

WPF Business Committee
Delivery of the Collective Agreement 2022-4

Report of the final milestone review
March 2024

Non-Pay Element	Page
Unsocial hours	2
Career progression	3
Flexible Working	4
Working hours	5
Retention strategy	6
Retire and return	6
Reduction in the use of agency	7
Health and well-being	9
Continuing Professional Development (CPD)	10
Partnership agreement hub	12
Ensuring safe and effective care	13
Pay restoration	14

Black text below is the wording of the collective non-pay agreement elements.

Red text below describes the delivery mechanism for each element.

Unsocial hours allowance

1. Reinstated after three weeks sickness absence with immediate effect. (Remains the permanent position if this offer rejected).
2. With effect from 1st March 2023, for a twelve-month period, USH will be reinstated after one weeks sickness absence.

Completed.

3. Monitoring of this additional change will be undertaken in the context of relevant wider partnership discussions for example around flexible working.
4. Work in social partnership to review how the policy is implemented to ensure fairness, industrial injuries are properly recognised, and that staff are not discriminated against in line with the Equalities Act 2010.

Included in Non-pay WHC part 2

5. After twelve months there will be a formal review in partnership with the expectation that the UHA reinstatement after one weeks sickness absence will be made the permanent position.

Included in Non-pay WHC part 1

Career progression

1. Review career progression arrangements starting with nurse and other health carer professional's progression from band 5-6.
2. Development of a framework (including an implementation plan for career progression)

Delivery as part of HEIW work programme

Requires reference in the Agency WHC phase 2

3. Shared aim of improving ability for individual progression in their professional field/staff group.

Completed – agreed as shared aim.

Implement recommendations of the nurse preceptorship scheme report.

Completed – implemented as a separate WHC

4. Utilise this work to consider developing similar schemes across other Staff groups.

Referred to HEIW for consideration.

1 to 4 included in Non-pay WHC part 3

Job evaluation

5. We know there are concerns about whether our national role profiles are fit for purpose and whether 'on the ground' people are being asked to undertake duties that exceed the expectations of their role and pay band. We will consider the work being undertaken by the NHS Staff Council and will undertake a review of the national role profiles and develop a national plan and methodology. This will look across teams to ensure roles are well designed, in line with the role profiles and that day-to-day expectations fit with the pay band of individuals.

Delivery as part of the UK Staff Council work with updates to WPC Business Cmte.

6. Review job descriptions which are over three years old - NHS Employers will set up a working group to plan how job descriptions can be reviewed every three years, and explore a potential mechanism to identify priorities, such as areas with a substantial number of vacancies, and how existing Annex 20 arrangements can be applied. They will identify an appropriate reporting mechanism.

The working group will report progress via the Partnership Agreement Hub and complete the work plan by the end of 2023**.

Completed - joint policy statement agreed and published on the Partnership Hub.

Proposals for the implementation of All-Wales Job Descriptions for high priority, high volume roles and proposals for an All-Wales Job Description Review policy are in development and progress is being reported to the Business Committee.

Requires reference in the Agency WHC phase 2.

*** NOTE It was jointly agreed by all the social partners to allow flexibility with regard to the target dates identified whilst the commitment to deliver these elements as agreed by the end of March 2024 remains.*

Flexible Working

1. Implement the principle that acceptance of flexible working becomes the default across the workforce unless there are clear reasons to decline.
2. Deliver an all-Wales policy on flexible working by September 2023**.
3. We know that lack of flexibility about working hours drives some people to working for agencies – we will issue a statement of principles about flexible working which emphasises that requests to work flexibly should be agreed as the default position and this will be fully integrated into our policies by September 2023**, for immediate implementation by employers.
4. An appropriate evaluation mechanism will be developed, exploring all relevant options including the Partnership Agreement Hub, the NHS Executive etc.
5. Reports will be provided through that agreed mechanism on a quarterly basis with the first report due in December 2023**.

Completed – joint statement published and policy agreed at full WPF for implementation throughout Welsh NHS.

To be included in non-pay WHC part 1.

Requires reference in the Agency WHC phase 2 / continuing work.

Advanced rostering

6. We also know that last minute changes to shifts makes it difficult to plan your work life balance and you feel pressured to take shifts at the last minute to provide cover. This is creating extra pressure on people, and this is unacceptable. We will drive through up to date rostering best practice to include rosters issued 12 weeks in advance, whilst recognising some degree of flexibility must be retained, and incentivisation to encourage the early filling of rota gaps in an open and transparent way so people can better plan their working hours to suit their circumstances.
7. In September, Welsh Government will set up a working group with employers, nurse and other interested staff group representatives to identify and embed best rostering practice to explore all the opportunities that better management can deliver for nurses, patients and employers. This group will report by February 2024** with a view to complete implementation as soon as practical before the end of 2024.

Incorporated as part of the reducing agency spend programme.

To be included in Agency WHC phase 2 / continuing work.

Radiology on-call standby

8. Welsh Government are committed to develop a working group to undertake a review of the use of on-call standby in out of hours arrangements in Radiology with the objective to ensure that the frequency of on-call standby does not negatively impact an individual's work-life balance.

Included in non-pay WHC part 2.

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Working Hours

1. Explore reducing hours in the working week for Agenda for Change staff with the aim of moving to a 36-hour working week without loss of earnings.
2. Working group to report by Autumn 2023** on feasibility and implications (service provisions, safe staffing levels, staff wellbeing, and costs).
3. If the 36 hour working week is found to be feasible, affordable and an agreed partnership priority, then the working group will develop a plan by March 2024** which defines a timeline for the move to a 36 hours working week without loss of earnings

In order to establish feasibility and implications the tripartite representatives utilised analysis of Welsh NHS pay and vacancy statistics, relevant aspects of the WPC four day working week review, feedback from the Local Partnership Forum stocktake and information on the approach adopted in NHS Scotland. The WPF Business Committee noted that the aim of reducing working hours was a high priority for the union side. While employers and Government were aware of the staff benefits of reducing hours, the level of detail in the currently available analysis did not provide the necessary assurance on feasibility and affordability.

The WPF Business Committee recognised that it had taken the Scottish partnership two years to arrive at their position on reducing hours and the partners agreed that the Welsh tripartite working group had gone as far as possible, with the time and resources available to it, in developing information to support a decision in Wales. However, it was agreed that a formal feasibility study should now be commissioned from a suitably specialist project team with full access to the necessary data sets and to detailed local arrangements. The tripartite working group analysis can form the basis of the detailed terms of reference for the specialist feasibility study which can also be informed by arrangements being developed in the Scottish NHS.

In addition to overall costings and vacancy analysis, the specialist feasibility study terms of reference should include: - An analysis of the impact of reduced hours on staff retention and wellbeing. - Local service changes which could accommodate reduced working hours without reliance on overtime, agency or increasing vacancies. - Advanced rostering arrangements. - The specific impacts on part-time workers. - Annual leave policies / arrangements. - Consideration of 12 hour shift arrangements. - Safe staffing levels. - Pension benefits. - Delivery of CPD and staff training.

By end of April 2024 a tripartite steering group will be established bringing together relevant expertise and HEIW will have undertaken deep dives to fully explore the requirements of the work to undertake a full feasibility and affordability study of the 36 hr working week and CPD elements of the non-pay agreement. The deep dives will establish exactly what work needs to be undertaken and enable realistic timelines to be set for completion of both studies, although we anticipate that the outputs from both studies will be available prior to the end of quarter 2 2024/25. The outputs will be considered by the WPF Business Committee where any next steps will then be agreed by all three partners.

*** NOTE It was jointly agreed by all the social partners to allow flexibility with regard to the target dates identified whilst the commitment to deliver these elements as agreed by the end of March 2024 remains.*

Retention Strategy

1. Implement and monitor recommendations contained in;
 - National Workforce Implementation plan,
 - Nursing Retention Plan due in April 2023,
 - other professional group retention strategies (including the review of Birthrate Plus Report).
2. Identify recommendations which may be transferrable across all Agenda for Change groups.

Delivery via the HEIW utilising their Nurse Retention Plan and National Retention Programme of work.

Included in WHC part 3.

Note - recruitment and Retention Premia (RRPs) dealt with via agency tripartite group see page 8.

Retire and Return

1. Deliver an all-Wales policy on retire and return by September 2023**.

Completed - reference to retire and return/partial retirement included in all-Wales Pension Flexibilities policy.

2. Reissue and reaffirm retire and return principles and make these mandatory minimum standards from May 2023**.

Statement issued January 2024. To be included in non-pay WHC part 1.

3. Make joint representations in social partnership to UK Government to explore options for future pension flexibility regulation changes to aid retention and facilitate early retirement.

Social partners satisfied this has been delivered through normal engagement.

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Reduction in use of agency

1. We want to reduce the spend on Agency staff and to ensure that we offer fair pay in line with AfC (which includes wider benefits than pay alone) to our own workforce rather than fund the profits of private sector agencies.

Completed – as worded, delivered via the tripartite reducing agency group and Agency WHC Phase 1

2. We will work in social partnership to reduce reliance on agency workers through all means possible including adherence to the NHS Agenda for Change Terms & Conditions.

Completed – as worded, delivered via the tripartite reducing agency group and Agency WHC Phase 1

3. Incentivise NHS employment e.g. weekly pay, annualised hours, additional hours.
4. Review the use of overtime and bank rates to incentivise.
5. Any extra hours added onto the end of the shift due to work pressures will be paid at overtime rates across all roles.

Included in non-pay WHC part 1 (existing T&Cs).

To be included in Agency WHC phase 2 / continuing work.

6. Robust national action will be planned and delivered in social partnership with the establishment of a Steering Group in July**.

Completed – as worded, delivered via the tripartite reducing agency group

7. The Group will explore and develop actions in a number of areas including -
 - All the items collectively agreed under point 5 of the non-pay elements of the pay offer from May.
 - Priority will be given to exploring the issues around additional hours pay, we will develop a national approach to paying bank shifts at substantive grade rates.

Included in non-pay WHC part 1 (existing T&Cs).

To be included in Agency WHC phase 2 / continuing work.

*** NOTE It was jointly agreed by all the social partners to allow flexibility with regard to the target dates identified whilst the commitment to deliver these elements as agreed by the end of March 2024 remains.*

Agency group - Additional hours

8. We also know that people find shift overruns and working through breaks is tiring and frustrating and this is compounded by the unfairness that some of these additional hours are not remunerated. Welsh Government will work with NHS Employers to issue a pay letter by end of September 2023** to ensure that nurses are paid properly for the hours they work including their breaks and shift over runs in line with national agreed terms and conditions.
9. A working group will be established in October 2023** by NHS Employers to ensure a robust system is in place for the logging and claiming of additional hours that is able to produce regular reports by April 2024**. An interim solution will be put in place by employers as this work is undertaken.

Included in non-pay WHC part 1 (existing T&Cs).

To be included in Agency WHC phase 2 / continuing work.

Agency group - Recruitment and Retention Premia (RRP)

10. Alongside the work on retention and limiting agency use, the Welsh Government will set up a review to develop national guidance on the appropriate and proportionate use of RRPs against shortages in certain specialist areas, that review will conclude by the end of November 2023**, implementation of the national guidance will be reviewed in partnership.
11. This will recognise that all applications to pay RRP will need to first be endorsed by the WPF Business Committee as part of the existing governance mechanism around the use of RRP.
12. Where a retention plan is developed it must contain specific reference to the national guidance on the use of RRPs.

Advice issued on appropriate to use of, and approval mechanism for, RRPs.

Approval and monitoring of any Recruitment and Retention remains with WPF Business Committee.

Requires reference in the agency WHC phase 2.

*** NOTE It was jointly agreed by all the social partners to allow flexibility with regard to the target dates identified whilst the commitment to deliver these elements as agreed by the end of March 2024 remains.*

Health and well-being

1. Work in social partnership to deliver a programme of changes that improve individuals experience of work.
2. Support for individuals to enable people to remain in work or return from absence as quickly as possible.
3. Ensure that support for the mental wellbeing of staff has parity with physical wellbeing support.
4. A focus on redeployment (including cross boundary working) rather than sickness absence when this is appropriate.
5. Full implementation of the Fatigue and Facilities and Midwives Caring for You Charters.

Social partnership engagement in relevant NWIP work streams, service networks and WPF tripartite groups.

Include access to hydration aspect of the staff welfare project in WHC part 1 assurance report.

Include in non-pay WHC part 2 assurance on implementation of all-Wales Occupational Health minimum service levels/KPIs incorporating monitoring and support.

Include in non-pay WHC part 3 delivery of HEIW 'Staff Health and Wellbeing best practice guide' (incorporating nutrition and rest aspects of the staff welfare project).

Continuing Professional Development (CPD)

1. CPD is included as a priority in the National Workforce Implementation Plan is led by HEIW. This will include;
 - incorporate the output of the staff welfare project (note this refers to CPD output see page 9 for other output),
 - identify key benefits in staff retention, working at top of licence, utilising whole workforce and delivering prudent health care,
 - have the long term goal for all staff protected time as parity with medics but set specific steps to achieving that which are realistic and achievable.
Included in part 3 of the non-pay WHC.

2. Alongside this, the WPF Business Committee will jointly;
 - immediately reaffirm the current expectations of employers to enable regular CPD time to support the maintenance of professional registration, The relevant requirements of the Nursing Staff Levels Act (2016) Statutory Guidance (paras 38 and 40) and the Duty of Quality Statutory Guidance 2023 and Quality Standards 2023 (paras 6.5 and 12.15) included in part 1 of the non-pay WHC.
 - develop an all-Wales approach which guarantees protected time for staff CPD See below.
(with the aim, over time, of extending this guarantee to all NHS staff learning and development). Included in part 3 of the non-pay WHC.

All-Wales approach on protected time

Further develop an All-Wales approach in this area for staff required to maintain professional registration in the first instance.

Appoint a joint steering group to lead the work (with employer and union co-chairs).

The joint steering group will:-

- Set clear parameters regarding the scope of this work.
- Agree in partnership the data set that will be used.
- Consider the impact of other commitments, in related areas, already made and any other changes to staff learning and development that may be agreed in future.
- Take account of the union side expectation that 52 hours per year should be an appropriate standard.
- Consider how any staff groups who already have designated CPD hours are not at a detriment following this work.

- Commission an assessment to identify;
 - the time required for registrants to undertake the training required to maintain professional registration
 - the implications of guaranteed protection of this time (including unintended consequences and opportunities e.g. use of the “payback shift” for training time),

The joint steering group will report its findings to the WPF Business Committee and make a proposal (with robust delivery mechanism) for implementation by the end of Quarter 3 2024/2025.

By end of April 2024 a tripartite steering group will be established bringing together relevant expertise and HEIW will have undertaken deep dives to fully explore the requirements of the work to undertake a full feasibility and affordability study of the 36 hr working week and CPD elements of the non-pay agreement.

The deep dives will establish exactly what work needs to be undertaken and enable realistic timelines to be set for completion of both studies, although we anticipate that the outputs from both studies will be available prior to the end of quarter 2 2024/25.

The outputs will be considered by the WPF Business Committee where any next steps will then be agreed by all three partners.

Partnership Agreement Hub

Create a Partnership Agreement Hub by July 2023** which will;

- disseminate agreements,
- track progress, and
- hold the relevant organisations to account for delivery and compliance with terms & conditions and all-Wales policies.

Completed – hub established, the non-pay WHC control framework process identified for delivery and compliance with aspects of the non-pay collective agreement alongside the normal WPF Business Committee functions.

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Ensuring safe and effective care for our service users

1. We are all committed to providing the best care for our patients and Welsh Government will establish a task and finish by October 2023** to include representatives such as, Chief Operating Officers, nurses and other staff groups working in some of our most challenging settings so that they can help us to find ways to ensure that care is delivered in safe and appropriate setting across Wales.

Delivery via the operational group established to redraft the national escalation policy (group involves nurses through EDONs).

2. We commit that onboarding (allocating extra patients to wards/departments over establishment) or corridor care will only be enacted in exceptional circumstances through the named responsible executive.

Business Committee will provide on-going assurance that this is adequately delivered in the escalation policy currently under development and if there is a need for any interim measures.

3. A national escalation policy will be developed and implemented containing “must not dos” in terms of examinations / investigations / personal sensitive communications undertaken in inappropriate settings which compromise the privacy and dignity for all.

Business Committee will provide on-going assurance that this is adequately delivered in the escalation policy currently under development and that the social partnership input process is appropriate to needs.

The overall escalation policy is subject to a separate delivery process/specific WHC.

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Pay restoration

1. Welsh Government commit to the principle of pay restoration to 2008 levels.
Commitment in principle made but an agreed definition of pay restoration remains to be agreed.

1. Work in social partnership to make practical plans to meet this aim (including influence UK Government and Pay Review Body).
2. Pay Review Body (PRB) process - work in social partnership to influence changes to the PRB process for future years.

Tripartite working group established and work is on-going.

1. Treatment of consequentials - in line with our commitment to pay restoration, should the Welsh Government receive consequential funding from the UK Government as a result of the pay award for the NHS in England 2023/24 being more generous than the award made in Wales, or any other significant change in circumstances, we will agree to discuss the pay award in Wales.

None were forthcoming – kept under review.