

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar y [gweithlu Iechyd a Gofal Cymdeithasol](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Health and Social Care Workforce](#)

HSC 18

Ymateb gan: | Response from: Bwrdd Iechyd Prifysgol Betsi Cadwaladr | Betsi Cadwaladr University Health Board

Betsi Cadwaladr University Health Board

A Healthier Wales – our workforce strategy for health and social care

Call for written evidence

1. The Health Board is making considerable progress towards the themes in the strategy. Many of the themes are included in the BCU Workforce Strategy 2019 -22, and are being delivered through,
 - Regional Partnership Boards
 - Increased community care provision
 - Revised performance and accountability framework
 - A workforce strategy, focussing on staff engagement, leadership, innovation and learning (refresh due 2022-25)
 - Development of medical and health school

Key challenges relate to the development of multi-agency workforce models, education and learning investment, recruitment of professional staff and building a digitally ready workforce.

The People & OD Strategy 2022 – 2025 in development is aligned to the national and regional strategies published in 2020. The role of BCU as a major employer will be highlighted further in this strategy.

2. The strategy is fully aligned with other identified priorities and actions.
3. There are currently considerable recruitment challenges for professionally qualified staff, and whilst education commissioning numbers have increased there needs to be a greater focus and funding for shortened routes for existing, experienced staff across all professional disciplines. In addition using digital technology to allow access to some courses commissioned in south Wales only, will have a positive impact on people in north Wales being able to access and ensure that BCUHB is able to retain local people. This is of particular importance for the recruitment of Welsh speakers.
The current education commissioning process needs to consider where jointly commissioned, health and social care training and education can be most useful. Integrated training will support the development of an integrated workforce.

4. A broad range of actions have been set out which will require national and local actions. This will include quantitative data in relation to employee numbers / skills, and qualitative data in relation to staff engagement and leadership.
5. It is expected that additional resources will be required to develop programmes to equip our current workforce with the skills required. In addition additional focus will be needed on engagement and wellbeing given the effects of the pandemic.
6. Greater emphasis on inclusion and widening access within the strategy would make the identification of innovative training routes to ensure groups with protected characteristics or those people traditionally furthest from the workforce can access opportunities as far as possible. This includes part time courses and on line opportunities. Covid 19 will have also provided an opportunity to access people who may have lost their jobs due to the pandemic, providing Health Boards with an opportunity to retrain.
7. The interventions relating to wellbeing require robust plans and further research to deliver a compelling body of evidence that links wellbeing strategies to outcomes in patient care. The focus will need to be on the following:
 - Define a clear connection between staff wellbeing and improved outcomes for the people who we provide health, care and support.
 - Measure how fair and equitable wellbeing policies influence change in the workforce perception of fairness, leading to better engagement.
 - Identify key outcomes to measure happy, healthy and supported workforce
 - How will the strategy measure a wellbeing culture in the key staff groups that influences the benefits to people within their care