%
Healthcare Scientists	168	20	11.73%	210	10	5.33%	219	26	12.12%	205	39	18.44%	213	19	9.07%
Medical and Dental	681	40	9.21%	1052	56	10.33%	1013	64	9.65%	902	52	7.58%	797	78	11.10%
Nursing and Midwifery Registered	2503	282	11.21%	3679	381	12.33%	3812	378	10.07%	3994	410	10.50%	4024	497	12.49%
Students	5	0	0.00%	15	0	0.00%	98	9	2.35%	19	4	6.84%	69	1	2.17%