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CIPD Membership Number: 55478700

Qualification: CIPD Diploma in Applied Human Resources (CIPDL5)

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By signing below, I confirm that the work/evidence presented is my own, unaided work. I understand the regulations pertaining to candidate malpractice and the action that may be taken as a result.

Signed: Emma Carrington

Date: 24 May 2020

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Candidate name: Emma Carrington				CIPD Membership/registration No.: 55478700		
Qualification title: Contributing to Resource and Talent Planning				Unique Learner No. (ULN): 1910725		
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	activities are addressing potential needs.		SWOT Analysis of HEIWs approach to recruitment, retention, and succession planning	EV15		
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5KRTP	3.4 Plan and prepare for agreed role, ensuring the availability of any materials or resources required.	3.4	HEIW plan on a page HEIW annual update – away day presentation Workforce Strategy with Social Care Wales / HEIW vision and strategic aims	EV3 EV4 EV5		

			HEIW Successors SWOT Analysis of HEIWs approach to recruitment, retention, and succession planning HEIW Pestle HEIW Metrics HEIW IMTP Workforce Planning benefits Workforce Planning Best Practice DPIA / Performance / Executive reporting / Agile working (Also refer to Recruitment and selection training/ PADR etc EV25 &29) Change plan Communication Plan HEIW New Starter Checklist – First 90 days onboarding checklist GANTT Chart ABC Framework GDPR HEIW Consultation and Privacy Notice E-mail to focus group participants and consent form (These were considered further into the activity)	EV14 EV15 EV16 EV17 EV27 EV38 EV30 a b EV21,22 &23 EV49 EV50 EV51 EV52 EV58 EV62 EV63 EV64		
5KRTP	3.5 Undertake agreed role in a timely and accurate manner, in line with organisational procedures and legislative requirements.	3.5	Presentation detailing outcomes, impact of change and recommendations Email sign off from senior W&OD manager Prosci Diagram Email from S. Manager asking to develop tasks that needed to be achieved Approval e-mail from the Director of W&OD	EV67 EV68 EV69 Refer to EV47		

				Refer to EV48		
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			GDPR	EV62		
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			E-mail to focus group participants and consent form (These were considered further into the activity)	EV64		
			Focus Group notes	EV65		

			Feedback Presentation detailing outcomes, impact of change and recommendations Email sign off from senior W&OD manager Prosci Diagram Email from S. Manager asking to develop tasks that needed to be achieved Approval e-mail from the Director of W&OD	EV66 EV67 EV68 EV69 EV47 EV48		
5KRTP	**Provide information and support to stakeholders in line with their identified requirements.**	2.2	Change Management Best Practice Peer support group feedback ABC Framework Workforce and OD New starter introductory meetings	EV15 EV16 EV17 EV18		
5KRTP	**Apply techniques for maintaining positive working relationships throughout the change processes.**	2.3	ABC Framework Workforce and OD New starter introductory meetings			
5KRTP	**Monitor the effectiveness of the implementation, agreeing and making justified adaptations where required.**	2.4	New Starter Engagement Survey Engagement Survey Presentation: Building high Performance Teams	EV19 EV20		

5KRTP	**Maintain records of the change process in line with organisational requirements.**	2.5	DPIA HEIW Consultation and Privacy Notice	EV21 EV22		
5KRTP	**3.1 Measure the effectiveness of the change process in meeting data and main findings.** **3.2 Identify further work required to embed changes and/or further developments required.**		E-mail to focus group participants and consent form Focus Group summary report and recommendations	EV23 EV24		
5KRTP	**3.3 Communicate the key outcomes and the impact of change to stakeholders.**		Presentation detailing outcomes, impact of change and recommendations Email sign off from senior W&OD manager	EV25 EV26		
5KRTP	**3.4 Evaluate the effectiveness of own performance in contributing to the management of change.**		Prosci Diagram	EV27		

Candidate declaration:

- I confirm that the work/evidence presented for assessment is my own unaided work.
- I have read the assessment regulations and understand that if I am found to have 'copied' from published work without acknowledgement, or from other candidate's work, this may be regarded as plagiarism which is an offence against the assessment regulations and leads to failure in the relevant unit and formal disciplinary action.
- I agree to this work being subjected to scrutiny by textual analysis software if required.
- I understand that my work may be used for future academic/quality assurance purposes in accordance with the provisions of the Data Protection Act 1998.
- I understand that the work/evidence submitted for assessment may not be returned to me and that I have retained a copy for my records.
- I understand that until such time as the assessment grade has been ratified through internal and external quality assurance processes it is not final.

Signature:	**ELCarrington**	**Date:**	**24/05/21**

Executive summary

HEIWs people are the organisations most precious asset. HEIW's aspiration is to be an excellent employer and a great organisation to work for. This has been a strategic aim since they were created in 2018, and they continue to develop their People, Inclusion and Organisational Development practices to enable us to achieve this aspiration.

When HEIW was established in October 2018, it brought together staff from 3 former organisations – Workforce Education and Development Service, Wales Deanery and the Wales Centre for Pharmacy Professional Education. At this point there were 92% of HEIW staff on Cardiff University Terms and Conditions who transferred to HEIW under *Transfer of Undertakings (Protection of Employment) Regulations* (TUPE) arrangements. This is a significant challenge for the People Team, who need to be familiar with two complex sets of employment terms and conditions on a daily basis.

It is essential that HEIW have a motivated, engaged, and sustainable workforce that is competent, confident and have the appropriate capacity to deliver HEIW's future priorities in support of NHS Wales' delivery of excellent health care provision. Its essential that HEIW continue to support existing staff and be attractive to future workforce talent as the organisation matures.

HEIW continue to embed our diversity, equality and inclusion agenda which is informed by strong leadership, co-production, collaboration, and direct engagement with those who are affected by the decisions we make. This is progressed through ongoing communication and engagement with staff, stakeholders, and their representatives to inform our future plans.

During 2018, in partnership with all staff, HEIW developed organisational values and behaviours framework, for which we won the *Improvement in Colleague Engagement and Experience* award at the recent Healthcare People Management Association (HPMA) Wales. This framework underpins all of HEIWs business, key examples of which may be found in our Recruitment and Selection processes, Performance Appraisal and Development Review and our Health and Wellbeing programmes.

This report assesses how and to what extent the HEIW undertakes workforce and talent planning. It details an analysis of internal and external information relating to HEIW future people and skills needs and the availability of talent, whilst also assessing the extent to which current organisational planning activities are addressing potential needs.

Based on the above findings I have made reasoned recommendations for how HEIW can maintain an appropriate number of people with the skills required by the organisation.

Section three details and explains the rationale for an essential onboarding resourcing activity during the pandemic, within HEIW. Throughout the activity I have:

- Agreed roles and responsibilities with other contributors to the activity.
- Considered and identified organisational procedures and legislative requirements which underpinned the activity.
- Detailed how I planned and prepared for my agreed role within the activity, ensuring the availability of any materials or resources required.
- Demonstrated the activity was undertaken in a timely and accurate manner, in line with organisational procedures and legislative requirements.
- Reflected on the effectiveness of the resourcing activity in meeting required objectives and reported back to stakeholders. – there was a strong business case and recommendations were made.

1.1 Assess how and to what extent the organisation undertakes workforce and talent planning.

1.2 Analyse internal and external information relating to the organisation's future people and skills needs and the availability of talent.

1.3 Assess the extent to which current organisational planning activities are addressing potential needs.

The NHS Workforce is a critical driver and key enabler for future service delivery. Integrated (population-based) workforce planning considers the whole healthcare system (ibid: 37; Tichy et al, 1982: 47; Fombrun; Beer; Lengnick-Hall et al , 2009; Baird and Meshoulam, 1988; Wright and McMahan, 1992; Dyer and Holder, 1988; MacDuffie, 1995; Delery & Doty, 1996: 804; CIPD, 2020; Wright & Nishii, 2007). Workforce Planning can be impacted by a number of factors including, changes in technology, population trends, generation expectations changes in policy and local labour market trends, deprivation, and chronic conditions etc (ONS, 2020, 2021; Government of Science, 2016; Workforce Planning Practice, 2018; CIPD, 2021; Nuffield trust, 2017; The Kings Fund, 2011; ONS, 2021; European Parliament, 2020; NHS Long Term Plan, 2019; Age UK, 2021; McKinsey, 2019).

Within NHS Wales workforce planning in secondary care is based on the six-step methodology (EV1) (Skills for Health, 2021) and is linked to the requirements of the Integrated medium-term plan. All Health Boards forecast by providing both HEIW and Welsh Government with three-year integrated business plans. Within primary care (GP, Dentists etc.) this approach has been adapted for use in cluster and to support the requirements of cluster integrated medium term plan. Therefore, ensuring a workforce of the right size, with the right skills, organised in the right way within an affordable budget, ensuring patient care is provided to the required standards, which deliver organisations', short, medium and long term objectives (HEIW, 2018; Healthier Wales Strategy, 2019; CIPD, 2020).

HEIW currently have mechanisms in place to support a robust workforce planning strategy. According to Taylor (2019), demand should be forecasted in a stable environment, ideally for 1-2 years, however HEIWs IMTP spans a three-year timeframe (EV2). Operational plans are submitted to the executive team (EV3), which detail annual goals (EV 4). HEIW have a 10-year Workforce Strategy in place with Social Care Wales (EV5) (HEIW, 2019) and demonstrate alignment with strategic objectives, A *Healthier Wales* and enabling the future through the Wellbeing of Future Generations Act, and align with ministerial priorities (Taylor & Woodhams, 2016; ibid: 37; Tichy et al, 1982: 47; Fombrun; Beer, 1984, 2015; Lengnick-Hall et al , 2009; Baird and Meshoulam, 1988; Wright and McMahan, 1992; Dyer and Holder, 1988; MacDuffie, 1995; Delery and Doty, 1996: 804; CIPD, 2020; Wright & Nishii, 2007; Ryanair; Skills for Health, 2021; Skills for Care, 2021).

In light of COVID-19, HEIW became a 100% virtual organisation. HEIW were actively involved in the emergency planning response to the current COVID-19 Public Health Emergency. HEIWs priority has been to use resources and expertise to support our frontline NHS services in light of the increasing demands from the pandemic, and to maintain the safety and wellbeing of NHS Wales employees and learners (HEIW, 2020; Timewise, 2020;Gwella, 2020). As part of the pandemic, HEIW compiled a compendium of workforce planning guidance for NHS Wales organisations as part of the pandemic, which follows best practice and was sourced from the four nations and regulators (EV6)

Health Education & Improvement Wales is a Special Health Authority with a number of our key functions enabling us to be positioned, to proactively support our NHS Wales colleagues during the COVID-19 crisis. During 2020, HEIW was required to review their work programmes to ensure that only essential activities were being undertaken to focus on business continuity and support the Covid-19 response. EV 7 provides an initial view of HEIWs assessment of this for Q1 of 2020/21. As a method of planning and forecasting, discussions regularly take place with the Senior Leadership Team (SLT). HEIWs remit enables the consideration and innovation of appropriate interventions, to support and monitor the implications on current and future education and training of the healthcare workforce. HEIW are also actively engaged in supporting colleagues to consider and implement changes to workforce planning and requirements through

use of consistent data analysis and reviewing planning assumptions and expectations (CIPD,2021; Parry and Tyson, 2011; Hirsh, 2020; CIPD 2020, Croner, 2021; SHRM, 2021).

To support this, organisationally, HEIW created a Crisis Management Team, which encompassed key individuals from across the organisation to consider the impact of COVID-19 across a range of themes relating to our remit. HEIW action logs considered amongst others, Compassionate Leadership, Workforce Planning & Deployment, NHS Health & Wellbeing, Sickness absence data reporting, Nursing & Health Professional Students, HEIW staff and organisation, Medical, Dental and Pharmacy students. This group currently meets on a weekly basis and EV8 log details the range of actions undertaken. In support of the actions HEIW are actively engaging with external stakeholders such as regulators, trade unions, Royal colleges and equivalent National bodies, and are maintaining consistent dialogue and reporting mechanisms to both our Board and Welsh Government (EV9) (RCN, 2021 Unison, 2021; Peakon,2020).

HEIW Leadership and Succession Team refocused its efforts on supporting NHS Wales. Since the start of the pandemic NHS Wales headcount has increased by 5,691 (Jan 20 – headcount 94291 / Jan 21 – headcount 99982) (HEIW Workforce Analytics, 2021). It was therefore apparent that mechanisms needed to be put in place to support managers and leaders as they stepped up to the extraordinary challenges of leading during the Covid-19 pandemic and providing the NHS workforce with practical ways of accessing resources, materials and webinars to enable them to feel supported. This comprised of expansion and development of straightforward digital bitesize digital resources. The resources were established with a range of credible experts and were extensively accessed across NHS Wales as well as the other UK nations (EV10).

In recognition of the positive feedback and need, HEIW launched the digital leadership platform for Wales *Gwella*, during August 2020, which provided employees with access to several evidences based compassionate leadership resources (West *et al*, 2020; West & Baileys, 2019).

To enabling HEIW and other NHS organisations to provide learning and education to their workforce through a contemporary and intuitive learning environment the virtual classroom functionality was rapidly integrated into Gwella, which reflects *how effective and lasting digital transformation can be in challenging and rapidly changing circumstance. It also demonstrates how it can still be implemented with care and best practice to ensure evidence of effectiveness and genuine impact is captured throughout.* In response to Covid-19, this was recently recognised with HEIW obtaining Gold recognition at the 2020 Learning Technologies Awards for best digital innovation transformation.

HEIW supported with band 4 staff recruitment within ABUHB. Internal staff available were considered for redeployment for utilisation by other health boards to support future applicant recruitment (RCN, 2020; BMA, 2021; NHS Confederation, 2020) (EV11)

HEIW invited expressions of interest from employees to provide support to help with the vaccination process (EV12). Consideration was taken as lots of staff had existing role requirements. Employees were released for a proportion of their weekly contract.

HEIW were also involved in the streamline recruitment of PCA to support the COVID-19 emergency. The People team devised a PCA job description (EV13) and selected employees underwent fast-trac training in readiness for a fast-trac recruitment drive to support wider NHS Wales services.

In terms of business as usual, the role of the HEIW leadership directorates influence to the success and contribution of a healthier Wales cannot be over emphasised (EV14). This can be supported by Strategic Aim 3 -*To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels*. This can also be supported by further engagement progress which links to strategic organisational Objective 3.7: *Lead the development, implementation, and management of the new NHS Executive Collective and Compassionate Leadership programme*. HEIW has a leading role within establishing and managing talent and succession for senior and executive leadership roles across NHS Wales.

To support the wider NHS Wales, HEIW work in collaboration with both WG and the wider NHS Wales to provide talent and succession programme to grow the workforce (Lindemann *et al* 2001; Merrick, 2018; Peakon,2020).

Talent management and succession planning is best practice within NHS Wales, specifically HEIW (Deloitte, 2021; SHRM, 2007, 2021; CIPD, 2021; Roberts, 2018; Writer, 2019; Ju, 2016; White, 2018; Hirsh, 2020; CIPD 2020, Croner, 2021). The focus has been triggered by a developing crisis in the recruitment of senior and executive leaders, and the increasing number of roles held by individuals on an interim basis across NHS Wales (HSJ, 2015; BMJ, 2019; NHS England, 2021; NLIA, 2005). This situation creates uncertainty across organisations, which has an effect on the morale and workload of existing staff and ultimately impacts NHS organisations' ability to achieve their objectives.

To date, there is significant evidence to suggest that a blend of talent management and succession planning delivers an important double function within HEIW and the wider NHS Wales (Hirsh, 2000, 2020; CIPD 2020, Croner, 2021; SHRM, 2021). It boosts distinct performance beyond the impact of conventional programmes of learning and also provides quality assurance, and capability at the point of recruitment into business-critical roles (Taylor, 2016; SHRM, 2021). Additionally, evidence suggests that 'home-grown' talent, when undertaken effectively is one of the distinguishing features of world class top performing organisations (Lachhar, 2017). The ability to ensure a robust talent and succession process supports the achievement of NHS Wales ambitions as outlined within 'A Healthier Wales', which states *" We will continue to invest in our approach to improving quality, including through strengthening our talent and leadership, and planning on a national basis to ensure that good practice is widely shared"* (HEIW, 2019).

I have undertaken a SWOT analysis (CIPD, 2020) to analyse, assess and evaluate how HEIW resourcing and talent planning practices relate to the organisation's future people, and skill needs and the availability of talent, whilst considering the extent to which current organisational planning activities are addressing potential needs (EV15). I have also undertaken a PESTLE analysis (CIPD, 2020) (EV16) which is a useful analysis tool that examines HEIWs external drivers of change, and describes a framework of macro-environmental factors (political, economic, social & technology) which is used in environmental scanning of strategic management. It provides HR professionals insight into external factors impacting on organisations (CIPD, 2018). It facilitates an understanding of the wider business environment (CIPD, 2018) and enables HEIW to anticipate future business threats, and take action to avoid or minimise their impact (CIPD, 2018;Luneburg, 2010; CIPD, 2018; Pettigrew and Whipp,1993); Information balance is needed (CIPD, 2018). Combined with a SWOT the organisation is provided with valuable information for strategic decision making.

The HEIW HR function is responsible for understanding and communicating the political, legal, financial (economical) and Welsh Government requirements to the workforce and preparing them for the future to achieve strategic aims and objectives. Both the PESTLE and SWOT highlighted a clear link to the CIPD professional map behaviours along with a clear link to HEIWs organisational aims, objectives, values, and behaviours that align to its business strategy (IMTP) and HEIWs resourcing and talent planning practices support activities.

HEIWs ambition is to be an exemplar employer where staff are motivated and empowered by undertaking interesting and varied work, where skills and talent is developed, and where staff wellbeing is supported by an inclusive and values-based culture, a modern working environment, effective HR function and flexible working patterns (Timewise, 2014). Currently, HEIW consists of 486 employees with a particularly low rolling turnover rate, at 7.84% (includes all leavers, since 2018), retention levels are high, sickness absence low, and vacancies easy to fill with high calibre applicants (Merhar, 2020; Dwomoh *et a*l, 2013). Leaders lead with compassion, candour, and openness, providing clear direction and supporting staff with effective feedback about performance and development (HEIW, 2020). Our current staff profile highlights: 3.88 out of 5 engagement score and 90% of contracts are permanent (People Insight, 2020; CIPD, 2018; Kings Fund, 2015,2017) (EV17).

HEIW has undertaken extensive best practice research from the four UK nations to inform the proposal for delivering the NHS Wales National Succession and Talent Management Strategy 2017 – 2020, which was endorsed and ratified by NHS Wales Chief Executives during 2017 (HEE, 2021; NES, 2021) (EV18-). The strategy was designed to support reliable and inclusive tools and mechanisms that were consistent for talent identification, ensure future leaders have experience of the whole system, ensure broader health and social care sector experience (as detailed within a Healthier Wales, 2019), and facilitate direct experience to build a top leaders portfolio. It will also be utilised within local NHS organisations', such as HEIW, to better support consistent mechanisms for succession planning and inform senior level succession planning across NHS Wales. HEIW acknowledge planning for what is needed now will support NHS Wales to identify, develop and fully utilise the potential of NHS staff in the delivery of a world-class health service for the people of Wales, and ensure there is effective capability and capacity in the future. HEIW also acknowledge the importance of identifying skills and knowledge within NHS Wales and enabling individuals to feel supported, mentored and sponsored to succeed (Clutterbuck, 1998, 2018). The strategy sets out the ambition to deliver a cohort of senior level talent of NHS staff at local and national levels, underpinned by a technical solution through ESR data, designed to guide the national approach.

Over the past year, HEIWs Talent and Succession Planning Team have been developing the ambitious and aspiring Directors Programme which is supported by the Kings Fund. NHS Wales Health Boards were requested to identify their own talented individuals who had the drive and talent to move into an executive role within approximately three years and recommend them for the programme. Although essential, this exercise clearly demonstrated that health boards are using different methodology to identifying organisational talent; some are using robust processes and other not. This highlights the need for change and a consistent approach across NHS Wales (Sharma, 2017; Harver, 2021; Myers-Briggs, 2021; Brooks, 2019; MindTools, 2021; Oxford Review, 2021).

HEIWs Chief Executive invited all those identified to join the talent pipeline and attend Talentbury; A virtual festival of leadership, learning and collaboration, aimed at providing a valuable leadership experience for aspiring clinical and non-clinical executive leaders. This was supported by the development of a success profile and talent management programme involving clinicians, Planning and Workforce and OD Executive directors from across NHS Wales to identify the need for any additional offering.

My colleague and I met with HEIW'S National Talent and Succession Senior Manager (EV19) who is supporting HEIWs objective by working with partners to improve collective leadership capacity, specifically for those in tier 3 (assistant/deputy directors) being capable and competent to move to tier 2 (executive director) positions. This level has been chosen as these roles are the most challenging to recruit to (Anandaciva *et al,* 2018; Sobieraj, 2021; Ramsay *et al,* 2010; The Rotherham NHS Foundation Trust, 2020). This meeting helped us gain a more detailed understanding of the organisation's approach in relation to those in tiers 4 and below, which are the responsibility of individual organisations to manage. The process is managed in two separate ways; Tier 1 &2 roles are managed nationally through the National succession Manager post, and other Tiers are managed by local organisations' through a local succession planning approach. Individuals who are appointed to Tier 3 positions are included within the nationally managed network for Tier 1 & 2 posts (EV20). The first step in this has been to advance and develop talent and succession plans, which identify the following in relation to tier 3 (assistant director) candidates wanting to move into tier 2 (executive director) positions (EV21)

HEIW is responsible for implementing a talent and succession plan for tiers 1 – 3 across NHS Wales ensuring it keeps all organisations informed, involved and able to influence. It's an organisations individual responsibility to develop their own programmes that supports those in tier 4 and above. There is currently no standard consistent process in place across health boards, with some using best practice such as the 9-box grid (Clutterbuck, 2012) (EV22). HEIW will therefore be working with Learning and OD Practitioners to develop a toolkit that health boards can use to identify and develop talent in their organisations, most likely tied in with the annual appraisal process (Fletcher,2004).

A National Talent Board has been set up to advise on the inclusive and transparent NHS Wales operating model required to grow and support existing and aspiring executive talent. The NHS Wales CEO chair's this group (EV23). HEIW have continued to commit and support the delivery of this strategy which can be reinforced by the following milestones attained:

- An NHS Wales Executive Talent Board
- A talent summit
- Executive success profiles
- A digital talent management solution

To supplement our meeting with HEIW'S National Talent and Succession Senior Manager, a colleague and I met with HEIWs Head of People and Learning and Development Practitioner to establish if HEIW has an internal formal process in place to workforce and talent planning to identify organisational talent, as part of our CIPD studies (EV24). Whilst HEIW supports employee to reach their maximum potential through learning and development, it became evident there is currently no formal internal process within HEIW to identify talent above tier 3 and HEIW do not identify internal pools of capable candidates in workforce and talent planning (Hirsh, 2020; CIPD 2020, Croner, 2021; SHRM, 2021; Kings Fund, 2021; Groysberg *et al*, 2009).

We discussed how potential pools of candidates could be identified, using current processes if HEIW were to use pools of candidates. The only potentially relevant information available is the annual appraisal information. The PADR policy is 'values based', and 'employee led' (EV25) and is based on best practice, engagement, and research (SAGE, 2020; Price, 2020; People Insight, 2020). The toolkit includes 101 coaching questions to help the individual to reflect on their performance and development during PADR discussions using coaching techniques and questions posed by the manager to the employee (EV26) (CIPD Good Work Index, 2020; Farndale & Kelliher, 2013; Fletcher, 2004; Groen *et al* 2017; Pote, 2016; Clutterbuck 2014).

Currently employee performance (CIPD, 2019) is assessed and reviewed against HEIW's values and behaviours (EV27) (CIPD, 2019; Cardiff and Vale UHB, 2020) and previous objectives (EV28). Succession planning (CIPD, 2020; Investors in people) for critical posts are identified and developed, work related objectives are agreed for the following year and are linked to HEIW objectives. Regular line manager 1:1 and talent conversations (NHS Leadership Academy, 2014) take place, enabling employees to discuss their future career aspirations and potential development opportunities are identified. Employees and line managers are given details of opportunities that are available, to ensure they are developed in a way that brings job satisfaction, but also supports HEIW in meeting its objectives.

The process, however is subjective, and based solely on manager interpretation (HRZone, 2014; Gillikin,2019). To identify pools of candidates would require the People Team to assess every appraisal to identify potential talent, but with the potential for line manager interpretation and commitment to development to be inconsistent across the organisation. HEIWs PM risks are assessed monthly by a corporate risk register. Talent and Succession Planning (Aguinis et al., 2012; CIPD, 2020;Hirsh, 2105; Taylor, 2016) is at the core of HEIW's performance management and is a significant factor of development and talent management within HEIW (Aguinis et al., 2012). Every employer has an opportunity to develop to their full potential and to engage in career conversations. Line managers work with HR to retain talent and mitigate any potential people risks that are identified through workforce planning. Nevertheless, the biggest risks to the organisation is manager bias and competency, which is difficult to assess (EW Group,2020; CIPD 2020). Making judgements about an employee's value, capability, worth, contribution and potential is a vital dimension of a manager's relationship with employees. However, managers are sometimes reluctant to carry out PAs due to the dislike of passing judgement about employees' value and an inability to handle emotional responses that arises when employees receive ratings that are less impressive than they were expecting. Taylor (2016) suggests that the appraisal interview does not fit well with individual management styles which explains managerial resistance. There is also a tendency that managers undertake the talking during the PA process leaving a lack of opportunity for employees to participate and respond to future objectives (McGregor, 1957, p89; Beer, 1985; Beer et al 1984). Using this method would need further supporting tools to ensure the process was fair and identified all appropriate and capable talent.

According to ONS Recruitment difficulties are slightly higher in the public sector (62%) compared to the private sector (56%) and most are prevalent in healthcare (75%), which could attribute to the pandemic (Kings Fund, 2021; Collins, 2020). An estimated 599,000 vacancies were reported within the UK in November 2020 to January 2021; this is 211,000 fewer than a year ago and 64,000 increase than the previous quarter (Search, 2021; ONS, 2021; Prospects Luminate,2021); This is evident with only 26% of job vacancies within the UK between November 2020 to January 2021. However, reflects a development on the situation during summer 2020 when vacancies were down by nearly 60% year on year, yet the rate of improvement has slowed in the past few months) (LFS). Nevertheless, HEIW remained working from home virtually (Groysberg *et al*,2009).

Within HEIW it is an employee's individual responsibility to identify suitable roles for themselves and apply for them following the NHS recruitment and selection process via application and interview(Business Balls, 2017; Astron Solution, 2015; Wright State University,2021; Johnson, 2020; IRS, 2003; SOAS, 2021). However, NHS Wales employee recruitment and selection process is formal and time consuming. Information and guidance on the NHS recruitment processes is not easily accessible and likely to leave workforce recruitment gaps for long periods of time. When considering the availability of talent, HEIW created a lot of new posts to fulfil aspects of the IMTP (HEIW, 2018). Although recruitment accelerated during the pandemic these positions are now full, and employees are likely to stay in them, due to exceptional branding (Walker, 2007; The Wonderful Workplaces, 2019; Post Beyond,2021; Jackson, 2019; McCartney, 2018; Search, 2021; ONS, 2021; Prospects Luminate,2021; NHS Employers, 2018; NHS Awards; NHS Wales Charter, 2019; NHS Confederation, 2017; Stonewall Cymru, 2021;McKinsey, 2017; CIPD, 2020). Individuals can apply for limited promotional opportunities but cannot be guaranteed the role. HEIW also has a good organisational culture (SHRM, 2021; SHRM Effective Practice Guidelines Series, 2021;Wong, 2021; CIPD, 2021) and offer learning and development opportunities (getsmarter, 2019) at all levels. Therefore, existing employees feel engaged and valued, and as a result have no desire to leave the organisation. However, high staff retention within HEIW means that there is a risk of less internal opportunities, as well as opportunities to bring in new blood and innovative ideas from external candidates as vacancies are unavailable (Newton, 2019). There are currently 36 leavers in the admin category (bands 3-5), the majority have left due to lack of promotion opportunities, linked to the high retention rate, however there is currently insufficient processes to support the reason for leaving data within HEIW. The CIPD labour market report highlights the portion of organisations reporting hard-to-fill vacancies increased from 56% in the Spring 2017 report to more than three in five (61%) organisations in the Spring 2019 report (Labour Market Outlook, 2019). As a result, numerous organisations increased salaries, particularly for key staff and new starters (59% of private sector employers reported raising salaries to help offset their recruitment difficulties) (LMO Autumn, 2019). However, as a public sector organisation, HEIW cannot offer an employee money incentive to stay within their role, as they are bound by NHS Contractual Terms and Conditions of service (NHS Confederation, 2021). All job descriptions and competency frameworks are analysed via NHS Agenda for Change job evaluation processes, at an appropriate point within the NHS pay scale (Glassdoor, 2021; Parikh, 2019).

The strategic objectives relating to leadership under Strategic Aim 3, i.e. the development of a Leadership Strategy for Wales, succession planning, digital leadership, development of leadership programmes, delivery of the graduate leadership and executive leadership programmes advances equality of opportunity between people and ensure that they do not discriminate anyone directly or indirectly on the basis of age through effective engagement, implementation and delivery (West & Dawson, 2012, 2018; ACAS, 2019).

HEIW Line managers add value through excellent communication and leadership skills, engagement, coaching and mentoring, demonstrating emotional intelligence, recruiting, and hiring talent to fill team positions and providing training and support to new employees (SABA,2020; Oxford Review,2021; Clifton & Harter, 2019; Clutterbuck, 2004). This is obtained through effective recruitment selection and employee retention practice (Pulakos, 2005; leaveboard, 2021; Roder, 2019; Kingsfund, 2021). The training highlights the importance of general recruitment process KPIs, targets and line manager and HR responsibilities

(Mindtools, 2020) however, these are currently not compulsory within HEIW (SHRM, 2020; Ashe-Edmunds, 2020; CIPD, 2018; NMC, 2018; HEIW, 2020; HEE, 2020). (EV 29).

Effective leadership across and throughout health and social care, the public, private and third sectors is recognised by 'A Healthier Wales: long term plan for health and social care' (2018) as a key element in turning good intentions into practice and one of the priorities outlined in the workforce strategies for leadership relates to the development of a shared approach to collective and compassionate leadership across health and social care which HEIW is committed to.

In terms of digital leadership, cyber security has been identified as a critical role within HEIW and is currently listed on the risk register. However, the national workforce transformation team supports HEIW regional teams and systems directly, using proven methodologies, tools, and techniques to identify and prioritise workforce challenges, whether those be rooted in workforce shortages, skills gaps or designing new models of care and determine appropriate solutions. With the advancements in technology data analytics may be another area for HEIW to explore. The team has a vital co-ordinating workforce transformational role effort and investment across HEIW in establishing the evidence base, sharing what works, facilitating spread and adoption and accelerating workforce redesign. Its therefore vital succession is in place within HEIW, or at the very least replacement plan to identifying short-term or long-term replacement, to ensure HEIW have employees who can assume responsibility during an unexpected event (Topol Review, 2019; Welsh Government, 2019; Lauby, 2018; Sigma, 2021).

It's also now important that HEIW started to succession plan for tier 2 and 3 roles to ensure a pipeline. Wales as a whole has an ageing population. Between 1998 and 2018, the proportion of the population aged 65 and over has increased from 17.4 % to 20.8 %, while the proportion of the population aged 15 and under has fallen from 20.6 % to 17.9 % (GOV.UK). Limited HEIW age profiling data indicates an examination of the age profile of HEIW workforce should be undertaken, specifically looking at those aged 45 and above (EV30a), to identify those who are potentially looking to retire and the pipeline of staff that could potentially fill these posts if and when they became vacant. The CIPD report 'Employee Outlook: Focus on older people' (2016) highlighted, 76% of employers had not made reasonable adjustments to enable older employees to carry on working. To retain talent, HEIW ensures that they examine reasonable adjustments such as flexible working to enable older employees to carry on working.

Age Profiling data also highlights less than a 1/3 of employees are millennials within HEIW (EV30b) (Diloitte, 2014, 2019; Writer, 2019). The CIPD state that the need for leadership has changed significantly in the last decade in the way that UK Businesses work and operate. The CIPD report, 'Leadership – Easier Said Than Done' (2014) looks in detail at the barriers to leadership and good people management in practice. One of the key barriers identified was the inability of managers to embrace workforce diversity. Employees aged between 16-24 were far less likely to be appointed or promoted into management and leadership roles. People management processes were cited as inadvertently favouring 'sameness' over the desirable level of identifying talent and skills in local teams, regardless of age. Companies report that their younger workers expect a better work-life balance and faster career progression. (People Management, 2018). There's an increasing need for HEIW to build roles that are flexible and allow a WLB (Deloitte, 2014, 2019; People Management, 2018, 2019; Independent 2016; CIPD 2015; KPMG, 2017; INC 2018). The spread of ages across the workforce now covers up to four generations as older workers retire later (Focus on age report,2017; Future trends 2015)

The Centre for Aging Better found that attributes stereotypically associated with younger employees (e.g. being open to new ideas, learning new skills and rapid decision making) are viewed more positively in the talent management process than those of older employees (e.g. dealing with people politely, settling arguments or carefulness). These 'older' attributes were associated with lower status job roles and employers were less likely to select them for talent management programmes.

HEIW currently refer to the All Wales Wales Recruitment and Selection Policy, however a bespoke policy, which details positive action to recruit a diverse workforce from protected characteristics would be beneficial to HEIW employees and reinforce their proactive and positive brand (Post Beyond, 2021).

It is recognised in Is Wales Fairer (2018) that across the public sector in Wales there are clear data gaps, which can make it difficult for us to understand the experiences of people sharing protected characteristics. To address this urgent action has been called for within the Health and Social Care Workforce Strategy and Strategic Equality Planning to address this. With real opportunities to build on this at local, regional, and national level, will help to inform future-plans.

L& D (HR Zone; CIPD; Glaveski, S, 2019; Mckinsey,2019) is a core feature of HEIW resourcing and talent planning and is reflected within the learning and development policy (EV31). However, according to a recent staff survey only 67.5% of HEIW employees take time out to reflect and learn. This could impact on employee motivation resulting in employees investing in discretionary effort in organisational goals or outcomes (Crabtree, 2013).

In view of the annual plan HEIW pledge to develop their leaders and managers to undertake roles with consistency and competence (CIPD, 2020; GOV.UK,2020; IAEA). Using information from the PDPs, HEIW produce an annual learning bid for the Executive team to consider. HEIW acknowledged that People are an organisation's best investment (Investors in people, 2020;), nevertheless are acutely aware L&D budgets are the first to see funding cuts. Reduction in funding across NHS Wales is a huge risk could lead to a reduction in funding for L&D activities along with promotion opportunities (CIPD, 2021; People Management 2021; Skills Portal, 2019; Factsuite, 2020; CIPD, 202). A reduction in training within HEIW may have a detrimental impact on business performance and future talent. Scrutiny is therefore required with regards to appropriateness of training and development and its link to an employee's development plan, costs associated, and time required away from work. HEIW are currently undergoing a training needs analysis of the organisation within the constraints of WG funding. It is anticipated this will further increase performance within HEIW (Economic times 2020; CIPD 2020; HR-Inform, 2018).

HEIW need to ensure staff development whilst considering future workforce drivers i.e. Millennials, part-time contracts (CIPD, 2015, 2016; Timewise 2014; Deloitte, 2014, 2016, 2019; Independent 2016; INC 2018; People Management 2018, 2019; KPMG, 2017; Skeoch, 2018; Sloan, 2019; Aftab, 2016; Vodafone, 2015);

In view of the annual plan, HEIWs people team continue to develop their leaders and managers to undertake roles with consistency and competence. A L&D business manager within HEIW allows the people team the ability to respond readily to line manager needs for their team which creates a much closer and relevant function of the L&D team (CIPD, 2019). Using information from the PDPs (which the employees line manager submits) HEIW L & D Business managers produce an annual learning and development bid (CIPD, 2015) for the Executive team to consider. This enables both people and business issues to be considered in a wide range of decisions that will impact on HEIWs effectiveness. As the relationship is ongoing, both sides build a better understanding and develop long-term strategies and solutions rather than the HR and L&D functions being brought in to manage issues as they arise. This proactive rather than reactive approach offers synergy and better support to operations and impact on the bottom line (CIPD, 2019).

HEIWs workforce strategy for Health and Social Care in Wales states that 'by 2030 leaders across health and care will demonstrate collective and compassionate leadership (HEIW, 2018). The strategy promotes the notion that everyone is a leader and that leadership should be distributed. Leadership is a statutory function within HEIW. It is therefore important everyone has cultural awareness, understands their compassionate leadership responsibilities, and demonstrates competency, as both HEIW employee and as a systems leader (HEIW Leadership portal, 2021). Emotional intelligence and compassionate leadership are also threaded through a coaching approach within HEIW MAAW policy (Goleman,1998; Hill, 2017) (EV32a)

As an employer of choice, with low attrition HEIW are building a branding culture of compassionate and inclusive leadership which will attract, continuously support, and develop a flexible and agile workforce who feel valued, and are valued, by an inclusive and modern health and social care system. An employer of (Jackson, 2019; McCartney, 2018; The Times, 2021; Glassdoor, 2020; Shah, 2020; Carpenter, 2020; Sunday Times top 100 employers, 2020; Robinson, 2018; The wonderful workplaces, 2019). HEIW are using principles set out in compassionate leadership, prudent healthcare and sustainable social services, promote inclusivity and wellbeing, and offer roles and opportunities which attract, reward, develop, and retain our workforce within a fair and just health and care system (HEIW, 2018; NHS Employers, 2018; NHS Awards; NHS Wales Charter, 2019; NHS Confederation, 2017; Stonewall Cymru, 2021;McKinsey, 2017; CIPD, 2020; SHRM, 2021; SHRM Effective Practice Guidelines Series, 2021; McKinsey, 2017).

HEIWs culture is based on a strongly held and widely shared set of beliefs' that are supported by strategy and culture (Wilkinson & Taylor, 2016; Bersin, 2015). This is reflected within a number of HEIW policies and strategies, specifically the Values Based Appraisal and PADR process, Managing Attendance at Work, Healthy Working Relationships programme and Communication and Engagement Strategy (EV32b). These are based on the organisation's IMTP (business case), vision, purpose, strategic objectives, values, and behaviours, plus feedback from staff and stakeholders (HEIW, 2018; Groysberg et al, 2018) and is the premise of HEIW leadership. HEIW'S values and behaviours culture reflect within HEIW resourcing and talent planning practices when engaging; Both parties must be proactive and willing to participate. It also recapitulates how HEIW communicate and engage effectively with staff, stakeholders, and partners to build on existing and establish new working relationships, and outlines HEIWs approach to resourcing and talent planning. (Mindtools, 2021; Taylor, 2016; CIPD, 2019; 2020 MacLeod and Clarke 2009, p33; Holbeche and Matthews (2012).

Within the people team we have used pulse surveys as a proactive method of engaging and consulting with employees to improve retention. This gives employees a voice (CIPD, 2020, 2021) and is a mechanism of check-in with the workforce regularly (Ellis, 2016; CIPD 2020). This is reflected within HEIW's 12-month rolling turnover rate for HEIW for the period to August 2020 which was 8%, an increase of 0.3% since the previous report (Levinson, 2007a; Demourouti et al. 2001, cited in Sonnentag, 2003) indicating the above engagement programmes have had a positive impact on HEIW turnover (Blain, 2020). This is still relatively low given our newness but is at a level which continues to support business continuity and organisational memory whilst also bringing in new thinking and new ideas (EV33). BlessingWhite (2008) reports that 85% of engaged employees plan on sticking around compared to 27% of disengaged employees. In addition, 41% of engaged employees said that they would stay if the organisation is struggling to survive. All factors support and suggesting that employees are highly engaged, have a better WLB and presenteeism is not a concern nor evident within HEIW. It is hoped this will continue post pandemic when the office will return to a 60 / 40 working environment, where employees continue to feel engaged. Although, policies such as Agile Working will need to be revisited to endure employees feel supported (EV 34).

HEIW currently provides a number of modules, with a focus on coaching and mentoring, to help build management capacity and boost resourcing and talent planning, including a new internal recognised management development programme which is underpinned by collective and compassionate approaches (Lindemann *et al* 2001; Merrick, 2018) for new and aspiring managers based on the research of Professor Michael West and the Kings Fund.

HEIW is a relatively new organisation who do not yet have a formal coaching and mentoring programme in place. Nevertheless, this area is moving at pace, predominantly as a training needs analysis identified coaching and mentoring as a gap in the organisation's L&D offering (Berteig, 2020). However, the ability to develop managers as coaches is a key component of this and helps to provide a foundation to Emotional Intelligence (EV35), Compassionate Leadership, and quality improvement (EV36) particularly those who are new to more senior roles (Whitmore,2003, 2009, 2017). As learning and development is encouraged within HEIW, this has proved particularly successful (West & Baileys, 2019 & 2020).This approach is used to help individuals focus on their future aspirations and career development and gain the skills and knowledge

required to enable them to progress in their career. Whilst this would ensure there are individuals in the organisation with the necessary skills required to fill these positions, individuals would still need to follow the application process and be successfully appointed through the recruitment process. HEIW would not solely tap into this talent pool and would advertise posts on the NHS Jobs website, ensuring fair competition to those from within and outside the organisation (Day, 2004).

HEIW have recently finished the recruitment process of the first cohort of the inaugural NHS Wales General Management Graduate Programme (Jackson, 2019; McCartney, 2018). Inclusive recruitment, assessment, and induction processes were undertaken. HEIW has appointed 20 aspiring graduates who will work across NHS Wales organisations, including one graduate who will commence employment within HEIW in September 2021. The individual will undertake professional development and lead on strategic issues, through the staged programme. The programme is designed to succession plan and equip enthusiastic individuals with the right skills, knowledge, and competencies; ensuring both NHS Wales and HEIWs future people and skills needs and the availability of talent. Within HEIW it will be the graduate's responsibility to lead on specific aspects of HEIWs IMPT (NHS Graduate Scheme, 2021; CIPD, 2020)

2.1 Recommendations – Workforce planning assignment

HEIW align core organisational goals with the changing organisational and people strategy, which is needed to drive the strategic objectives of the organisation in a way which ensures that projects are managed effectively, and risks are mitigated (ibid: 37; Tichy et al, 1982: 47; Fombrun; Beer; Lengnick-Hall et al , 2009; Baird and Meshoulam, 1988; Wright and McMahan, 1992; Dyer and Holder, 1988; MacDuffie, 1995). Delery and Doty, 1996: 804; CIPD, 2020; Wright & Nishii, 2007) (EV2, EV5, EV37).

To inform best practice, HEIW examines their present workforce, establish future need, identify current and forthcoming gaps, and use tools to implement resolutions which can be achieved within an organisations business plan/objective along with long term objectives (CIPD, 2020). WFP benefits organisations in a number of ways (EV38). This can inform HR best practice (EV39a, b), however there are currently a number of gaps. I therefore recommend the following:

1.) HEIW to work with organisations to create and implement a consistent methodology within talent and succession planning to identifying and selecting all Wales talent through robust processes, such as exploring other selection methods i.e. assessment centres etc (Gwella, 2021; Pulakos, 2005; SHRM, 2007; Welsh Government, 2019; People Fluent, 2018).
2.) Implement compulsory mandatory appraisal and, recruitment and selection training for all managers. These, training methods are currently not compulsory within HEIW and therefore subjective and open to line manager bias. Its therefore essential leadership are appropriately trained to mitigate these risks and ensure the processes are fair and consistent; Ensure this is a performance objective within a senior managers PADR (SHRM, 2020; Ashe-Edmunds, 2020; CIPD, 2018; NMC, 2018; HEIW, 2020; HEE, 2020; HRZone, 2014; Gillikin,2019; SABA,2020; Oxford Review,2021; Pulakos, 2005; leaveboard, 2021; Roder, 2019; Kingsfund, 202; SHRM, 2020; Ashe-Edmunds, 2020; CIPD, 2018; NMC, 2018; HEIW, 2020; HEE, 2020; United Nations Economic Commission for Europe, 2013; EW Group, 2020; Equality Act, 2010; University of Lincoln, 2020; The NHS Centre for Equality and Human Rights, 2020; Human Rights Commission, 2009, 2014, 2020; Ellis, 2016; Daniels, 2019) (EV25&EV29).
3.) Implement a bespoke Recruitment and Selection policy within HEIW (Slezak, 2016; YOH, 2018; Brown, 2018; EW Group, 2020).
4.) Take positive action to recruit individuals from protected characteristic groups (Equality Act, 2010; Human Rights Commission, 2009, 2014, 2020; Is Wales Fairer,2018).
5.) Undertake an evidenced based Equality Impact Assessment to assess and ensure that positive actions are covered within a bespoke Recruitment and Selection Policy. Whilst also ensuring decisions, procedures, and practices (strategic and operational) are inclusive and do not disadvantage any individuals or groups protected under the Equality Act 2010 (Daniels, 2019; Frazer Consulting, 2020; Equality Act, 2010; University of Lincoln, 2020; The NHS Centre for Equality and Human Rights, 2020; Human Rights Commission, 2009, 2014, 2020; Ellis, 2016).
6.) Set up a Recruitment and Selection Task and finish group to engage all employees within the formulation of the bespoke policy. Ensuring individuals from protected characteristic groups are represented (Ellis, 2016; West & Dawson, 2012, 2018; Personnel Today, 2002; SAGE, 2020; Price, 2020; People Insight, 2020; Kings Fund, 2015,2017; CIPD, 2020; 2017; 2018; Peakon, 2020; Gallup, 2020).
7.) Enhance and embed exit interview process to capture reasons for the small turnover percentage, to continuously improve HEIWs employer brand (Miller, 2018; Groysberg, & Spain, 2016; Muller, 2020; Jackson, 2019; McCartney, 2018).
8.) Continue to regularly review / benchmark employee engagement data, i.e. staff survey to identify why employees stay in the organisation (West & Dawson, 2012, 2018; Levinson, 2007a; Demourouti et al. 2001, cited in Sonnentag, 2003; Personnel Today, 2002; SAGE, 2020; Price, 2020; People Insight, 2020; CIPD, 2018; Kings Fund, 2015,2017).
9.) Undertake robust skill gap analysis to identify skill mix and any gaps within HEIW. There is currently no formal coaching and mentoring available within HEIW. There is an opportunity to use coaching and mentoring within succession planning to keep knowledge within organisation. A colleague and I

developed a skill gap analysis questionnaire, which could be shared with all staff in the organisation (EV40). The information would inform and help develop an internal mentoring scheme staff with advanced workplace skills knowledge could share their expertise with other staff (Alexandra, 2019; CIPD, 2021; Gibbons, 2017; Evolution, 2015). The analysis would help identify the skill gaps in the organisation and also identify those with advanced skills who would like to share their knowledge with the wider workforce. Staff wishing to do this could be supported to complete a formal mentoring qualification, enabling them to effectively mentor staff in their area of expertise. This would support HEIWs values, together as a team and ideas that improve and be of mutual benefit to those requiring upskilling and those with advanced skills being offered the opportunity to develop their mentoring skills. Providing this service internally will not only demonstrate ROI but allow all staff to contribute more effectively to the organisation and its overall objectives, supporting its strategy of developing the future workforce of the NHS in Wales.

10.) Millennials and Generation Y top priority is a healthy Work Life Balance (WLB). The spread of ages across the workforce now covers up to four generations as older workers retire later (Focus on age report,2017; Future trends 2015).Ensure future roles are flexible and allow a WLB (Deloitte, 2014, 2019; People Management, 2018, 2019; Independent 2016; CIPD 2015; KPMG, 2017; INC 2018). Review data analytics and skills gap analysis to identify potential retirees and availability of internal staff / talent to fill vacancies when they arise (a proactive rather than reactive approach). Then develop and embed activities that support the sharing of knowledge and skills to ensure they remain in the organisation in the long term. WLB policies are imperative to support the ageing workforce (Chemistry Report, 2019). Employers that support a WLB philosophy are more likely to have a competitive advantage within the labour market particularly the new generation of employees. HEIW need to utilise the graduate expertise to plan, Implement and lead on bespoke HEIWs planning and talent management strategy to ensure that HEIW have a workforce of diverse, highly skilled, dedicated individuals who'll contribute individually and collectively to delivering high quality patient care. Consider factors such as age of the work force / retirement to ensure HEIW have a workforce of diverse, highly skilled, dedicated individuals who'll contribute individually and collectively to delivering high quality patient care (CIPD, 2015, 2016; Timewise 2014; Deloitte, 2014, 2016, 2019; Independent 2016; INC 2018; ACAS, 2019; People Management 2018, 2019; KPMG, 2017; Skeoch, 2018; Sloan, 2019; Aftab, 2016; Vodafone, 2015; leaveboard, 2021; Roder, 2019; Kingsfund, 2021; Writer, 2019).

11.) Maintain and continue to build a distinctive brand. McKinsey (2012) suggests organisations with an employee value proposition (EVP) which is linked to effective and engaging PM is truly stronger than the competitions who don't, and these will attract and retain the best talent i.e. what employees get for what they give: "Gives" includes time, effort, experience, ideas. "Gets"includes tangible rewards, the experience of working in a company, the way its leadership helps employees, and the substance of the work (McKinsey,2017; SHRM, 2021; SHRM Effective Practice Guidelines Series, 2021) (EV41).

12.) Roll out and embed compassionate leadership principles through training across all health boards within NHS Wales (Gwella, 2021; HEIW, 2018) (EV42)

13.) Carry out repeat culture assessment to identify change since baseline (HEIW, 2018; SHRM, 2021; Wong, 2021; CIPD, 2021) (EV43)

14.) Carry out digital capability assessment to meet growing future need (Topol Review,2019)

15.) Development of work experience programmes – incorporate in to leaving and development opportunities.

16.) There are currently no formal coaching and mentoring available within HEIW (SABA,2020; Oxford Review,2021; Pulakos, 2005; leaveboard, 2021; Roder, 2019; Kingsfund, 2021; SHRM, 2020; Ashe-Edmunds, 2020; CIPD, 2018; NMC, 2018; HEIW, 2020; HEE, 2020 Robust policies, will inform future change nevertheless, unless these interventions directly impact HEIW and individuals feel listened too, the policies remain a philosophical statement lacking a 'ground reality' (Bailyn,1997 Mindtools, 2020;).

3.1 Identify and explain the rationale for a specific resourcing activity within the organisation.

3.2 Agree roles and responsibilities with other contributors to the activity.

3.3 Identify organisational procedures and legislative requirements which underpin the activity.

3.4 Plan and prepare for agreed role, ensuring the availability of any materials or resources required.

3.5 Undertake agreed role in a timely and accurate manner, in line with organisational procedures and legislative requirements.

3.6 Reflect on the effectiveness of the resourcing activity in meeting required objectives and report back to stakeholders.

The COVID-19 pandemic external driving forces relate to situations that occurred within the external environment of HEIW. (Jones, (2004); Van de Ven & Poole, (1995) Fullan, (2011); Hargreaves, (2011); Spector, (2011) suggest that organisational change occurs as a reaction to ever-changing organisational environments i.e. internal or external drivers or as a response to current crisis situation i.e. the pandemic. The associated restrictions led to all recruitment within HEIW being stopped, due to the inability for candidates to undergo face to face interviews, and the inability to provide an effective induction process for new starters. With the roll out of technology including Microsoft Teams, HEIW were able to restart recruitment. It was quickly realised that the onboarding process would need to be adapted to ensure new starters felt welcomed to the organisation, understood their role and responsibilities and had the necessary support in place to ensure a smooth transition into both the workplace and a new way of working.

There have been 35 new starters within HEIW since the implementation of the national lockdown on 23rd March 2020, all of which have joined the organisation in a virtual way (different to normal recruitment process). Gallup's engagement by employees' length of service research highlighted , that although engagement peaks during the first six months of employment, only half (52%) of employees are engaged at this point, while 40% are not engaged, and 8% are actively disengaged. This suggests that there's room for improvement in how organisations bring new employees on board (EV44).

Onboarding has become incredibly difficult amidst this global crisis, and in our new remote world. The impact is far reaching; SHRM reports that over 68% of organisations already have or report they will adopt broader or more flexible work from home policies. Whilst the Gartner *Reimagine HR Employee Survey* revealed 41% of employees don't feel connected to colleagues when working remotely and 26% report feelings of isolation (Kuepers, 2020).

With the onset of the social isolation policy caused by the COVID-19 pandemic, working from home has become the norm in many sectors (HR grapevine, 2020). An effective onboarding programme, regardless of whether it's an in-person programme or a remote programme, provides employers such as HEIW with a robust starting point during which they can communicate their values to their employees, and explain why they do what they do. Therefore, new employees feel comfortable and appreciated right from the start, become productive more quickly and colleagues and supervisors know exactly what to do (Personio, 2020). It also helps new employees easily integrate into organisational culture. To enable HEIW to continue to recruit vacant and new posts during the COVID-19 pandemic and associated restrictions, the onboarding process (Teale, 2020; Holton & Cruise, 2020; HR Grapevine, 2020; Joseph, 2020; MCQUAID, D, 2020) for new starters needed to be adapted, to ensure they felt welcomed to the organisation, understood their roles and responsibilities to enable them to carrying out their duties effectively and are able to perform at the necessary level. This enables them to feel part of the HEIW wider family, to contribute in a way that adds value and gives them the necessary support in place to ensure a smooth transition into both the workplace and a new way of working.

A successfully adapted onboarding process to engage, prepare, support and train new starters within HEIW will aid retention and ensure they can perform at the same level should they have progressed through the original onboarding process (The process will need to be predominately virtually, with attendance at the office if restrictions allow). An employee who has gone through a positive onboarding experience helps build a positive reputation for his or her organisation among talented job seekers (DIGNEY GRANT, 2020).

A recent study from HR experts found that the first 90 days of employment is a crucial time for employees to build a rapport with an organisation, its management and their co-workers, which can be implemented with and effective onboarding plan. Thus, everyone benefits when organisational goals and values are shared with employees, while simultaneously showing them how to undertake their jobs. (DIGNEY GRANT, 2020). The importance of the change to the process was acknowledged along with the potential benefit to new HEIW employees. Within their first three months of employment it was hoped they could:

- Demonstrate HEIW values – together as a team, respect for all, ideas that improve.
- Develop a sense of belonging and improved wellbeing.
- Flexibility.
- Improve job satisfaction and retention: employees who experienced an effective onboarding program are 18 times more likely to feel highly committed to their organisation and 30 times more likely to have high job satisfaction (Howard 2020); 59% of HR professionals believe the battle for talent will shift from acquisition to retention (clickboard, 2020).
- Have the ability to meet wider organisation colleagues.
- Improve performance: When employees understand their expectations from the beginning, they perform better as they start working. According to clickboard (2020) onboarding increases employee performance levels by 11% ;Access to a support network, offering a safe space to talk about how they are feeling and ask for assistance from their peers.

A new starter may feel isolated if they do not undergo a satisfactory onboarding process, leading to negative impact on well-being, causing demotivation, decreased performance and feeling undervalued (Judge et al 2001, Lyubmirsky et al 2005; Peccei et al, 2013; Van de Voorde et al 2012; Engage for success, 2014; Bailey et al 2015a, 2015b ; Staw et al 1994; Aon Hewi, 2012). This could ultimately lead to new starters leaving the organisation (Howard, 2020).

Prior to carrying out any work I devised a SWOT (EV45) analysis as recommended by CIPD (2020) which identifies Strengths, Weaknesses, Opportunities', and Threats within the onboarding change process. I also undertook a PESTLE analysis (EV46), (Luneburg, 2010; CIPD, 2018; Pettigrew and Whipp,1993). Information balance is needed (CIPD, 2018).

As I am not in a HR role within HEIW, it was not appropriate for me to develop this change for the whole organisation however, as part of my CIPD I was asked to design, develop and facilitate a blended (but predominately virtual) induction process within HEIW. Virtual onboarding affects all new starters during the pandemic however, for the purposes of this change a colleague and I were specifically asked by two senior workforce managers to develop an onboarding plan for three new employees, within the Workforce and OD Directorate (W&OD), who joined the organisation virtually during the pandemic. I was completely mindful the changes needed to happen virtually, and the need for extra resources. It was essential that I ensured new starters:

- understand how they will be required to work;
- understand what impact the restrictions will have on the way they work;
- How appropriate support will be in place to introduce to the organisation.

I became a Change Champions to support the process, as it was imperative to adopted Kotter (1996) best practice recommendation to implement change champions within a change process. My key role was to communicate benefits comprehension management – defining and disseminating the benefits of the changes

and communicating with them effectively in their own parts of the organisation (Levine, 2020; Prosci, 2020; Estabrooks & Degher; Thompson, 2004; Warrick, 2009). Team ownership was overseen by workforce directorate line managers.

A senior W&OD Manager asked a colleague and I (EV47) to develop tasks that needed to be achieved, such as an onboarding checklist. Ultimately my responsibility was to develop a plan and support the new starters. As a change champion I recognised new starters would need extra support, so a colleague and I suggested setting up a peer support group to assist in instituting the new onboarding process. The senor W&OD manager agreed the peer support group was a good idea, and gained approval from the Director of Workforce (EV48).

The group was initiated in September 2020 and was managed and chaired by myself and a colleague. As remote employees can feel isolated it was essential that a sense of belonging was created within the team. I was a key communicator within the process and used the peer support group as a platform (Warrik, 2009). The new starters are provided with protected time to attend each meeting. The group meet monthly. It allowed the three new starters to check in regularly and provided them with a safe space to turn for feedback or to ask any questions. We set up a team's group, which includes a HEIW compendium of information and supporting materials to encourage them to collaborate with other team members and build the team spirit. We also promoted ad hoc virtual meetups, as and when they need support, such as online coffee breaks which will help them bond. Dewar (2020) advocates 87% of buddy programmes boost new hire proficiency, we therefore assigned them with a mentor or created a buddy" system which will have a positive effect on their morale and their performance as well. We furthermore arranged a meeting with HEIWs health and safety team to ensure they had the correct equipment at home, to prevent musculoskeletal problems etc. along with a virtual VDU assessment. We also highlighted the importance of taking regular breaks from their screen an and encouraged the use of HEIW protected time at lunchtime, where no meetings are permitted.

There were not costs associated with the change. Due to COVID-19 and the need for recruitment the change necessitated changes to onboarding processes, including Pre-employment checks being carried out virtually, a brief tour of the office to collect equipment followed by virtual introductions to various areas of the business, it also involved online training rather than classroom based and development sessions to help them get to know their colleagues. It was also important that wider HEIW staff had time and capacity available to meet with new starters to help and ensure feel part of the HEIW wide team.

An objective in HEIW / HRM is improving and seeking to maximise employee performance within the workforce. The main goal for contemporary organisations is to increase productivity and sustained competitive advantage without detrimental impacts upon workers. The enhancement of employees' skills to develop learning capability and build a culture of learning into the organisation (Ress &Hall, 2016), productivity and commitment lead to positive organisational outcomes and competitive advantage for organisations (Zhang, Di Fan & Zhu, 2014). Within the onboarding process it was essential HEIW managers were more accessible than ever to a new team member during the pandemic. HEIW managers were responsible for overseeing the induction programme, bi monthly 1:1 meetings (Leung, 2018) as well as monthly meetings, PADRs, providing each employee with documentation i.e. an individualised tailored onboarding plan, which detailed what was expected of them and encouraged them to the aspire to goals and opportunities during the first three months of the onboarding process, whilst also regularly interacting with their managers. This helped them feel more productive and motivated.

As part of the virtual onboarding change it was imperative managers authorised the new starters time to attend induction, training etc. The new onboarding process has changed induction from 1 full day to 2 half days to ensure engagement. During the onboarding process, trainers and managers can promote commitment to organisational goals and build the foundation for successful employees. "Working closely with a new employee, managers can build toward the four pillars of employee engagement: connection, commitment, contribution, and progress." (Zenefits, 2020)

NHS Wales preemployment checks are administered by another NHS organisation; however, it is the reasonability of an employee's line manager to follow these up.

It was also essential that new employees had their IT set up quickly to get familiar with the flow of the team more quickly and so that they have access to the digital workplace (HEIW intranet, TEAMS, video conferencing software, and other apps and tools). Technology can also help beyond its traditional role of streamlining the many administrative tasks that come with onboarding new employees (Cary, 2020).

A change plan was devised, detailing who will be affected by the changes and their potential information and support needs. It established objectives, actions, and timescales for implementing the proposed change and how onboarding would need to be carried out differently (EV49). A communication plan was also devised (EV50). Whilst HEIW has a robust induction programme, due to Covid-19 HEIW employees now work 100% virtually, and therefore assurance was needed to ensure new starters felt welcomed, and had access to all necessary resources via a virtual process, as they would have done through the existing in-person approach. Not only would this approach benefit the new starters and make them feel welcome and part of a team, leading to better performance, it meant that HEIW could continue to recruit during the pandemic and continue a *'business as usual'* approach.

Objectives were identified and categorised within a HEIW new starter 90-day checklist, which included mandatory tasks, technology, pastoral care, key documents etc (EV51). The checklist is non time specific and can therefore be repeatedly use for future new starters. It is acknowledged that this can also be amended to account for future feedback.

A Gantt chart was also devised to project manage, schedule, and maintain activities to monitor milestones (EV52). Tasks were identified; essential tasks, the task relationships, input activities into software (Microsoft Project / Excel) and charted progress. The chart outlined assigned responsibilities (which were colour coded) and all tasks within the change project, in order against timescales. The chart gave an overview, allowing management and control of many activities to ensure that they were completed on schedule. I recognised missing a change task or finishing a task late could have a knock-on effect on the rest of the change project i.e. late delivery and financial implications (Mindtools, 2020).

Verbal agreement on the change plan and its implementation was received from the workforce manager. Email confirmation was later received (Refer back to EV47) An e-mail was also received from the Deputy Director of Workforce, endorsing the idea and confirming approval for peer support group implementation (Refer back to EV48).

A solid business case was presented within the change plan: We identified that the onboarding process will be improved through this change process. Whilst HEIW has a robust induction programme, due to Covid-19 we needed to ensure new starters felt as welcomed and had access to all necessary resources via a virtual process as they would have done through the existing in-person approach.

Throughout the process I followed the outlined plans such as the Gantt chart, change plan etc to implement the change. Our responsibilities included arranging, Charing and managing the peer support group. Monthly meetings have taken place, which have also included colleagues from the wider organisation (EV53). Amongst other initiatives we have set up a team's channel which includes a compendium of information / useful documents such as Equality Impact Assessment guides, PADR form, contact list, Board report template etc (EV54). Whilst I was not responsible for the whole process, I was asked to facilitate an introductory meeting with the new starters regarding the Health and Wellbeing agenda (EV55). I also accompanied them to other meetings.

I provided resources and used data for evaluation. Communication was key within the process and was done consistency, with transparency through multiple communications channels. This ensure the right messages

is relayed, through the most appropriate channels (CIPD, 2019; 2020; HEIW, 2018, 2020; Wilkinson & Taylor, 2016; Bersin, 2015 Macleod, 2009, p6; Rees & Hall, 2016).

Throughout the process I monitored and managed resistance (Adkins, 2015; Prosci, 2020; Taylor & Woodhams, 2016; FMLink; Lunenburg, 2010; Fincham & Rhodes 2005; French et al, 2011; Walkme, 2018; Beckett, 1999; Cadwell, 2003; Doz & Prahalad, 1988; Buchanan & Boddy, 1992; Kotter, 1999; Balogun et al, 2005; Hardy, 1994/6; Folger & Skarlicki, 1999; Kanter, 2012; Senge, 1992; Alas & Vadi, 2006; Morrison, Brown & Smith, 2006) dependencies' and established no organisational costs – however, acknowledged if it not was not implemented there is a risk of sickness costs and cost incurred through retention and further avoidable recruitment.

In order to celebrate success, I recognised milestone achievements as an essential part of this project, as well as the successes of the new starters involved – i.e. positive feedback regarding the group and experiences within their role etc.

Review, Revise and continuously review; I identified that the HEIW onboarding process will be continuously improved through this change process.

As part of our role within the peer support group I approached this methodically, taking the time to review and assess the existing process, and translating this into a virtual process. The process we devised followed best practice (CMI, 2020) (EV56) and ensured our new starters felt welcomed, by arranging pre-start date introductory meetings with the team, arranging IT equipment to be ready on their start date and signposting them to resources including; Health and wellbeing apps such as Silver Cloud, Psychological wellbeing etc; the workforce strategy, IMTP, intranet, Social support groups and organisational groups i.e. the biodiversity (HEIW, 2020), health and wellbeing (HEIW, 2018) and equality (HEIW, 2018) and explaining what to expect in the first three months of joining the organisation

Encouraging feedback has been received from the peer support group indicating we have met the requirements of their identified needs (EV57). Positive feedback was also received from a W&OD manager (Also see EV47) *"Emma & *** addressed this issue by setting up an informal* peer support group which *allowed our new starters to connect with others in the same position and have a place where they could access hints, tips and support from Emma & ***. I look forward to reviewing the results from the pulse survey and focus group with Emma & ***. Initial feedback through my 1:1 meeting with new team members has confirmed that this process has been a success"* Sharon Jenkins – Head of Careers and Widening Access (W&OD).

The onboarding process is designed to cultivate a long-term relationship between the employer and the employee, while fostering a feeling of belonging and an affirmation of making the right choice. This is extremely important for both employers and employees, especially during the pandemic. West *et al* (2020) suggests employees have three core needs at work: autonomy, belonging and contribution. He advocates that if wellbeing and motivation at work are met, employees will flourish (EV58). Throughout this change activity these factors were considered and applied HEIW focus on employee experience (CIPD, 2020; 2017; 2018; Peakon, 2020; Gallup, 2020; Mercer, 2019; People Insight, 2020; Sage, 2020) which creates a holistic approach around EE and wellbeing that enables employees to have a voice (CIPD, 2020; CIPD, 2017; 2018; Peakon, 2020; Gallup, 2020; Mercer, 2019; People Insight, 2020; Sage, 2020; Engage for Success, 2020; ACAS 2016, 2020) and be their best.

Positive Working Relationships were maintained throughout the onboarding change activity, as expectations were managed at the start of the process. This ensured that employees did not feel vulnerable and changes to the process were being imposed on them. The onboarding process is designed to cultivate a long-term relationship between the employer and the employee while fostering a feeling of belonging and an affirmation of making the right choice. This is extremely important for both employers and employees. As such, we have demonstrated the importance of the change and furthermore highlighted that HEIW has

prioritized onboarding new employees, and additionally though their training virtually instead of in-person due to the COVID-19 pandemic.

The tone of the communication was also important as it develops a consistent tone of voice across all stakeholder connections to HEIWs brand, including all social media channels, which makes them seem genuine and employees and stakeholders feel at ease (CIPD, 2020; Whitehouse, 2018; Imperial College London, 2020). The new starters were informed HEIW encourage employee feedback and embed employee voice within communications methods for obtaining feedback via (CIPD, 2013; Silverman, 2014; Engage for Success, 2020):

- Online communication tools such as Microsoft Teams
- A dedicated email address with a mailbox for employees to send any questions or concerns
- An already established staff forum or newly set-up forum which represents employee voice during the current situation;
- Digital area such as a staff intranet.

Throughout the change process we considered the Change Curve (Kubler-Ross, 1969; Mindtools, 2020) model that demonstrates the four stages most people go through as they adjust to change stages of personal transition and organisational change such as onboarding i.e. Denial, acceptance etc (Mindtools, 2020). We recognised working from home can be isolating, especially new staff. We therefore check in with new employees daily, as the intention is to maintain relationships and keep employees healthy, especially during the pandemic. We scheduled daily calls or video chats with new employees to help them feel like part of the team and give them the opportunity to ask questions.This allowed us to predict how employees may react, so that we could, help them make their own personal transitions. This helps make sure they have all the guidance and support they require/need such health and wellbeing resources i.e. Counselling services, EAP etc.

The new starters followed the onboarding plan and met virtually with 20 organisational teams with full attendance. They met with every employee required within both the workforce team and the nursing and commissioning team in order to fulfil tasks within their current role. A record was maintained (EV59). Further meetings took place with other directorates in early 2021. It is anticipated when restrictions are lifted, and it is safe to return to the office face to face meetings will take place with teams.

We continue to support them through the peer support group and have received positive feedback that they are happy in their role. Alongside this, the right data and metrics were gathered on the workforce directorate new starters, from the technology they have at home, to individual's vulnerabilities in relation to COVID-19. This will also help plan a staggered 'return to work' process when social isolation measures become less stringent (HR Grapevine, 2020).

To supplement this during November 2020 a colleague and I produced a pulse survey to measure new starter engagement. We targeted new starters between 23rd March and 31st August 2020. The main objective of this research was to measure new starter engagement within HEIW, as there had been 35 new starters within HEIW since the implementation of the national lockdown on 23rd March,2020. All of which have joined the organisation in a virtual way (different to normal recruitment process) and identified areas of concern or improvement as there was no efficient way of monitoring new starter engagement within HEIW. An onboarding survey was activated on Tuesday 26th October and remained open until Tuesday 3rd November (EV60).

The research highlighted several factors in relation to the onboarding process within HEIW. It was evident new starter engagement levels are high within HEIW, with an overall engagement score of 80%. 77% respondents strongly agreed or slightly agreed with all ten of the multiple-choice questions and 92% of respondents would recommend HEIW as a place to work to colleagues (CIPD, 2018; Kings Fund, 2015,2017). The research highlighted that there are pockets of dissatisfaction (2 respondents) regarding line manager, network and directorate support. A presentation was collated, detailing the findings and presented to the

people team (EV61). It highlighted dissatisfaction with the induction programme, however the People team has also recognised this from other avenues (HEIW new starter group) and have since consulted with new starters, and improved the process, splitting into 3 sessions rather than 1 - 6 hour.

Although the data size of the research gave the analysis credibility (Harter et al 2002), the relationships of a larger sample size would've been statistically significant, the practical implications of the difference would have been small (Lenth, 2001; Survey Monkey; Comrey & Lee, H., 1992; Tabachnick & Fidell, 2007; Saunders et al, 2016). Due to confidentiality we were unable to do a pulse survey with the three W&OD new starters. However, for the purpose of this change activity we were able to use the results as a baseline to generate a conversation starter within a focus group with the three Workforce Directorate new starters.

I was always aware of the importance of Information Governance and maintaining confidentiality and security of information gained during this activity. This in many cases included access to personal information relating to employees. I was aware that all information must be treated, whether corporate, staff or patient information, in a discreet and confidential manner in accordance with the provisions of the GDPR and organisational policy. Any breach of such confidentiality is considered a serious disciplinary offence, which is liable to dismissal and / or prosecution under current statutory legislation and the HB Disciplinary Policy. As a key part of the organisation's accountability and under the GDPR accountability obligations, a DPIA was completed to systematically analyse, identify, and minimise the data protection risks and demonstrate how HEIW comply with data protection obligations (EV62).

The Pulse survey was anonymised, and results were only shared with the People Team. The focus group was informed that the discussion would not be recorded but would be summarised and shared with management to enable the process to be improved for future new starters however, no names will be mentioned in the report. It was acknowledged that all the data collated will be in strict adherence to data regulations agreement was received from all participants at the focus group. The group agreed to the records maintenance in line with the consultation and survey privacy notice (EV63).

As an employee of HEIW, I am legally responsible for all records that I gather, create or use as part of my work within the organisation (including patient health, staff health or injury, financial, personal and administrative), whether paper based or on computer. All such records are considered public records and I have a legal duty of confidence to service users (even after an employee has left the organisation). I was aware that I should consult my manager if I had any doubt as to the correct management of records with which I work. Within the onboarding process and beyond line managers are responsible for maintaining new starter records on attendance at induction, completion of mandatory training and 1:1 discussion.

The Public Sector Equality Duty in Wales places a positive duty on the HB to promote equality for people with protected characteristics, both as an employer and as a provider of public services. There are nine protected characteristics: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex and sexual orientation. The HB is committed to ensuring that no job applicant or employee receives less favourable treatment of any of the above grounds. To this end, HEIW has an Equality Policy and it is for each employee to contribute to its success.

HEIW condemns all forms of bullying and harassment and is actively seeking to promote a workplace where employees are treated fairly and with dignity and respect. All staff are requested to report and form of bullying and harassment to their Line Manager or to any Director of the organisation. Any inappropriate behaviour inside the workplace will not be tolerated and will be treated as a serious matter under the HB/Trust Disciplinary Policy.

As the pulse survey did not identify WOD specifically, to measure the effectiveness of the activity I supplemented it with quantifiable qualitative data in the form of a focus group, to identify the effectiveness of the change specifically in W&OD. I recognised "Measuring change management is one of the most difficult

parts of the process, because you're measuring people and their emotions, which is hard to quantify" (Otto, 2020).

In line with GDPR I e-mailed participants to obtain consent from the three new starters, who agreed to partake in the focus groups (EV64). The focus group was held on Thursday 7th January with the peer support group, to establish if identified requirements have been met (EV65).

We monitored and evaluated results of the change programme against the goals and milestones established in the original plan (Taylor & Woodhams, 2016; Rees & French, Pappas, 2020; EIGE, 2020). Overall, the new starters felt that they have benefited from the range of support mechanisms in place, including the peer support group, health and wellbeing resources and introductory meetings, supported by colleagues. Feedback outlined in EV66.

It would appear, from the comments received, that all new starters have had an extremely positive and engaging experience during their first four months of employment. HEIW'S ethos of employee experience is underpinned by the ten pillars of EE (Shriar, 2015; Mansfeild, 2018; Deloitte, 2015). This is reflected within the process as the new starters have felt well supported, the enthusiasm from other staff in the organisation has been clear and they indicated we have met the requirements of their identified needs. However, according to Dewar (2020) the best employee onboarding programs extend throughout the employee's first 90 days. It's therefore essential we continue to support the new starters during their first 90 days and beyond. The more an employee feels engaged the more probable they are to stay with their organisation and deliver excellent job performance.

All new starters commented on the positive experience they have received during introductory meetings and the enthusiasm from other staff in the organisation has been clear. These meetings have along with strong enthusiasm from staff relating to their area of work / expertise, a positive impression of HEIW'S organisational brand, by improving the ability to attract and retain top talent, ensuring faster time to productivity and improved team performance, Boosts retention, reducing new hire attrition and associated costs, Improves employee experience, increasing engagement, productivity and profitability(McKinsey 2017;SHRM, 2021; SHRM Effective Practice Guidelines Series, 2021).

The corporate induction process has some issues, but changes have been made recently so that the original 1 session has now spread over three sessions, with the People Team working on making the sessions more interactive and engaging.

They also benefited from attending these meetings together along with myself and colleague as we highlight where the crossovers between teams were and steered the conversations to ensure it remained relevant to us.

There was also feedback that whilst the amount of health and wellbeing resources available was seen as a positive, the way they are presented is a little overwhelming (Aon Hewi ,2012).

There was a difference in workload levels amongst the three new starters, with one extremely busy, with little inter-team peer support, compared with another who felt they had a significantly reduced workload, but had inter-team support to help identify pieces of work that could be undertaken.

Throughout the change process we adopted best practice. We have demonstrated the importance of the change and furthermore HEIW has demonstrated the organisation is prioritising onboarding new employees, though their training virtually instead of in-person due to the COVID-19 pandemic. Recognising that effective onboarding promotes positive working relationships.

This research has indicated that there is a strong business case to support the onboarding change for new starters within HEIW. HEIW have also recently reviewed their Induction process during COVID-19 from one

full day to 2 half days virtually. Robust policies such as Recruitment and Retention, will inform future change however, unless these interventions directly impact HEIW, the policies remain a philosophical statement lacking a 'ground reality (Bailyn,1997).

A summary report and recommendations were produced to ensure the views and opinions captured, will further improve the future onboarding process (EV67). We adhered to GDPR processes and no identifiable names were mentioned within the report. The report was shared with the W&OD mangers (EV68, EV 69)

Recommendations

- The peer support group continues, as the support mechanisms are regarded as extremely valuable (MIND, 2020; CIC, 2020).

- Ongoing support will be available for all during and after implementation (CIPD, 2021).

- Future new starters continue to be "buddied" up if possible and attend introductory meetings together (Dewar, 2020)

- Introductory meetings are scheduled according to work timelines, rather than starting with the directorate and moving outwards across the organisation.

- Provision of an organisation chart, split into directorates

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HEIW IMTP Executive Summary

This IMTP is centred around 6 Strategic aims, 4 of which are externally facing and 2 are predominantly internally facing and about how we work with others. Together they present HEIW with the opportunity to make a real difference to patients, quality of care, trainee and student experience and the wellbeing of the NHS workforce culture. These are:

- To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'
- To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs
- To work with partners to improve collective leadership capacity in the NHS
- To develop the workforce to support the delivery of safety and quality
- To be an exemplar employer and a great place to work
- To be recognised as an excellent partner, influencer and leader.





Our vision is **"Transforming the workforce for a healthier Wales"** which was developed through engagement with staff, stakeholders and partners. We deliver this vision using our PEOPLE principles:

P	**Planning** ahead to predict and embrace changes and build a sustainable health and social care system
E	**Educating**, training and developing staff to meet the needs of patients and citizens in line with prudent healthcare principles
O	**Offering opportunities** for development to new and existing staff from all professional and occupational groups throughout career pathways
P	**Partnership working** to increase value for our citizens, patients, learners and staff
L	**Leading** the way, through continuous learning, improvement and innovation
E	**Exciting, Enthusing**, **Engaging, Enabling** and **Empowering** staff across all professional and occupational groups

EV 2 – HEIW IMTP

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Integrated Medium Term Plan (IMTP)

2020-2023

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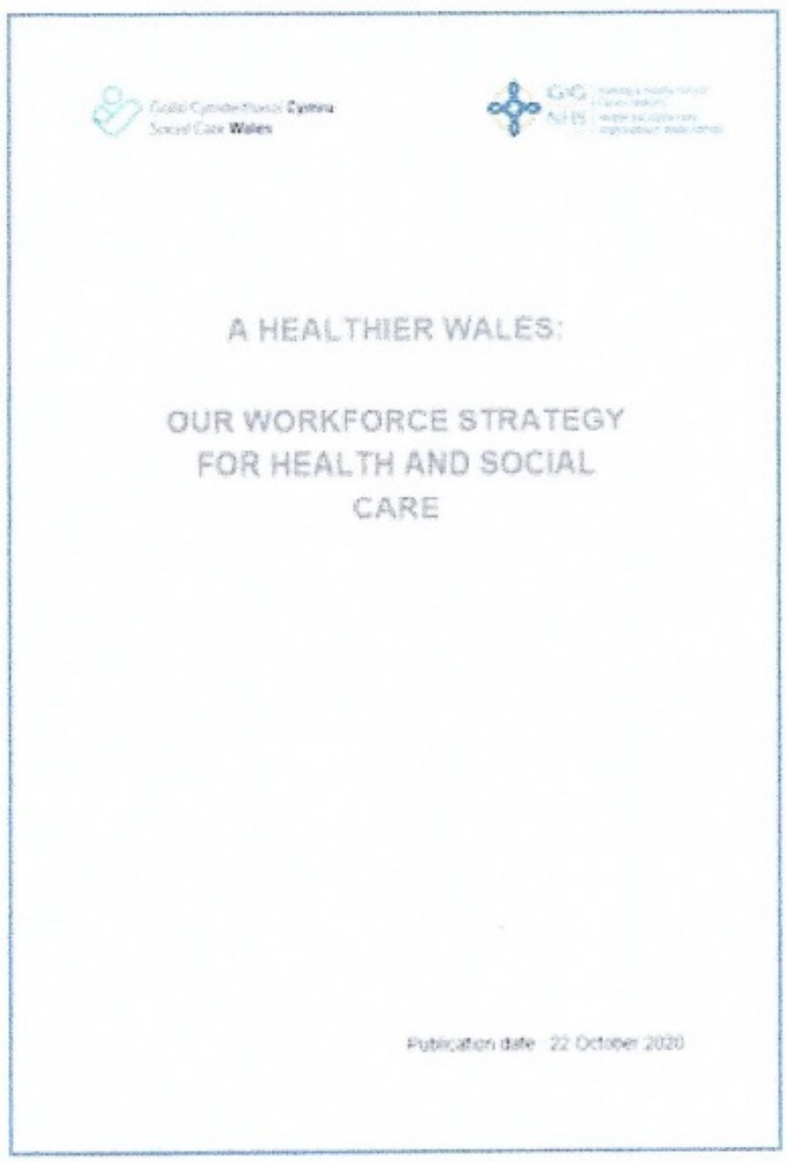
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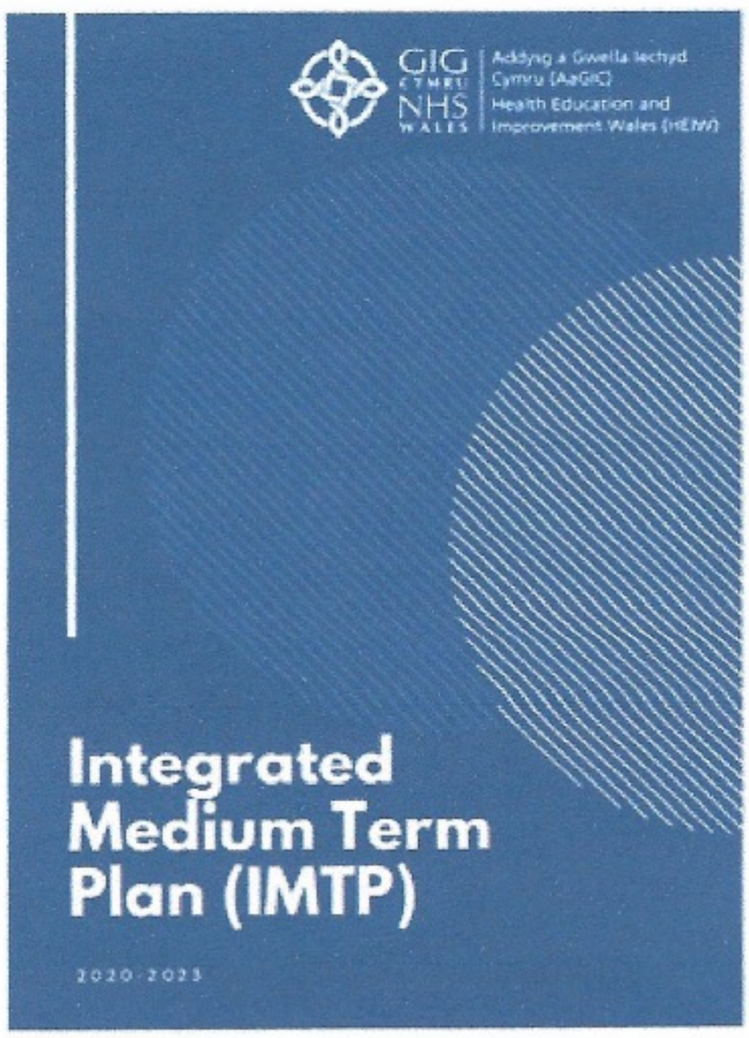
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Progress this year





endix 3 Plan on a page

tegic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership acity at all levels

tegic Objective 3.1 Lead the implementation of the Health & Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership ework for action

cutive Lead: [redacted] / SRO: [redacted]

y Deliverables for Year 1 (2021-22)	Key Quarterly Milestones for Year 1 (2021-22)
Develop and promote a cultural assessment tool that reliably measures compassionate and collective culture and behaviours within organisations. Provision of compassionate leadership conference to promote and embed compassionate leadership across the system and share best practice. Influence the inclusion of the compassionate leadership principles and manager core competences into all leadership and management offerings Develop compassionate leadership resources including the provision of resources that attract educational credit Provision of a compassionate leadership module for use within HEIW and Induction Actively engage with staff from BAME groups, taking positive action and providing targeted leadership development Provision of master classes focussed on racial injustice and health inequalities to support leaders Develop a range /dashboard of workforce measures to assess the effectiveness of leadership and culture within organisations. Continue to lead and support a network of Collective Leadership Champions/accredited practitioners. Continue to partner with experts to ensure HEIW leadership offerings are credible and steeped in evidence base Establish coaching and mentoring capacity able to support executive and clinical leaders Increase HEIW profile within the 5 nations collective leadership network	**Q1 (April-June)** • Compassionate leadership Principles embedded within all leadership offerings across HEIW and NHS Wales • Completion of compassionate leadership book with Professor Michael West that includes case examples from the UK and Wales • Production of a range of compassionate leadership measures **Q2 (July-September)** • Development of Compassionate Leadership module worth 20 credits at master's level • Development of CEO onboarding programme **Q3 (October-December)** • Provision of compassionate leadership national conference that attracts NHS wales and other sector leaders **Q4 (January-March)** • Host the 5 nations collective leadership event
gh level Deliverables for Year 2 (2022-23)	
Create capability and capacity within HEIW to deliver compassionate leadership offerings Continue to develop Leadership resources that are available bilingually, pan Wales. Establish a network /faculty of Leadership associates who can support Executive development. Provide leadership conference and learning events to share best practice. Review the impact of the NHS Leadership framework for action.	
gh level Deliverables for Year 3 (2023-24)	

tegic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership acity at all levels

tegic Objective 3.2: Lead the implementation and management of the NHS succession planning framework for Tiers 1 -3 and monitor progress

cutive Lead: [redacted] / SRO: [redacted]

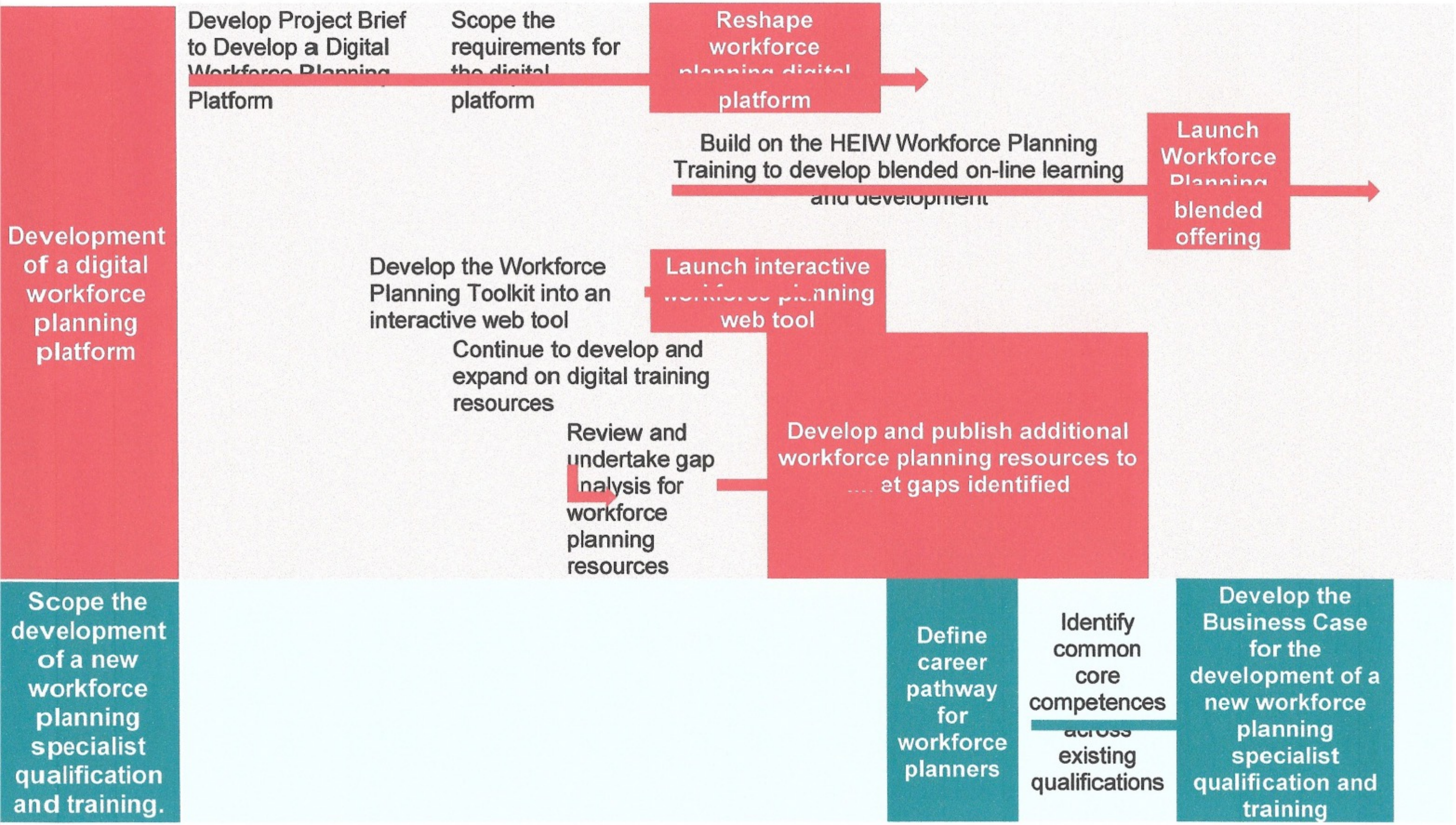
y Deliverables for Year 1 (2021-22)	**Key Quarterly Milestones for Year 1 (2021-22)**
Implement the programme deliverables identified by the national Talent Board through the Talent and Succession Operational Group Develop and deliver a standardised, evidence-based approach to the identification and management of Tier 1-2 talent across NHS Wales. Integration of a self-assessment / diagnostic tool based on the NHS Wales Executive Success Profile into 'Gwella' TM solution. Design and deliver Executive Director development centre to identify potential successors for prioritised posts. Develop a range of talent management dashboards for Tiers 1 – 3 Establish and support networks of 'ready now' and 'ready soon' executive talent. Implement targeted processes to support Succession Planning, based on intelligence from Workforce and Talent Management dashboards Provision of a range of master classes and development offers Support organisations in identifying best practice Talent and Succession processes /frameworks for local application of robust Talent Management. Scope the option of HEIW playing a leading role in executive leadership recruitment.	**Q1 (April-June)** • National Talent Board operational • Talent management practitioner group established • Talent management digital solution implemented • Talentbury 2020 network engaged • Schedule of succession planning activities and Leadership Masterclasses & Learning Events available. **Q2 (July-September)** • Development Centres delivered for those aspiring to Tier 2 positions. • On-boarding programme for new CEOs in NHS Wales established **Q3 (October- December)** • Self-service self-assessment / 360 degree assessment integrated into talent management solution • A range of talent dashboards developed **Q4 (January-March)** • Leadership/Talentbury 2021 Conference event provided
h level Deliverables for Year 2 (2022-23)	
Widen access to Executive compassionate leadership development to reflect local population requirements? Continued delivery of Executive Director development centres to identify possible successors for prioritised posts. Continued delivery of executive leadership offerings.	
h level Deliverables for Year 3 (2023-24)	
Continued provision of executive leadership offerings Established talent pools for critical roles across NHS Wales Established alumni's and networks	

t does success look like?

- An established talent management process embedded across NHS Wales for Tiers 1-3
- Best practice 'Talent Management and Succession Planning' frameworks and toolkit developed for NHS Wales
- Ability to identify 'Ready Now' and 'Ready Soon' candidates across NHS Wales with robust aspiring executive talent pools and pipelines established.
- Up to 3 NHS applicants shortlisted for all NHS Wales Executive positions by 2024 (3 minimum by 2027).

Plan to develop education and training to support NHS organisations to improve the quality of workforce planning expertise and capability across the system

Objective	2021/2022				2022/23	2023/24
	Q1 Apr-Jun 21	Q2 Jul-Sept 21	Q3 Oct-Dec 21	Q4 Jan-Mar 22		
Implementing a standardised methodology for workforce planning	Pilot, review and refine capability matrix Launch capability Matrix Tool	Develop and build web-based interactive digital capability matrix tool		Launch web-based interactive Digital Capability Matrix		
	Develop Workforce Planning Training	Commence Delivery of Workforce Planning Training				
	Develop Toolkit and Resources	Pilot Toolkit with key stakeholders				
Continue to Develop a workforce planning approach for Primary Care	Evaluation of virtual training					
	Further development of on-line training offering	Implement and roll-out on-line offering for Primary Care	Work with Strategic Programme to embed the workforce planning approach into the Cluster IMTP Process			
	Develop interactive Toolkit for Primary Care	Launch Interactive Toolkit for Primary Care				


Development of a digital workforce planning platform
Develop Project Brief to Develop a Digital Workforce Planning Platform
Scope the requirements for the digital platform
Reshape workforce planning digital platform
Build on the HEIW Workforce Planning Training to develop blended on-line learning and development
Launch Workforce Planning blended offering
Develop the Workforce Planning Toolkit into an interactive web tool
Launch interactive workforce planning web tool
Continue to develop and expand on digital training resources
Review and undertake gap analysis for workforce planning resources
Develop and publish additional workforce planning resources to .... et gaps identified
Scope the development of a new workforce planning specialist qualification and training.
Define career pathway for workforce planners
Identify common core competences across existing qualifications
Develop the Business Case for the development of a new workforce planning specialist qualification and training

EV 4

Progress this year

Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of '*A Healthier Wales*'

Achievements

- Endorsement from WG and publication of the 10 Year Workforce Strategy to 2030
- Transfer of Widening Access team into HEIW
- Transfer of Train Work Live into HEIW portfolio
- Supported the development of BAME risk assessment tool
- Piloted the Continuing Professional Development Course Management System (CMS).
- Delivered the first non-clinical qualification for Primary Care Practice administration and reception staff.
- Developed and started progression of Made in Wales programme
- Agreed to standardised workforce planning methodology

Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs

Achievements

- Phase 1 of Strategic Review of Education completed
- Approved and endorsed Education and Commissioning Plan
- Implemented enhanced Single Lead employer arrangements across a breadth of Medical specialities, dental and pharmacy
- Invested in an interprofessional team to drive forward our approach to co-ordinate Simulation Based Education and hosted 2 webinars to take forward the agenda.

We have professionalised our Training Programme Director programme

- First cohort of nurses commenced on Future Nurse Programme
- Expanded Clinical Fellowship to include Pharmacy and Optometry
- Assisted the rollout of Attend Anywhere to dental practices
- Established Differential attainment programme board to drive forward change

Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels

Achievements

- Developed and utilised 'Gwella' our Leadership Portal
- Led the implementation of the Health & Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership framework for action
- Produced Talentoury – 4-day festival of Leadership
- Relaunched the NHS Graduate Scheme with inclusive recruitment, assessment and induction processes
- Piloted Executive Leadership programme developed in conjunction with the Kings Fund
- Created Alumni networks to support Leadership cohort

Strategic Aim 4: To develop the workforce to support the delivery of safety and quality

Achievements

- Achieved an overfill in GP training places -125% fill rate
- Completed rollout of GP training 1+ model across all Wales regions
- implemented Longitudinal Integrated Foundation Training (LIFT) model
- Transitioned the Nurse staffing Act team into HEIW
- Increase medical foundation training places by 12
- Increased Pre-Registration pharmacy places filled to 132. An increase of 39%
- Hosted virtual conference on Informing the Future of the Mental Health workforce in Wales

Strategic Aim 5: To be an exemplar employer and a great place to work

Achievements

- Publication of our Strategic Equality Plan which explains how HEIW will promote equality, eliminate discrimination and foster good relations
- Piloted and shared a range of wellbeing resources for staff to raise awareness and provide availability of support across mental health, money advice
- Taken forward and embraced our organisational approach to the Biodiversity and decarbonisation agenda
- Enhanced structure of Welsh Language team to meet increasing demands and requirements
- Enabled staff to work virtually from home within 24 hours

Strategic Aim 6: To be recognised as an excellent partner, influencer and leader

Achievements

- Moved to virtual board meetings and AGM increasing the ability of stakeholders to attend
- Finalised and launched Brand guidelines
- Publication of detailed stakeholder bulletins
- Developed range of bi-lingual materials
- Increasing presence across various forms of media and ensuring appropriate engagement
- Engaged with health boards on the availability of EDUROAM network across all sites

EV5

Strategic Planning – what's the point?

Planning: bridges the gap from **where we are** to **where we want to be** and reduces the **risk** of making **change** happen. It is the process of deciding in advance **what** is to be done, **who** is to do it, **how** it is to be done and **when** it is to be done (and also **how much it may cost!**)



Planning in partnership is the way we make change happen in NHS Wales

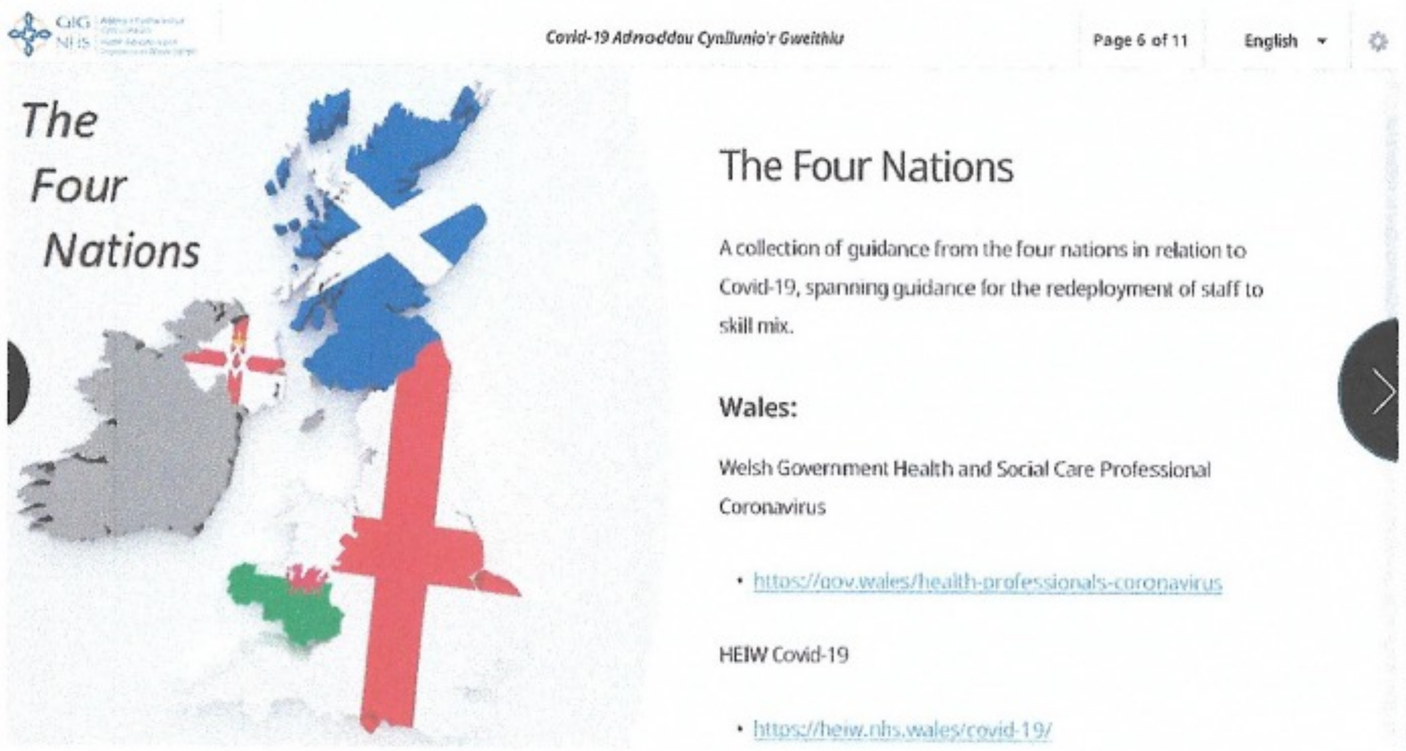
Strategic Planning – setting long term goals for the organisation. Developing and delivering our plans to achieve them, understanding our progress & then reviewing our plans

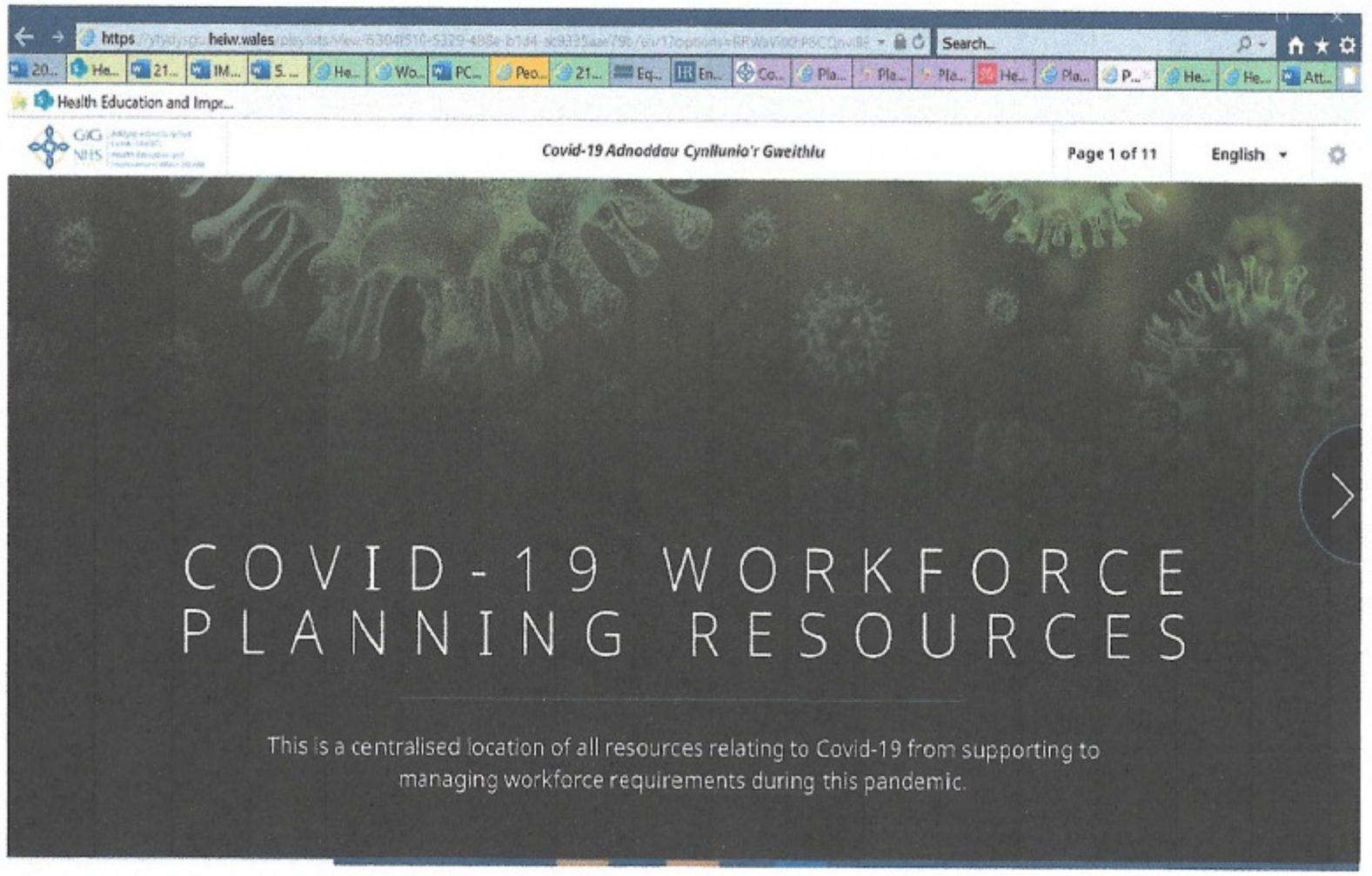
HEIW Vision & Strategic Aims

Transforming the workforce for a healthier Wales



EV 6







https://www.nhsconfed.org/supporting-members/covid19

England:

NHS England Covid-19 pages

• https://www.england.nhs.uk/coronavirus/workforce/

NHS Employers - Covid-19 Guidance for NHS Workforce Leaders

• https://www.nhsemployers.org/covid19

Scotland:

Covid-19 Compendium

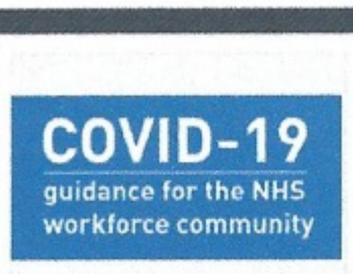
• https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2990/documents/1_covid-19-



Workforce Guidance for Students, Trainees and Trainers

HEIW in conjuction with our stakeholders, working together to support our students.

: Workforce Guidance for Students, Trainees and Trainers

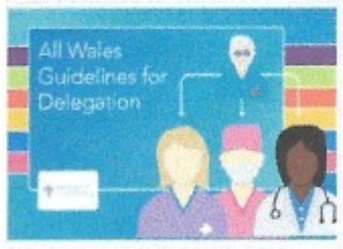


Workforce Guidance from Regulators

Covid-19 related resources from key regulators.

: Workforce Guidance from Regulators

GIG NHS
Covid-19 Adnoddau Cynllunio'r Gweithlu
Page 5 of 11
English



Resources to Support Workforce Deployment

HEIW collated resources that support the deployment of various staff groups.

: Resources to Support Workforce Deployment



Resources to Support Staff

A collation of resources to support the Health and Wellbeing of the workforce.

: Resources to Support Staff

Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

EV7

HEIW IMTP STATUS FOR COVID–19

In light of COVID-19 we are required to review our work programmes to ensure that only essential activities are being undertaken. The following table provides an initial view of our assessment of this for Q1 OF 2020/21 for discussion at SLT

AIM	OBJ	EXECUTIVE	SRO	DESCRIPTION	STATUS	PROGRESS UPDATE APR 20	PLAN FOR NEXT 3 MONTHS
Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of *'A Healthier Wales'*	1.1	[redacted]	[redacted]	Lead the development of a multi-professional Continuous Professional Development (CPD) strategy and drive improvements in current CPD activity to ensure that the existing NHS Wales workforce has the skills and capabilities required for the future	**PAUSE** strategic work **CONTINUE** system procurement and implementation **CONTINUE** internal review work		
	1.2	[redacted]	[redacted]	Lead, develop and implement a sustainable national workforce plan for key shortage	**PAUSE** and review impact on workforce after Q1		

AIM	OBJ	EXECUTIVE	SRO	DESCRIPTION	STATUS	PROGRESS UPDATE APR 20	PLAN FOR NEXT 3 MONTHS
				professional areas to achieve a better match between demand and supply in Wales			
	1.3	[redacted]	[redacted]	Lead, develop and embed a range of actions to support workforce and workplace wellbeing and colleague experience	**ACCELERATE AND REDIRECT to focus on COVID 19 position**	• HEIW Health and Wellbeing Strategy – consultation began at staff event on the 11th March. • Wellbeing Matters documents (2nd edition) issued in March 2020. • COVID-19 playlist developed and implemented. • COVID-19 Colleague Health and Wellbeing	In recognition of the significant change that CVIDO-19 will have on staff health and wellbeing it is recommended to pause the strategy until after the second HNA in October with an additional section for COVID-19. • Continue to support the work of the Health and Wellbeing subgroup of the COVID-19 Workforce Cell.

AIM	OBJ	EXECUTIVE	SRO	DESCRIPTION	STATUS	PROGRESS UPDATE APR 20	PLAN FOR NEXT 3 MONTHS
						Strategy developed and issued.	
Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels	3.1	[redacted]	[redacted]	Lead the implementation of the Health & Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership framework for action	Close consultation and **PAUSE**		
	3.2	[redacted]	[redacted]	Lead the implementation and management of the NHS succession planning framework for Tiers 1 -3 and monitor progress	**PAUSE**		
	3.3	[redacted]	[redacted]	Lead the implementation and management of the Digital Leadership portal	**CONTINUE** – contractual issues and will be used to support well being work re COVID -19		
	3.4	[redacted]	[redacted]	Lead the establishment and management of a Wales Leadership alumni and range of leadership networks	**PAUSE** – light touch		

EV8

Health Education & Improvement Wales

COVID -19 Identified Risks per Directorate

12 May 2020

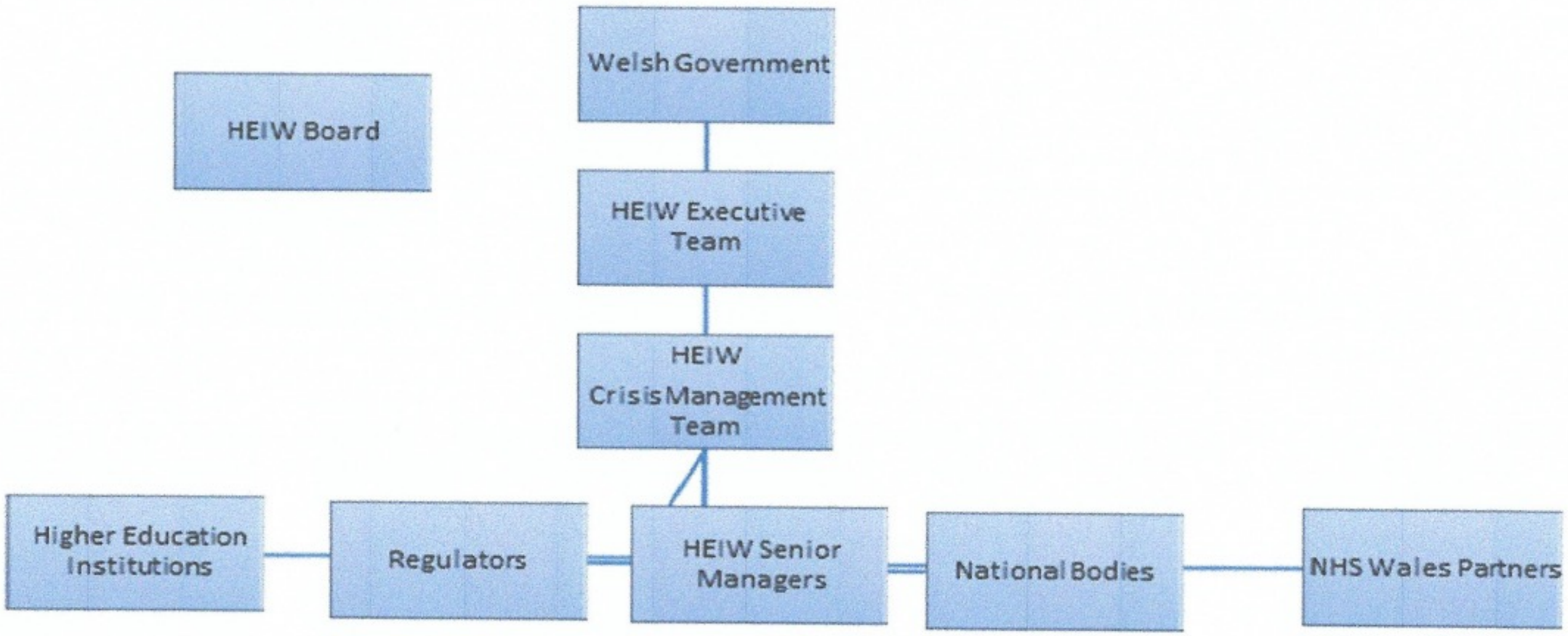
MEDICAL DIRECTORATE

Medicine

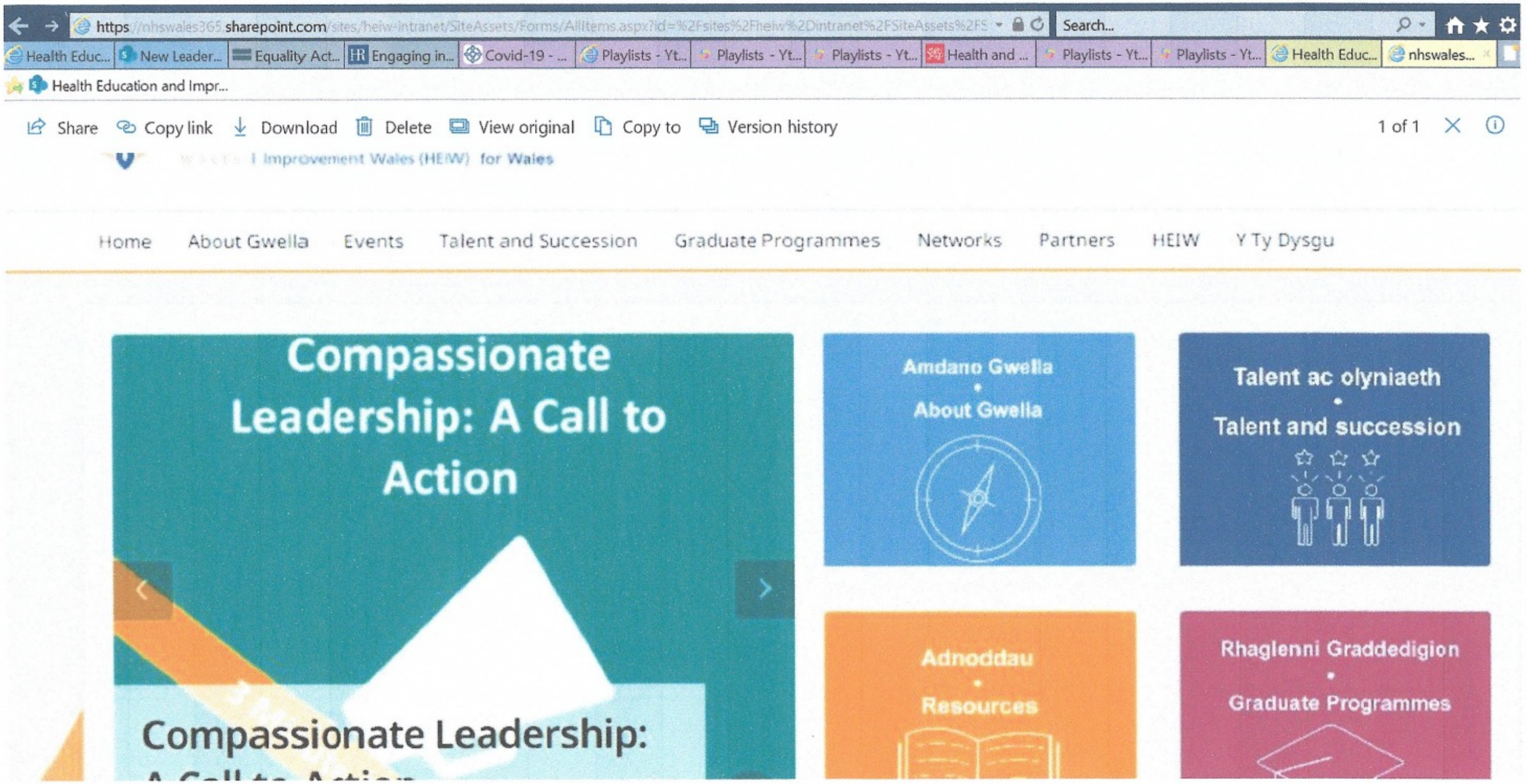
Type of Risk	What is the specific risk?	What actions do we need to take to manage/ reduce/mitigate the risk?	Progress	Escalate to Corp Risk Reg? Close Risk
Progress / completion of education and training for current students and trainees.	Rotations stopped across UK resulting in certain groups of trainees not obtaining the required skills and competences to progress in their programme.	• 4 nation agreement and contingency planning being developed. • Awaiting Royal College guidance on flexibility. • Foundation trainees are being deployed to obtain key skills in medicine as required by their programme and others deployed to maximise skills obtained to date for the benefit of the COVID response. • In other specialties additional training time will be required in these key areas this will be managed through revisions to programme management over the coming months i.e. where programmes such as Anaesthetics are modular.	August rotations to proceed for most trainees AoMRC guidance re ARCPs to be finalised and approved week ending 16th May Review of redeployment underway Mapping of risk for extension requirements across all schools underway but incomplete data until recruitment completed end of May	Yes - financial risk because of impact of unknown number of unexpected trainee extensions due to COVID
Recruitment to/fill rates of future	Tier 2 Visa – May impact future International Medical graduate intake and delays to training may	Need a Home office decision	Whilst visa clarity has been provided risk of vacancies created by	

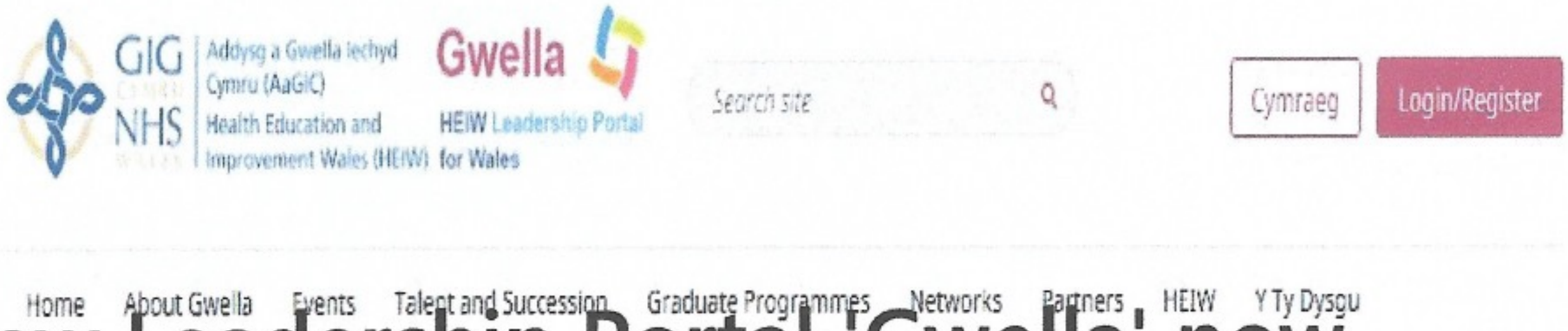
education and training programmes	require an extension to VISA requirements		travel restrictions persists	
	Recruitment halted may have an adverse impact on future service delivery and workforce shortages	Four-nation decision has been made to cancel all face to face specialty recruitment interviews with immediate effect. Across the UK stakeholder discussions are taking place to consider the contingency plans submitted by each of the lead recruiting organisations to ensure recruitment can be delivered and trainees ready to commence post in August 2020. In a number of specialties a pared down version of the Multi-Specialty Recruitment Assessment (MSRA) process will be used solely to determine ranking and offers. In other specialties a trainee self-assessment criteria and matrix will be used to obtain candidates scores which will then be used to rank trainees and offer posts. These models are not without logistical challenges however they aim to minimise any requirement for consultant and trainee involvement. Additional reviews along with an enhanced ARCP process will be required to monitor this cohort of trainees to provide reassurance that	Agreed revised 4 nation recruitment processes in place Uncertain impact and ongoing risk as well as risk of challenge to new processes	yes

EV 9


Welsh Government
HEIW Board
HEIW Executive Team
HEIW Crisis Management Team
Higher Education Institutions
Regulators
HEIW Senior Managers
National Bodies
NHS Wales Partners

EV10


https://nhswales365.sharepoint.com/sites/heiw-intranet/SiteAssets/Forms/AllItems.aspx?id=%2Fsites%2Fheiw%2Dintranet%2FSiteAssets%2FS
Search...
Health Educ...
New Leader...
Equality Act...
Engaging in...
Covid-19 - ...
Playlists - Yt...
Playlists - Yt...
Playlists - Yt...
Health and ...
Playlists - Yt...
Playlists - Yt...
Health Educ...
nhswales...
Health Education and Impr...
Share
Copy link
Download
Delete
View original
Copy to
Version history
1 of 1
Improvement Wales (HEIW) for Wales
Home
About Gwella
Events
Talent and Succession
Graduate Programmes
Networks
Partners
HEIW
Y Ty Dysgu
Compassionate Leadership: A Call to Action
Compassionate Leadership:
Amdano Gwella
•
About Gwella
Talent ac olyniaeth
•
Talent and succession
Adnoddau
•
Resources
Rhaglenni Graddedigion
•
Graduate Programmes



New Leadership Portal 'Gwella' now available for all NHS Wales staff



Helen Cade (HEIW)
Communication & Engagement Manager

The 'Gwella' the leadership portal for all NHS Wales staff has been launched today. The bi-lingual digital resource is available through any mobile device and provides access to a wide range of compassionate leadership and management resources curated from The King's Fund, Open University and colleagues across the other UK nations.

Alex Howells, Chief Executive Officer, Health Education and Improvement Wales said, "I am delighted to launch Gwella – The HEIW Leadership Portal for Wales.

"The openly accessible and bi-lingual leadership portal will provide a vast range of compassionate leadership resources that will benefit leaders at all levels across our system".

We are also proud to be working with Professor Michael West who has provided evidence based academic materials which have been digitised (example below). These materials are also available as teaching resources so organisations can integrate into existing leadership and management programmes. Gwella is designed to enable NHS organisations to create leadership networks, digitised resources and deliver leadership and management programmes through its integrated virtual classroom facilities.

Professor West said, "The website offers a powerful vision to support the development of high quality and compassionate care for the people of Wales.

EV11

NHS Wales

COVID-19 (Coronavirus)

Temporary redeployment / alternative duties principles

Context

The Covid-19 pandemic is placing unprecedented challenges on NHS Wales. Services have had to be reconfigured to respond to the increase in the demand and therefore the way in which many of our services are provided has had to change and adapt to fit in with this response. These rapid changes have led to significant changes to many roles and there are areas where normal NHS services have been reduced or which have been suspended for the duration of the pandemic. Accordingly, there are staff whose roles have or will temporarily diminish during the period of the response to the pandemic and who have skills and or the ability to take up a different role on a temporary basis in NHS Wales to help with the unprecedented challenges facing the service.

To respond to this challenge, NHS Wales staff may therefore be required to work differently or outside of their usual job description for a temporary period. Health Boards and Trusts will coordinate such temporary redeployments either internal to the organisation or between organisations through processes which will be guided by a common set of principles.

Principles

1. It is the expectation that during the Covid-19 crisis that any NHS Wales employees who are no longer required to perform their current roles will be open to redeployment to an alternative role on a temporary basis, until such time as the Covid-19 crisis has concluded.

2. Individuals will have the opportunity to consider the role(s) being proposed and organisations should ensure that there is partnership involvement in the strategy and approach which the organisation is using to temporarily redeploy staff.

3. Staff will either self-identify or will be identified by managers/service leads if their current role has temporarily diminished or may not be required, during the response to the pandemic.

4. Organisations will identify the roles where additional capacity is required and put in place a process to align individuals to those needs.

5. If organisations do not have any roles for temporary redeployment or if there are more employees requiring temporary redeployment then consideration will be given to temporary redeployment to another NHS Wales organisation.

6. It is essential that staff are flexible when responding to redeployment requests, even if they only have the basic abilities required.

7. Organisations will ensure that staff have the necessary induction and introductory training in their new department/service, they will be clear on what is expected of the member of staff being redeployed and inform them of what additional on-the-job training and support will be provided. This will include any necessary health and safety requirements for the role.

8. Organisations will consider and mitigate (e.g. a non-shift worker being required to work shifts,) any changes to working patterns and travel which may affect the employee's ability to effectively commit to the role. Individual risk assessments should be carried out where requested or required and any reasonable adjustments made in accordance with the Equality Act.

9. Pay (including any enhanced elements of pay) in all instances will be protected, even where staff are fulfilling a lower banded post.

10. It is recognised that some staff will be worried about putting their own and their family's health at risk if particular roles and the location of those roles are proposed for them whilst Covid-19 prevalent. In respect of these redeployment principles there are no circumstances where employees who do not usually provide direct patient care will be expected to do so, or will be expected to undertake roles in patient care areas if they do not wish to. Such roles may be offered and it will be for individuals to determine for themselves whether they wish to take up such roles on a temporary basis. Similarly, staff working in patient care areas may be offered work in another patient care area and the same principles apply.

11. Where an employee considers that the temporary alternative employment is not suitable, the reasons will be explored with them and where possible, alternative roles will continue to be sought.

12. If an employee declines to undertake all available suitable alternative roles presented to them, then the matter will be discussed with the employee, in partnership with their trade union representatives if requested, and other avenues and opportunities explored e.g. home working on different tasks and duties or re-deployment to another Health Board/Trust.

13. At the end of the response to the Covid-19 pandemic, in all circumstances the employee will be guaranteed a return to their substantive job with their employing Health Board or Trust. Any necessary support will be provided to ensure a smooth return to their substantive job.

14. Throughout this process all staff will be treated with dignity and respect in accordance with the Core Principles of NHS Wales.

EV12

Emma Carrington (HEIW)

From: Amy Whitehead (HEIW) on behalf of Julie Rogers (HEIW)
Sent: 06 January 2021 09:39
Subject: URGENT : Request for HEIW volunteers to support Covid vaccination programme

Importance: High

EMAIL TO ALL STAFF

Dear Colleagues,

As I'm sure you're aware from the media and your work the emphasis at the moment is on the huge task of vaccinating millions of people as quickly as possible at the same time as keeping vital NHS services running. To do this requires a massive army of people – more than health boards and trusts currently have. To help our colleagues across NHS Wales we were wondering if any HEIW staff would like to volunteer some of their HEIW working hours to go and support the vaccination programme in their local area.

Can you help?

We are inviting expressions of interest from HEIW clinical and non-clinical staff to provide support in areas such as:

- Immunisers
- Booking clerks
- Administrators
- Exit care including monitoring of vital signs and signs of allergic reaction
- Provision of first aid if/where required
- Clinical supervisors

Full training and skills updating will be provided as well as appropriate supervision, support and personal protective equipment where required.

Who will be providing my training?
Training will be provided by the relevant health board.

Will I be paid?
You will continue to receive your normal salary from HEIW and you will remain an employee of HEIW on your current terms, conditions and renumeration.

What will the hours be?
This will depend on the number of hours we are able to release you from your HEIW work. However, you will not be expected to work more hours per week than you are

contracted to with HEIW. For example, if you work 20 hours a week for HEIW you may work 15 hours for HEIW and 5 hours volunteering. You will still be paid for 20 hours of work as per your contract with HEIW.

Where are these roles located?
All over Wales. You will be allocated to the nearest Health Board to your home address.

Will I have PPE?
Appropriate PPE will be provided for the role you are undertaking.

Interested?
If you are interested, please discuss this with your line manager in the first instance, to confirm they are happy for you to put your name forward. Please email the People team inbox heiw.people@wales.nhs.uk if you are able to support, indicating if you have any clinical skills and/or a specific interest in a particular role.

Due to the urgent requirement for volunteers, this is an open campaign with no closing date until further notice. Expressions of interest will be reviewed on a case by case basis to ensure they can be accommodated prior to your details being passed to the relevant health board.

For any queries, please email the People team inbox heiw.people@wales.nhs.uk

Kind regards

Julie Rogers

Deputy CEO and Director of Workforce & OD
Addysg a Gwella Iechyd Cymru (AGIC) / Health Education and Improvement Wales (HEIW)
e-bost: / email: julie.m.rogers@wales.nhs.uk
aagic.gig.cymru heiw.nhs.wales
@AaGIC_GIG @HEIW_NHS

I often choose to work outside normal office hours, however I do not expect that you will read or respond to this email outside of your normal working hours.

EV13

CAJE Ref: REF/wales/2020/0036

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

JOB DETAILS:

Job Title	Patient Care Assistant (PCA)
Pay Band	2
Hours of Work and Nature of Contract	To be completed on recruitment
Division/Directorate	Extra Capacity COVID-19
Department	To confirmed by H.B
Base	To be completed on recruitment

ORGANISATIONAL ARRANGEMENTS:

Managerially Accountable to:	Clinician in charge
Reports to: **Name Line Manager**	Clinician in charge
Professionally Responsible to:	Clinician in charge

Scope of Practice

The PCA is a generic role to support the COVID-19 emergency. You will work alongside others in the clinical team to assist with a wide range of care needs in current and new health care settings under the direction and supervision of a clinician. You will work as part of a dedicated team providing compassionate care and supporting patients to recover and rehabilitate following illness and surgery. You will receive guidance and support from clinical staff in delivering basic care to a number of patients.

Job Purpose/Summary :

The post holder will assist in the provision of care to patients by providing a range of personal care duties as designated by a clinician.

These tasks will involve direct and indirect care for the benefit of the patient in accordance with agreed protocols, and include basic care duties such as :

- Enabling patients to maintain personal hygiene through assistance with shower/ bath, washing facilities access and use of toilet facilities; promoting independence where possible.
- Enabling patients to eat and drink, assisting where appropriate.
- Escorting patients to other departments/hospitals.
- Keeping up to date with mandatory training requirements.
- Maintaining a good standard of cleanliness in the ward, including changing bed linen and restocking of clinical areas in accordance with organisational policies.

DUTIES/RESPONSIBILITIES:

Knowledge & Skills:

The post holder will have a good standard of general education including numeracy and literacy skills, with an opportunity to undertake training to QCF Level 2 in Health and Social Care/Clinical Healthcare Support.

The post holder will have an opportunity to complete Level 2 Vocational Training. The post holder will maintain a personal portfolio and take part in reflection and appropriate learning from practice, in order to maintain and develop competence and performance.

The post holder will require standard keyboard skills to contribute to updating patients' records electronically or paper copies.

Communication:

The post holder will

- Develop communication skills in order to convey routine information effectively to patients, carers and other staff, overcoming any barriers to understanding and providing support during distressing or emotional events.
- Communicate clearly, effectively and appropriately with the multi-disciplinary team.
- Respond appropriately to routine queries, take phone messages and pass on written and verbal information to patients and staff in a timely manner.
- Provide appropriate information to patients, family/visitors/carers and colleagues.
- Accept instructions and receive constructive feedback from clinical and other staff.
- Give constructive feedback on patient care and activities to relevant healthcare professionals where required.
- Participate in discussions about patient care and ward/departmental development e.g. at team meetings, de-briefings, case conferences.
- Plan their own daily-allocated workload within area of Ward/Department.
- Manoeuvre trolleys, wheelchairs and other equipment safely around the Ward/Department environment.

- Identify potential risks for all staff, patients and visitors and adhere to relevant incident reporting procedures taking appropriate action/advice as needed.
- Following a period of training, will be required to undertake some routine observations for patients under their care.
- Will require basic numeracy skills to utilise early warning indicators to recognise any patient deterioration/sudden change in condition, reporting immediately to clinician.
- Identify monitor and report other patient equipment alarms to the clinician.

Responsibilities:

The post holder will be required to provide personal care to patients including assisting with feeding, bathing and dressing, promoting independence where possible.

The post holder will assist in the care of patients with reduced mobility.

The post holder will assist patients with personal care such as oral hygiene and foot care.

The post holder will assist clinician in undertaking last offices procedure.

The post holder will attend organisational induction programmes, mandatory training sessions and annual updates.

The post holder will collect/record data accurately in accordance with organisational guidelines.

The post holder may be required to maintain adequate levels of stock, equipment and materials and facilitate the efficient, effective use of resources; reporting when availability falls below an acceptable standard or level to a clinician.

The post holder will ensure safe custody, return or disposal of patients' property, in accordance with organisational policies.

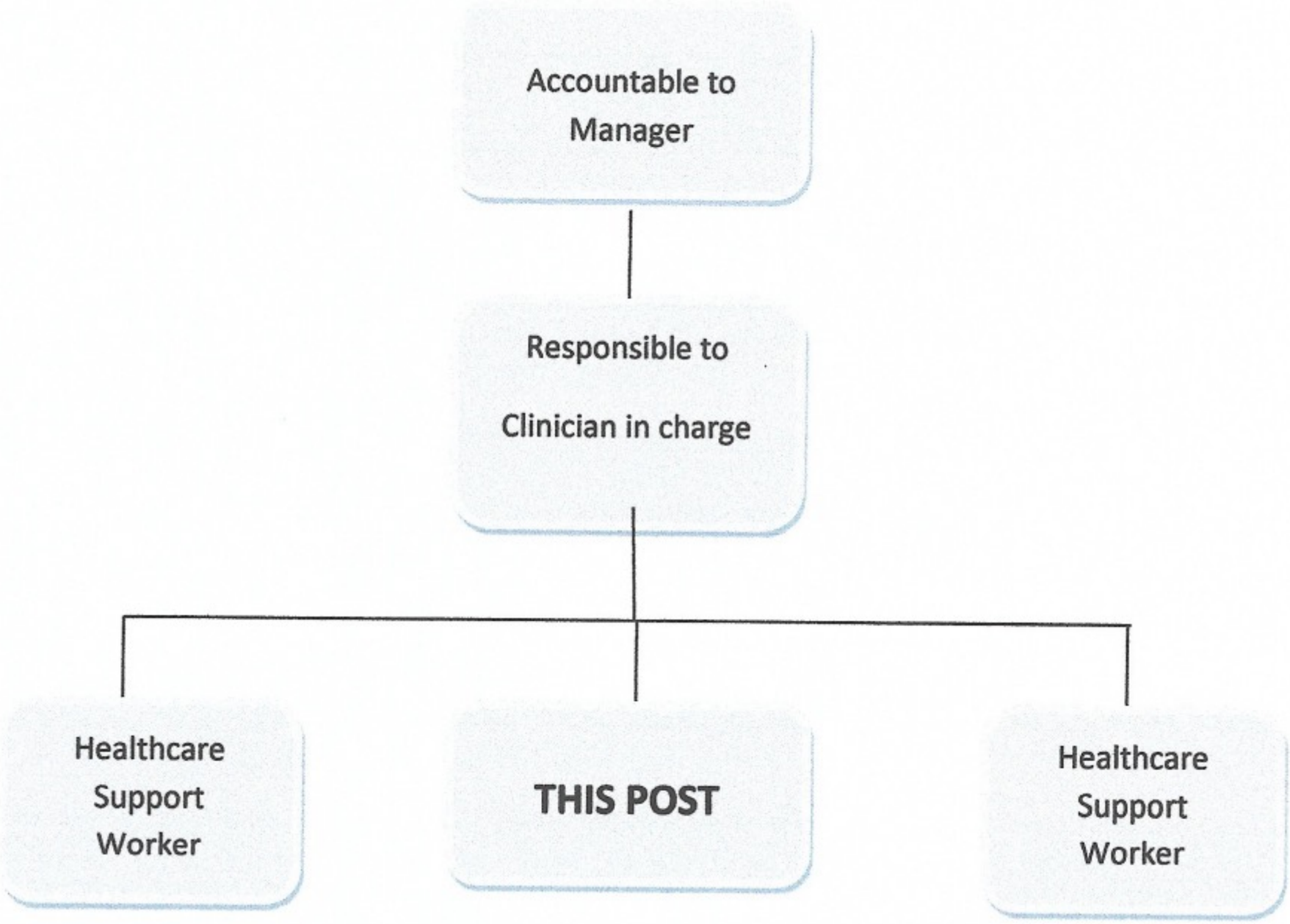
The post holder will be responsible for the safe use of equipment used by self and others.

The post holder will contribute to research, audits and clinical trials programmes carried out within the Ward/Department under direct supervision.

The post holder will be required to follow all legislation and organisational policies, and will be asked to comment on procedures for own area of activity.

The post holder will work within established procedures when delivering care; and under the direct supervision of a clinician or senior member of staff.

Organisational Chart



PERSON SPECIFICATION

The knowledge to be measured in the minimum needed to carry out the full duties of the job to the required standards. Qualifications should be used to provide an indicator of the level of knowledge required. Training and experience is also a means of acquiring the knowledge required for a job such as on-the-job training, short courses and experience to an equivalent level of knowledge which should be specified.

NOTE: Please do not use the number of years experience as this is potentially discriminatory and these will be returned. It is essential that managers concentrate on the sorts of skills and qualities needed to fulfil the duties of the post.

ATTRIBUTES	ESSENTIAL	DESIRABLE	METHOD OF ASSESSMENT
Qualifications and/or Knowledge	Good standard of general education including numeracy and literacy skills, with an opportunity to undertake training to QCF Level 2 in Health and Social Care/Clinical Healthcare Support. Standard keyboard skills.	To hold QCF Level 2 qualifications in Health & Social Care/Clinical Health Care.	Application form
Experience	No previous experience is required.	Previous care responsibilities.	Application form and interview
Aptitude and Abilities Skills	Good communication skills. Able to demonstrate a positive and caring attitude to all patients, relatives and members of staff in a calm manner. Ability to deal with distressing situations.	The ability to speak or learn Welsh to a satisfactory level. Knowledge of UHB policies and procedures.	Interview
Personal Qualities	Must be motivated, and possess a non-judgemental attitude towards others. Works well both as an individual and as part of a team, always acting in a professional manner. Accept instructions from others.		Application Form Interview References

Circumstances	Flexibility to meet service needs. Able to undertake the full range of duties of the role, including different shifts e.g. days, nights, weekends.		Application form and interview
Other	Satisfactory DBS Clearance.		

EV 14

HEIW Successes

The talent and succession team have been working with HEIWs Associate Dean on the new Wales Clinical Leadership Trainee Fellows (WCLTF) recruitment process. This will provide learning opportunities for trainees in Wales to enhance their skills to facilitate the delivery of high quality medical dental education in Wales. In addition, the scheme will equip trainees with the experience, knowledge, and skills to take on education leadership roles in the future.

The talent and succession team have been working in partnership with HEIWs nursing directorate and partners, to provide support and governance for the Florence Nightingale Foundation (FNF) Scholars participating in the 2021/22 Leadership and Transformation Programme, to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels.

HEIW talent and succession planning team have worked in consultation with Chief Executives, Chairs and Executive Directors across NHS Wales to develop, the publication of the NHS Wales Executive 'Success Profile' which describes the behavioural competences required by Executive Directors, will ultimately inform the HEIW Executive Leadership Programme. It is anticipated this will be launched during the summer 2021. In collaboration with Glyndwr University, HEIIW has developed a 20-credit master's level module. It will be launched along with the HEIW Executive Leadership Programme which will include a range of learning and development components that include master classes, expert speakers, simulations, organisational safaris and support and challenge groups.

HEIW launch the Compassionate Leadership Principles for Health and Social Care in Wales, during March 2021, in collaboration with their partners in Social Care Wales and Academi Wales. The principles have been extensively consulted on and intend to shape the behaviours and interactions of all employees as leaders, at all levels while providing a framework for employees to meet the objectives outlined within the Workforce Strategy for Health and Social Care in Wales. To supplement the launch of the principles within NHS Wales, HEIW has internally focused efforts on a specific compassionate leadership principle each month, to build knowledge and skills of the workforce each month. They also provided a range of master classes, webinars, and virtual events. All information was recorded, transcribed, and translated and made available for use across NHS Wales organisations.

Additionally, during March 2021, HIEW worked with five interns from Cardiff University over two-weeks to help the organisation co-design the bespoke HEIW internship. It is intended this will be piloted by HEIW during the summer 2021, with the intention of adding this to HEIWs offer to partner organisations in the future.

HEIW have been working with Professor Michael West and will be launching their publication of a Compassionate Leadership book with Professor Michael West, completion of the 'Compassionate Leadership in Action' during 2021.

In collaboration with Glyndwr University, HEIIW has developed a 20-credit master's level module. It will be launched along with the HEIW Executive Leadership Programme which will include a range of learning and development components that include master classes, expert speakers, simulations, organisational safaris and support and challenge groups.

EV15

SWOT analysis of HEIW's approach to recruitment, retention, and succession planning

Strengths	Weaknesses
A strong set of values that underpin policies and processes	Budget constraints due to Welsh Government funding and the need to ensure scrutiny when advertising jobs, ensuring there is a justifiable business need
Values based recruitment approaches	
Flexible working practices	Time consuming recruitment process
Robust appraisal process	Insufficient processes to support the collection of reason for leaving data
Opportunities for learning and development	Fewer opportunities for promotion due to high retention rate
High retention rate	Lack of availability of diverse panel members
Organisation is still growing and developing new posts.	Interviews are currently undertaken virtually
Robust disciplinary and capability policies in place to ensure lawful termination of contracts.	Information and guidance on NHS Wales recruitment processes is not easily accessible
Development of coaching and mentoring programmes	Social media marketing is not meeting its maximum potential
Very low long-term sickness absence rates	Salary is restricted by NHS terms and conditions
Good annual leave entitlement and pension contributions	Recruitment and selection training is not mandatory for managers
Job descriptions and specifications follow best practice	Differing T&Cs between TUPE and NHS staff.
Succession programmes in place – Aspiring Directors, Graduate Programmes and Internships	Cultural differences remain as seen in recent staff survey
Recruitment and selection training provision	Rigid job description and personal specification templates
Adherence to discriminatory and Equality Law.	No work experience opportunities
Commitment to the Welsh language with recruitment and selection (golden thread throughout workforce strategy)	HEIW workforce is not representative of the communities its serves.
Clear links between individual, team and organisational objectives	
Good NHS employment package – annual leave, pension, flexible working, sickness, EAP, health and wellbeing packages.	
Opportunities	**Threats**
Embed compassionate leadership principles	Lack of manager understanding/confidence regarding recruitment
Development of internal aspiring manager programme	Reduction in WG funding, leading to redundancy, unfinished projects and stop on recruitment activity.
Undertake robust skill gap analysis to identify skill mix and any gaps	Proportion of workforce aged 55 and over and the likelihood of retirement. Potential to lose knowledge and skills from this demographic
Enhance and embed exit interview process	Continuing to lose staff under TUPE terms and conditions and the knowledge and skills they have (due to inferior NHS T&Cs)
Review data analytics to identify potential retirees and availability of internal staff to fill vacancies when they arise	Inconsistent approach to work life balance offering across the organisation.
Carry out digital capability assessment to meet growing need	Lack of trust between managers and employees
Development of engaging social media content that reaches a wider audience than currently	Potential to always advertise in the same places and not reach a wider audience
Explore other selection methods, i.e. assessment centres	
Development of coaching and mentoring activities that support the sharing of knowledge and skills to ensure they remain in the organisation in the long term and support succession planning.	
Review employee engagement data, ie staff survey to identify why employees stay in the organisation.	
Carry out repeat culture assessment to identify change since baseline	
Development of work experience programmes	
Take positive action to recruit individuals from protected characteristic groups	
Use learning from working from home during pandemic to inform future agile working policy	

HEIW PESTLE

	External factors to consider	Factors affected within my industry	Importance to organisation	Impact on resourcing and talent planning
Political	Welsh Government Policy and Legislation.	How money is spent. Public sector objectives link in to WG policy and targets. Aligns with the future ambitions for HEIW. We are accountable to WG.	High High High High	Development of good 2-way relationships/networks with WG to ensure awareness of new policy/legislation and future visions. Scrutiny of job vacancies, ensuring they are justified, and graded appropriately. <u>The Wellbeing of Future Generations (Wales) Act</u> HR function to development more sustainable workforce solutions, which rely less on short term, expensive solutions (agency staff) (Welsh Government, 2015)
	Brexit	Effect non-British national trainees and staff.	Medium	The organisation must clearly understand the guidance and the impact leaving the EU has had on recruitment processes (CIPD, 2021).
Economic	Baby boom	High proportion of the workforce that are due to retire in 10 years' time – workforce planning is essential.	High	Workforce planning is a priority and HR should look to identify gaps and identify solutions to ensure effective succession planning, ensuring knowledge and skills or current workforce is shared and not lost (Focus on age report,2017; Future trends 2015)
	Aging population	People are living longer and there is more demand for NHS services.	High	Need to ensure we have the right people, with the right skills, at the right time to support the aging population (HEIW, 2018; Focus on Age Report, 2019; Brooks, 2018)
Social	Work-life Balance	Heavy workload, balancing personal responsibilities and careers, managing health – need to develop flexible measures to support employee work-life balance.	High	Growing evidence to support the need for work life balance and flexible, agile working (millennials and generation Y). Build into job descriptions and adverts to attract and retain talent (CIPD, 2015, 2016; Timewise 2014; Deloitte, 2014,

				2016, 2019; Independent 2016; INC 2018; ACAS, 2019; People Management 2018, 2019; KPMG, 2017; Skeoch, 2018; Sloan, 2019; Aftab, 2016; Vodafone, 2015; leaveboard, 2021; Roder, 2019; Kingsfund, 2021; Writer, 2019Focus on age report,2017; Future trends 2015)
	Hard to recruit areas in Wales	Recruitment and retention are harder in urban and rural areas of Wales.	High	Identify ways to encourage trainees to train in Wales and then stay. Employee engagement and exit interviews could help identify specific reasons for trainees leaving Wales. Incentives could be identified.
Technological	Remote Working	HEIW is currently functioning well as a virtual organisation due to the pandemic.	Medium	Use experience of virtual working through the pandemic to help inform future ways of working that are agile and flexible (Zoom, 2021; People Management, 2021; CIPD, 2020).
	The need to create a digitally ready future workforce	Data intelligence is more widely used therefore a skilled workforce is essential.	Medium	Identify talent in this area and provide the skills and training to support this developing field. HR could support a "grow your own" model and look to train current staff in this field, rather than looking to add to the establishment (Topol Review, 2019; Nuffieldtrust, 2019; Welsh Government 2019, 2018, 2017)
Legal	Employment Law	Employee terms and conditions, Accountability to regulatory body standards - GMC, NMC, GDC etc. Retirement, dismissal, and redundancy GDPR	High	Recruitment, selection and retention are underpinned by NHS Wales terms and conditions. Job descriptions clearly state when a professional registration/qualification is essential. Retirement, dismissal and redundancy are carried out as per appropriate policies and within legal parameters (UK Government, 2021;CIPD, 2021; Daniels, 2019; NHS Confederation, 2020; HSJ, 2015; BMJ, 2019; NHS England, 2021; NLIA, 2005; Business Balls, 2017; Astron Solution, 2015; Wright State University,2021; Johnson, 2020; IRS, 2003; SOAS, 2021). All processes are within GDPR guidelines.

	Equality Act	We need to undertake Equality Impact Assessments (EIA) for all new policies and procedures etc.	High	Any new resourcing activities need to undergo an EIA to ensure they meet the standards of the Equality Act (Equality Act, 2010; Human Rights Commission, 2009, 2014, 2020; Is Wales Fairer,2018; Daniels, 2019; Frazer Consulting, 2020; University of Lincoln, 2020; The NHS Centre for Equality and Human Rights, 2020; Ellis, 2016West & Dawson, 2012, 2018.
	Discriminatory law	To ensure that those with a protected characteristic are not treated less favourably than those without		Job descriptions and personal specifications are developed so as not to disadvantage any protected characteristic group (Business Balls, 2017; Astron Solution, 2015; Wright State University,2021; Johnson, 2020; IRS, 2003; SOAS, 2021)
Environmental	The Environment (Wales) Act 2016	HEIW has a duty to decrease its emissions and impact on climate change.	Medium	Development of virtual resourcing activities, i.e. Talentbury, virtual interviews, stakeholder panels (Glodz, 2020; NES, 2020)
	Legislation on reduction of environmental impact	As an NHS Wales organisation, we have a responsibility to reduce our use of utilities, including gas, electric, travel and be more efficient with our resources etc.	Medium	Further development and embedding of electronic processes that replace the need for paperwork and support home working.

EV 17

HEIW Metrics

Gender Profile



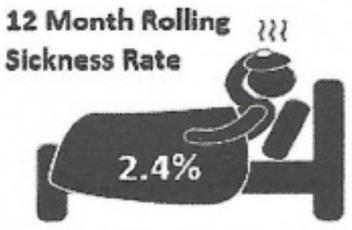
Speaking Welsh



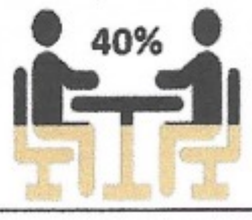
34% Can speak some Welsh

*75% Did Not Declare

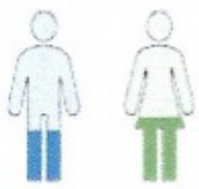
12 Month Rolling Sickness Rate



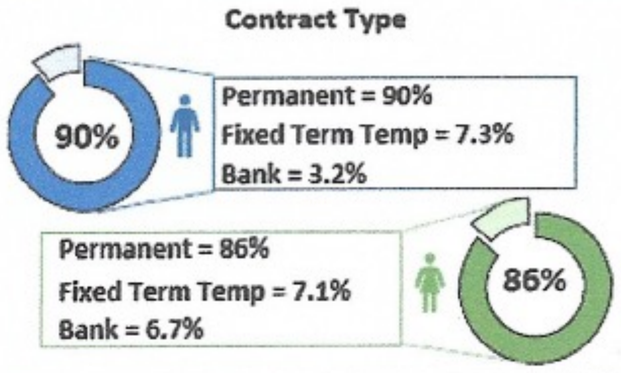
PADR Compliance *



Full Time Hours



Contract Type



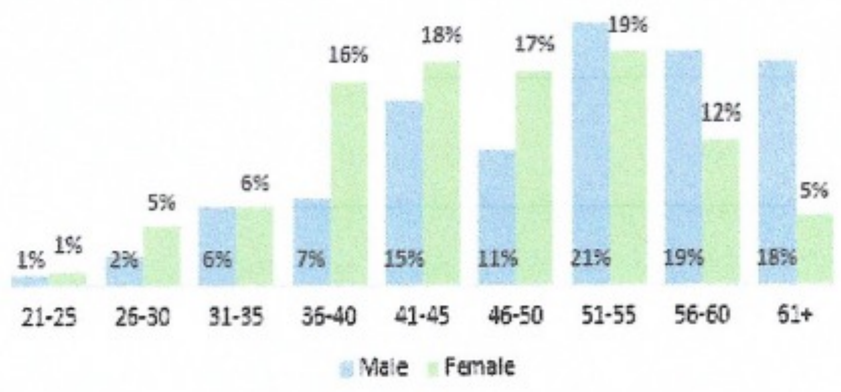
Statutory & Mandatory Compliance *



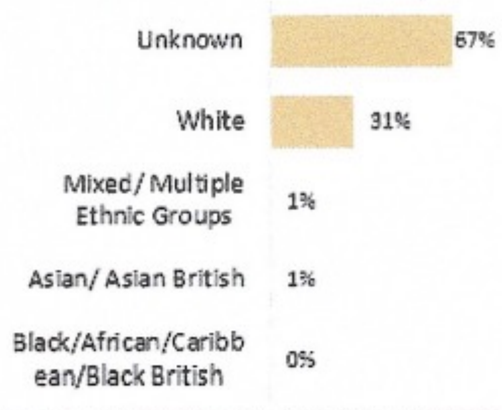
12 Month Rolling Turnover Rate



Age Profile



Ethnicity



Engagement Score:

3.88



out of 5

Staff receiving Flu Vaccine



30%

* Excluding sessional staff (staff with a main employment in other NHS Wales organisation)

EV18

NHS WALES

NATIONAL SUCCESSION STRATEGY

2017-2027

1. INTRODUCTION

The NHS Wales National Succession Strategy sets out the ambition to deliver a pipeline of talent of NHS staff at local and national levels, underpinned by a technical solution through ESR.

This strategy is designed to be utilised within local NHS organisations to better support consistent mechanisms for succession planning and inform senior level succession planning across both NHS Wales.

Planning for what is needed now will ensure there is effective capability and capacity in the future. This will support NHS Wales to identify, develop and fully utilise the potential of NHS staff in the delivery of a world-class health service for the people of Wales.

2. DEFINITIONS

For the purpose of this document, and to provide clarity, the following definitions of talent management and succession planning are used.

> *Talent management is a set of integrated workforce processes designed to attract, develop, motivate and retain productive, engaged employees. The goal of talent management is to create a high performance, sustainable organisation that meets its strategic and operational goals and objectives* (Kings Fund, 2015)

> *Succession planning is the process of identifying critical positions within each organisation and across NHS Wales and assessing current staff members who might be able to fill these positions.*

3. VISION

Our vision for NHS Wales is to refresh our national approach to talent management and succession planning to ensure a future pipeline of outstanding performers across services within NHS Wales.

The implementation of the strategy will deliver a systematic and planned strategic effort across NHS Wales to attract, retain, develop and motivate high-performing staff who meet the short, medium and long-term needs of all organisations. The strategy is based on equity of opportunity, will widen access to support and promote opportunity, resulting in a diverse leadership.

There are a number of elements to this strategy, many of which are already in place or in development in individual NHS organisations across Wales. This strategy has been developed, to ensure a consistent overview approach across NHS Wales that meets the needs of all organisations but takes account of local differences in specific processes related to talent management and succession planning.

Evidence shows that when investment in individuals is valued and demonstrated, organisations see improved outcomes, better financial results and an engaged workforce and adaptable workforce which will ensure public confidence.

4. THE OUTCOME

This strategy is designed to enable talent to be identified and nurtured at an early stage in the careers of those with potential to be senior leaders. In this context an effective succession planning approach implemented across Wales will bring the following benefits;

This will result in

- Talent identified at all levels and embedded into organisational processes including PADR/appraisal/job planning processes.
- Improved staff retention at all levels in NHS Wales
- Availability of candidates that can deliver against strategic objectives
- Increased creativity and innovation to solve organisational challenges
- Attractive career pathways within NHS Wales, to support recruitment and retention in line with the Train.Work.Live campaign
- Increased diversity in senior manager positions
- Lower turnover at Chief Executive and Executive levels
- At least three shortlisted NHS Wales applicants for every Board level position by 2025.

5. THE OUTPUT

The output of this work is to facilitate a managed process in relation to the deployment of people within the local talent pipelines and between NHS Wales organisations and wider public services and private sector.

The potential for route transfers between streams of management eg functional managers into general management and vice versa etc could offer an extra opportunity for job enrichment in what could be a very long career.

Implementation of this strategy will be supported by a framework and toolkit, which will describe how we identify, select, develop, deploy, support and evaluate talent within NHS Wales. In the first instance this will be developed to facilitate Senior Succession Planning, but will also support a mechanism to identify potential talent earlier in the talent pipeline at local levels.

EV 19

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Notes from meeting with Jackie Parsons, National Talent and Succession Senior Manager, HEIW
HEIW approach to Talent and Succession Planning

Wednesday 14 April 2021

Present:
Jackie Parsons, National Talent and Succession Senior Manager (JP)
Emma Carrington, Policy Officer (EC)
Ruth Taylor, Careers and Widening Access Advisor (RT)

RT and EC asked to meet with JP to understand the organisation's approach to talent and succession planning as part of their CIPD studies. One of HEIW's strategic objectives is to work with partners to improve collective leadership capacity. The first step in this has been to develop talent and succession plans, which identify the following in relation to tier 3 (assistant director) candidates wanting to move into tier 2 (executive director) positions:

- which positions are without "ready now" candidates?
- how many "ready now" successors do we have?
- who are the "ready now" candidates?
- who are the high potential leaders for the short, medium and long term?

This level has been chosen as these roles are the most challenging to recruit to.

Over the past year, the Talent and Succession Planning Team have been developing an Aspiring Directors Programme, supported by the Kings Fund. Individual Health Boards were asked to identify their own talented individuals who had the drive and ability to move into an executive role within the next three years and nominate them for the programme. This exercise clearly demonstrated that health boards were using different approaches to identifying talent in their organisations, some using robust processes and other not, highlighting the need for change and a consistent approach across NHS Wales. All identified were invited by the Chief Executive of HEIW to join the talent pipeline and were invited to attend Talentbury, A virtual festival of leadership, learning and collaboration, aimed at providing a valuable leadership experience for aspiring clinical and non-clinical executive leaders. This was supported by the development of a success profile and talent management programme involving clinicians, Planning and Workforce and OD Executive directors from across NHS Wales to identify the need for any additional offering.

Initial information only included the name of the candidate, their organisation and role. It did not include details of the portfolio they wished to work in. Therefore, a questionnaire was sent to all attendees of Talentbury with the aim of identifying a pool of candidates to use for deployment and targetting individuals. The questionnaire identified 130 credible individuals who knew what portfolio of work they would like to pursue. This showed an even spread across workforce and OD, nursing and medicine, but fewer stating they wished to pursue a role in digital or governance.

The questionnaire also asked for information across all the Stonewall Equality and Diversity characteristics and identified only 4 candidates who represented the BAME group. There are therefore plans in place to commission a bespoke positive action programme, including reverse

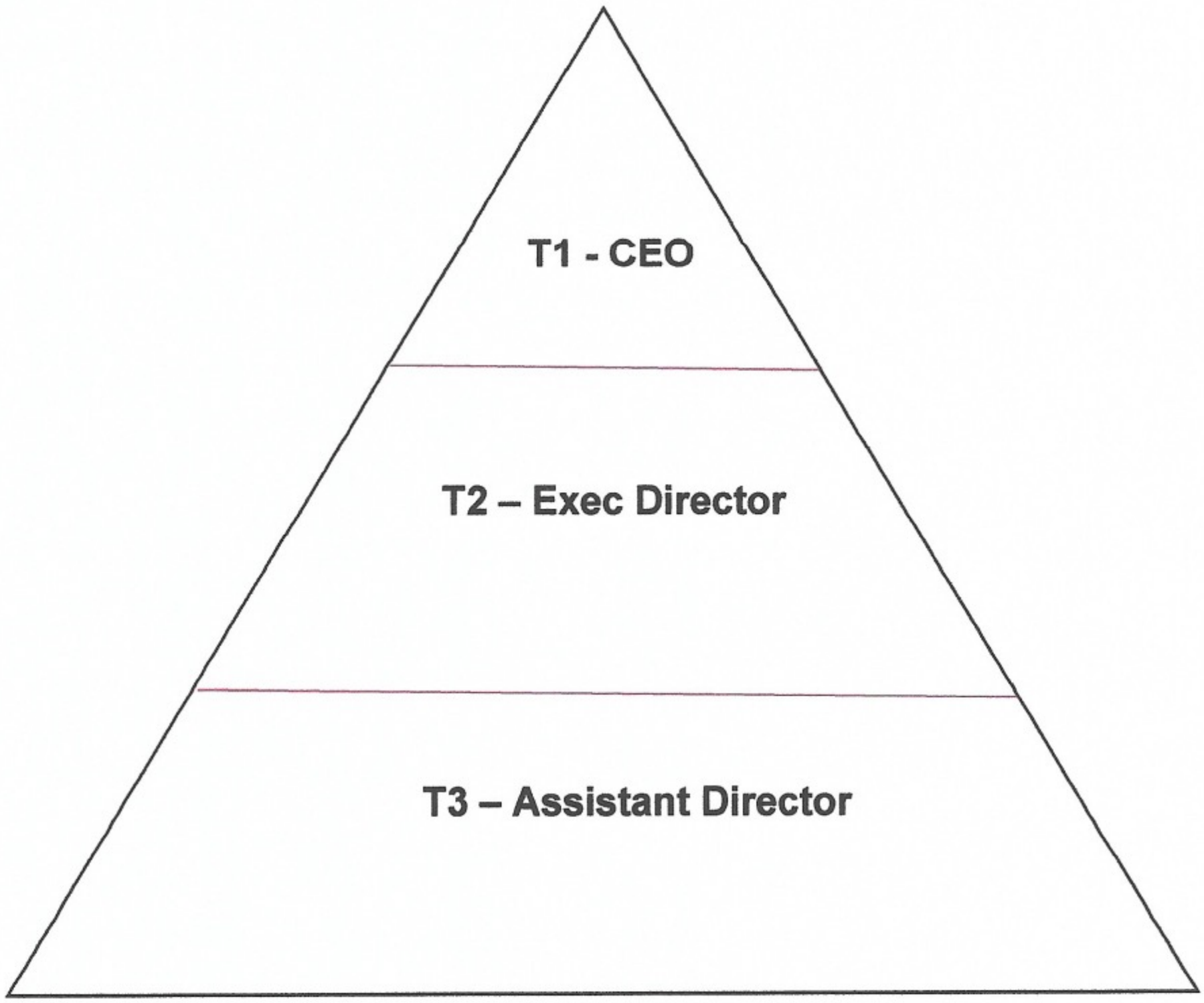
mentoring and coaching and workshops over a six-month period to increase the number of successors in this category.

The questionnaire also identified how ready individuals were to progress in their careers. This included ready now, ready in one to two years and ready in three to five years candidates. There was an equal split across all categories, with those identified as ready now being offered three 1 ½ hour mentoring sessions by a retired CEO over six months. To date, 29 individuals across NHS Wales have been identified and the process will be evaluated once complete.

Moving forward, the process is likely to change to an application process supported by development centres that put candidates through a number of exercises including interviews, group exercises and psychometric testing, the results of which will be assessed against the success profile to identify suitable candidates. It will also identify the differences and transition gap between individuals who are not successful and the steps they need to take to enable them to enter the programme at a later date.

JP explained that whilst HEIW is responsible for implementing a talent and succession plan for tiers 1 – 3 across NHS Wales ensuring it keeps all organisations informed, involved and able to influence, it sits with individual health boards to develop their own programmes that supports those in tier 4 and above. There is currently no standard process in place across health boards, with some using best practice such as the 9 box grid. HEIW will therefore be working with Learning and OD Practitioners to develop a toolkit that health boards can use to identify and develop talent in their organisations, most likely tied in with the annual appraisal process.

EV20

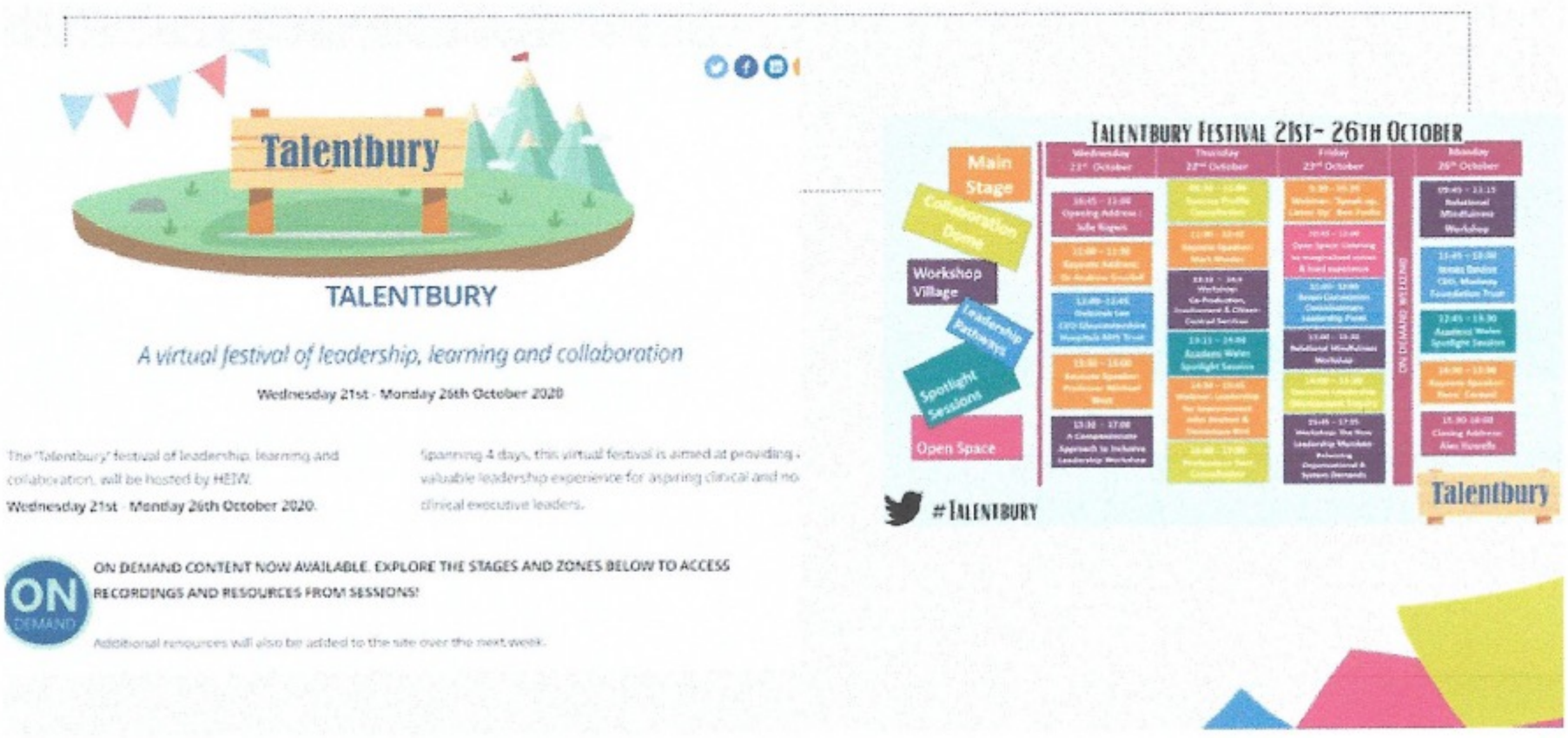


EV21

Consider:

- which positions are without "ready now" candidates?
- how many "ready now" successors do we have?
- who are the "ready now" candidates?
- who are the high potential leaders for the short, medium and long term?





EV 22

Example 1 – Maximising Potential Conversations Tool

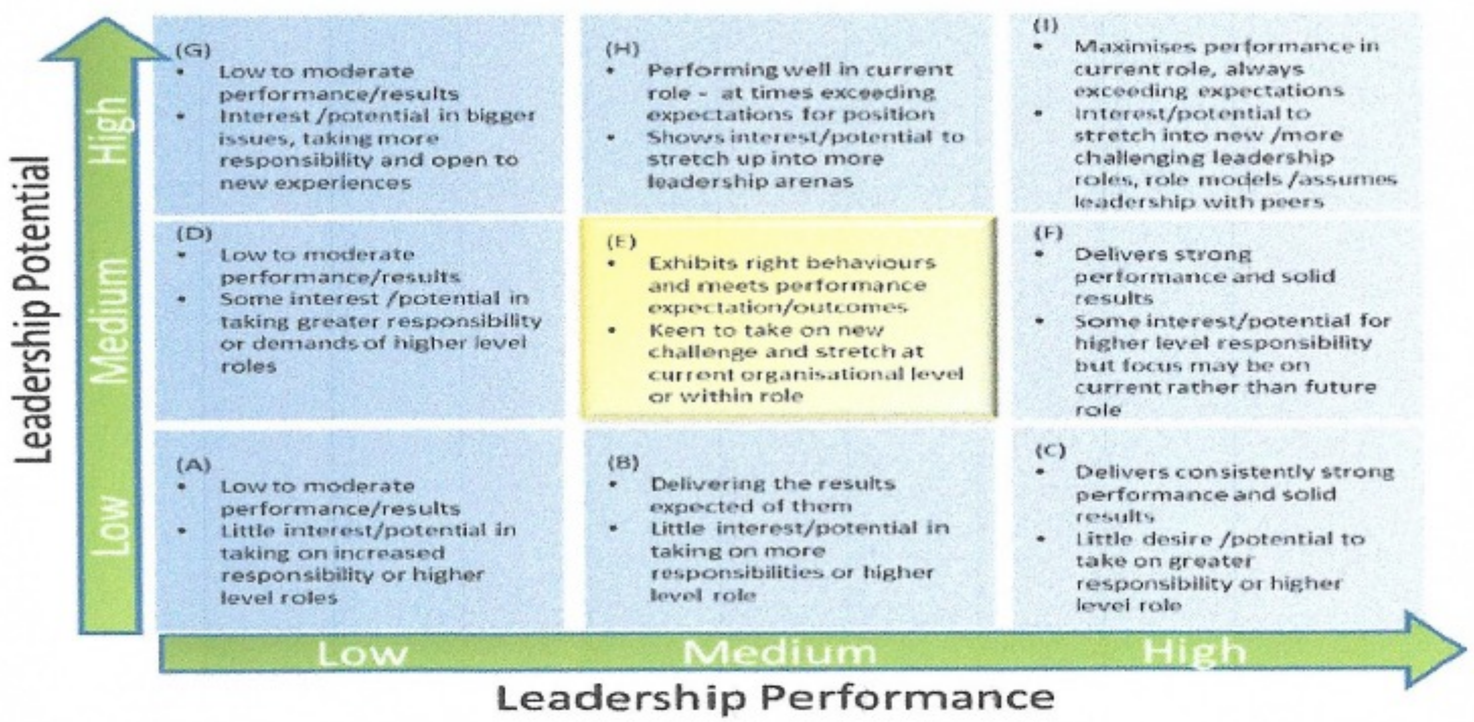


Example 2 – Talent Conversations Grid



Readiness to move / Performance and behaviours	Professional talent	Developing talent, ready soon	Ready now
	Shows promise to continue to advance in their professional field or into a wider leadership role within 3–5 years if they have the capacity and ambition to do so, but equally valuable where they are.	Demonstrates the potential, ambition and motivation to develop at their current level and potentially progress in their career within 1–3 years into new and wider challenges.	Demonstrates the potential, ambition, motivation and experience to perform at the next level now or within the next 12 months into new and wider challenges.
Exceeds expectations Outstanding performance against objectives, achieves more than what is expected of them, and demonstrates role modelling of behaviours required beyond their role.	**Professional in field** • High performance in own field. • Role models behaviours of organisation/role. • Consistent results and brings added value to tasks given. • Position reached 'expert' stage in their career. • Shows upward potential, but less ambition, likely to move on in the medium future, outside of own specialism. • Emergent wider skills.	**Key generalist** (Proven and flexible) • High performance with consistency of results across a variety of assignments and brings added value to tasks given. • Acts wider than professional background. • Role models behaviours of organisation/role. • Low–moderate potential/ambition to move on, possibly happy to stay in current position. • Secondary post to fill critical positions, perhaps cross-net level, likely to shift to top of high professional roles over time.	**Role model** (High potential to go further) • A role model with the highest levels of performance, potential and ambition to move on. • High performer, bringing added value to assignments with lots of potential and capacity for immediate advancement. • Role models behaviours of organisation/role. • Demonstrated mastery of current assignment. • Has organisation asset – role model. • Prime slot to fill critical positions.
Meets expectations Meets the expectations for performance against objectives and behaviours required at the level for their role.	**Future professional in field** • Good reliable performance. • Behaves professionally in line with role. • Showing upward potential but less ambitious to move outside of field.	**Solid generalist** (Solid/adaptable) • Good rounded performance. • Behaves professionally in line with role. • Meets expectations. • Works wider than professional background. • Some potential to go more to long term if ambition and development shows.	**Future emergent potential** (Capacity for key roles) • Individual with high potential. • Good rounded performance. • Performs professionally in line with role. • Has the capacity to be a competent senior, or mid-level move to higher levels.
Partially met expectations Below 'met expectations' against performance objectives and behaviours required at the level for their role.	**Developing professional** (Needs stretching) • Current low demonstration of performance and behaviours required of role. • Being supported to reach their potential. • May be in the wrong role.	**Developing generalist** (Needs stretching) • Low performance but showing moderate potential over time outside of professional role. • Being supported, needs pushing out stretching to reach full potential. • May be bored, under-used or in the wrong role.	**Transition employee** (New to role, needs support) • New to post or assignment. • Have yet to demonstrate results, or high potential in a new position / development assignment. • Future performance will allow assessment of where they align to the grid longer term.

Example 3 – Grid from another industry



EV23

NHS Wales Talent Management Board
Terms of Reference

1. Background

There is a considerable body of evidence to suggest that a vibrant blend of talent management and succession planning provides an important dual function. It lifts individual performance beyond the impact of conventional programmes of learning and at the same time provides an assurance of quality and capability at the point of recruitment into business-critical roles.

The NHS Wales National Succession Strategy 2017 – 2020, was ratified by NHS Wales Chief Executives in 2017 with an ambition is to deliver a pipeline of senior talent with the confidence, competence and motivation to work in the most senior leadership posts in NHS Wales. The Talent Management Board is a key vehicle to implement the strategy, supported by HEIW and its leadership development function.

The ability to ensure a robust talent and succession process supports the achievement of NHS Wales ambitions outlined within 'A Healthier Wales' which clearly states " We will continue to invest in our approach to improving quality, including through strengthening our talent and leadership, and planning on a national basis to ensure that good practice is widely shared".

The approach and resources developed to support talent management and succession planning will also be able to be utilised within local NHS organisations to better support consistent mechanisms for talent identification and inform senior level succession planning.

2. Strategy Vision

The vision for the Strategy proposes a refresh of our national approach to talent management and succession planning, to ensure a future pipeline of outstanding performers across services within NHS Wales.

Planning for what is needed now will ensure there is effective capability and capacity in the future. This will support NHS Wales to identify, develop and fully utilise the potential of NHS staff in delivering the ambitions of 'A Healthier Wales'.

The implementation of the strategy will be managed in two distinct ways:

The process of succession planning for Tier's 1 and 2 will be managed nationally through HEIW and this will be overseen and supported by the National Talent Board and the National Talent and Succession Operational Group.

All other tiers will be managed locally by respective organisations through a local approach to talent management and succession planning. HEIW will support local implementation through OD Practitioner development and a co-produced Talent Management toolkit, utilising research-based models and best practice tools.

3. Succession Strategy: Key Aims

The overall aim of the Succession Strategy is to ensure a future pipeline of outstanding performers across services within NHS Wales, with at least three shortlisted NHS Wales applicants for every Board level position by 2025.

This will be supported by:

- Provision of opportunities to develop management and leadership skills and competence aligned to the NHS Wales Leadership Principles supporting compassionate and collective leadership.

- Clarity of expectation provided through an Executive Leader Success Profile.

- Effective appraisal processes with clear methodology for the identification of those with ambition, ability, a pattern of achievement and agility.

- Talent management and succession planning processes which are equitable, fair and which widen access to support and opportunities, resulting in greater diversity within the leadership of NHS Wales.

- Greater understanding of which executive leadership positions across NHS Wales require prioritisation for succession planning.

- Procurement of an appropriate digital platform to support national mapping of talent pipelines.

- Establishment of a national Talent Board to advise, influence and steer activity to support the achievement of the Succession Strategy objectives.

- Establishment of a national Talent and Succession Group to support strategy implementation and operationalise the refreshed succession planning and talent management model and accompanying systems and processes.

The National Succession Strategy will assist in shaping these outputs. The Talent Board will steer and approve the establishment of the refreshed succession planning and talent management model for NHS Wales and accompanying systems and processes, which will be ethical, support diversity and socio-economic agendas as well as creating sustainable pipelines

4. NHS Wales Talent Management Board – Terms of Reference

The Talent Board will be key in steering the National Succession Strategy with an initial focus on succession planning for Tiers 1 - 2 and Talent Management and development for Tiers 2 and 3.

4.1 Outcomes

Outcomes for the first 12 months of the Board are as follows:

1. Oversee developments of the Executive Talent Management Framework which will describe how we identify, select, develop, deploy, support and evaluate executive talent within NHS Wales.

2. Agree national succession planning proposals for executive and critical to fill leadership roles, providing NHS Wales clear talent pipelines to support current and future need.

3. Approve the assessment process to determine 'readiness' for Executive positions, aligned to the NHS Wales Executive Success Profile.

4. Agree the senior leadership development framework to support 'ready soon' aspiring

Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Notes from meeting with Foula Evans, Head of People and OD and Jeremy Ashdown, Learning and Development Practitioner, HEIW
HEIW approach to Workforce and Talent Planning

Monday 19th April 2021

Present:
Foula Evans (FE), Head of People and OD
Jeremy Ashdown (JA), Learning and Development Practitioner
Ruth Taylor (RT), Careers & Widening Access Advisor
Emma Carrington (EC), Policy Officer

RT and EC asked to meet with FE and JA to understand the organisation's approach to workforce and talent planning as part of their CIPD studies. Having met with Jackie Parsons last week who is supporting the organisation's objective by working with partners to improve collective leadership capacity, specifically for those in tier 3 (assistant/deputy directors) being capable and competent to move to tier 2 (executive director) positions, this meeting was to gain an understanding of the organisation's approach in relation to those in tiers 4 and below, which are the responsibility of individual organisation's to manage.

Both JA ad FE explained that there is no formal process within HEIW to identify talent and it does not identify pools of capable candidates in workforce and talent planning. Whilst it supports the learning and development of employees to reach their maximum potential, it is down to individuals themselves to identify suitable roles for themselves and apply following the NHS standard process via application and interview.

We discussed how potential pools of candidates could be identified, using current processes if HEIW were to use pools of candidates. The only potentially relevant information available is the annual appraisal information, which is subjective and based solely on manager interpretation. To identify pools of candidates would require the People Team to assess every appraisal to identify potential talent, but with the potential for line manager interpretation and commitment to development to be inconsistent across the organisation. Using this method would need further supporting tools to ensure the process was fair and identified all appropriate and capable talent.

There are plans in place to develop an Internal Aspiring Managers programme based on compassionate leadership principles, which would enable aspiring managers to undergo recognised training. Whilst this would ensure there are individuals in the organisation with the necessary skills required to fill these positions, individuals would still need to follow the application process and be successfully appointed through the recruitment process. The organisation would not solely tap into this talent pool and would advertise posts on the NHS Jobs website, ensuring fair competition to those from within and outside the organisation.

We discussed whether any work had been done looking at critical roles. The only role that has currently been identified as critical is in cyber security, which is listed on the risk register. Another area to explore would be data analytics.

With the work beginning on the Aspiring Directors Programme, FE and JA explained how it was now important that HEIW started to look at their succession plans in relation to tier 2 and 3 roles, to enable us to plan for the future

EV 25

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Health Education and Improvement Wales

Values Based Performance Appraisal and Development Policy

Approved by: Executive Team

Issue Date: 5th March 2019

Review Date: Ongoing

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Values Based Performance Appraisal and Development Review Scheme

Croeso



1. Introduction
2. Can you give an example of a memorable appraisal?
3. What are your expectations for this session?

Introduction



- A new organisation
- Together as a team
- Shared Common Purpose
- Opportunity to set and maintain a new culture from Day 1











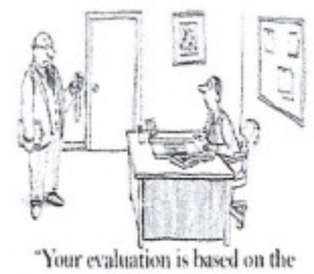




Aims of the Session

01 How to use our values based scheme	03 Roles and Responsibilities	06 Personal Development Plan
	04 SMART Objectives	07 How to use and update ESR for PADR
02 Our Culture	05 121 & 360	08 Pay Progression

What it is NOT....



"Your evaluation is based on the next 30 seconds. Go!"

- A form filling exercise
- A one sided conversation
- A capability procedure
- Just a Corporate Process
- Anything to be fearful of.....
- A rating
- A HR Process
- NO SURPRISES !



Aligned to our workforce strategy



What makes our scheme unique



Manager as a Coach

- Employee Led
- Manager as coach
- Not about capability or poor performance
- Opportunity to reflect and grow
- No ratings boxes, or box markings
- No moderation panels
- People Team does not need it
- It provides a platform and integrates to all other people processes and training
- It provides clarity about what we are expected to achieve
- It is an opportunity to review what skills we need in the team and in each other
- It is what every exemplar organisation does...

Strategic Aims 2020-23

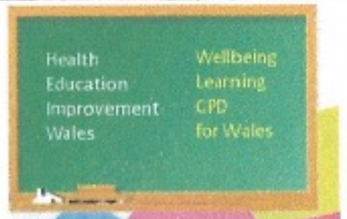


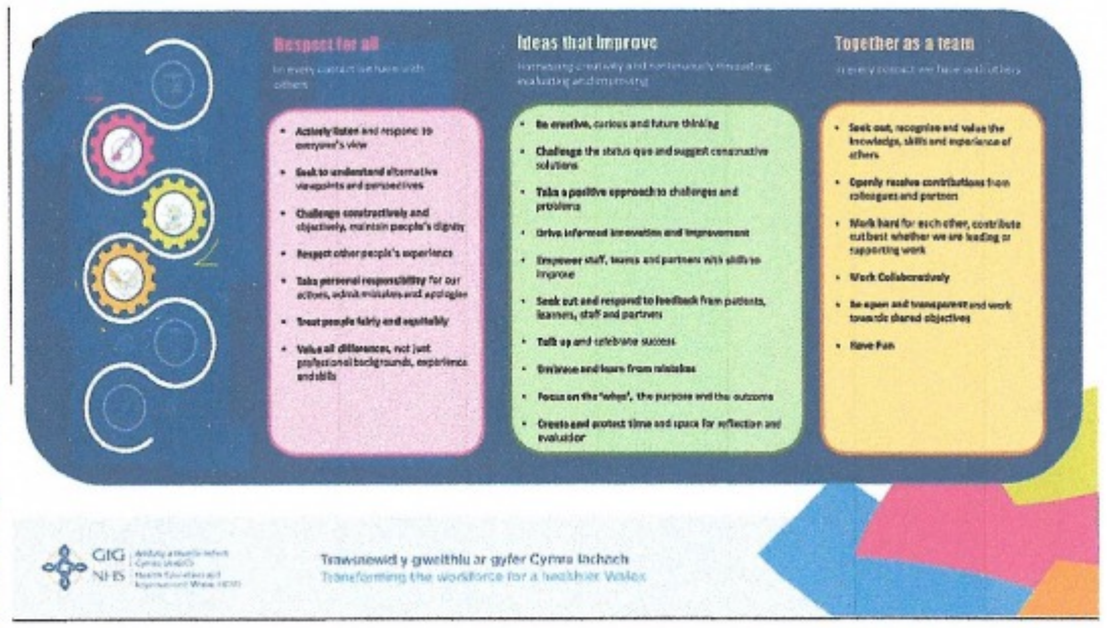
Integrated Medium Term Plan for 20 – 23 approved and submitted to WG 31/1/20

Our Journey









EV 26

A bank of 101 different questions to ask during one to one discussions

To start the meeting: Many line managers like to use the same, unassuming opener at each one to one. It may seem boring, but doing so encourages direct reports to drive the conversation by starting with a topic they want to talk about (remember, it's their meeting). The answer will also help you gauge how they're feeling that week.

1. How's it going?

2. So, what's on your mind?

3. What would you like to start with?

To gauge job satisfaction: Proactive questions about job satisfaction can help you unearth issues before they become full-blown problems — and lead to unwanted turnover. Some direct reports are more forthcoming than others, so even if the answers to these questions sound positive, listen for clues to deeper issues, and ask plenty of follow-up questions.

4. How are you feeling about your role?

5. Are you happy here? What makes you say that?

6. Do you feel like you're growing in your role? What makes you say that?

7. What interests you about your work, and why?

8. What is your favourite/least favourite thing about your work right now?

9. How do you think that least favourite thing affects your overall performance?

10. What's working well for you in your current position?

11. What would you like to see change?

12. In what ways does your current position allow you to use your skills and talents?

13. Which areas make you feel like your hands are tied or you are unable to reach your full potential?

14. What do you think you could be doing differently?

15. If you could work on anything for the next month, what would it be? What makes you say that?

16. What's one thing that could make your work more satisfying, and why?

17. Which areas would you would like more feedback on?

To address career development: Some direct reports may have a career path fully mapped out, down to desired promotion dates. Others may have no clue what they want to do next. No matter where your direct reports stand, it's worth bringing up career development in your one to one's to ensure you get the best out of your team and keep people happy in the long term.

18. What are you most proud of, and what do you think you might want to do next?

19. What are two to three new skills you'd like to learn on the job? What about those skills interests you?

20. What other roles here could you see yourself in down the line? Or what areas would you like to explore?

21. If you were to create your ideal position, how would it differ from what you are currently doing?

22. How is your current work helping or hurting your professional development?

23. Which career or development goals do you feel like you're not able to focus on right now?

24. What else can I be doing to help you grow/advance in your career?

25. Imagine it is two years from now, and things have gone well? What has been your role in that? What does your role look like now?

26. Have you given any more thought to your long-term goals since our last meeting? What are your latest thoughts?

27. Where do you see yourself in three years? Five years?

28. What professional goals would you like to accomplish in the next 6 to 12 months, and what makes you say that?

29. To help identify and clarify the goal: What do you want to achieve? What will you do to achieve it? When will you do it? Who do you need to involve? When should you see results?

30. What about this goal is important to you and what will be different when you achieve the goal?

To gauge how the person is feeling about the organisation: These types of questions may yield good ideas you want to pass upward, or at least give you an opportunity to explain why decisions have been made the way they have. They will also give you insight into another facet of the person's job satisfaction.

31. What's the biggest opportunity we're missing out on?

32. If we could improve in any way as an organisation, how would we do it?

33. What would you like to see change here? Why do you say that?

34. What's the No. 1 problem with our organisation, and what do you think's causing it?

35. What are we not doing that we should be doing? What makes you say that?

36. What are we doing that you think we should stop doing, and why?

37. How are you feeling about the organisation's overall? What makes you say that?

To gauge how the person is feeling about the team: You want to be sure your team is functioning at a high level, and here's a chance to uncover problems and opportunities that will benefit everyone.

38. How would you describe the personality of the team? What sort of person would be a good fit here? What sort of person would add something we're currently missing?

39. How would you say we're doing at working together as team? What makes you say that?

40. What are some ways we could improve at teamwork? What makes you say that?

41. Who would you like to work more/less often with? Why?

42. How would you describe the division of work among team members?

43. Do you feel adequately supported by other team members? What makes you say that?

44. Is there anything you'd like to see change about the team, and if so, why?

To check in on how the person's coping with a recent change at work: Change is inevitable. And no matter what type it is — change is more of a process than a single event. Make sure to check in with direct reports on how it's going when something has changed in their work life.

45. How are you feeling about the recent news? Why do you say that?

46. What concerns do you have about the change that haven't been addressed?

47. What's going well and not so well with the new situation/development? Why do you think this might be happening?

48. Do you have a clear understanding of the new goals and expectations? What makes you say that?

49. *How is the new situation/development affecting your work? What could be getting in the way of your* being effective?

To learn more about a project: These questions go beyond a status update; they help you to learn about what your direct report finds engaging, as well as challenges or roadblocks you may be able to help with.

50. How are you feeling about the project?

51. What aspect of this project has been particularly interesting for you?

52. What do you feel like you're learning from this project?

53. What frustrates you about the project?

54. Which areas would you like to spend more time on and why?

55. What do you think has gone well? What do you think you could have done better? What, if anything, would you like to do, but haven't been able to?

56. What can I do to make things more manageable?

57. How might I make this project more challenging or interesting for you?

58. What do you think I should know about the project, but might not?

To learn your direct report's biggest challenges: For some, discussing a challenge is like admitting a failure. Let your direct report know that you want to hear about his or her concerns because you care about making things better.

59. What is the biggest challenge you are currently facing? How can I help with that?

60. At what point in the past week were you most frustrated with or discouraged by your work? What can I do to help you manage that?

61. What are your biggest concerns about your current workload?

62. I've noticed X about the project/work... Can you help me understand that better? Talk me through your process.

63. Which parts of your role are unclear or confusing?

64. How is your workload right now?

65. How has your work/life balance been lately?

66. What sort of resources could you use right now to make things more manageable?

To draw out an issue: If your direct report seems to stop short or gives a curt response on a topic where you think there may be important issues lurking beneath the surface, use open-ended questions to encourage him or her to continue.

67. Could you tell me a little more about that?

68. Can you share some of the details around that particular issue? (Who was involved? Where? When? For how long?)

69. What was that experience like for you?

70. What did you like most/least about that?

71. How did that affect you?

72. How did that make you feel?

73. If you could change what happened, how would you alter it?

74. What do you think caused that to happen?

To coach a direct report on a particular issue or challenge: Coaching can be a powerful way to encourage, empower, and help direct reports to solve their own problems. Ask questions that help the person establish a goal outcome, explore the situation, generate a set of potential solutions, and finally plan the way forward. HEIW will establish Coaching Training for Line managers, *'Line Managers as Coaches'*, and will look to establish its own internal Coaching and Mentoring network. Please contact Organisational_Development_HEIW@wales.nhs.uk if you would like additional information.

75. What is your number one issue or challenge right now? How are you feeling about it?

76. What would be the most helpful thing for you to take away from this conversation in order to make progress on it?

77. What have you tried so far to make progress on it?

78. What ideas can you bring in from past successes?

79. What haven't you tried yet?

80. What are some possible ways to get the solution you need?

81. What additional resources from me would be helpful for you as you solve this problem?

82. What are your next steps to make progress on this problem?

To promote continuity between meetings: Your one to one's will be more effective in the long term if you follow up on the topics, goals, and actions discussed in previous meetings and set items for follow up next time.

83. What sort of progress have you made on the next steps we discussed last time?

84. In our last one to one you mentioned that you'd like to grow in X — how has that been going?

85. In our last one to one you mentioned you were frustrated by X and wanted to try Y as a solution. How has that been going?

86. What development areas do you want to work on in the coming weeks?

87. What actions will you take before our next 1-1 to make progress on X? (Also discuss and agree on actions you will take to help.)

88. During this meeting you've mentioned that you'd like to pursue X. What steps can you take toward that before our next one to one?

89. What additional resources can I provide for you between now and the next time we meet?

If you feel like your one to one's are stuck in a rut, or ineffective: You want a one to one to be a good use of your time, as well as your direct report's. Sometimes a simple change of scenery can help. Other times, direct and honest questions about the issue can really open things up — chances are if you feel the meetings aren't as effective as they should be, your direct report feels the same way, too.

90. Would you like to walk today, or go somewhere else outside the office?

91. I've noticed that our last several one to one's have lacked energy. What are your honest impressions of this meeting? What could we be doing differently or better?

92. What would you like to see change about these discussions? How could we make them more useful for you?

93. What would you be doing right now if we weren't having this meeting? How do you feel about being taken away from that task?

94. I'm trying to make my one to one's better and would appreciate your honest feedback on this one — what did you like about it, and what could be improved?

To address the direct report's personal life (In accordance with the 'managing absence and attendance policy', "knowing your employee"): Asking about your direct report's personal life can be a good way to show that you care about him or her as a person. Be sensitive and keep in mind that some people are more private than others. Depending on the employee, personal topics could be informal small talk about the person's family or interests, or more serious matters. It's often good to start with broad questions, like these, and be careful not to make assumptions.

95. How are things going for you outside of work?

96. How do you feel about your work/life balance?

97. What, if anything, did you used to do that you find you don't have time for right now?

98. I've noticed you're a little quieter than usual. Is there anything you'd like to talk about?

99. What could we change about work that would improve the rest of your life?

To ask for feedback on the one to one's and on your performance as a manager: Getting feedback from your direct reports can be just as important as giving it. Not only will it help you improve as a manager, it can also build trust and strengthen your relationship with your direct reports. However, only ask for feedback if you feel confident in your ability to take the feedback well and act on it; asking and then doing nothing could do more harm than good. Plus, given the power dynamic involved, how you ask is critical.

100. I'm interested in feedback on how I can improve as a manager. In preparing for our next one to one, would you be willing to think through what you like about how I do X (for example, run team meetings) and what I could do differently or better? (Ask prior to the one to one.)

101. I'd like to improve as a manager and I could really use your help. Next week, would you be willing to...

Please note that additional tools are available to line managers on giving real time feedback and creating a real time feedback culture. In addition, there are resources available via the e-Library for health, www.wales.nhs.uk/elibrary

People Team (JA)

5th March 2019

Appendix 27

HEIW IMTP - CORE VALUES

Respect for all - *in every contact we have we have with others.*	**Together as a team** - *we will work with colleagues, across NHS Wales and with partner organisations.*	**Ideas that improve** – *harnessing creativity and continuously innovating, evaluating and improving.*
We Will	**We Will**	**We Will**
• Actively listen – make time to listen, to hear, and respond to everyone's views; • Seek to understand alternative viewpoints and see things from others' perspectives; • Challenge constructively and objectively and deal with disagreement quickly and respectfully maintaining peoples' dignity; • Respect other people's expertise and trust people to do their jobs; • Take personal responsibility for our actions and have the confidence to admit mistakes and apologise; • Treat people fairly and equitably according to their needs; • Value all differences not just professional backgrounds, experience and skills.	• Seek out, recognise and value the knowledge skills and experience of others from within HEIW and across our stakeholders; • Openly receive contributions from colleagues and partners; • Work hard for each other, contribute our best whether we are leading or supporting work; • Work collaboratively; • Be open and transparent and work towards shared objectives; • Have fun.	• Be creative, curious and future thinking; • Challenge the status quo and suggest constructive solutions; • Take a positive approach to challenges and problems; • Drive informed innovation and improvement for patients, staff and learners; • Empower staff, teams and partners with skills to improve; • Seek out and respond to feedback from patients, learners, staff and partners; • Talk up and celebrate success; • Embrace and learn from mistakes; • Focus on the 'whys' - the purpose and the outcome; • Create and protect time and space for reflection and evaluation.
We will not	**We will not**	**We will not**
• Allow challenges or differences of opinion to become personal; • Behave in a way which could be perceived as bullying; • Exclude others; • Behave in a way which could be perceived as prejudicial; • Give preferential treatment; • Dominate discussions or approaches.	• Withhold important relevant information; • Forget to communicate with each other; • Lack loyalty towards each other and HEIW; • Work rigidly to defined boundaries.	• Behave in a negative or "can't do" way; • Be defensive when challenging existing ways of working; • Think we know best; • Allow obstacles to stop improvement; • Blame others for mistakes.

EV 28

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Values Based Performance Appraisal & Development Review

For use by all staff (except casual workers) DRAFT

Name:		**Job Title:**	
Name of Manager:	Click or tap here to enter text.	**Date of Meeting:**	Click or tap here to enter text.

1. Self-Assessment

1.1 **End of Year review of the previous six months / year** — **for completion in April**

Please refer back to the previous / most recent appraisal documentation to support your review.

	Individual SMART objectives – Specific, Measurable, Achievable, Relevant and Time-bound		
	What was expected of you?	**Was this objective met? If so, what impact did this have? If not, please consider the support that may be required to help deliver the objective.**	**What worked well, what did not work so well. What would you do differently?**
1			
2			
3			
4			
5			

Manager comments
Click or tap here to enter text.

1.2 **Have you demonstrated our values in your behaviour?**

For discussion: Please refer to the findings of the *'360 degree feedback'*, together with our 'Values and Competencies' framework. Which of the values were evident when you were working to complete the

What support do you need from your manager, the team or the organisation to fulfil your potential?	
What Learning and Development have you undertaken this year:	Click or tap here to enter text.

Following discussion, what was agreed regarding your readiness to progress?	☐ Now	☐1 Year	☐ 2 to 3 years

1.4 **Personal development planning (PDP)** **For completion in April**

The Personal development plan underpins and supports the delivery of objectives, career aspirations and values and behaviours. How will this be achieved? Managers are asked to consider blended learning opportunities *(i.e. coaching, mentoring, job shadowing, e-learning, as well as formal classroom training).* Interventions that incur a cost are subject to a learning and development bid being submitted to Executive in June. Academic qualifications are subject to a formal business plan being considered and approved in accordance with the *'Access to Learning and Development'* policy.

Personal Development Plan: Please refer to information about the training and support available from HEIW Please also consider shadowing, projects, research, coaching/mentoring, 360 Feedback, as well as formal training opportunities.
Click or tap here to enter text.

1.5 **Professional requirements and continuing professional development** **For completion in April**

The focus of this section should be on your potential and aspirations for future career development, along with your professional registration requirements.

Name of professional and or clinical body. (i.e. GMC, NMC, HCPC, and any other Continuing	

	Specific, Achievable, Relevant	Measurable	Time Bound
1			
2			
3			
4			
5			

Employee comments
Click or tap here to enter text.

Manager comments
Click or tap here to enter text.

3.1	Review of the previous six months	For completion in September

In looking back at all of the one to one meetings over the last six months, please outline the main successes, achievements and challenges over the previous 6 month that has been discussed. Please refer to manager/employee guidance for information.

Employee comments
Click or tap here to enter text.

Manager comments
Click or tap here to enter text.

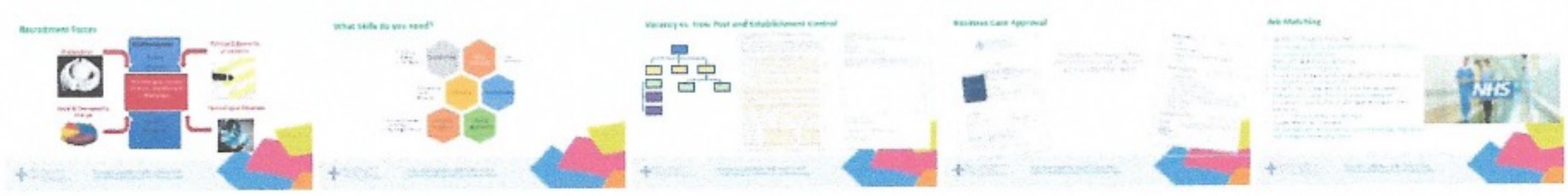
3.2	Do you demonstrate our values in our behaviour?

Here you need to consider what was done well and what could be done better, providing evidence and examples for discussion.

EV 29

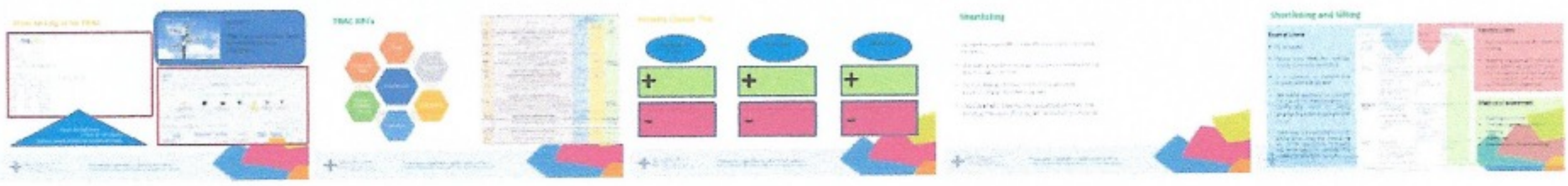
HEIW Recruitment and Selection training slides




















































Best Practice









GENERAL RECRUITMENT PROCESS KEY PERFORMANCE INDICATORS, TARGETS AND RESPONSIBILITIES

(in working days)

Step	Agreed KPI	TARGET & RESPONSIBILITY		Total Time
		NWSSP	HB/Trust/ Manager	
Step 1	**Time from resignation to submitting vacancy for approval on Trac**		5 days	**5 days**
Step 2	**Time to approve/authorise a vacancy**		10 days	**Maximum of 44 days**
Step 3	**Time to place adverts live** Quality check and place adverts. Internal on Trac only, external onto NHS Jobs and Trac.	2 days		
Step 4	**Time to send applications to a manager after the post closes**	2 days		
Step 5	**Time to shortlist by manager** Score against the person specification in the Trac system. Manager completes interview gateway on Trac and Recruitment will set interviews up on the system and invite candidates to interview		3 days	
Step 6	**Time to invite candidates to interview**	2 days		
Step 7	**Time to notify Recruitment of interview outcome** Manager to enter interview outcome onto Trac		3 days	
Step 8	**Time to send conditional offer letter** Recruitment will check original WTE approval so ensure additional approval is already received if required. References will be requested. OH form is sent to candidate to complete and return to OH.	4 days		
Step 9	**Completion of pre-employment checks (PECs)** Appointee to attend a face-to-face meeting to produce ID, Right to Work, Quals/Reg where applicable, complete DBS check. Internal appointees may have complete records on file, if so, they will only need to complete new OH form. References will be obtained as appropriate. If different quals/DBS level are required then may need to attend a face-to-face meeting	25 days		**Maximum of 27 days**
Step 10	**Time to send unconditional offer letter**	2 days		
	Total Time (excluding notice period)			**Maximum 76 days**

Step 11	**Time to notify Recruitment of Start Date**		3 days	
Step 12	**Time for Recruitment to issue contract**	Issued on Start Date		

PLEASE NOTE: All communications by email must be submitted through Trac by entering the Vacancy Communications tab, in relation to your vacancy. Once an applicant has been appointed, use the Applicant Communications tab.

Alternatively please phone the Recruitment Help Desk
02920 905353

Emma Carrington (HEIW)

From: Rachel Mort (HEIW)
Sent: 05 May 2020 14:56
Subject: Recruitment & Selection Training Course

Dear Colleague,

Thank you for attending the recruitment and selection training course this morning, we hope you found the course both informative and stimulating and provided you with enough knowledge and information with regards to the process of recruitment and selection in order to carry our your roles effectively.

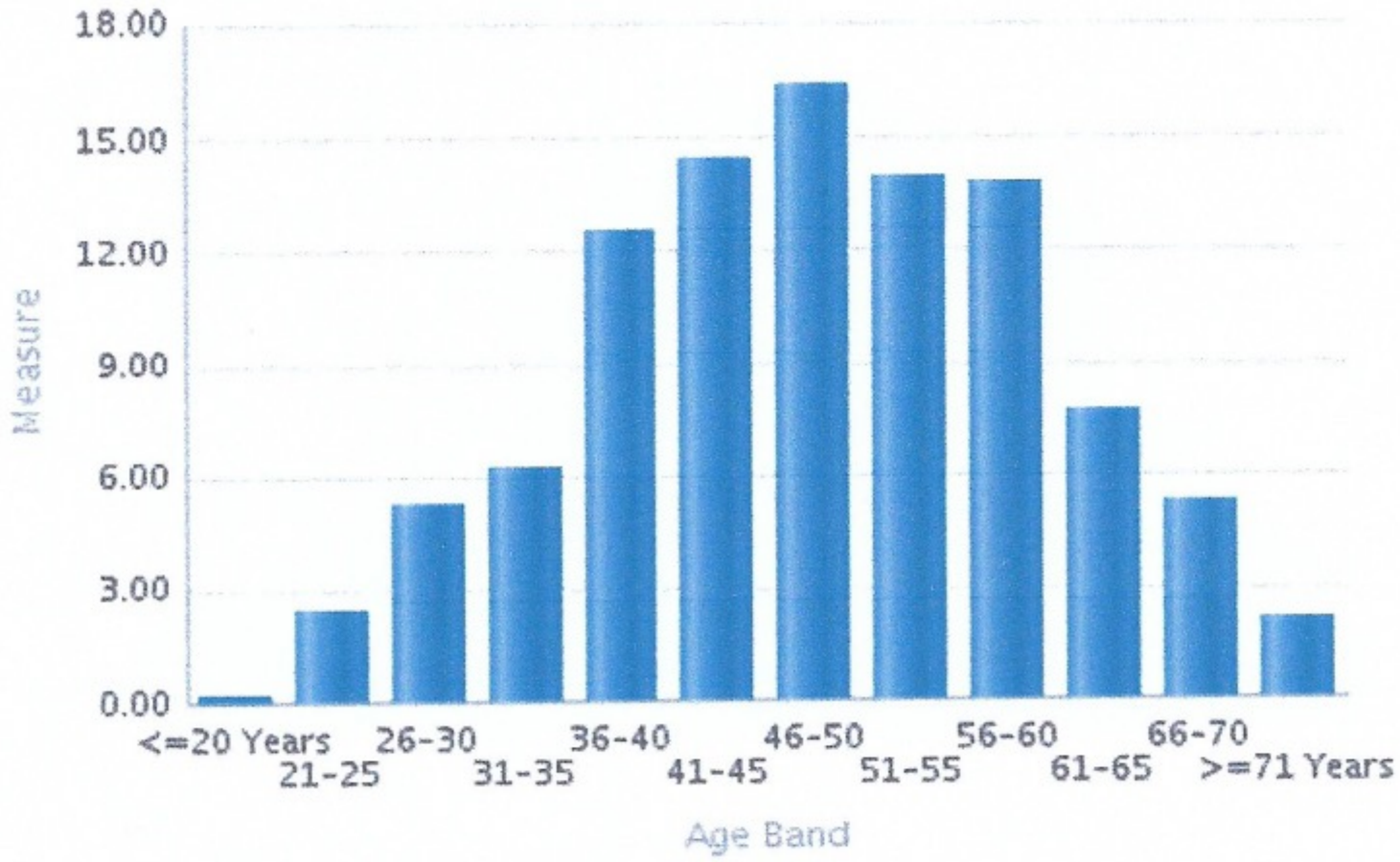
The HEIW People Team welcome your feedback and we would like to encourage you to complete the online feedback form: https://heiw.onlinesurveys.ac.uk/recruitmentandselectionrevaluation following today's course so we can identify areas which worked well and where improvements are required. We would like to remind you the feedback is anonymous however if you wish to leave your details you are very welcome. Certificates will follow very shortly.

With Kind Regards,

Cofion caredig Kind Regards
Rachel Mort
Gweinyddwr Pobl / People Administrator
Addysg a Gwella Iechyd Cymru (AaGIC) / Health Education and Improvement Wales (HEIW)
Ffôn: (01443) 846317
e-bost: / email: Rachel.Mort@wales.nhs.uk
aagic.gig.cymru / heiw.nhs.wales

EV30

Age Band



GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Age Band	Headcount					
<=20 Years	1					
21-25	11					
26-30	23					
31-35	26					
36-40	59					
41-45	89					
46-50	78					
51-55	85					
56-60	69					
61-65	33					
66-70	11					
>=71 Years	1					
Total	**486**					
Data Source: ESR BI - NHS WF Profile Dashboard Diversity Detail						

EV 31

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

HEALTH EDUCATION & IMPROVEMENT WALES

ACCESS TO LEARNING & DEVELOPMENT POLICY & PROCEDURE

Approved by: HEIW Executive

Issue Date: January 2019

Review Date: January 2021

1. INTRODUCTION

Health Education & Improvement Wales (HEIW) is committed to the continuing education, training and development of all staff to enhance the work environment, competence of employees, and improve the quality of services. These guidelines outline the commitment of HEIW, levels of development and funding available for training and development activity.

2. PURPOSE

The purpose of this document is to standardise the process for requesting access to learning and development within HEIW and to give clear guidance on the procedure to be followed by the employee, line manager and the People team in applying for and processing learning & development and study leave requests.

3. SCOPE

This procedure applies to all staff within HEIW.

4. ROLES & RESPONSIBILITIES

4.1 INDIVIDUAL/EMPLOYEE

All staff must take responsibility for their own learning and development requirements. Staff are equal partners in successfully achieving their development needs and therefore are responsible for:-

- Identifying their own development needs, including mandatory, essential, and Continuing Professional Development (CPD)
- Accessing appropriate learning opportunities
- Liaising with the People team for advice and guidance on the availability of current and future learning opportunities prior to application of any funded training courses.
- Completion of all statutory and mandatory training
- Attending and completing all authorised study days
- Maintaining and updating their own learning record via ESR
- Providing feedback on the quality and effectiveness of learning activities
- Evaluating and sharing learning opportunities widely
- Notifying their line manager if they are unable to attend the training course / development activity. Where relevant this should also be in accordance with the All Wales Managing Attendance at Work Policy. This is in addition to reporting any absence to the relevant course provider if required.

Internal Training*

If the required training is being centrally delivered, the employee should book a place on the relevant course as outlined in the online booking guidance in Appendix A*.

*Please note that whilst ESR is being developed, please continue to use the designated leave form

External Training*

If the training is not being delivered internally, then the employee will need to complete the form in Appendix A and forward to their line manager. The employee must complete all their Statutory and Mandatory training before requesting training. If the training is approved by the line manager and the People team, and the employee has completed all statutory and mandatory training, a place on the course can be booked via complying with departmental procedures. In addition, the employee is required to record any study leave absences via ESR* as outline in Appendix B.

Individuals will be entitled to claim for travel expenses for any external training courses and in certain instances overnight accommodation may be required. Guidance and details of reclaiming expenses is outlined within Appendix C.

4.2 LINE MANAGER

It is the line manager's responsibility to:

- Ensure the applicant is 100% compliant with their statutory/mandatory training requirements before approving a study leave application.
- Liaise with employees at regular intervals in addition to the annual appraisal to review progress and offer further support.
- Identify learning and development needs to meet the needs of the organisation, department and the individual.
- Liaise with the People team for advice and guidance on the availability of current and future learning opportunities prior to approval of any funded training courses.
- Ensure all staff have equal opportunities to access learning and development activities and that study leave, training costs and expenses are awarded to the relevant levels according to the categories of protected time and funding levels table below.
- Send all approved study leave requests to: heiw.people@wales.nhs.uk
- Ensure that all staff attend booked training events and ESR training sections are maintained and updated.
- Ensure that they take the appropriate action if it is found that the staff member has not attended any training and has failed to inform them of this - examples of reasonable justification for nonattendance of a planned training course may be sickness absence, emergency/special leave circumstances or bereavement
- Ensure that all associated expenses related to the study leave are scrutinised and approved within the necessary timescales. Details and guidance are outlined within Appendix C.

4.3 PEOPLE TEAM

It is the People team's responsibility to:

- Collate an organisation-wide Training Needs Analysis (TNA) based on submitted PDPs
- Take account of the content of this TNA when planning programmes of learning
- Provide advice and guidance on internal and external course offerings
- Provide advice and guidance to all staff and line managers on how to record learning activity in ESR
- Monitor all study leave requests and cross-reference with PDPs and CSTF Compliance
- Monitor and assign the training budget to requests. Budget will be held with the People Team.

*Please note that whilst ESR is being developed, please continue to use the designated leave form

5. CATEGORIES OF PROTECTED LEARNING TIME & FUNDING LEVELS

Category	Type of Study Leave	Examples	Protected Time & Funding
NB Any protected time granted to attend learning and development activities must be approved by the Line Manager. This includes meetings with trainers and assessors as part of long-term learning programmes.			
A	• All Statutory and mandatory training that is not suitable for online delivery via ESR or other approved methods. • Training that is essential to the performance of the job • Training where there is significant benefit for HEIW • Training where the individuals are requested by HEIW to attend	• Manual Handling Module B • Training for a newly introduced system or process	100% business expenses, course/exam fees*, accommodation, time to attend
B	Study that is of mutual benefit to both the individual and the organisation	Attainment of a qualification, which is relevant to the post but not essential	Up to 100% business expenses, course/exam fees*, accommodation, time to attend
C	Study that is more beneficial to the individual.	Attending a course of professional interest but not directly relevant to their role	Up to 100% business expenses, fees, accommodation, time to attend
D	Study that is of benefit to the individual, but of little relevance to HEIW.	Attending a course of broad based interest but not relevant to the role	No contribution towards business expenses, fees, accommodation. Time to attend would be at discretion of line manager
Staff who are required to undertake learning & development activities which falls outside their usual hours of work are eligible to take time back in respect of the guidelines for protected time as outlined above. Time back to be taken is to be agreed with the line manager prior to the learning activity taking place. ****Please note, the organisation is not obliged to fund examination re-sits following an unsuccessful first attempt***			

6. REPAYMENT OF FINANCIAL SUPPORT

Where staff undertake qualifications that are paid for, in part or full, by the organisation, non-completions may result in recovery of those costs from the individual. Where a member of staff fails to complete a course, or withdraws from a course following commencement, the member of staff may be asked to make a repayment of the financial assistance provided by the organisation, unless there are exceptional circumstances, or a medical certificate is provided in the case of sickness. Each case will be looked at on an individual basis.

GIG CYMRU NHS WALES

NHS Wales Managing Attendance at Work Policy

GIG NHS

Sections

01 NHS Wales Managing Attendance at Work Policy

02 How to Procedure Notification and Certification

03 How to Procedure Managing Frequent Short Term Sickness Absence

04 How To Procedure Managing Long Term Sickness Absence

05 How to Procedure Occupational Health

06 How to Procedure Return to Work

07 How to Procedure Phased Return and Temporary Redeployment

08 How to Procedure Reasonable / Tailored Adjustments

09 Minimum Standards

GIG CYMRU NHS WALES

01

NHS Wales Managing Attendance at Work Policy

Approved by: Wales Partnership Forum Business Committee

Issue Date: October 2018

Effective Date: October 2018

Review Date: 2021 (Quarterly evaluation)

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1 NHS Wales Managing Attendance at Work Policy

1.0 The Core Principles of NHS Wales:

- **We put patients and users of our services first:** We work with the public and patients/service users through co-production, doing only what is needed, no more, no less and trying to avoid harm. We are honest, open, empathetic and compassionate. We ensure quality and safety above all else by providing the best care at all times.
- **We seek to improve our care:** We care for those with the greatest health need first, making the most effective use of all skills and resources and constantly seeking to fit the care and services we provide to users' needs. We integrate improvement into everyday working, by being open to change in all that we do, which also reduces harm and waste.
- **We focus on wellbeing and prevention:** We strive to improve health and remove inequities by working together with the people of Wales so as to ensure their wellbeing now and in future years and generations.
- **We reflect on our experiences and learn:** We invest in our learning and development. We make decisions that benefit patients and users of our services by appropriate use of the tools, systems and environments which enable us to work competently, safely and effectively. We actively innovate, adapt and reduce inappropriate variation whilst being mindful of the appropriate evidence base to guide us.
- **We work in partnership and as a team:** We work with individuals including patients, colleagues, and other organisations; taking pride in all that we do, valuing and respecting each other, being honest and open and listening to the contribution of others. We aim to resolve disagreements effectively and promptly and we have a zero tolerance of bullying or victimization of any patient, service user or member of employees.
- **We value all who work for the NHS:** We support all our colleagues in doing the jobs they have agreed to do. We will regularly ask about what they need to do their work better and seek to provide the facilities they need to excel in the care they give. We will listen to our colleagues and act on their feedback and concerns.

They have been developed to help and support employees working in NHS Wales.

NHS Wales is about people, working with people, to care for people. These Core Principles describe how we can work together to make sure that what we do and how we do it is underpinned by a strong common sense of purpose which we all share and understand.

The NHS is continually under pressure to deliver more services, with better outcomes and maintain and increase quality against the backdrop of significant financial challenge, high levels of public expectation and with a population which is getting older and with increased levels of chronic conditions.

EV131

Managing Attendance at Work

Employees are responsible for:	*Line managers are responsible for:*	*Role of Trade Union Representative*
• Employees are responsible for their own health and wellbeing. • Employees should take up all reasonable opportunities to maximise and protect their own health and wellbeing. • Employees should seek medical advice and treatment as soon as possible to support their own health and wellbeing. • Employees have a responsibility to attend Occupational Health appointments and sickness absence meetings when requested to do so. • Employees can self-refer to available services where they exist, i.e. Occupational Health, Physiotherapy, Employee Wellbeing, where this would be beneficial to their own health and wellbeing. • Employees have the responsibility for keeping in touch regularly with their manager when unwell. • Employees must consider whether there are any reasonable / tailored adjustments that may help them to remain in work or return to work at the earliest opportunity. • Employees have a responsibility to maximise attendance at work in line	• The primary responsibility for the management of attendance rests with managers. The rationale for this approach is that our managers should "know their employees" and be familiar with the issues surrounding the attendance profile and needs of their employees. • The manager in "knowing their employee", has the discretion that when reviewing their health and wellbeing following an episode of sickness absence, they will consider as to whether the employee progresses through the procedure. The decision will be determined and rationale recorded as part of the return to work/informal/formal stage meetings. • Managers are responsible for ensuring that employees are aware of the range of health and wellbeing support that is available to them in and out of the workplace. In addition, managers should make employees aware that support or advice may be available through trade union representatives if required. • Managers must consider the opportunities to return employees to	It is the role of trade union representatives to: • Support the individual member and their organisation in minimising absence from work caused by sickness. • Provide their members with advice on all aspects of the policy. • Ensure an appropriate trade union representative is available at all levels of the procedure should their member wish to be accompanied and to ensure that meetings can occur in a timely manner. • Work closely with managers and other groups to make the policy effective at organisational level, including being aware of all relevant legislation. • Maintain their competence in the application of the policy and in supporting their member through absence due to sickness. • Work with their individual member, the manager and Occupational Health to facilitate a return to work as soon as possible following a period of sickness. • The Minimum Standards for Managing Attendance at Work Policy outlines other responsibilities.

EV 32b

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

HEIW communications and engagement strategy

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EV33

On Tuesday 6th April I met with my line manager to discuss HEIWs retention figures. HEIW currently consists of 486 employees. HEIW rolling turnover rate, since 2018, is particularly low at 7.84% (includes all leavers) (HEIW, 2021). As HEIW is a relatively small organisation, it's important to note that figures can look skued as 1 person may leave a team of 2 suggesting a 50% turnover rate (Roder. 2019; Leaveboard,2021; Merhar, 2020; Dwomoh *et al*, 2013), however this is not representative of the whole organisation, just the specific department. Also, as HEIWs retention levels (CIPD, 2021; Brownlee, M, 2021) are good, it's can also be very difficult to identify any large trends or particular issues. However, retention figures would be more evident within a health board as there are a higher number of employees, thus has a is a higher turnover rate. Therefore, problem areas i.e. bulling issue or high workloads would be more obvious as a higher proportion of employees would leave over a period of time.

When HEIW was established in October 2018, it brought together staff from 3 former organisations – Workforce Education and Development Service, Wales Deanery, and the Wales Centre for Pharmacy Professional Education. At this point there were 92% of HEIW staff on Cardiff University Terms and Conditions who transferred to HEIW under *Transfer of Undertakings (Protection of Employment Regulations* - TUPE) arrangements (Daniels, 2019; CIPD, 2021). This is a significant challenge for the People Team, who need to be familiar with two complex sets of employment terms and conditions on a daily basis (NHS Terms and Conditions of service, 2021; Cardiff University Terms and conditions of Service; Wales Centre for Pharmacy Professional Education; NHS Agenda for Change). The most significant factor within HEIWs retention metrics is that 59/82 leavers TUPE'd into the organisation, which highlights that their employee experience has been different to those who have joined the organisation since the transfer. HEIWs long-term plan has been to harmonise terms and conditions across the organisation, and work in partnership with Trade Union colleagues to progress this. Former Cardiff University staff have been awarded a pay increase in line with Agenda for Change staff. However, where appropriate, policies will need to be adopted or adapted to ensure fairness and equity across our workforce. All newly appointed staff are employed on NHS Terms and Conditions, and staff who wish to transfer from existing University contracts are supported to do so. Our current staff profile highlights: 3.88 out of 5 engagement score; 90% of contracts are permanent.

Of the 50 leavers in the medial director, 37 of them were in clinical roles, which seems to reflect those only contracted to work a small number of hours per week (some staff work on a sessional basis, so they may want to concentrate on their substantive post i.e. GP) (GMS Contract). Of those who sited work life balance as their reason for leaving, they all were contracted to work 3 hours or less per week (CIPD, 2009-17; Kohll, 2018; Wedgwood, 2019). Therefore, it could be suggested that these roles are viewed as an extra responsibility that is not beneficial nor sustainable for long periods of time. It could also be viewed as added pressure on top of their substantive role and therefore a personal decision. HEIWs staff profile highlights a gender profile of predominantly larger female workforce (67%), compared to male (33%) (Devine *et al*, 2020; Ortiz-Ospina & Tzvetkova, 2017; Catalyst, 2020; Roantree, B and **Kartik,** V (2018). Retention could also account for female responsibility outside work (McKinsey, 2020; Ely & Padavic, 2020)

In contrast, those who are not dental educators or GP appraisers, 12 cite promotion as their reason for leaving, with 7 stating WLB. The most concerning is that for 16 leavers, we don't actually know the reason. This shows a truer reflection of those working predominately for HEIW. It would therefore be beneficial for HEIW to incorporate exit questionnaire / satisfaction surveys into employee termination, to establish reasons for leaving. Exit interviews could also be held earlier rather than the last day to mitigate reasons for an employee leaving and may help with prevention (Insight Link, 2020;

Sullivan 2020; Groysberg & Spain, 2016; Alexander, 2014). It could also help to address trends, and maybe change aspects of some policies and procedures i.e. sabbatical leave / flexible working.

Good Retention figures highlight that people are happy in their roles (Engage for Success, 2021; CIPD, 2021; Smith, 2020; Investors in People, 2021). HEIWs improved sickness rates since the start of the pandemic (2.1% compared with 4.1% of wider NHS Wales) has demonstrated engaged colleagues typically experience greater job satisfaction and greater wellbeing and engagement activities within HEIW which are universally beneficial to an employee at work and the organisational brand (Robertson-Smith & Markwick, 2009; Beheshti, 2019; Baldoni, 2013; MacLeod, 2009, p6; Schaufeli et al 2008, 2010; Alfes et al, 2010). Given the overall low levels of absence, any single long-term episode has a significant impact on the overall picture within the organisation, and the small number of cases that HEIW are sympathetically and appropriately managing. The most days lost to sickness have typically been for reasons of anxiety/stress (which could be linked to the pandemic), but it is worth noting that absence due to tumours/cancers is now at the same level (NHS Wales' Workforce Trends, 31st March 2019) .

HEIW also has a good organisational culture (Wong, 2021; CIPD, 2021) and offer learning and development opportunities (getsmarter, 2019) at all levels (common reasons people leave). Therefore, existing employees feel engaged and valued, and as a result have no desire to leave the organisation. As retention is high, there are less opportunities for promotion (reflected in data); There are currently 36 leavers in the admin category (bands 3-5), the majority are leaving due to lack of promotion opportunities. As a public sector organisation, HEIW cannot offer an employee more money to stay within their role, as they are bound by NHS Contractual Terms and Conditions of service. The job has also been analysed / evaluated at an appropriate point within the NHS pay scale. Historically, HEIW has created a lot of new posts to fulfil aspects of the IMTP (HEIW, 2018), however these are now full, and employees are likely to stay in them. Individuals can apply for limited promotional opportunities but cannot be guaranteed the role. Staff retention within HEIW means that there is a risk of less internal opportunities, as well as opportunities to bring in new blood and innovative ideas from external candidates as vacancies are unavailable (Newton, 2019).

The talent and succession initiatives (ibid: 37; Tichy et al, 1982: 47; Fombrun; Beer; Lengnick-Hall *et a*l, 2009; Baird and Meshoulam, 1988; Wright and McMahan, 1992; Dyer and Holder, 1988; MacDuffie, 1995). Delery and Doty, 1996: 804; CIPD, 2020; Wright & Nishii, 2007; Fombrun et al, 1984: 26; SHRM, 2007; Taylor, 2017; Taylor & Woodhams, 2017; Hirsh, 2020; CIPD 2020, Croner, 2021; SHRM, 2021; Day, 2004; Groysberg *et al*, 2009) outlined within question 1 have no doubt also helped retention levels within HEIW and promoted HEIWs brand within and external to NHS Wales. This can be supported by a number of factors.

HEIW recognises without employees that are well at work the NHS can't perform or deliver quality and effective care to patients. HEIW advocate that all employees are provided with an environment and opportunities that encourage and enable them to make choices that support their well-being and lead healthy lives, which is supported by a staff health and wellbeing charter (Caring for People who Care, 2018; Caring to change, 2017). The NHS Wales Charter (2019) highlights the joint responsibility of managers and individual employees to work together, encourage healthier life style and choices, support each other in the workplace and promote effective management of sickness when employees cannot work through ill health or are at the risk of having to take sick leave (NHS Confederation, 2017;Caring for People who Care, 2018; Caring to change, 2017). The NHS Wales Charter (2019).

Within the people team we have used pulse surveys as a proactive method of engaging and consulting with employees to improve retention. This gives employees a voice (CIPD, 2020, 2021) and is a mechanism of check-in with the workforce regularly (Ellis, 2016; CIPD 2020). This is reflected within

HEIW's 12-month rolling turnover rate for HEIW for the period to August 2020 which was 8%, an increase of 0.3% since the previous report (Levinson, 2007a; Demourouti et al. 2001, cited in Sonnentag, 2003) indicating the above EE programmes have had a positive impact on HEIW turnover (Blain, 2020). This is still relatively low given our newness but is at a level which continues to support business continuity and organisational memory whilst also bringing in new thinking and new ideas. BlessingWhite (2008) reports that 85% of engaged employees plan on sticking around compared to 27% of disengaged employees. In addition, 41% of engaged employees said that they would stay if the organisation is struggling to survive. All factors support and suggesting that employees are highly engaged, have a better WLB and presenteeism is not a concern nor evident within HEIW. It is hoped this will continue post pandemic when the office will return to a 60 / 40 working environment, where employees continue to feel engaged.

Engagement levels across HEIW are evident and generally high, supported by delivery of organisation objectives, general observations, and positive pulse survey results (Hemp, 2004; Baker-McClearn et al, 2010; Aronsson and Gustafsson, 2005) i.e. The HEIW 2020 mini working from home pulse survey demonstrated that of the 187 respondents, 40% indicated that there were WLB challenges at the start of the pandemic however, they have been able to overcome them: 21% balancing work with parental / caring responsibilities. 38% felt the experience was better than expected, 20% indicated that working from home is a positive experience and 22% suspect that working from home could be the new normal post COVID-19. The 2020 mini HNA also demonstrated employee job satisfaction has increased by 10% since 2018. There has been a significant reduction in those staff who think they are suffering or have suffered from fatigue. Since 2019, a 2% decrease was evident in individuals who usually experience good or fair energy levels. Those who maintain very good energy levels have experienced a 6% increase. Evidence from the 2018 HEIW HNA, 2019 follow-up HNA and the 2019 FW survey and secondary data sources, indicated that enabling employees to have a balance between their private lives and paid work can lead to a reduction in absenteeism, improved recruitment and retention, employee commitment and productivity.

To continue driving engagement through Healthy Working Relationships (Gallup, 2018; Naber, 2007), HEIW's Leadership and Succession planning team have developed training modules that explore the importance of communication, building rapport, exploring assertive behaviors and tips for courageous conversations. How to manage relationships that have declined and need restoration i.e. ways of restoring relationships and the best way to use the new Respect and Resolution policy.

To continue driving EE within HEIW an NHS Wales Colleague Engagement and Experience Steering Group (CEESG) has been established to promote and give direction to these Wales activities (Shape of the workforce document; NHS Employers, 2013; NHS Confederation, 2017; Imison et al, 2009; Parliamentary Review, 2018; HEIW, 2020). The Group brings representatives from the Welsh Government, Health Boards / Trusts and Trade Union and Social Care partners together to draw on and provide a focus for the knowledge and experience of existing networks and resources; support a consistent approach to the sharing of knowledge, ideas, to promote good practice and innovation and facilitate the scaling up and implementation of ideas on a once for Wales basis. It also provides a mechanism to ensure that opportunities to further improve Colleague Experience and Engagement are highlighted as appropriate and are taken forward collaboratively, and in partnership with Trade Unions and Social Care.

ev34

GIG CYMRU NHS WALES

Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Health Education and Improvement Wales

Agile Working Policy

Policy Owner:

Approved by:

Issue Date:

Review Date:

Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

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FIGURE 3: *Transformational coaching is the practice of emotional intelligence*

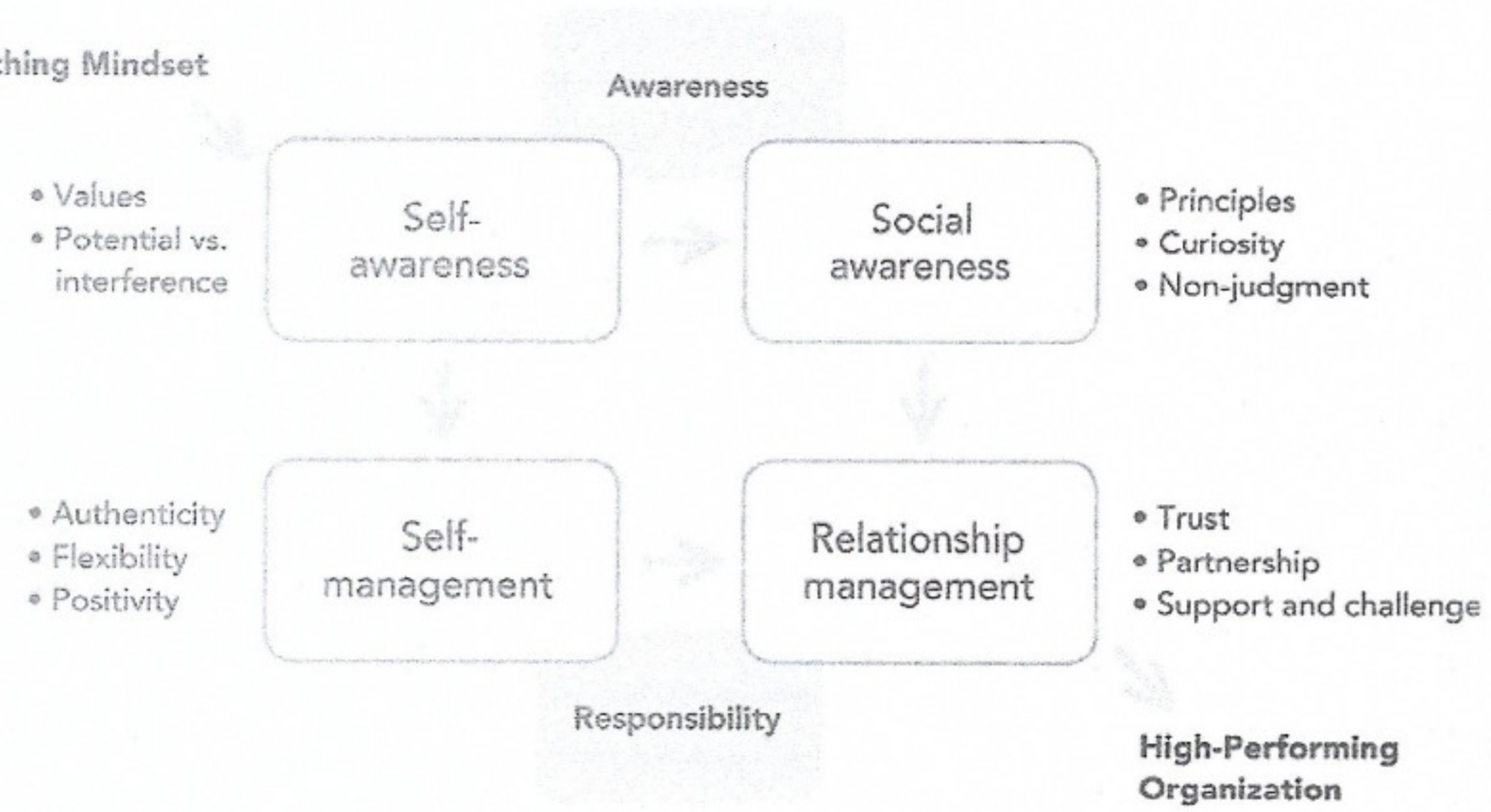
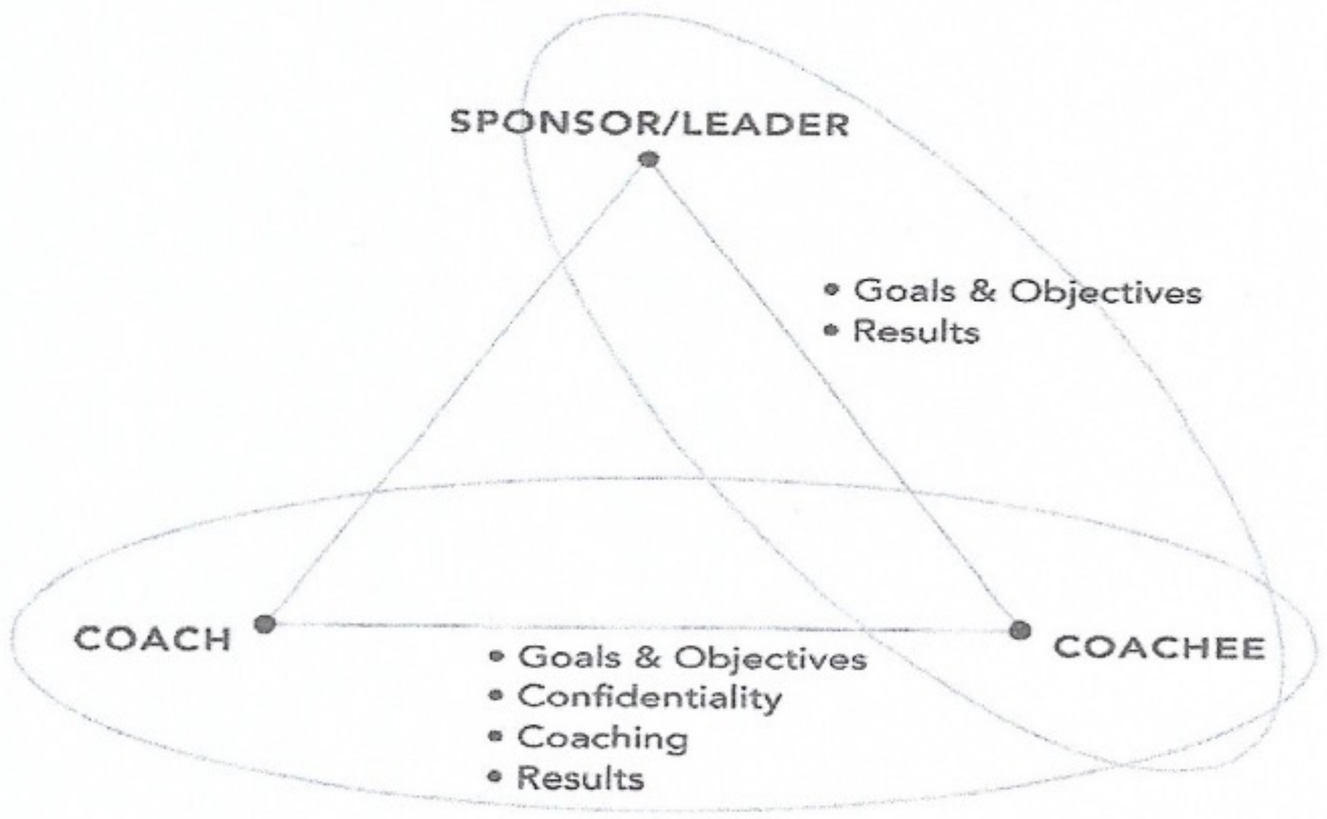


FIGURE 15: *Confidentiality is key to the coaching relationship*



Whitmore, J. (2017) Coaching for Performance – The principles and practices of coaching and leadership (5th Edition). Nicholas Brealey Publishing, London.

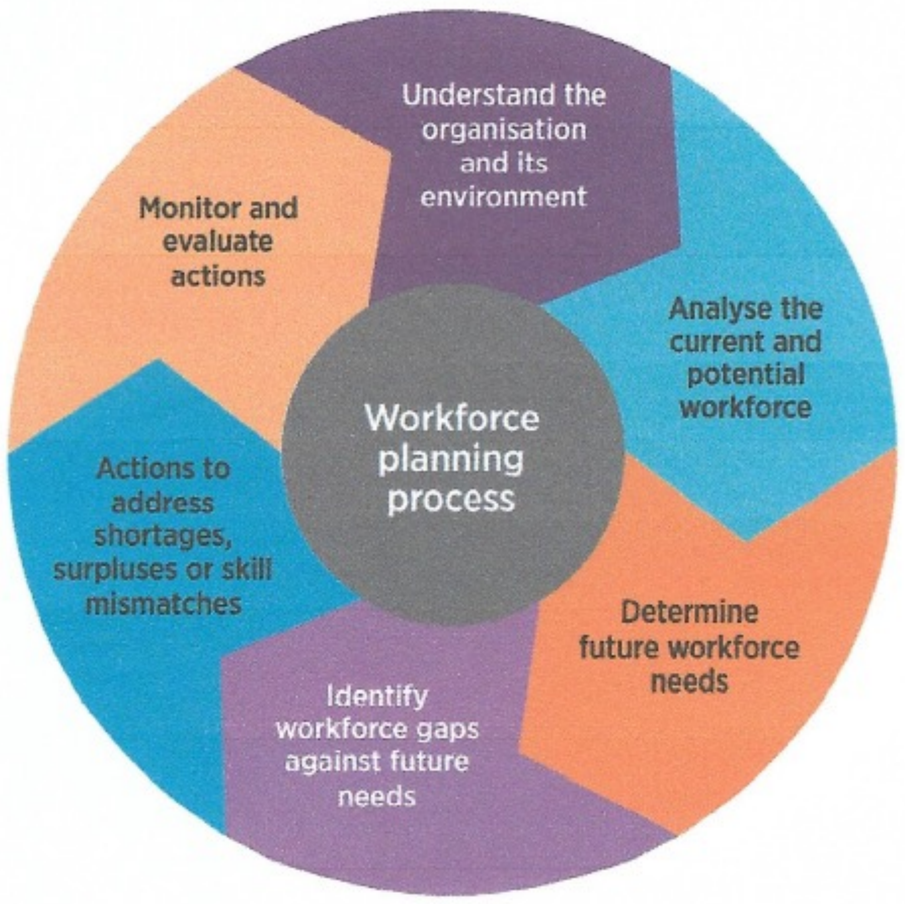
Evidence 36 - HEIW Compassionate Leadership Aligned to Quality Improvement (2020)



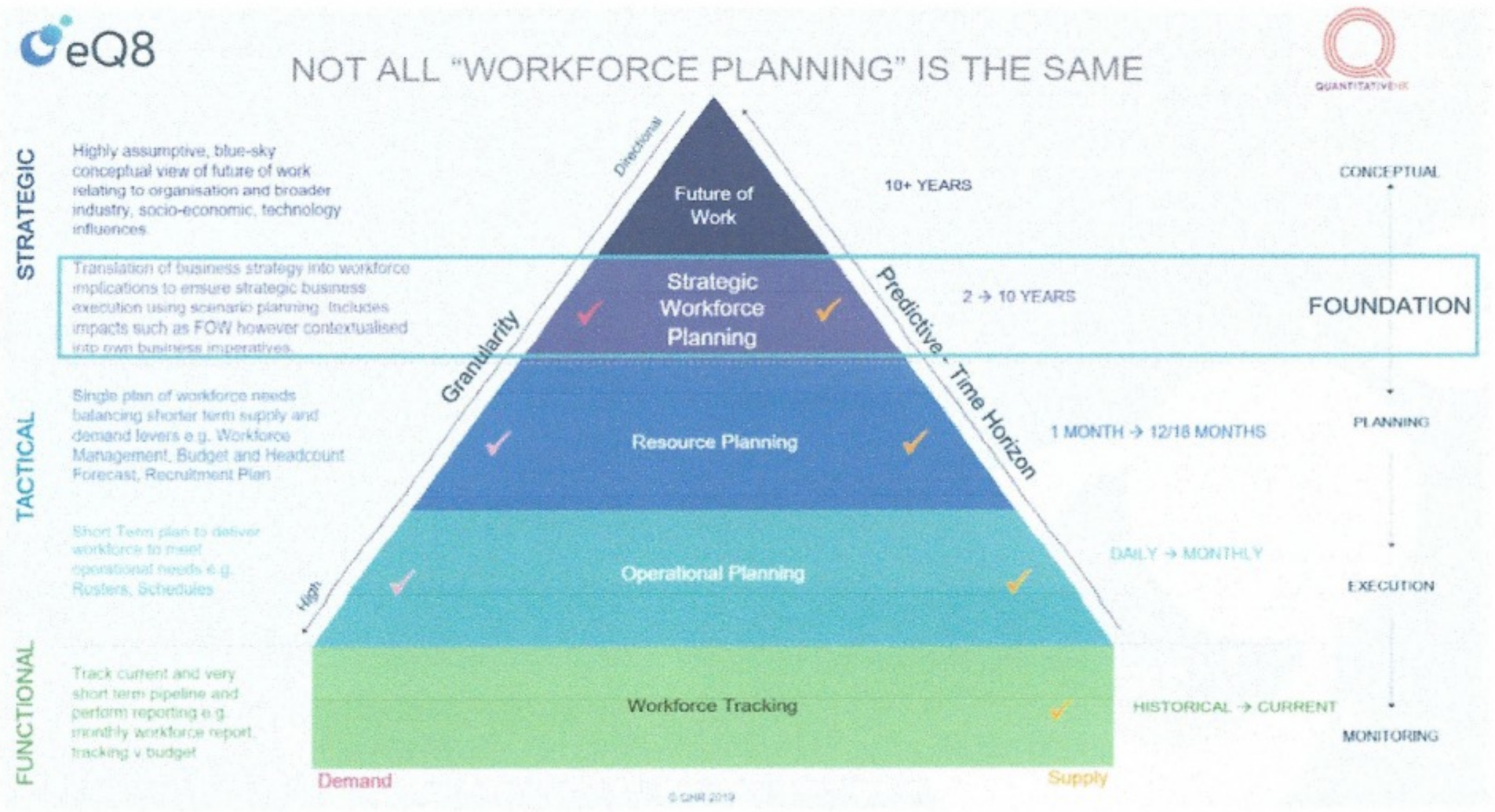
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[Workforce planning practice | CIPD | Guidance]

Figure 3: Steps in workforce planning process



Strategic vs operational workforce planning



[The Path to Transformation and Organisational Effectiveness? (aka Strategic Workforce Planning) | myHRfuture]

Stages of Workforce Planning

CIPD (2021) Available at: workforce-planning-guide_tcm18-42735.pdf (cipd.co.uk)

1. Understand the organisation and the operating environment:

Consider factors such as organisational structure currently and in the future. Consider future plans such as organisational structure / change etc.

2. Analysing the workforce

Analysing the workforce: undertake a workforce analysis and identify talent profile, skills, and knowledge along with attrition rates. Also engage with employees and gather information on employee views such as a staff survey, satisfaction surveys, Health needs assessments. This will produce information regarding how employees feel about job security, health and wellbeing, organisational culture, satisfaction, and intention to leave. Assess how work is resourced, demographics differences such as age, geographical location etc and contractual arrangement / differences and impacts this may have on the workforce.

3. Determine future workforce Need:

Identify future capabilities and skills and forecast the timeframe needed. Undertake scenario planning to establish how different situations may impact the workforce and requirements. This will help facilitate and formulate contingency / adaptive organisational plan to achieve aspirational future business case goals.

4. Identify gaps in workforce skills and knowledge:

Look a factors such as the gig economy and the future impact; future roles will require better digital and technological awareness.

5. Develop an action plan that has functional, numerical, and adaptable flexibility:

A flexible / agile workforce can aid a proactive change- ready organisation to adapt to change when required.

6. Monitor, evaluate action plans and solutions:

Organisations should formulate, develop, and agree actions with suitable support and information manager can use detailing regular updates of outcomes. Evaluation processes should be clearly embedded into all stages of the process.

CIPD (2020) Workforce Planning

Workforce Planning can offer market and industry intelligence and help organisations to focus on:
Reducing labour costs in favour of workforce deployment and flexibility
Responding to the needs of their customer base
Identifying skills gaps and areas of succession risk
Relevant strategies for talent management and people development
Targeting specific and identified inefficiencies
Employee retention initiatives.
improving the quality of outputs
Improve organisational retention, employee productivity, output, and work-life balance
Recruitment and training responses to changes in the education system
Organisations can identify appropriate strategies for focused people development
Make recommendations to deliver strategic value (ROI) through talent

Best Practice

This can inform HR best practice:
Retention planning initiatives, such as learning and development, flexible working and well-being.
Recruitment and selection processes, along with job design
Talent and succession planning
Organisational design and development
Reward and recognition

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Skill gap analysis

Page 1: Page 1

HEIW is committed to supporting individuals to be the best they can. To help us achieve this, we are conducting a workplace skills analysis to identify the development needs of the organisation. This will allow us to identify common themes across the organisation and identify where there are opportunities to support our values by working as a team to improve individual and team abilities to perform at their best.

Our behaviours ask that we drive innovation and improvement for staff as well as patients and learners. To do this, we are looking to identify staff who have enhanced skills in workplace practices to become mentors to others and share their expertise and knowledge, to increase the skills within our organisation to support the delivery of our objectives. Not only with this help to provide staff with the skills and knowledge they need to perform their roles to their full potential, but offer proficiently skilled individuals to support their colleagues and develop their skills. Providing these opportunities within the organisation, will contribute to our values – together as a team and ideas that improve.

Health Education and Improvement Wales (HEIW) Consultation and Surveys Privacy Notice

https://heiw.nhs.wales/files/privacy-policy-for-consultations-and-surveys/

Page 3

1. **Please select which of the following options you consider yourself to be with regard workplace skills and practices.** ✱ *Required*

Please don't select more than 1 answer(s) per row.

Please select at least 1 answer(s).

	No knowledge	Some knowledge	Sufficient knowledge	Significant knowledge	Expert knowledge
Microsoft Word	☐	☐	☐	☐	☐
Microsoft Excel	☐	☐	☐	☐	☐
Microsoft Powerpoint	☐	☐	☐	☐	☐
Databases	☐	☐	☐	☐	☐
Surveys	☐	☐	☐	☐	☐
Delivering presentations/public speaking	☐	☐	☐	☐	☐
Financial processes	☐	☐	☐	☐	☐
HR processes	☐	☐	☐	☐	☐
Project management	☐	☐	☐	☐	☐
Infographic design	☐	☐	☐	☐	☐
Coaching	☐	☐	☐	☐	☐
Mentoring	☐	☐	☐	☐	☐
Leadership	☐	☐	☐	☐	☐
Report writing	☐	☐	☐	☐	☐
External communications	☐	☐	☐	☐	☐
Social media for business use	☐	☐	☐	☐	☐
Website design	☐	☐	☐	☐	☐
Microsoft Teams	☐	☐	☐	☐	☐
SharePoint	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐

2. If you selected other, please state what skill and your level of competency.

Page 4

3. **Would you like support and/or training to develop your skills in any of the above areas?** *Required

- Yes
- No

4. **Which area/s would you be most keen to develop?**

- Microsoft Word
- Microsoft Excel
- Microsoft Powerpoint
- Databases
- Surveys
- Delivering presentations/public speaking
- Financial processes
- HR processes
- Project management
- Infographic design
- Coaching
- Mentoring
- Leadership
- Report writing
- External communications
- Social media for business use
- Website design
- Microsoft Teams
- SharePoint
- Other

5. If you selected other, please state

Page 5

6. If you consider yourself to have significant or expert knowledge in any of the abovementioned workplace skills, would you be interested in undertaking a mentoring programme to enable you to share your knowledge and skills with other members of HEIW staff to support their development needs? *

Required

- ☐ Yes
- ☐ No
- ☐ N/A

Page 6

7. **Which area would you like to provide support with?**

- ☐ Microsoft Word
- ☐ Microsoft Excel
- ☐ Microsoft Powerpoint
- ☐ Databases
- ☐ Surveys
- ☐ Delivering presentations/public speaking
- ☐ Financial processes
- ☐ HR processes
- ☐ Project management
- ☐ Infographic design
- ☐ Coaching
- ☐ Mentoring
- ☐ Leadership
- ☐ Report writing
- ☐ External communications
- ☐ Social media for business use
- ☐ Website design
- ☐ Microsoft Teams
- ☐ SharePoint
- ☐ Other

8. If you selected other, please state

Page 7

9. Please provide your name and email address and the People Team will be in touch with you about developing your mentoring skills to support the wider organisation. * *Required*

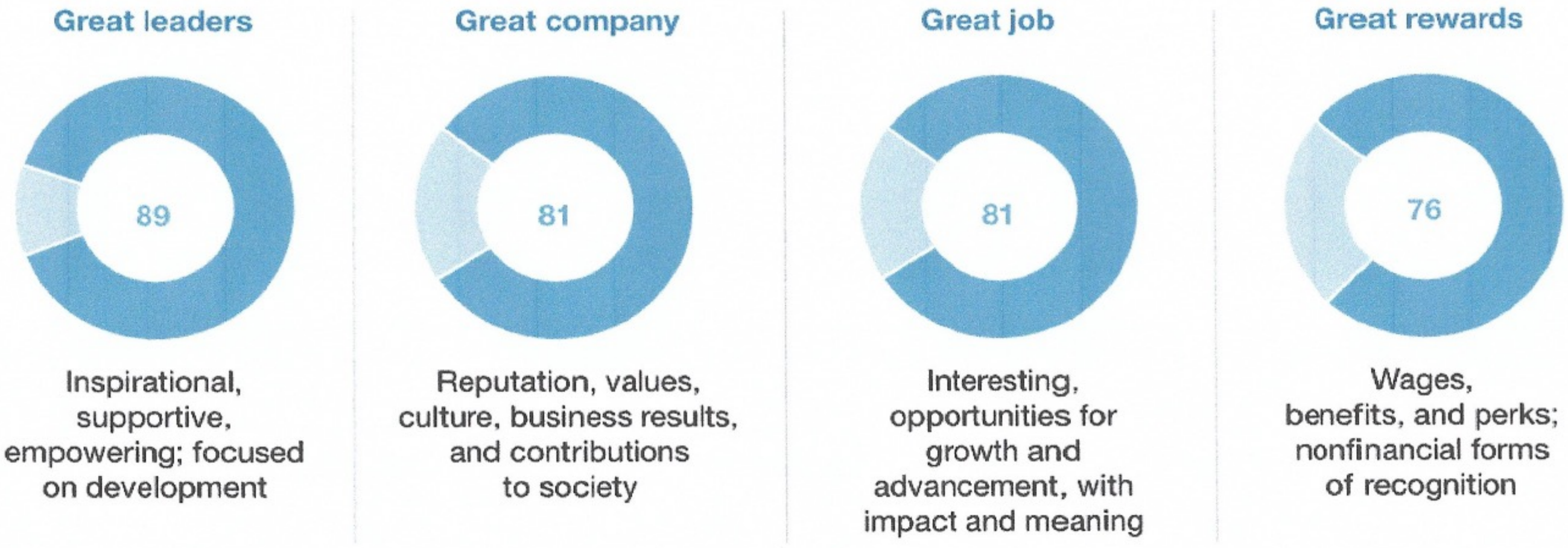
Page 8: Final page

Thank you for taking the time to complete this survey.

Following evaluation of this survey, the People Team hope to be able to provide staff with learning opportunities to develop their skills and knowledge in these areas.

One of the four elements most valued by top talent should be a source of distinctiveness.

% of employees satisfied when their companies deliver



McKinsey&Company | **Source:** "McKinsey Global Survey: War for talent 2000," refreshed in 2012

By 2030 leaders will display collective and compassionate leadership, evident of coaching principles.

Link to 2030 workforce strategy pic: 7 principles have been created heave a framework that links to compassionate leadership principles, action 25, 26, executive leadership programme, 27. HEIW ARE RESPONSIBLE FOR ensuring NHS Wales We have a robust pipe line of aspiring CEO and directors.

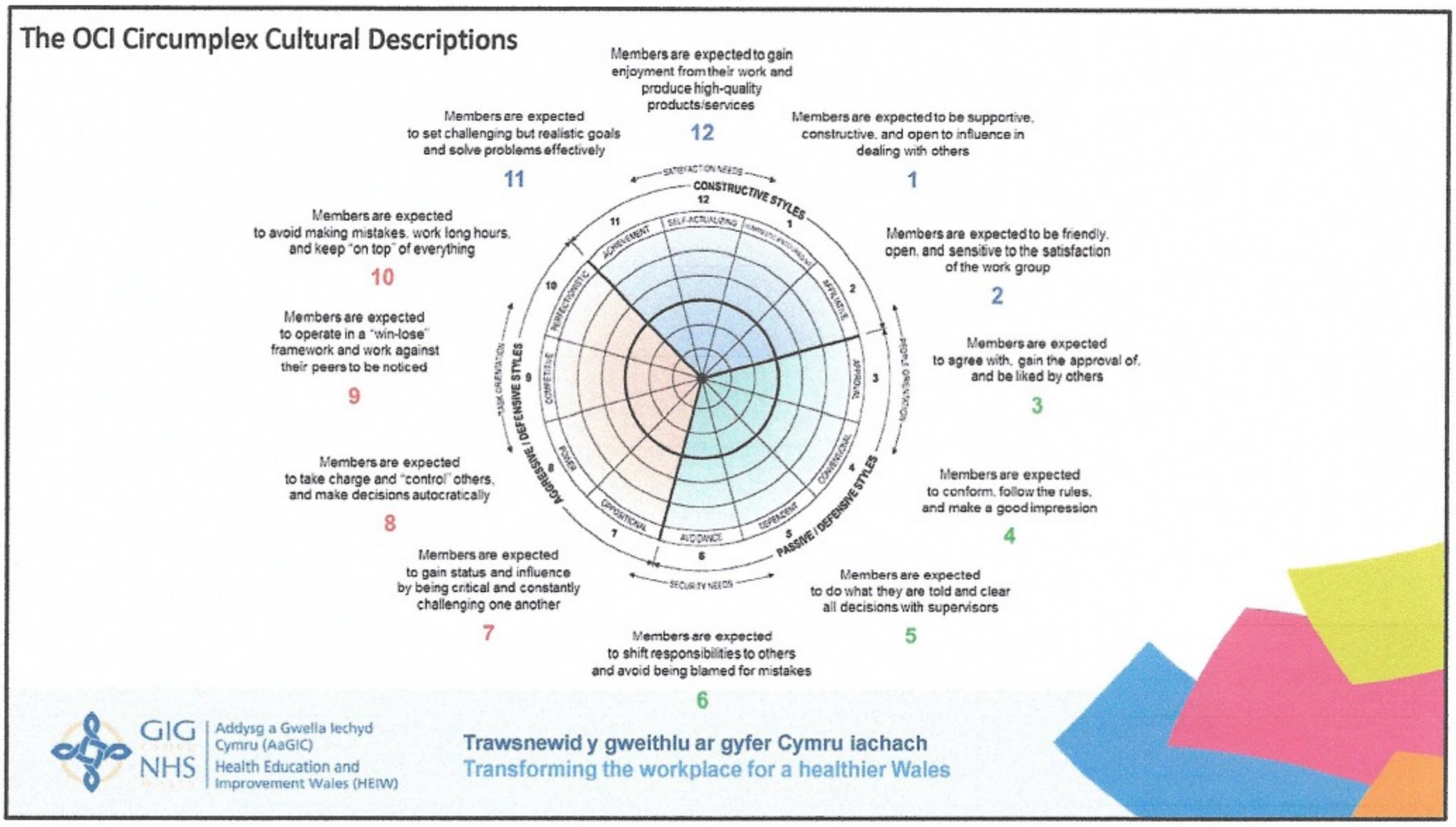


Compassionate Behaviours Compass



How do we demonstrate compassionate leadership? By:

- Creating cultures where teams feel safe to be open about challenges, share their ideas and share a vision.
- Providing regular time for team reflection to enable sharing of learning and experiences.
- Connecting fully with colleagues and users of our services with the intent to help and support.
- Taking the time to listen in order to understand the challenges that colleagues and those we lead face in their work



Constructive Cultures are associated with effective organisations.

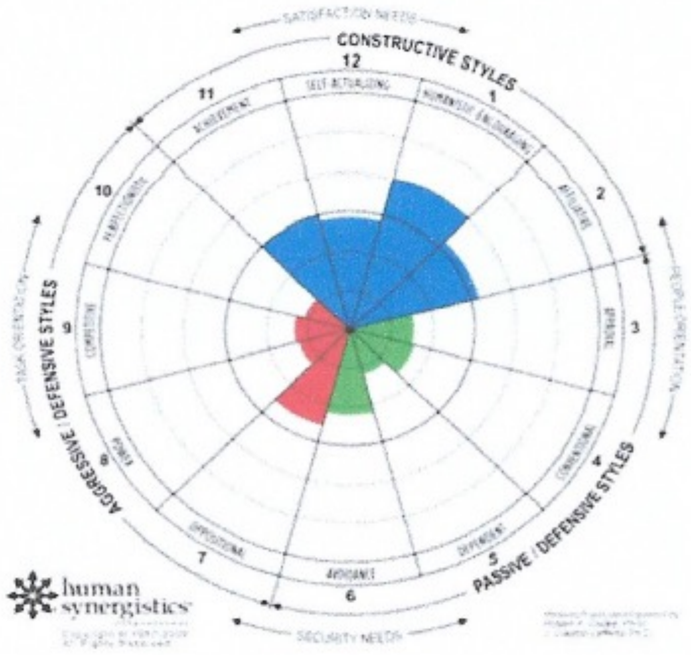
Passive Defensive cultures are about survival/security/keeping your head down
Aggressive Defensive is about survival by competing, controlling, arguing etc

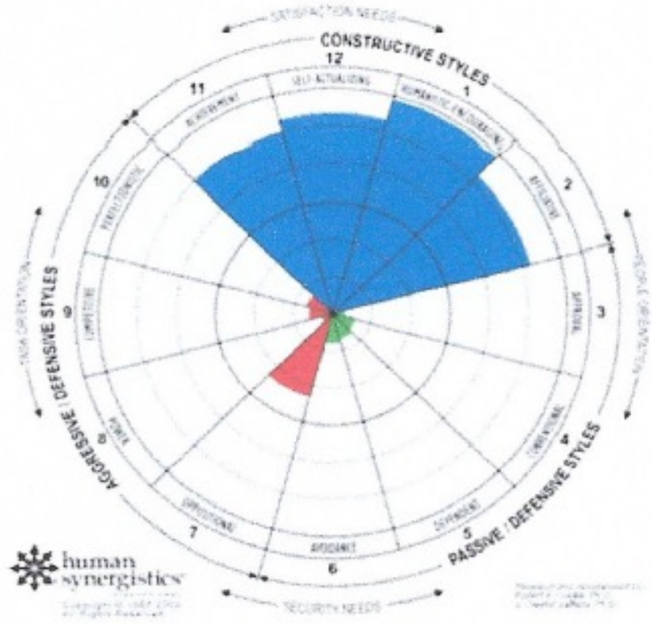
They all serve a purpose – Banking tends to have consciously drive for some red (targets, competition etc) whereas public sector is often more passive, regulation and conforming (huge generalisation but borne out of the research

All organisations when describing their ideal are predominantly constructive

Black circle in middle is 50%ile – anything above this is likely to be a noticeable cultural norm in the organisation
Less than 50% then it is there but less stringly)or in pockets/not frequent or not consistent

HEIW Gap between Current (2018) and Ideal





GIG NHS | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Trawsnewid y gweithlu ar gyfer Cymru iachach
Transforming the workplace for a healthier Wales

The wheel on the left shows HEIW's culture prior to establishment in October 2018. This demonstrates some negative culture elements that go against a culturing culture, including task orientation behaviours, which are aggressive/defensive in style as well as some security needs, demonstrating passive/defensive behaviour. These culture behaviours can be a barrier and there needs to be a strong shift towards more constructive culture styles.

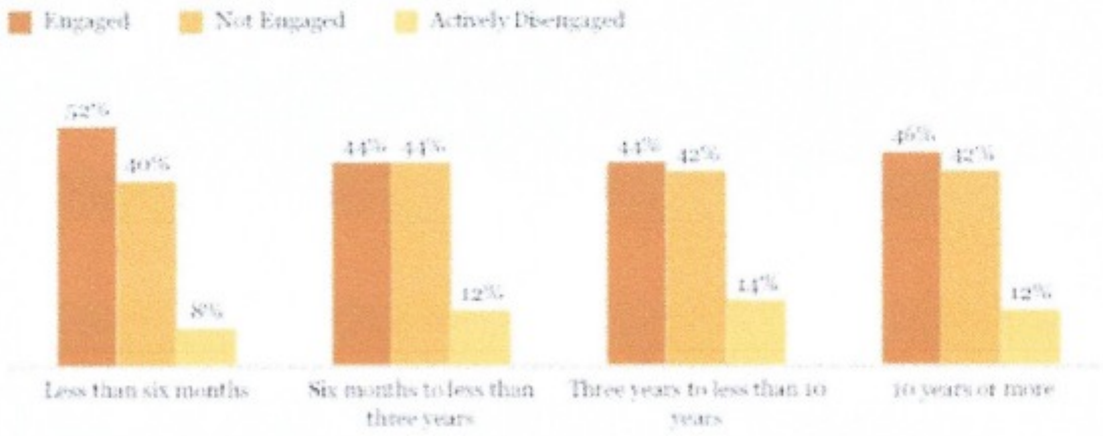
Prior to October 2018, staff in legacy organisations were asked what culture they would like to see (right hand side wheel). They said they wanted to have a culture that used more constructive styles encouraging supportive, constructive styles when dealing with others as well as being open. As HEIW builds on the development of a coaching culture, this shift should naturally happen.

The culture assessment is due to be repeated shortly and it will be interesting to see what impact the initiatives carried out over the preceding two years has had on the organisation culture and whether the organisation has moved towards a more coaching culture, using more supportive and constructive styles.

EV 44

The Engagement Honeymoon Period

Workers are more engaged during their first six months — the "honeymoon period" — than they are at any other stage in their employment with a company. About half (52%) of employees are engaged at this point while 40% are not engaged, and 8% are actively disengaged. After the honeymoon is over, engagement dips significantly, to 44% engaged among workers under the 10-year mark, and tends to remain flat for the duration of a typical employee's career.



GALLUP

https://news.gallup.com/businessjournal/163463/engaging-employees-honeymoon-period.aspx#:~:text=Workers%27%20relatively%20high%20engagement%20levels%20during%20the%20first,expectations%20and%20having%20opportunities%20to%20learn%20and%20grow.



https://www.pinterest.co.uk/pin/2425611299436797O2/

EV446

brightwave GROUP

The 5 I's of Onboarding

Impression

Onboarding starts during the **attraction** and **selection phases**, so make sure these touch-points create a positive first impression of your organisation.



Induction

Onboarding is a journey and new starters need a **map!**



Create a **checklist of induction activities** to ensure new starters get the most out of their first few weeks of employment.

Integration

Think about the **social side** of onboarding and ensure new starters settle into their teams and connect with the right people across the organisation.



Immersion

Immerse your new starters in challenging and memorable **role play**, **simulation** and **VR activities** that facilitate learning-by-doing.



Independence



Build a blended learning ecosystem that supports **independent**, **self-directed learning**, so that new starters can keep improving and realise their **full potential**.

Pinterest

EV45

SWOT analysis of Change to onboarding process for new starters

Strengths	Weaknesses
HEIW has a clear set of values. "Together as a team, Respect for all & ideas that improve" The organisational values form part of all HEIW policies and processes	Availability of office space at home
	Difficulties with understanding organisational structure
	Inability to have face to face conversations with colleagues
	Training to be carried out virtually
Increase staff confidence in their abilities	Reliance on home broad band capability
Flexibility	More emphasis on self-directed learning regarding the business
Ability to meeting wider team colleagues	Difficulty with putting faces to names
Improved support networks	Inability to experience normal working environment
Line manager & team led	Significant screen time
Sense of belonging and improved wellbeing	
Access to mobile equipment	
Reduced need for travel	
Opportunities	**Threats**
Embed organisation values and compassionate leadership principles, setting clear expectations.	Inability to manage work and home life
Embed an effective support network that continues beyond onboarding.	Working longer hours – not knowing when to stop
Identify a set of working from home principles, supported by the Exec Team, to support health and wellbeing when working from home.	Negative impact on performance, relationships, health and wellbeing and engagement.
Measure employee engagement levels via pulse surveys and focus groups	Manager competence/confidence
	Burnout
Implementation of initiatives to replicate face to face interactions	Higher stress levels
	Inter-team silos/inter-team conflict – needs trust and honesty
Use learning to develop policies and procedures to support virtual working	Failure to form and maintain strong teams leading to: • lack of trust • poor performance • Inter-team conflict • Lack of commitment • Poor communication
Use results of NHS Wales staff survey to inform future plans and start conversations.	
Share learning with wider organisation to assist onboarding of future new starters	
	Presenteeism
	Lack of understanding of job purpose and expectations

EV46

HEIW PESTLE

Political – Government policies beneficial/detrimental to HEIWs success and whether the political environment is stable or likely to change.

Economic – Current economic performance affecting HEIW along with impact on revenue/costs – retirement and baby boom.

Social – Human behaviour or cultural trends have a role in HEIW. There has been a change in attitudes towards work and careers with the need to find a work life balance becoming an increasingly important requirement for HEIW employees.

Technological – Innovation and technological advancements by recognising the need to make progress on the digital and technologies agenda going forward.

Legal - HEIW undertake EIAs for all new policies and procedures.

Environmental – Environment (Wales) Act 2016 – HEIW are prepared for future environmental targets.

EV47

Emma Carrington (HEIW)

From: Sharon Evans (HEIW)
Sent: 08 January 2021 16:13
To: [redacted]
Cc: Emma Carrington (HEIW)
Subject: RE: CIPD - Contributing to the Management of Change
Attachments: Gantt Chart - onboarding.xlsx; HEIW New starters Checklist - First 90 days.docx; Change Plan - onboarding.docx

Hi both,

Thank you for your email.

As outlined in the below information, I approached Ruth and Emma to design a blended (but predominately virtual) induction process to welcome new starters to the Workforce and OD Directorate – two of which would be joining my team. Whilst HEIW has a robust induction programme, due to Covid-19 we needed to ensure new starters felt as welcomed and had access to all necessary resources via a virtual process as they would have done through the existing in-person approach. Both Ruth and Emma approached this methodically, taking the time to review and assess the existing process and translating this into a virtual process. The process they devised ensured our new starters felt welcomed, by arranging pre-start date introductory meetings with the team, arranging IT equipment to be ready on their start date and explaining what to expect in the first three months of joining the organisation.

Starting a new role and joining a new organisation is both an exciting and nerve racking experience. This was further perpetuated by the current situation and there was the potential for our new starters to feel isolated by having to work virtually. Ruth and Emma addressed this issue by setting up an informal peer support group, which supplemented 1:1 meetings with their respective line managers. It also allowed our new starters to connect with others in the same position and have a place where they could access hints, tips and support from Ruth and Emma.

I look forward to reviewing the results from the pulse survey and focus group with Ruth and Emma. Initial feedback through my 1:1 meetings with new team members has confirmed that this process has been a success.

Cofion caredig Kind regards

Sharon

Sharon Evans
Pennaeth Gyrfaoedd ac Ehangu Mynediad Head of Careers and Widening Access
Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)
Telephone: 01443 846388
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@AaGIC_GIG **@HEIW_NHS** **@NHSWalesCareers**
NHSWalesCareers

Helpwch arbed papur – oes angen i chi printio'r e-bost yma?
Help save paper - do you need to print this e mail?

From: [redacted]
Sent: 07 January 2021 08:38
To: Sharon Evans (HEIW) <Sharon.Evans25@wales.nhs.uk>
Cc: Emma Carrington (HEIW) <Emma.Carrington@wales.nhs.uk>
Subject: CIPD - Contributing to the Management of Change

Morning Sharon

I am just writing to confirm the discussions and agreement that occurred with yourself, Emma and I back in August regarding the onboarding/induction for the three new starters in the Workforce & OD Directorate. Below is a summary of our initial conversation along with attachments outlining the change plan, first 90 day induction checklist and gantt chart highlighting the key milestones of the project.

I would be grateful if you could review and confirm that this is an accurate record and the documents reflect what was agreed.

Emma and I were approached by Sharon Evans, Head of Careers and Widening Access to ask for assistance to support our CIPD studies with developing an adjusted onboarding/induction process for the three new starters due to join the Workforce and OD Directorate in mid August . The process would need to be tailored to take account for the covid-19 restrictions and the inability for normal processes to be followed due to the requirement for all staff to work from home, with limited access to the building. We recognised that joining an organisation in a predominately virtual way would be a significant change for both the new starters and us as a directorate and more effort would be required to ensure that they felt welcomed to HEIW, understood their role and responsibilities and how they fit within the wider context of the organisation. It would important that broader support mechanisms were in place and it was suggested that a peer support group was set up, including the new starters and current W&OD administrative staff to enable a safe place to talk about how they were feeling, ask for support with tasks and allow a safe space to discuss concerns and worries that may not feel they wished to bother their line manager with. It was agreed that approval to set up this group would be gained from Angie Oliver, Deputy Director of Workforce & OD as it affected administrative staff from outside the team the new starters were joining.

It was agreed that Emma and I would develop a check list for new starters to ensure that key milestones relating to their induction were not missed covering mandatory elements such as induction, mandatory training, objective setting along with identification of IT systems they would require training on, pastoral support mechanisms and key documents to aid understanding of the organisation. This would be supported by a Gantt chart that highlighted the key milestones in the project and whose responsibility the task was assigned to and allow monitoring of the change project.

It was agreed that informal monitoring of the project would be undertaken via the peer support group, with Emma and I checking in on the new starters to see how they were doing and settling in and if there was any support that was required, alongside line manager led 1:1 meetings with individuals. A pulse survey will be undertaken in October/November time followed by a focus group at the beginning of January to assess the effectiveness of the changes and make any amendments that could be applied to future new employees.

Many thanks

[redacted] & Emma

[redacted]

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[redacted]

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Telephone: 01443 846380

EV48

Emma Carrington (HEIW)

From: Angie Oliver (HEIW)
Sent: 16 July 2020 10:20
To: [redacted]
Subject: RE: idea for new starters in W&OD

Follow Up Flag: Follow up
Flag Status: Flagged

I think this is an excellent idea – thank you

Cofion cynnes

Angie

Mrs Angie Oliver
Deputy Director of Workforce & Organisational Development
Health Education and Improvement Wales (HEIW)
Tŷ Dysgu
Cefn Coed
Nantgarw CF15 7QQ

☎Ext: 4175
☎External: 01443 824175 / 07583 097014

Email:Angie.oliver@wales.nhs.uk
heiw.nhs.wales

Mrs Angie Oliver
Dirprwy Gyfarwyddwr Gweithlu a Datblygiad Sefydliadol
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E-bost: Angie.oliver@wales.nhs.uk

See our NHS Wales Staff Wellbeing Covid -19 Resource

aagic.gig.cymru

@HEIW_NHS

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Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

@AaGIC_GIG

From: Ruth Taylor (HEIW) <Ruth.Taylor@wales.nhs.uk>
Sent: 16 July 2020 09:24
To: Angie Oliver (HEIW) <Angie.Oliver@wales.nhs.uk>
Subject: idea for new starters in W&OD

Hi Angie

Emma and I have been having a think about how we welcome the new team members in the worforce and careers teams and and thought it would be nice to set up an informal group with myself, Emma and Laura so the new members would have people they could ask for help with tasks etc. This would remove the necessity for them to go straight to their line managers. Also thought it would help them feel part of the wider team and supported. My thoughts were that we could meet weekly/fortnightly and talk a little bit about what we are working on, any challenges and also a bit of friendly chat.

Was concerned that with the current situation, they would feel a little isolated and they may be more confident to ask us for help rather than escalate small issues.

What do you think? I mentioned it to Clem and she thought it was a good idea. Would just need to speak to Claire and Sharon.

Thanks

[redacted] & Emma

[redacted]

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Web: heiw.nhs.wales
@HEIW_NHS

NHS Wales welcomes correspondence in Welsh or English. Corresponding in Welsh will not lead to any delay.

Mae GIG Cymru yn croesawu gohebiaeth yn Gymraeg neu yn Saesneg. Ni fydd gohebu yn Gymraeg yn creu unrhyw oedi.

EV 49

Evidence 6

Change Plan

Created by	Emma Carrington
Date	1 August 2020
Version	1

Vision and Objectives
To enable HEIW to continue to recruit to vacant and new posts during the COVID-19 pandemic and associated restrictions, the onboarding process for new starters needs to be adapted to ensure new starters feel supported, capable of carrying out their duties effectively and are able to perform at the necessary level, whilst feeling part of the HEIW wider family and are able to contribute in a way that adds value. A successfully adapted onboarding process to support new starters will aid retention and ensure they can perform at the same level should they have progressed through the original onboarding process, involving full attendance at the office. The process will need to be predominately virtually, with attendance at the office if restrictions allow.
Activities to achieve objectives *(attach Gantt chart)*
• Pre-start date introductions to immediate team • Sharing of key organisation documents – values, induction handbook • Face to face immediate team introductions • Provision of IT equipment and training on use • Set up of peer support group and regular meetings diarised • Directorate team introductions • Corporate induction • Wider organisation introductions • Pulse survey • Amendments
Business case *(evidence-based - include data, benefits of change, gap analysis – difference between current and future states, issues and risks)*
Benefits Demonstration of HEIW values – together as a team, respect for all, ideas that improve Develop sense of belonging and improved wellbeing Flexibility Ability to meet wider organisation colleagues Improved support network, offering a safe space to talk about how they are feeling, performance and ask for assistance from their peers. **Issues/risks** Feeling of isolation Not understanding role purpose Lack of confidence Burnout Presenteesim Significant screen time
People affected *(stakeholders – employees, particular employees, customers, shareholders)*
New starters

Scope of change *(eg one site, one product group)*
Workforce & OD Directorate only with the intention to share experiences and learning with the People Team, allowing wider sharing with the organisation.
Roles *(project manager, sponsor, team members)*
Lead – Line Managers Change champions – Emma Carrington and xxx IT department People Team Wider teams
Communication strategy *(attach communication plan, list of change champions)*
See attached
Support to be offered (*advice, counselling, coaching, mentoring, representation, training - attach, for example, a training plan)*
Directorate peer support and regular 1:1 meetings with line manager and immediate team
Timings and milestones *(see Gantt chart)*
As above Onboarding starts prior to start date and runs over the first three months in post, with continued support offered thereafter as required.
Resources required, including cost *(equipment, time, people, materials, guidance)*
IT equipment Protected time to attend peer support group Allowance of time to attend induction, training etc Access to business related documents (as appropriate)
Monitoring activities
Pulse surveys Focus group
Success Measures
A positive response to pulse surveys in relation to the first three months in post. New starters feel included, feel they are adding value and are confident that support is available to them if required.

EVSO

COMMUNICATION PLAN

Company profile	HEIW is a Special Health Authority and is the 11th member of the NHS Wales family. It has a leading role in the education, training, development and shaping of the healthcare workforce in Wales, supporting the healthcare needs of the Welsh population. It employs 450 staff, the majority of which work from their main offices in Cardiff with the remainder working remotely across Wales.
Issue	The COVID-19 pandemic and associated restrictions lead to all recruitment in HEIW being stopped due to the inability for candidates to undergo face to face interviews and the inability to provide an effective induction process to new starters. With the roll out of technology including Microsoft Teams, HEIW were able to restart recruitment. However, it was quickly realised that the onboarding process would need to be adapted to ensure new starters felt welcomed to the organisation, understood their role and responsibilities and had the necessary support in place to ensure a smooth transition into both the workplace and a new way of working.
Research	According to Glassdoor a strong onboarding process improve new hire retention by 82 percent and productivity by over 70 percent (Laurano, 2015) CIPD 2020 Resourcing and talent planning survey, discovered 42% of organisations are improving their induction process to enhance retention (CIPD, 2020).
Communication objectives	• Ensure new starters understand how they will be required to work • Ensure new starters understand what impact the restrictions will have on the way they work • How appropriate support will be in place to introduce them to the organisation
Audiences	New starters in the Workforce & OD Directorate
Key messages	• This is a significant change for everyone • The adaptations are intended to lead to a positive induction experience • All necessary support will be available and continue to be so
Tactics/channels	• Line managers via 1:1s and team meetings • Team members • Change champions via peer support group
Risks	New starters feel isolated and do not undergo satisfactory onboarding/induction, leading to a negative impact on wellbeing, causing demotivation, decreased performance and feeling undervalued. This could ultimately lead in new starters leaving the organisation.
Measurement	Frequent staff engagement to measure effectiveness of change and the impact it is having on individuals and their teams. Make use qualitative measures, including pulse surveys and focus groups.
Review	Ongoing review and reflection to measure success and impact, make adjustments and recommendations to be shared with the wider organisation.

Change Champions

Change Champion	Department
Exec [redacted]	[redacted]
J [redacted] A [redacted]	People Team
S [redacted] M [redacted]	Workforce Transformation
B [redacted] B [redacted]	Health & Safety
C [redacted] P [redacted]	Corporate Services and Planning
C [redacted] P [redacted]	Workforce Planning
[redacted]	[redacted]
Emma Carrington	Health & Wellbeing
K [redacted] M [redacted]	Dentistry
M [redacted] A [redacted]	Pharmacy
T [redacted] L [redacted]	Secondary
H [redacted] B [redacted]	Primary Care
R [redacted] B [redacted]	Finance
A [redacted] P [redacted]	Comms
J [redacted] B [redacted]	Digital
L [redacted] W [redacted]	Professional Support Unit

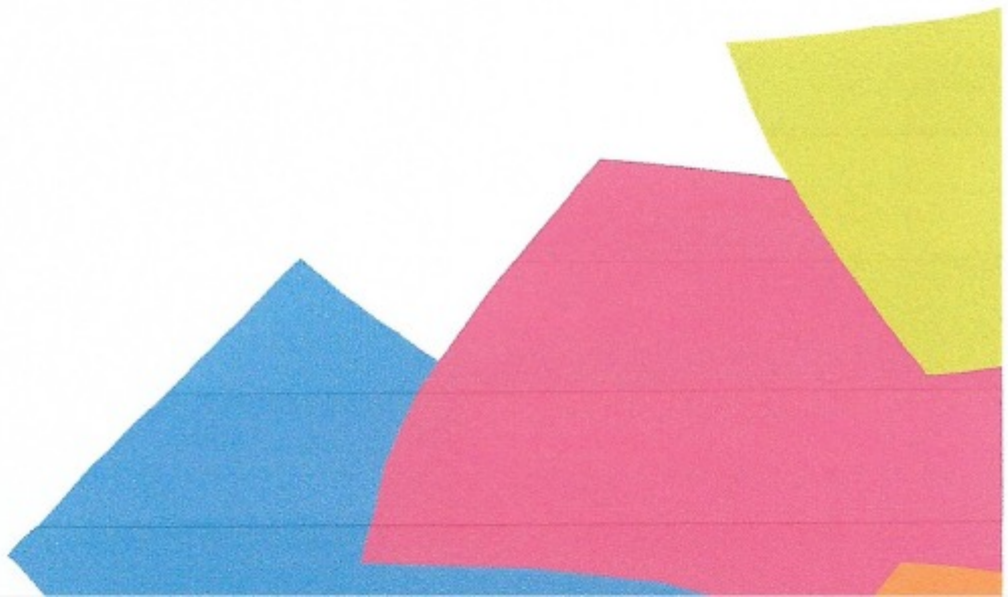
EV 51

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HEIW New Starters Checklist – First 90 days

	Day 1	Week 1	Month 1	Month 2	Month 3
Meet the team	✗				
Team/HEIW overview	✗				
Tour of the building	✗				
ID badge	✗				
IT setup/collection	✗				
Printer setup	✗				
Sickness process	✗				
DSE/Risk assessments	✗				
Mandatory					
Corporate Induction			✗		
Mandatory training			✗		
Objective setting			✗		✗
Personal details on ESR		✗			
Technology					
Using ESR		✗			
Using Teams/Skype	✗				
Using Expenses				✗	
Using Service Desk				✗	
Room bookings		✗			
Intranet		✗	✗		
Using Oracle				✗	
Using Y Ty Dysgu			✗	✗	✗
Pastoral					
WOD Peer support group			✗	✗	✗
H&WB web pages		✗			
Social teams channels			✗		
Organisational groups			✗	✗	✗
Meet other teams			✗	✗	✗
Regular team catch ups	✗	✗	✗	✗	✗
Key documents					
IMTP		✗			
A Healthier Wales			✗		
Future Generations			✗		
Workforce Strategy for H&SC			✗		
Key HEIW policies			✗		
Other					
Tasks to increase understanding of team and HEIW		✗	✗	✗	✗

*Timescales are subject to change due to COVID-19



EVS2

Onboarding plan

	03/08/2020	10/08/2020	17/08/2020	24/08/2020	31/08/2020	07/09/2020	14/09/2020	21/09/2020	28/09/2020	05/10/2020	12/10/2020	19/10/2020	26/10/2020	02/11/2020	09/11/2020	16/11/2020	23/11/2020	30/11/2020	07/12/2020	14/12/2020	21/12/2020	28/12/2020	04/01/2021	11/01/2021	18/01/2021
Individual Pre-start date introductions																									
Team pre-start date introductions																									
Start date																									
Face to face team introductions																									
Provision of IT equipment & training on use																									
Bi-weekly 1:1 meetings with line manager																									
Bi-weekly team meetings																									
Peer support group meetings																									
Directorate team introductions																									
Corporate inductions																									
Wider organisation introductions																									
Pulse survey																									
Pulse survey analysis																									
Focus Group																									
Recommendations for improvement																									

Responsibility	
Line Manager	
Emma Carrington	
[redacted] & Emma Carrington	
Other (IT, People Team etc)	

EY53

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Health Education and Improvement Wales (HEIW)

03/09/20: Peer Support Group Introductory Meeting:

Emma Carrington (Project Officer, Health & Wellbeing)
[redacted] (Careers & Widening Access Advisor)
[redacted] (Clerical Assistant, Health & Wellbeing),
[redacted] (Leadership & Succession Programme Support Officer)
[redacted] (Workforce Strategy and Planning Officer)

Introductory meeting managed through Ruth and Emma to provide a support network for colleagues with similar administrative roles. Discussion about opening up a shared Teams channel for the group (there is a 'useful documents' channel within CAWA but don't believe others have access).

The meeting also discussed the different groups available within HEIW, for example, social and Health and Wellbeing etc. which could request to join.

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Health Education and Improvement Wales (HEIW)

07/10/20: Peer Support Group Meeting:

Emma Carrington (Project Officer, Health & Wellbeing),
[redacted] (Careers & Widening Access Advisor)
[redacted] (Clerical Assistant, H&W),
[redacted] (Workforce Strategy and Planning Officer) and
[redacted] (Administration Support).

Catch-up support meeting, with a welcome to Helen who has joined the Team as Angie's PA. The meeting shared information on health & wellbeing resources, use of JISC, Teams channels and note on issues with updates on Eventbrite. Next meeting planned for the 3rd November.

EQS4

Contents

EqIA in 10 Steps

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Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

GUIDANCE NOTE: WRITING BOARD AND COMMITTEE REPORTS FOR HEIW

"To do our work, we all have to read a mass of papers. Nearly all of them are far too long. This wastes time, while energy has to be spent in looking for the essential points...Let us not shrink from the short expressive phrase, even if it is conversational...The saving in time will be great, while the discipline of setting out the real points concisely will prove an aid to clearer thinking."
[*Winston Churchill in a memo to his staff entitled 'Brevity', 9 August 1940*]

To be effective a report presented for consideration by a Board or Committee must contain the relevant facts, analysis and evidence which support the final conclusions and recommendations. Bear in mind the following:

(a) the Board or Committee must be given the information that it needs in order to be able to do what it is being asked to do;
(b) information that is not required for the main body of the report but which may help the Board or Committee to further understand it is best placed in an appendix;
(c) use short, simple words with short sentences organised into short paragraphs. Plain English guidelines recommend that the most effective sentences contain on average 15 - 20 words;
(d) charts and diagrams should only be included if they are necessary for the reader to understand the report or make a key contribution to enforcing a particular point;
(e) Board or Committee Members will not have time to read long reports, so include vital information only and use the minimum amount of space. A cover sheet is required for all reports and where possible reports should be of no more than six sides in length, excluding appendices
(f) stick to plain English and avoid jargon
(g) to plan ahead when developing reports as all reports must be considered first at the weekly Executive team meetings before being presented to Committees or the Board and:
    i. for the Board all reports must then be received by the Board Secretary 10 calendar days before the Board date;
    ii. and for a Committee all reports must be received by the Board Secretary and Executive Lead 10 calendar days before the Committee date.

Some of the most common problems with Board or Committee reports include cases where:

a. the purpose of the report has not been explained clearly – why is it being presented and what is it trying to achieve?
b. the report has not said what the recipients are supposed to do with it – do they simply have to note its contents, or are they expected to approve a recommendation contained in the report?

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Meeting Date		**Agenda Item**	
Report Title			
Report Author			
Report Sponsor			
Presented by			
Freedom of Information	Open or Closed (*)		
Purpose of the Report	In this section, explain in no more than [5] lines what the paper is about and what it is endeavouring to achieve. The paragraph should be clear and concise and should state why the paper is being submitted to the Board or Committee.		
Key Issues	Key points of the paper, how this supports the achievements of the Health Board's corporate objectives, overview of risk implications. Include the main details on page 2 of the report.		

Specific Action Required *(please ✓ one only)*	**Information**	**Discussion**	**Assurance**	**Approval**
Recommendations	Members are asked to: • **Note/Receive/Consider/Approve/Recommend/ Endorse** **Items for information will not be allocated time for consideration within the Board/Committee meeting.**			

*- (wording in red is for guidance only and should be deleted)

EV55

From: Emma Carrington (HEIW)
To: [redacted]
Subject: Introductory meeting: Health and Wellbeing
Start: 3 September 2020 09:30:00
End: 3 September 2020 10:30:00
Location: Microsoft Teams Meeting

Hi all,

I would like to take this opportunity to congratulate you on your new post and welcome you all to HEIW.

As part of the induction process, Sharon is keen for you to meet with all directorates. As part of your induction, I would like to invite you to a meeting I will be facilitating, to discuss the HEIW Health and Wellbeing agenda, along with the link to the national programme.

If the above date and time is not convenient, please let me know and I will do my best to arrange an alternative.

I look forward to meeting with you.

Kindest regards,

Emma

Microsoft Teams meeting

Join on your computer or mobile app

Click here to join the meeting <https://teams.microsoft.com/l/meetup-join/19%3ameeting_MjIxZTY4OTMtMmJhOS00NDdjLTlmYmYtOWYxZmM4NmM0YjA0%40thread.v2/0?context=%7b%22Tid%22%3a%22bb5628b8-e328-4082-a856-433c9edc8fae%22%2c%22Oid%22%3a%229d392f85-3fa4-4863-925c-d928ebc5e4da%22%7d>

Join with a video conferencing device

teams@nhswales.onpexip.com <mailto:teams@nhswales.onpexip.com>

Video Conference ID: 124 345 411 3

Alternate VTC dialing instructions <https://pexip.me/teams/nhswales.onpexip.com/1243454113>

Or call in (audio only)

+44 20 3321 5246,,135096249# <tel:+442033215246,,135096249#> United Kingdom, London

Phone Conference ID: 135 096 249#

Find a local number <https://dialin.teams.microsoft.com/c74cc4b4-ef99-4ee1-8880-bfd7bfcd6d5c?id=135096249> | Reset PIN <https://mysettings.lync.com/pstnconferencing>

<http://home.wales.nhs.uk/teams/nhs-logo.png>

Learn More <https://aka.ms/JoinTeamsMeeting> | Meeting options <https://teams.microsoft.com/meetingOptions/?organizerId=9d392f85-3fa4-4863-925c-d928ebc5e4da&tenantId=bb5628b8-e328-4082-a856-433c9edc8fae&threadId=19_meeting_MjIxZTY4OTMtMmJhOS00NDdjLTlmYmYtOWYxZmM4NmM0YjA0@thread.v2&messageId=0&language=en-US>

EV 56

[redacted]

Seven Change Management Best Practices

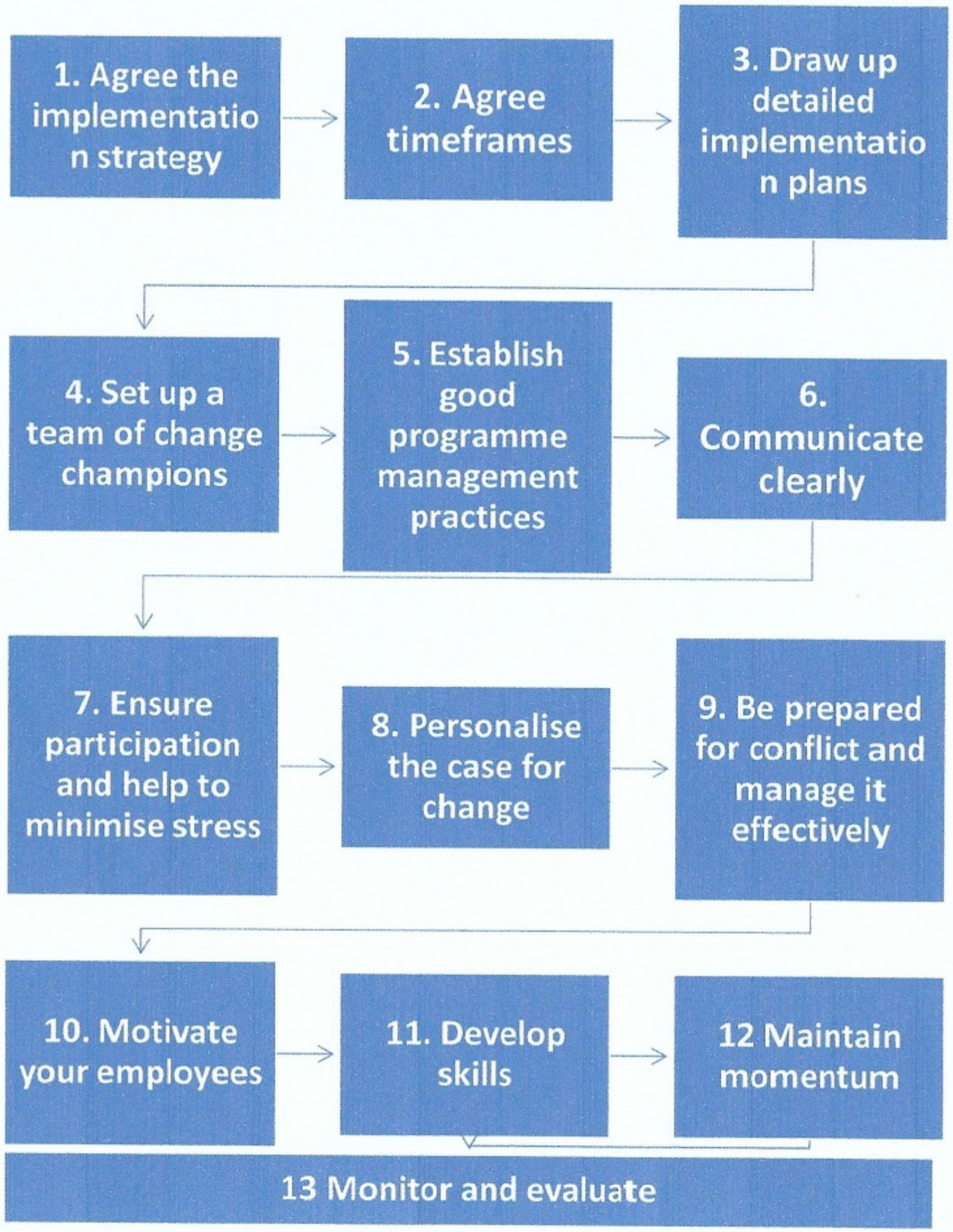
- Mobilise an active and visible executive sponsor
- Dedicate change management resources
- Apply a structured change management approach
- Engage with employees and encourage their participation
- Communicate frequently and openly
- Integrate and engage with project management
- Engage with middle managers

https://www.prosci.com/resources/articles/change-management-best-practices

Best Practice



ps://www.managers.org.uk/wp-
tent/uploads/2020/03/CHK-040-
lementing_an_effective_change_programme.pdf



EV 57

Emma Carrington (HEIW)

From: [redacted]
Sent: 07 January 2021 12:26
To: Ruth Taylor (HEIW); Emma Carrington (HEIW)
Subject: RE: Meeting

Hi both,

Hope this is ok? Let me know if I've missed anything!

General Support:
My experience within HEIW has been fantastic. From the positive experience at my interview and the communication prior to my start date to the great welcome and continued support I receive, including my 1:2:1 and team meetings.

Although the nature of operation is different to other environments I have worked in, I've actually really enjoyed being able to work virtually. The introduction of the peer support group, newcomers network, having introductory meetings with other teams and the opportunity to be part of networks such as the health & wellbeing group has meant that I feel part of the organisation, connected and supported.

The peer support group in particular, which is run by Emma and Ruth has been of real value to me from both a work and personal point of view with giving me an informal, safe space to talk which I find really beneficial and I very much hope the group is able to continue.

Thank you.

Rubecca Williams
Cynorthwy-ydd Gyrfaoedd ac Ehangu Mynediad | **Careers and Widening Access Assistant**
Addysg a Gwella Iechyd Cymru (AaGIC) | Health Education and Improvement Wales (HEIW)
aagic.gig.cymru | heiw.nhs.wales

@AaGIC_GIG **@HEIW_NHS** **@NHSWalesCareers**
NHSWalesCareers

Helpwch arbed papur – oes angen i chi printio'r e-bost yma?
Help save paper - do you need to print this e mail?

From: [redacted] (HEIW) <[redacted]>
Sent: 07 January 2021 11:02
To: Emma Carrington (HEIW) <Emma.Carrington@wales.nhs.uk>; Beckie Chandler (HEIW) <Beckie.Chandler2@wales.nhs.uk>; Sion Ford (HEIW) <Sion.Ford@wales.nhs.uk>; Rubecca Williams (HEIW) <Rubecca.Williams@wales.nhs.uk>
Subject: RE: Meeting

Hi All

I just want to echo Emma's thanks for this morning. It was really helpful and I'm glad your first few months in HEIW have been a positive experience for you.

BW

Ruth

Ruth Taylor

Cynghorydd Gyrfaoedd ag Ehangu Mynediad

Addysg a Gwella Iechyd Cymru (AaGIC)

Careers & Widening Access Advisor

Health Education and Improvement Wales (HEIW)

From: Emma Carrington (HEIW) <Emma.Carrington@wales.nhs.uk>
Sent: 07 January 2021 10:35
To: [redacted]
Cc: [redacted]
Subject: Meeting

Hi all ,

Thank you so much for attending the meeting this morning, the support and comments from you guys has been invaluable and will help with future onboarding and further shaping of the peer support group.

As mentioned this morning Ruth and I would really appreciate a personalised paragraph outlining your feedback along with any comments / observations in relation to your experience so far.

If you need any further information, Ruth and I are happy to catch up further.

Thanks again all, we both really appreciate your support.

Best wishes

Emma

Emma Carrington (HEIW)

From: [redacted] (HEIW)
Sent: 11 January 2021 15:33
To: Emma Carrington (HEIW)
Subject: CIPD Paragraph

Hi Emma,

Hope you had a good weekend. Sorry I didn't send this through last week, slipped my mind, but here's the "testimonial" paragraph for your CIPD:

"Emma's helped with setting up a group for myself and other colleagues where we can discuss what's going on with us, personally and professionally. The biggest achievement in her doing that is that it really is a safe space for us to have honest conversations – to be able to do that as a new starter has helped me to feel a part of the team and in a wider sense a part of the organisation; I don't feel like someone on the outside. Emma's also been instrumental in arranging some fantastic training opportunities, which have also really helped in their own way toward settling me into the organisation and feeling like I've met and established relationships with colleagues (even when we've never met face-to-face)."

Cofion Regards

[redacted] (He/Him)
Swyddog Gyrfaoedd ac Ehangu Mynediad [redacted]
Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Cymraeg

aagic.gig.cymru heiw.nhs.wales

@AaGIC_GIG @HEIW_NHS @NHSWalesCareers

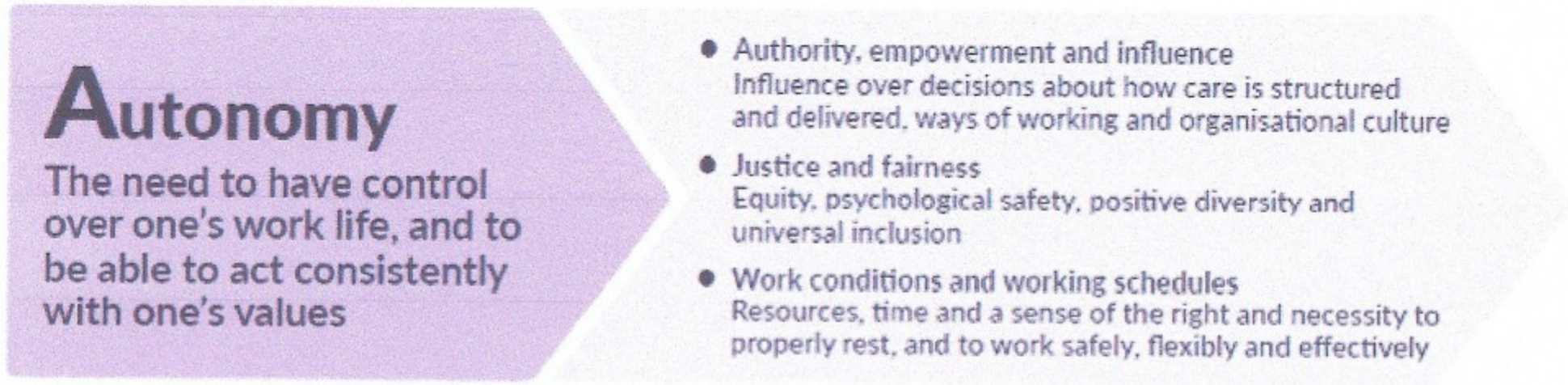
NHSWalesCareers

Helpwch arbed papur – oes angen i chi printio'r e-bost yma?
Help save paper - do you need to print this e mail?

EV58

Evidence 58

The ABC Framework of core work needs (specifically nurses and midwives, however, can be applied to the wider workforce)



https://www.kingsfund.org.uk/publications/courage-compassion-supporting-nurses-midwives

EV 59

Workforce & OD New starter introductory meetings

Area	Lead	Date
Apprenticeships	[redacted]	3 September 2020
Communications	[redacted]	3 September 2020
Health & Wellbeing	Emma Carrington	3 September 2020
Nursing	[redacted]	8 September 2020
Digital, E-learning & content development	[redacted]	8 September 2020
Equality, Diversity & Inclusion	[redacted]	9 September 2020
People Team	[redacted]	10 September 2020
Data & Analytics	[redacted]	10 September 2020
Welsh Language	[redacted]	10 September 2020
Healthy Working Relationships	[redacted]	17 September 2020
Graduate Programme	[redacted]	17 September 2020
Compassionate Leadership	[redacted]	17 September 2020
Learning & Development	[redacted]	7 October 2020
Workforce Transformation	[redacted]	19 October 2020
Workforce Planning	[redacted]	19 October 2020
Allied Health Professionals	[redacted]	20 October 2020
Education Contracting	[redacted]	26 October 2020
Pharmacy	[redacted]	28 October 2020
Commissioning & Quality	[redacted]	29 October 2020
Social Care Wales	[redacted]	29 October 2020
Talent & Succession Planning	[redacted]	26 November 2020
Train.Work.Live	[redacted]	5 January 2021
Welsh Health Student Forum	[redacted]	14 January 2021
Widening Access	[redacted]	18 January 2021
Medicine	[redacted]	TBC
Dentistry	[redacted]	TBC
Midwifery	[redacted]	TBC

EV 60

GIG CYMRU NHS | Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

New Starter Employee Engagement Survey

Page 1

New Starter Employee Engagement Survey

Welcome to HEIW, and we hope that you are settling into your new role. At HEIW, we place a large importance on welcoming new staff to the organisation, and helping them to feel settled as quickly as possible.

This is even more important this year, where colleagues like yourself have joined us in these highly unusual circumstances where we are all working from home. We have already made some changes to the way that we welcome staff. We have created a newcomers network, and have revisited our induction programme, making sessions more interactive over three bite-sized sessions.

We appreciate there is still more for us to do, and we would like you to be open and honest in sharing how you feel about home working and HEIW. Your views and opinions are vitally important and will help us to build on the momentum we have already made.

This survey is confidential, and should take you no longer than five minutes to complete. You may leave your details if you would prefer to do so and we will contact you to offer further support. If you would prefer to talk to us, please contact us at any time via HEIW.organisational_development@wales.nhs.uk

Thank you / Diolch.

Health Education and Improvement Wales (HEIW) Consultation and Surveys Privacy Notice

Please click here to view HEIW's Consultation and Surveys Privacy Notice.

I am satisfied with... *Required*

Please don't select more than 1 answer(s) per row.
Please select at least 10 answer(s).

	Strongly disagree	Slightly disagree	Neither	Slightly agree	Strongly agree
the recruitment process	☐	☐	☐	☐	☐
the information and support I received in my first week at HEIW	☐	☐	☐	☐	☐
the services and functions HEIW provides	☐	☐	☐	☐	☐
my office laptop and email account	☐	☐	☐	☐	☐
my support networks (colleagues, fellow new starters)	☐	☐	☐	☐	☐
the help and support from my line manager	☐	☐	☐	☐	☐
advice and support from my team colleagues	☐	☐	☐	☐	☐
peer support within the directorate	☐	☐	☐	☐	☐
the HEIW induction	☐	☐	☐	☐	☐
the HEIW Newcomers Network	☐	☐	☐	☐	☐

If you have selected 'strongly disagree' or 'disagree', please let us know why you have chosen this option.

Please use this open text box to give us further feedback or suggestions

What could have made your start at HEIW even better?

Would you recommend HEIW as a place to work to others? *Required*

- Yes
- No
- Not sure

Please let us know why you have chosen this option *Required*

Please use this box to add any additional comments not covered above.

The People Team would be happy to provide further support (optional). Would you find this useful? *Required*

- Yes
- No

Please provide your name and details of preferred contact method.

Final page

Thank you for your time
Diolch yn fawr iawn

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Building a High Performance Team

Emma Carrington & XXX

Rationale

Pulse surveys, feedback from senior managers, line managers, employees and general observations demonstrated Lencioni's 5 behaviours of a dysfunctional team in Team X. Targeted intervention is required to improve *engagement* levels *within team* X.

Negative impact on:

- Engagement within the team and across the organisation
- Relationships
- Performance

Leading to:

- Distrust/lack of trust
- Lack of commitment
- Micromanaging
- Lack of motivation
- Inter-team conflict



SMART Objectives

Increase levels of Trust in Team X within three months and demonstrate an ongoing commitment to positive employee engagement and working relationships

Specific – Improve levels of trust within 3 months.

Measurable – Demonstrable improvement in team X employee engagement score

Achievable – All that are involved are committed to improving team dynamics.

Relevant – Contribute to high levels of organisational engagement.

Time – positive effects can be achieved within three months

Team Structure

- Head x 1
- Programme manager x 4
- Team leader x 2
- Administrative support x 6

Overview of Plan

- Contract to agree expectations from external provider
- 1:1s and base line Lencioni psychometric testing with team members and external provider to identify barriers to engagement (workshop 1)
- Analysis of baseline survey and psychometric testing by external provider
- External provider facilitate workshop to develop team-owned recommendations (workshop 2)
- Team-owned action plan developed (workshop 2)
- Plan implemented
- Measure success and reflection (workshop 3)
- Continuous evaluation

Investment

Services of external HR consultant

- 3 x full day workshops
- Psychometric testing and analysis report inclusive of recommendations
- Support with implementation
- Support with measuring success

£10,950

Time

- 12 weeks

Who

- Team X
- External HR consultant

Evaluation method

Evaluation of training needs

Kirkpatrick 4 Levels of Training Evaluation model

Level 1: Reaction
Evaluate personal reactions to use of data collection tools – survey, 1:1, psychometrics

Level 2: Learning
Evaluate understanding of difference in behaviour/personality and impact on team dynamics

Level 3: Behaviour
Regular evaluation of extent behaviour change is impacting on team dynamics, performance and engagement levels

Level 4: Results
Evaluate effect on organisational KPIs to identify return on investment

Timeline

Who	
Team X	
People Team	
External Consultant	
Evaluation	

Task	WK 1	WK 2	WK 3	WK 4	WK 5	WK 6	WK 7	WK 8	WK 9	WK 10	WK 11	WK 12	M 6	M 12
Contract agreement														
Workshop 1 Baseline tests & interviews														
Analysis of testing & design of bespoke programme														
Workshop 2 Develop team-owned action plan														
Self-directed learning														
Plan implementation														
Workshop 3 Measure success and reflections														
Evaluate (Kirkpatrick Model levels)	baseline	1&2		1&2								3	3&4	3&4

EV62

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Privacy Impact Assessment [New starter onboarding]

Author: Emma Carrington
Project owner: Emma Carrington & Ruth Taylor
Approver: HEIW Governance Manager: xxxxx

Date: 02/02/21

NHS Health Education and Improvement Wales
Tŷ Dysgu
Cefn Coed
Nantgarw
CF15 7QQ

03300 585 005
https://heiw.nhs.wales

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4. Privacy Impact Assessment table 8
5. Requirement schedule 19

Appendices

Appendix 1 – Risk Type
Appendix 2 - Additional Guidance notes for completion of the Requirement Schedule
Appendix 3 - Risk Scoring Tables

1 DOCUMENT HISTORY

1.1 Revision History

Date	Version	Author	Revision Summary
10/1/2019	Draft	xxxx	Redrafted for HEIW

1.2 Reviewers

This document requires the following reviews:

Date	Version	Name	Position
23/09/2020	0.1	Xxxxx (HEIW)	Information Governance Manager

1.3 Authorisation

Signing of this document indicates acceptance of its contents.

Author's Name:	Emma Carrington		
Role:	Project Officer		
Signature:		Date:	02/01/21

Approver's Name:	Information Governance Manager		
Role:	Final approver		
Signature:		Date:	05/01/21

1.4 Document Location

Type	Location
Electronic	
Hard Copy	

2.Screening Questions

To be completed by the project lead

Please complete the table below. Answering "Yes" to any of the screening questions below represents a potential IG risk factor that will have to be further analysed to ensure those risks are identified, assessed and mitigated wherever possible by working through sections A, B and C of this document.

Category	Screening question	Yes/No
Identity	Will the project involve the collection of new information about individuals?	NO
Identity	Will the project compel individuals to provide information about themselves?	YES
Multiple organisations	Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?	NO
Data	Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?	NO
Data	Does the project involve using new technology which might be perceived as being privacy intruding for example biometrics or facial recognition?	NO
Data	Will the project result in you making decisions or taking action around individuals in ways which could have a significant impact on them?	NO
Data	Is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For example health records, criminal records, or other information that people are likely to consider as private?	NO
Data	Will the project require you to contact individuals in ways which they may find intrusive?	NO

Document C – IG Requirements Schedule [New starter on Boarding]

The requirements schedule forms part of the Health Education and Improvement Wales (HEIW), Privacy Impact Assessment (PIA) process.

This document must be read in conjunction with the project description for [New Starter on boarding] (section A)

Following the review of the populated PIA table (section B) the Information Governance Manager and project lead/manager will agree the information governance / privacy requirements and record them on the IG requirements schedule.

Each requirement will be scored against the risk matrix at Appendix 3. The requirements schedule will be used to capture progress against each requirement and note the final outcomes. It should be stated whether the risks identified have been eliminated, reduced or accepted.

The schedule is designed to be a living document which is updated regularly as the development progresses.

Using red, amber and green (RAG) as progress indicators within the schedule, by the time the report and recommendations go to the HEIW Executive Team, all requirements should be green. However, dependent on the nature of the project and the issues raised it is possible that requirements may be amber or in an exceptional case even red; where this is the case the organisations involved must agree to accept any residual risk.

See Appendix 2 for further guidance on how to complete the requirements schedule.

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
		Residual								
RQ1	DPIA to be reviewed with the project in six months.	Initial	1	1	1	Low				Any substantial changes to the information use to access the platform would require a further DPIA.
		Residual								
RQ2		Initial								
		Residual								

Are any residual risks scored higher than 10?

☐Yes xNo

If Yes, has the ICO been consulted on the processing?

☐Yes ☐No N/A

Appendix 3 - Risk Scoring Tables

Likelihood score	**1**	**2**	**3**	**4**	**5**
Descriptor	**Rare**	**Unlikely**	**Possible**	**Likely**	**Almost certain**
Frequency How often might an IG breach occur	This will probably never happen/recur	Do not expect it to happen/recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it may not be a persisting issue	Will undoubtedly happen/recur,possibly frequently

Impact score (severity levels) and examples of descriptors	**1**	**2**	**3**	**4**	**5**
	Negligible	**Minor**	**Moderate**	**Major**	**Catastrophic**
Impact on an individual's privacy and confidentiality	Minimal privacy impact requiring no/minimal intervention Other manual or electronic process in place to mitigate the IG risk	Minor impact on an individual's privacy Other manual or electronic process in place to mitigate the IG risk	Moderate privacy impact requiring professional intervention Aspects of reputational damage for the organisation if IG requirement not adopted Could result in an event which impacts on a moderate (less than 100) number of patients/clients	Major breach leading to possible larger scale privacy breaches Possible ICO reportable breach if IG standard not adhered to Mismanagement of patient/client privacy with long-term reputational issues Would impact on over 100 patients/clients – part system failure	Serious IG breach and non-compliance with the law if requirement not adhered to Definite ICO report required if breach occurs An event which impacts on a large number of patients/clients – full system breach because of no adherence to standards. Is likely to be 1000 of patients/clients

		Likelihood				
		1	**2**	**3**	**4**	**5**
		Rare	**Unlikely**	**Possible**	**Likely**	**Almost certain**
Impact Score	**5 Catastrophic**					
	4 Major					
	3 Moderate					
	2 Minor					
	1 Negligible					

Status

1 - 3	Low risk
4 - 6	Moderate risk
8 - 12	High risk
15 - 25	Extreme risk

Health Education and Improvement Wales (HEIW)
Consultation and Surveys
Privacy Notice

1. Introduction

NHS Wales is made up of several health organisations that include Health Education and Improvement Wales (HEIW) who have a leading role in the education, training, development, and shaping of the healthcare workforce in Wales, in order to ensure high-quality care for the people of Wales.

HEIW key functions include:

- Working closely with partners and key stakeholders, and planning ahead to ensure the health and care workforce meets the needs of the NHS and people of Wales, now and in the future;

- Being a reputable source of information and intelligence on the Welsh health and care workforce;

- Commissioning, designing, and delivering high quality, value for money education and training;

- Using education, training, and development to encourage and facilitate career progression;

- Supporting education, training, and service regulation by playing a key role in representing Wales, and working closely with regulators;

- Developing the healthcare leaders of today and the future;

- Providing opportunities for the health and care workforce to develop new skills;

- Promoting health and care careers in Wales, and Wales as a place to live;

- Supporting the professional workforce and organisation development profession with Wales; and

- Continuously improving what we do and how we do it.

This notice has been issued by the HEIW Executive Team to explain the reason for the use of information for consultations and surveys.

The work undertaken by various departments within HEIW from time to time may require public, stakeholder, service user and other party's feedback and opinions in relation to specific topics and service provisions, both intended or established and those undergoing change.

If you have any questions regarding how information is used you must contact the person shown at the bottom of this notice.

It is important to note, however, that many consultations that are implemented or surveys requesting feedback do not require the inclusion of personal data or identifiers. In the instances where they are required, this will be communicated to you within any intended launch of a consultation or release of a survey and by use of this Privacy Notice.

2. Your rights

This Privacy Notice covers the rights of data use under legislation called the General Data Protection Regulation (GDPR). It emphasises HEIW's need to make sure that we explain how we use information for consultations and surveys.

The information we give you about our use of information will be:

- Brief, easy to read and easily accessible;
- Written in clear, plain language; and
- Free of charge.

3. What laws do we use?

The law determines how we can use information. In those areas where we use identifiable information, the laws we follow that allow this to happen are listed below:

- General Data Protection Regulation
- UK Data Protection Bill
- Human Rights Act
- Freedom of Information Act
- Common Law Duty of Confidentiality
- Computer Misuse Act
- Audit Commission Act
- Regulation of Investigatory Powers Act

HEIW will retain data in order to comply with legal requirements.

We may need to use your information within the specified time period after the finalising of a consultation or survey for limited purposes, for example if we need your personal data in order to respond to any complaints or requests that you make.

However, complaints processing is dependent on whether HEIW receive or retain identifiable data elements in order to achieve their objectives in consultations or surveys.

Making a complaint

If you wish to make a complaint about any issues you have experienced regarding your information, then please contact:

Dafydd Bebb
Ysgrifennydd y Bwrdd/Board Secretary
Addysg a Gwella Iechyd Cymru/Health Education and Improvement Wales
Ffôn/Tel: 079 7130 0537
Ebost/email: dafydd.bebb@wales.nhs.uk

If you are still unsatisfied following your complaint and this remains unresolved, you have the right to make a complaint to the:

Information Commissioner's Office,
2nd Floor,
Churchill House,
17 Churchill Way,
Cardiff, CF10 2HH

Email: wales@ico.gsi.gov.uk
Website: www.ico.org.uk

EV63

From: Emma Carrington (HEIW)
To: [redacted]
Subject: Focus group
Date: 04 January 2021 16:03:01
Attachments: Focus Group Consent Form .doc

Dear Colleague,

Thank you for your willingness to participate in our focus group, led by myself and Ruth Taylor. The aim of the focus group is to assess the effectiveness of your onboarding, induction and support experience to date.

You will be in a group with 4 other employees of HEIW. The focus group will not be recorded, and your responses will be shared with the W&OD directors, to ensure your views and opinions improve the future onboarding process. However, no names will be mentioned in the report. All the data collated will be in strict adherence to data regulations.

The date, time and place are listed below and if you will not be able to attend the session please email Emma Carrington at emma.carrington@wales.nhs.uk or Ruth Taylor at [redacted]@wales.nhs.uk otherwise we look forward to seeing you.

Date: Thursday 7th January at 09:00

Time: 09:00 – 10:00

Venue: Via TEAMS

We would be grateful if you could please print and sign the attached consent form and forward it to either Emma or Ruth before attending the focus group.

We look forward to meeting with you,

Kind regards

Emma and Ruth

EV64

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Our Ref: OBFG070121

Date: 7th January 2021

Health Education and Improvement Wales
Ty Dysgu
Cefn Coed
Nantgarw
Cardiff
CF15 7QQ

03300 585 005
HEIW@wales.nhs.uk

Dear Colleague,

You have been asked to participate in a focus group involving employees of HEIW. The purpose of the group is to assess the effectiveness of your onboarding, induction and support experience to date.

You can choose whether or not to participate in the focus group and stop at any time. The focus group will not be recorded, and your responses will be shared with the W&OD directors, to ensure your views and opinions improve the future onboarding process however, no names will be mentioned in the report.

I understand this information and agree to participate fully under the conditions stated above:

Name:

Signed:

Date:

Yours sincerely

Emma Carrington

Ruth Taylor

EV65

GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Onboarding/Induction Focus Group
Thursday 7th January 2021

Present:
Emma Carrington
[redacted]
Member 1 (M1)
Member 2 (M2)
Member 3 (M3)

Three new members of staff from the Workforce & OD Directorate were invited to attend a focus group to discuss and measure their experience of the onboarding/induction process for their new roles over the preceding four months. This would help to measure the effectiveness of the processes that had been implemented to ensure they felt welcome and part of the organisation, understood their roles and responsibilities and had the appropriate support in place.

Q1. How did you feel before you joined the organisation, knowing that you would be required to work virtually from home?

M1: They had had some considerable time off from work due to illness prior to applying for this post. Their prior working environment was a negative experience, but they felt extremely excited as they had received a positive interview experience within HEIW. They did not anticipate working from home for this length of time, but the need to work virtually did not concern them and they enjoy working this way and find it works well.

M2: Prior to joining HEIW, they were required to work in an office environment during the pandemic with no flexibility. The HEIW website helped inform their decision to apply for the new position as it informed them that the organisation was working virtually due to the pandemic. After I applied for the post, I received an e-mail informing that interviews within HEIW will be held virtually due to the pandemic. I liked the sound of the agility that came with working virtually. Their experiences of working virtually within HEIW have been positive.

M3: Was excited to be starting a new role and relieved that they had been able to gain a job quickly after graduating from university. Understood that the role would be predominately virtual and was not concerned about the need to work virtually as they had spent the final part of their degree course working this way. They felt that this helped them prepare for the world of virtual work. They have enjoyed working from home and appreciate the flexibility offered. They feel that virtual working does not detract from their role and responsibilities.

Q2. How do you feel about the support you have received from the organisation?

M1: They have very much enjoyed their time in post and feel their wellbeing has been supported, both in a work and personal capacity. They believe working this way has helped with teamwork and they

have benefited considerably from the 1:1 meetings with their line manager and team meetings. They highlighted how any queries they had were answered promptly, which helped considerably with the tasks they had been set.

They have accessed the health and wellbeing resources available on the website but have found the volume of information a little overwhelming. However, they recognise how having this information is extremely useful, but could be condensed to make it clearer as to what resources are available depending on individual need and the website could be more user friendly.

M2: Everyone is so approachable and helpful within HEIW and the whole HEIW experience has been phenomenal! The peer support group is a safe platform to meet other HEIW staff. Working virtually has been good for my wellbeing as I've been able to get to know people in relation to work and personally. 1:1 meetings and team meetings are also really helpful, and I feel confident I can e-mail on Teams if I need support. I feel that I have met more people on specific groups that are now running virtually, such as Biodiversity, than I may have within the organisation.

I have accessed the health and wellbeing resources. I have also requested a resource that was available from my previous employer, but not within HEIW. HEIW are now in the process of implementing this resource. I'm pleased with this outcome and feel my thoughts and opinions have been listened too.

M3: Being able to join different groups within the organisation has given them an opportunity to meet people from across the organisation who have similar interests (Biodiversity Group, equality champions) and who they may not have come across in a work capacity. They have made use of the mindfulness course offered to HEIW staff, which has had a positive impact on their wellbeing.

The group acknowledged it is evident HEIW remote workers now feel they are on a level playing field to those who are now working virtually, as they are experiencing the same obstacles etc.

Q3. What has worked well?

M1, 2 & 3: The virtual introductions with other teams have been extremely useful and the engagement from other teams at these meetings has given a great impression of the organisation. They also benefited from attending these meetings together along with Ruth as she was able to highlight where the crossovers between teams were and able to steer the conversation to ensure it remained relevant to us

M1: Attending introductory meetings as a team has helped and I felt more confident to ask questions.

M2: The difference between attending these meetings as a group compared with attending some on their own has been considerably different. They find the individual meetings different and awkward and not as beneficial as those where they are supported by colleagues. They also highlighted how some of the introductions were set up after they had already met teams due to work need and so recommended that introductions were set up depending on the teams they were likely to work with first rather than starting with the directorate and working outwards.

All agreed the joint meetings were extremely beneficial and a more positive experience when compared to attending introductory meetings alone.

The peer support group has been excellent and offered an opportunity for them to meet other members of the directorate who are in similar roles. The appreciated that this forum was a safe space for them talk about how they were feeling and ask for help and they would like the group to continue

for the foreseeable future. They also appreciated the dedicated teams channel that had been set up and had begun to use this to ask questions to the group.

Q4: What has worked not so well?
M2: It would have been helpful to know on their first day that they were able to take office equipment home, ie a chair. They worked from home for some considerable time before realising that they could take a chair home from the office.

M1, 2 & 3: All agreed that an organisation chart broken down by directorate would be useful to help them understand the roles of others and if individuals had PA support who they could approach rather than contacting senior managers directly.

M1,2 & 3: All agreed that their corporate induction experience had not been well received due to the length of time of the session. Initially sessions were for 6 hours across one day and this covered all the necessary topics. However, following feedback, the corporate induction was split into two 3-hour sessions. It would appear that they fell between the change of format and underwent a 6-hour session followed by a three-hour session. They all felt that the sessions had some good points and some not so good and when they attended the second session, they had to listen to topics they had already covered. They are not clear whether they have now covered all induction topics or not as they did not receive documentation outlining this. The People Team have been making amendments to the corporate induction programme to reflect these comments and the group were pleased to hear their comments were taken onboard and a change has been made to make the session shorter and more interactive.

Q5: Do you have any further comments
One member felt they were struggling a little with the high volume of work within their team and the fact that they still had a lot to learn. As stress levels are high in the team, they do not feel they can approach their manager. However, they recognise that recruitment is underway to expand the team and that more support will become available and workload will be distributed more widely.

Ruth and Emma highlighted how it was important that they did speak with their manager but appreciated how they did not want to add further pressure to them. They were reminded that the People Team are available should they wish to discuss their concerns with them. It was emphasised that they should not let the situation run for too long and support should be requested.

Two members felt the opposite, in that they sometimes felt frustrated that they did not have enough work to do and would have liked to have been able to support wider teams during these times. However, they recognised that the reduced workload was related to the covid pandemic and the need for the work stream to be scaled down for a period of time and was also affected by line manager sickness. Both felt the situation would improve going forward.

Summary
It would appear from comments received that all new starters have received an extremely positive experience during their first four months in post. They feel that they have benefited from the range of support mechanisms in place, including the peer support group, health and wellbeing resources and introductory meetings, supported by colleagues. All commented on the positive experience they have received during introductory meetings and the enthusiasm from other staff in the organisation has been clear.

The corporate induction process has been not so good, but changes have been made recently so that the session is now spread over three sessions, with the People Team working on making the sessions more interactive and engaging.

There was also comment that whilst the amount of health and wellbeing resources available was seen as a positive, the way they are presented is a little overwhelming.

There was a difference in workload levels amongst the three new starters, with one extremely busy, with little inter-team peer support, compared with another who felt they had a significantly reduced workload, but had inter-team support to help identify pieces of work that could be undertaken.

Recommendations

- The peer support group continues
- Future new starters continue to be "buddied" up if possible and attend introductory meetings together
- Introductory meetings are scheduled according to work timelines rather than starting with the directorate and moving outwards across the organisation.
- Provision of an organisation chart split into directorates
- That the health and wellbeing resource webpage is reviewed.

EV66

Evidence 66
Feedback

New starter experience: *Although the nature of operation is different to other environments I have worked in, I've actually really enjoyed being able to work virtually. The introduction of the peer support group, newcomers' network, having introductory meetings with other teams and the opportunity to be part of networks such as the health & wellbeing group has meant that I feel part of the organisation, connected and supported".*

Introductory Meetings: *"The virtual introductions with other teams have been extremely useful and the engagement from other teams at these meetings has given a great impression of the organisation".*

Peer Support Group: *"Joining a new organisation at any time can be a bit daunting, so throw a pandemic into the mix and that could have exacerbated things. Fortunately for me, though, I've had a lot of support from Ruth and Emma – they put together the peer support group, which helped to introduce me to other new starters. I would be keen that this continued"*

Health and Wellbeing Resource: *"I have accessed the health and wellbeing resources available on the website but have found the volume of information a little overwhelming. However, I recognise how having this information is extremely useful, but it could be condensed to make it clearer as to what resources are available depending on individual need and the website could be more user friendly".*

EV 67

GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

Assessment of Change to New Starter Onboarding/Induction Process

Emma Carrington & XXX

January 2021

Aim

The development of an affective virtual onboarding/induction process to support new starters within the Workforce & OD Directorate during the COVID-19 pandemic

Benefits

- Demonstration and reinforcement of the organisation's values and behaviours
- Improved sense of belonging and wellbeing
- Flexibility
- Improved support network
- Understanding of role and job purpose

Risks

- Feelings of isolation
- Not understanding role purpose
- Lack of confidence
- Significant screen time

SMART Objectives

Provision of an effective onboarding/induction process for new starters within the Workforce & OD Directorate

Specific – Provision of an effective onboarding/induction process that is not inferior to previous processes.

Measurable – New starters will have undertaken all elements of their 90 day induction plan by Jan 2021

Achievable – All involved are committed to engaging with the process (employees, line managers and support staff)

Relevant – Contribute to high levels of organisational engagement, improved wellbeing, sense of belonging and understanding role and responsibilities and impact on wider organisation.

Time – Effectiveness can be measured during implementation and at the end of the first four months in post.

Project timeline

	03/08/2020	10/08/2020	17/08/2020	24/08/2020	31/08/2020	07/09/2020	14/09/2020	21/09/2020	28/09/2020	05/10/2020	12/10/2020	19/10/2020	26/10/2020	02/11/2020	09/11/2020	16/11/2020	23/11/2020	30/11/2020	07/12/2020	14/12/2020	21/12/2020	28/12/2020	04/01/2021	11/01/2021	18/01/2021
Individual Pre-start date introductions																									
Team pre-start date introductions																									
Start date																									
Face to face team introductions																									
Provision of IT equipment & training on use																									
Bi-weekly 1:1 meetings with line manager																									
Bi-weekly team meetings																									
Peer support group meetings																									
Directorate team introductions																									
Corporate inductions																									
Wider organisation introductions																									
Pulse survey																									
Pulse survey analysis																									
Focus Group																									
Recommendations for improvement																									

Responsibility	
Line Manager	
XXX	
XXX & Emma Carrington	
Other (IT, People Team etc)	

HEIW New Starters Checklist – First 90 days

	Day 1	Week 1	Month 1	Month 2	Month 3
Meet the team	✖				
Team/HEIW overview	✖				
Tour of the building	✖				
ID badge	✖				
IT setup/collection	✖				
Printer setup	✖				
Sickness process	✖				
DSE/Risk assessments	✖				
Mandatory					
Corporate Induction			✖		
Mandatory training			✖		
Objective setting			✖		✖
Personal details on ESR		✖			
Technology					
Using ESR		✖			
Using Teams/Skype	✖				
Using Expenses				✖	
Using Service Desk				✖	
Room bookings		✖			
Intranet		✖	✖		
Using Oracle				✖	
Using Y Ty Dysgu			✖	✖	✖
Pastoral					
WOD Peer support group			✖	✖	✖
H&WB web pages		✖			
Social teams channels			✖		
Organisational groups			✖	✖	✖
Meet other teams			✖	✖	✖
Regular team catch ups	✖	✖	✖	✖	✖
Key documents					
IMTP		✖			
A Healthier Wales			✖		
Future Generations			✖		
Workforce Strategy for H&SC			✖		
Key HEIW policies			✖		
Other					
Tasks to increase understanding of team and HEIW		✖	✖	✖	✖

*Timescales are subject to change due to COVID-19

Management information Progress Report

- Line manager met with new starters prior to start date (5th & 6th August 2020)
- Line manager and wider team met with new starters prior to start date (13th August 2020)
- Team face to face introductions and provision of IT equipment and training (start date 24th August 2020)
- Bi-weekly line manager 1:1 meetings set up and continued throughout
- Bi-weekly team meetings set up and continued throughout
- Provision of 4 peer support group meetings with full attendance
- Attendance at corporate induction and completion of mandatory training
- 22 x team introductory meetings attended with full attendance
- Pulse survey on HEIW new starter experience distributed and analysed
- W&OD Directorate New Starter focus group facilitated – positive feedback received

2013

Methods of Evaluation

- Informal discussions with line manager
- Informal discussions with team members
- Information discussions at peer support group
- HEIW-wide new starter pulse survey
- W&OD new starter focus group

New Starter Employee Pulse Survey (Nov 2020)

- Since 23rd March 2020, (HEIW) has employed over 40 new staff.

- All have joined the organisation in a very different way to previous staff:
  - limited face to face interaction with their line manager and colleagues
  - few visits to the main office building
  - Adapt to an almost 100% working from home model.

- Organisation has needed to adapt recruitment, onboarding and induction processes

Are we getting this right?

Method

Definition of a "new starter"

Someone who has joined the organisation between 23rd March and 31st August 2020

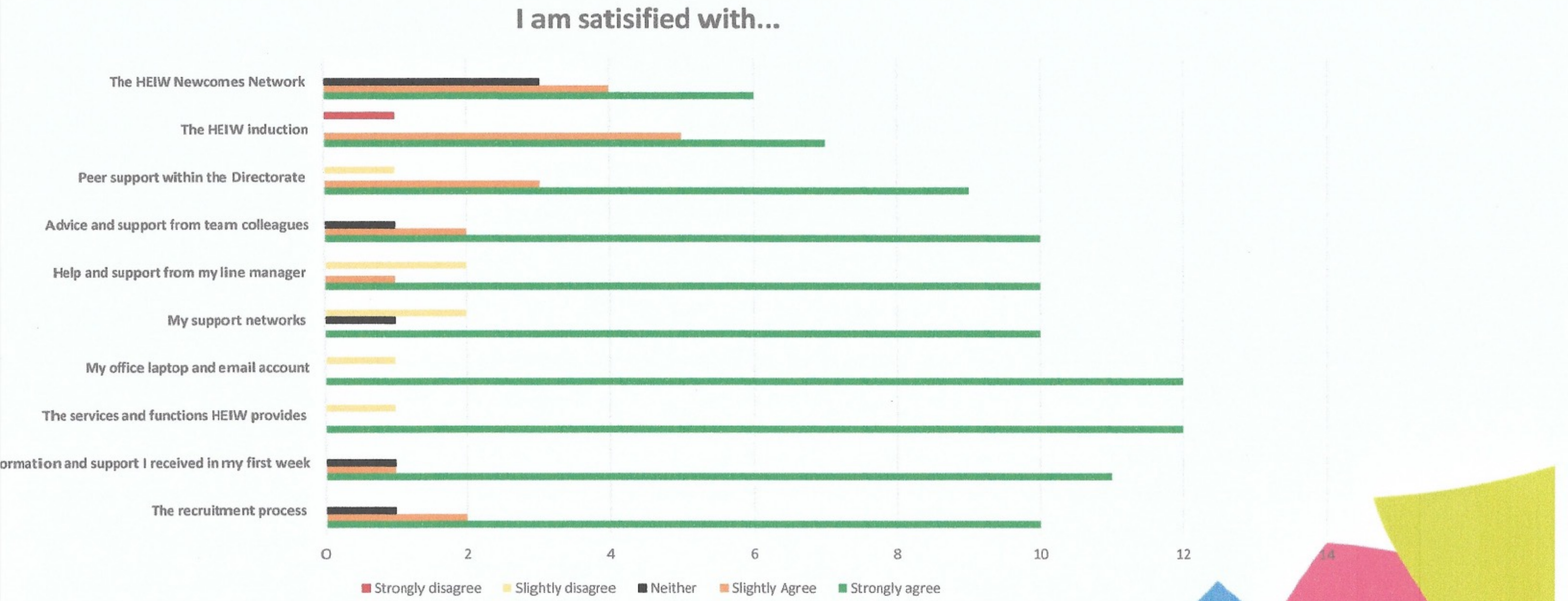
- Sample size = 34

Measurement tool

- Pulse survey consisting of 8 questions relating to new starter experience:
    - Recruitment
    - Onboarding
    - Workplace relationships
    - Equipment
    - Induction
    - Ambassadorship
- Survey open for 1 week

Results

Respondents = 13 (38%)



Conclusions

Engagement levels within the New Starter Group are high, with an overall engagement score of 80%

- 10 (77%) respondents strongly agreed or slightly agreed with all 10 multiple choice questions
- 12 (92%) respondents would recommend HEIW as a place to work to colleagues

- There are pockets of dissatisfaction with regard line manager, induction, network and directorate support

  = 2 respondents

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Health Education and Improvement Wales (HEIW)

Focus Group Feedback

Emma Carrington & Ruth Taylor

January 2021

New Starter Experience

"Everyone is so approachable and helpful within HEIW and the whole HEIW experience has been phenomenal!"

"My experience within HEIW has been fantastic. From the positive experience at my interview and the communication prior to my start date to the great welcome and continued support I receive, including my 1:2:1 and team meetings"

"Although the nature of operation is different to other environments I have worked in, I've actually really enjoyed being able to work virtually. The introduction of the peer support group, newcomers network, having introductory meetings with other teams and the opportunity to be part of networks such as the health & wellbeing group has meant that I feel part of the organisation, connected and supported".

Clear difference in workload volume across teams

Introductory meeting feedback

"The virtual introductions with other teams have been extremely useful and the engagement from other teams at these meetings has given a great impression of the organisation. They also benefited from attending these meetings together along with Ruth and Emma as they were able to highlight where the crossovers between teams were and able to steer the conversation to ensure it remained relevant to us"

"Attending introductory meetings as a team has helped and I felt more confident to ask questions".

"Joint meetings were extremely beneficial and a more positive experience when compared to attending introductory meetings alone".

"Some of my introductions were set up after I had already met teams due to work need. It would be good if introductions were set up depending on the teams we are likely to work with first rather than starting with the directorate and working outwards".

Peer Support Group Feedback

"Joining a new organisation at any time can be a bit daunting, so throw a pandemic into the mix and that could have exacerbated things. Fortunately for me, though, I've had a lot of support from Ruth and Emma – they put together the peer support group, which helped to introduce me to other new starters. I would be keen that this continued"

"The peer support group in particular, which is run by Emma and Ruth has been of real value to me from both a work and personal point of view with giving me an informal, safe space to talk which I find really beneficial and I very much hope the group is able to continue".

"The peer support group is a safe platform to meet other HEIW staff and I would like it continue".

Health & Wellbeing Resources

"I have accessed the health and wellbeing resources. I have also requested a resource that was available from my previous employer, but not within HEIW. HEIW are now in the process of implementing this resource. I'm pleased with this outcome and feel my thoughts and opinions have been listened too".

"I have made use of the mindfulness course offered to HEIW staff, which has had a positive impact on my wellbeing".

"I have accessed the health and wellbeing resources available on the website, but have found the volume of information a little overwhelming. However, I recognise how having this information is extremely useful, but it could be condensed to make it clearer as to what resources are available depending on individual need and the website could be more user friendly".

What could we do differently?

"It would have been helpful to know I could take a chair home on my first day"

"Provide an organisation chart broken down by directorate would be useful to help us understand the roles of others and if individuals had PA support who we could approach rather than contacting senior managers directly"

"Change corporate induction"

Summary

•All three new starters have received an extremely positive onboarding/induction experience during their first four months in post

•They have all benefited from the various support mechanisms in place, including peer support group, health and wellbeing resources, introductory meetings and line manager support.

•Introductory meetings have demonstrated a positive impression of the organisation and clear enthusiasm from staff relating to their area of work/expertise

•The corporate induction process has been not so good, but changes have been made recently so that the session is now spread over three sessions, with the People Team working on making the sessions more interactive and engaging.

•Overwhelming amount of health and wellbeing resources available

•Significant difference in workload levels across teams

Recommendations

- The peer support group continues

- Future new starters continue to be “buddied” up if possible and attend introductory meetings together

- Introductory meetings are scheduled according to work timelines rather than starting with the directorate and moving outwards across the organisation.

- Provision of an organisation chart split into directorates

- That the health and wellbeing resource webpage is reviewed.

- Staff are made aware that they can take supportive IT equipment and furniture to use at home

EV68

Emma Carrington (HEIW)

From: Angie Oliver (HEIW)
Sent: 18 January 2021 13:14
To: Emma Carrington (HEIW)
Subject: Testimonial for CIPD study

Hi Emma
Here you go
Angie 😊

To whom it may concern

Emma has had an essential role in the implementation and delivery a new onboarding/induction process for our newly appointed staff in the Workforce & OD Directorate. The change was necessitated as additional measures were required to support HEIW new starters during a period of time where remote working was and still is a necessary.

This involved

- welcoming them to the organisation, to
- ensure they have understood their role and responsibilities and
- have felt supported with the process of joining an organisation virtually

Emma's role involved welcoming our new starters to our HEIW family, ensuring they feel part of the HEIW wide team, understood their role and responsibilities and have felt supported throughout the process.

To do this, Emma has demonstrated excellent communication and relationship skills with the new members of the team by facilitating monthly peer support groups which she runs in partnership with another colleague. This included both new starters and the wider workforce administrative team, which has benefited the team whilst working virtually. It is hoped this will continue for the foreseeable future and help to improve the future onboarding process.

Emma and [redacted] have presented a summary of their change project to me, and identified further areas for improvement, clearly demonstrating how positive the change project has been.

Emma and [redacted] have been asked to present their findings to the Workforce and OD Senior Leadership team, so the learning can be shared and help improve the onboarding/induction process across the organisation.

Cofion cynnes

Angie

Mrs Angie Oliver
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Prosci thee phased process

