

Board of Directors Meeting in Public

Subject:	Medical Workforce Report	Date: 4 th May 2023		
Prepared By:	Rebecca Freeman – Head of Medical Workforce			
Approved By:	David Selwyn – Medical Director			
Presented By:	David Selwyn			
Purpose				
The purpose of this report is to provide the Board of Directors with an overview of the statutory regulatory aspects and recent developments in relation to the Medical Workforce		Approval		
		Assurance		
		Update		
		Consider		
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
X	X	X	X	X
Identify which principal risk this report relates to:				
PR1	Significant deterioration in standards of safety and care			X
PR2	Demand that overwhelms capacity			X
PR3	Critical shortage of workforce capacity and capability			X
PR4	Failure to achieve the Trust's financial strategy			X
PR5	Inability to initiate and implement evidence-based Improvement and innovation			
PR6	Working more closely with local health and care partners does not fully deliver the required benefits			
PR7	Major disruptive incident			
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change			
Committees/groups where this item has been presented before				
Aspects of this report have been presented to the Local Negotiating Committee and the People Cabinet.				
Acronyms				
SAS Doctors – Specialty Doctors and Associate Specialists/Specialists ARCP – Annual Review of Competency Progress KTC – Kings Treatment Centre JLNC – Joint Local Negotiating Committee NHSE – NHS England BMA – British Medical Association GMC – General Medical Council RCP- Royal College of Physicians				
Executive Summary				
<p>This report provides an overview of the progress against the regulatory aspects, specifically Medical Appraisal and Revalidation. The report also describes the progress in job planning for 2023/24.</p> <p>The report includes details of the current Medical vacancies and describes the areas of focus with the recruitment Task and Finish Groups. It provides an update on the progress of the implementation of new Trust bank rates.</p> <p>There is a summary of the additional training posts that can be expected in both the Foundation</p>				

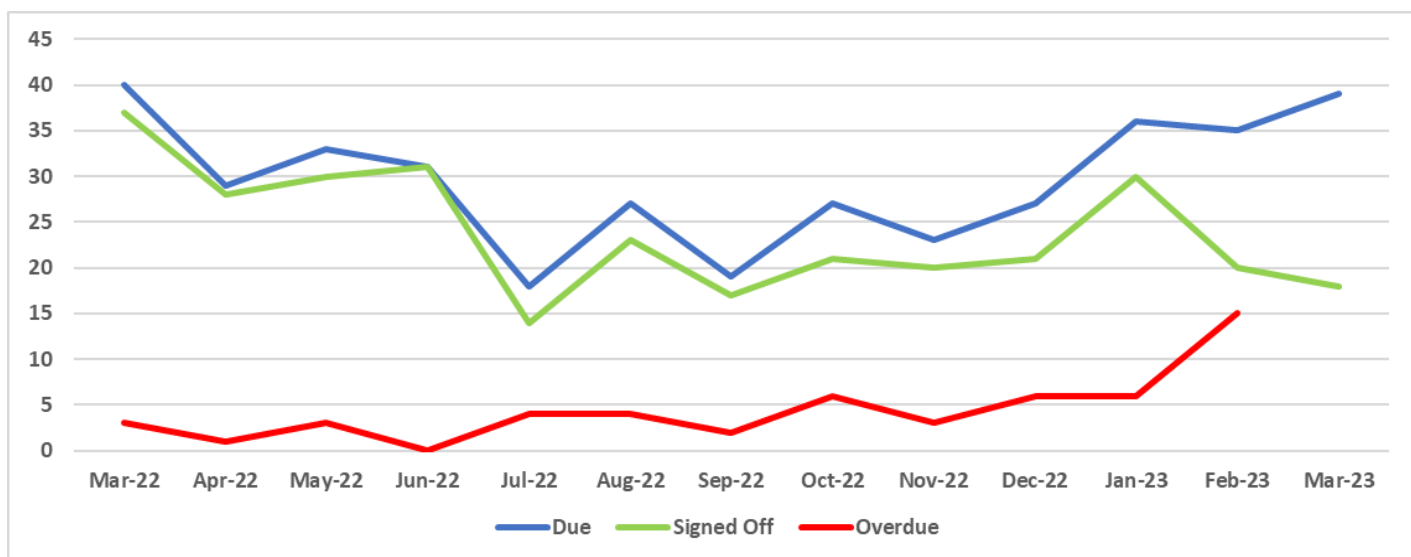
Programme and Specialty Trainees in August 2023.

The Board of Directors is asked to:

- Note the contents of this report
- Recognise that this work feeds into a number of areas of focus including the Guardian of Safe Working report, Strategic Direction of Medical Training and Education at the Trust and the Medical Transformation Programme.

Looking after our People

Appraisal and Revalidation



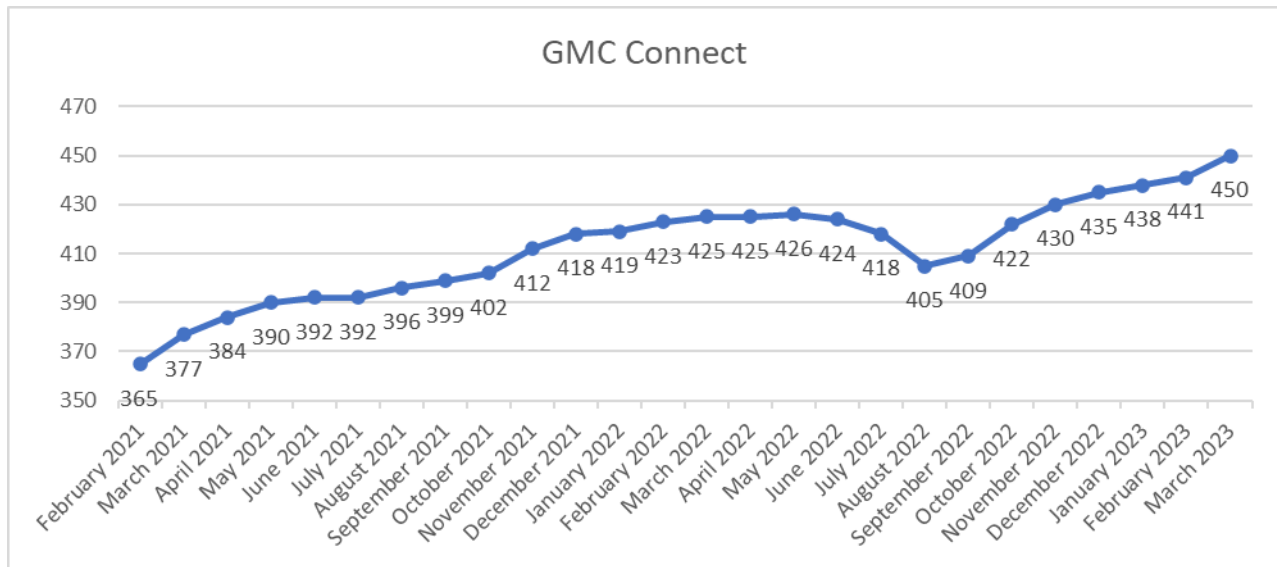
Appraisal compliance for the Trust is currently 88%. There are 53 appraisals that are currently overdue and the Medical Workforce Manager continues to work with these individuals to highlight the importance of completing their appraisal.

The Trust has 26 appraisers undertaking appraisals and this number will increase inline with the increase in Consultants and SAS doctors.

Senior Clinical Fellows and Clinical Fellows undertake an annual review of their progress against specified competencies (ARCP), this process is also followed by the Postgraduate Trainees. It involves the Senior/Clinical Fellows presenting their training, development and work experience or e-portfolio, to a panel of consultants who make an assessment of their progress to date. This is organised by the Medical Workforce Team and currently there are 95 Senior/Clinical Fellows going through this process. Although this does take a great deal of time to arrange and relies on the support of our consultants, this aspect of the programme is not replicated by any other Trust and sets SFH apart from other Trusts offering a Clinical Fellow programme. The Fellows feel that it is a supportive process that prepares them for a training post which the majority will move on to.

There are currently 450 doctors connected to the Trust with the GMC. These are the doctors that the Medical Director is accountable for the local clinical governance processes within SFH, focusing on the conduct and performance of doctors. These duties include evaluating a doctor's fitness to practise, and liaising with the GMC over relevant concerns, queries and procedures.

The graph below shows that this number has increased by 85 since February 2021.



Revalidation

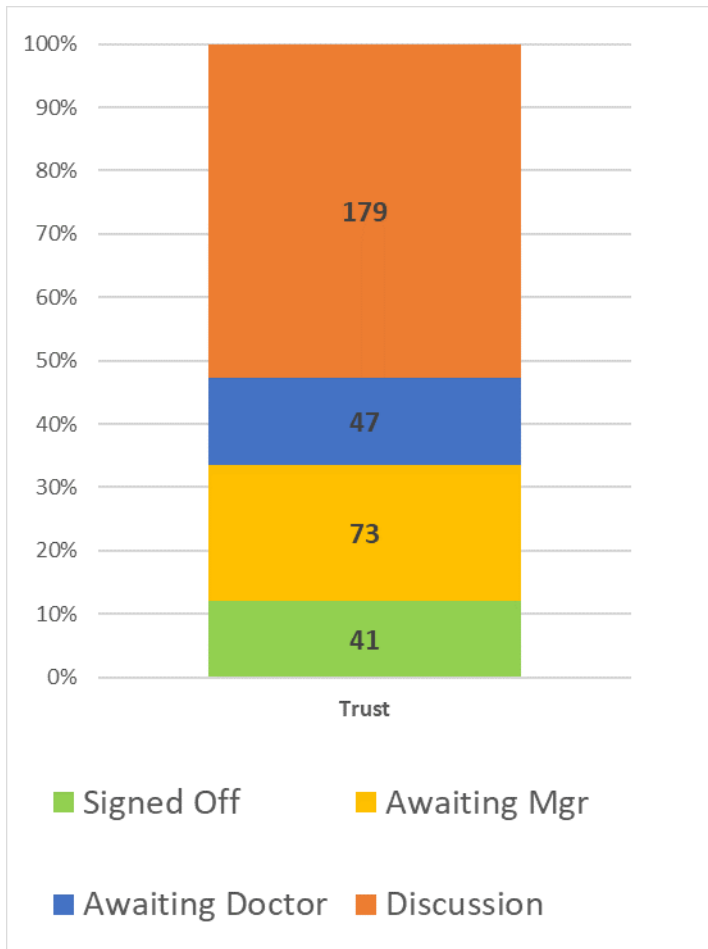
66 doctors are due to revalidate between April 2023 and March 2024. 7 of these doctors have already been revalidated and one doctor has been deferred due to not having the required information available to revalidate. GMC revalidation meetings take place with the Head of Medical Workforce, Medical Workforce Manager and the Associate Medical Director for Workforce to review portfolios and during those meetings a decision will be made to either recommend revalidation or defer based on individual readiness. The final decision rests with the GMC.

Job Planning for 2023/24

The job planning process for 2023/24 is well underway, many specialties have completed their team job planning meetings and are now progressing with the individual job planning process, as can be seen from the chart below 179 job plans are currently in discussion with 73 awaiting sign off by the Manager. Divisional job planning panel meetings have been arranged in April and May. Meetings have already taken place with Radiology, Cardiology and Rheumatology which has resulted in 41 job plans being fully signed off.

Once the job plan is fully signed off the Medical Workforce Team ensure any changes to the doctors' salary as a result of job plan change are communicated to Pay Services.

The Trust Job Planning Toolkit is due to be reviewed this year in readiness for the 2024/25 job planning round in conjunction with the Joint Local Negotiating Committee (JLNC).



Junior Doctors Strike

There have been two strikes involving the Postgraduate Trainees and the Clinical Fellows/Senior Clinical Fellows, this Industrial Action was between the British Medical Association and HM Government. The first strike took place from 13th to 15th March 2023 for 72 hours and the second strike took place from 11th to 15th April 2023 for 96 hours. During both periods an average of 85% of this group of doctors took strike action. During these periods of action the Trust supported the staff providing cover by having a well-being offer including tea, coffee cold drinks and snacks available in the Deli Marche. There was a picket line on entrance to the Trust each morning during the period of the strike and a member of the Executive Team together with a member of the People Function made a daily visit to the doctors on the picket line. During this period the consultants and SAS doctors covered the hospital. With the focus during the strikes being to provide cover for the emergency pathway and inpatients across the Trust a number of planned care clinics and operating lists were cancelled. However, we did manage to maintain most and some cancer operating and diagnostic services during the 2 periods of Industrial Action. We are currently in the process of capturing the resultant impact and/ or harm to our patients, colleagues who were working during this time and our junior doctors. The BMA is currently undergoing a period of review and reflection following their Industrial Action and an indicative ballot date for consideration of Consultant Industrial Action has been set to open 15th May 2023.

Doctors Mess

The provision of a suitable Doctor's Mess is a statutory Trust employment requirement. It is more than a physical space or area and provides a sacred or organisation base linking trainees and junior doctors with each other and the employing Trust, in essence it offers them with a 'home' and provides sense of belonging. It also facilitates sensitive clinical discussions, advice and guidance and formal referrals and handover of confidential patient information. Historically it has provided a safe space for teaching, consultant guidance and a social hub.

The current Doctors Mess is very small, particularly noting the workforce expansion, and is located within close proximity to the Education Centre. Unfortunately, this is a significant distance from the main areas of clinical activity and as such, is not central to the hospital wards/departments. This limits the ability of doctors to visit the 'mess', it has also had a decline in facilities offered along with doctor's safety concerns of being removed from acute areas.

Consequently, over the last few years, the use of the doctors mess has declined. The Trainee workforce is a highly important but transient Trust workforce and having a mess that is functional, active and vibrant whilst being central to the clinical activity, that they can easily access to decompress and to ensure their own well-being. This is not possible on/ in ward areas. It requires comfortable rest facilities, enabling them to take time out when they are able to do so. Computer and essential patient information system access is mandatory. The current mess has had poor Wi-Fi and mobile signal connection.

There is significant current national concern around recent fatalities of junior doctors driving home following overnight shifts without breaks and the Trust has received 'well-being' money to develop junior doctor rest areas.

Following Trust Board direction, work on relocating the Doctor's Mess has been re-invigorated. The proposed location for the Doctors Mess is the current Deli Marche on the 6th floor. A Task and Finish group has been established to work through what is required to re-apportion this space as the Doctors Mess. This space is currently used as a rest area for staff which will be also require to be re-provided in another locality within the Trust, likely to be in the KTC.

Two meetings of the Task and Finish Group have been held and a walk around the Deli Marche is arranged for Friday 28th April 2023 with members of the Estates team, representatives from the Task and Finish Group and some Trainees to progress this. Further updates will be provided via the People, Culture & Improvement Committee.

Chief Registrar

The RCP Chief Registrar Programme is a flagship leadership development programme for trainee doctors who are committed to quality improvement. Created as a senior leadership role for doctors, the programme develops the clinical leaders of the future and helps chief registrars to ensure NHS organisations deliver the highest quality of treatment and care for patients. The aims of the programme are;

- To provide a vital bridge between senior clinical leaders, managers and the wider trainee workforce
- address local challenges and priorities around service improvement, education and training, engagement and morale, workforce and sustainability

- collaborate across teams and traditional boundaries to deliver better outcomes for patients, teams and services, increasing efficiency and reducing costs.

Unfortunately, last year the Trust was not able to recruit a Chief Registrar which has had an impact on the current group of Trainees. It has generally felt that there has been a lack of engagement amongst the Trainees and we have missed their voice helping us shape and improve our services.

Dr Oliver Smith has been appointed to the post of Chief Registrar for the Trust commencing in post in August 2023. Dr Smith is currently a Specialty Trainee - Year 5 within Obstetrics and Gynaecology and is taking a year out of training to undertake this role.

Climate Action Fellows

The Trust has also been successful in a bid for two Climate Action Fellows, these posts are funded by NHSE and provide an opportunity for trainees/Clinical Fellows or other Healthcare Professionals to work alongside the Climate Action Team for half of their working week. These posts have been recruited to and the individuals commence in post in August.

Guardian of Safe Working

As mentioned in the last Medical Workforce report, Dr Martin Cooper the Guardian of Safe Working retired from the Trust on 29th March 2023. The post has been advertised and there are three applicants for the post. Interviews are currently taking place.

Belonging in the NHS

New Trust Bank Rates

Following on from the last report, the Trust Bank Rates were presented to the JLNC in November 2022, however, the move to the new rates was not supported by the JLNC due to the rates being below those that have been unilaterally proposed by the British Medical Association (BMA).

A paper was written for Trust Management Team detailing the proposed Trust bank rates. Although the new bank rates provided equity across specialties, concern was raised that in some areas this would result in a reduction to current enhanced rates, which would create some risks as individuals may decide not to undertake the additional work for the revised rates. A component of the updated rate card was the removal of waiting list initiatives as a tariff and the commitment to annual review of the rate card. An updated paper was presented clearly describing the risks for further scrutiny. This paper was supported and it was agreed to go ahead with the implementation of the new bank rates. This updated paper was taken through the LNC but again was not supported by the BMA members. Despite developing a communication plan and proposed launch of the new rates, this implementation was paused following the announcement of the periods of industrial action and the rapid escalation of ICB Trust rates to match the BMA rate card.

Whilst we await the resolution of Industrial Action, NHSE has committed to tasking NHS Employers to open discussions with the BMA to settle a mutually agreed national rate card. In the meantime, NHSE does not support BMA rates but recognises that local discretion is required.

Medical Workforce Data

The Chart below shows the doctors that are employed by the Trust by contract type and gender split by full time/part time. There are currently 623 doctors employed by the Trust, this figure excludes doctors on the Trust bank. The majority 518 (83%) work full-time and 105 (17%) work part-time.

Medical Workforce

Gender	Fixed Term Temp	Locum	Permanent	Total Headcount
Full Time	280	15	223	518
Female	132	2	67	201
Male	148	13	156	317
Part Time	33	5	67	105
Female	25	1	40	66
Male	8	4	27	39
Total Headcount	313	20	290	623

The charts below concentrate on the Consultant workforce, it shows the age profile of the consultant body and as can be seen below 62 (27%) of consultants are 56 years of age and above, this group of doctors represents over a quarter of our consultant workforce, are very experienced doctors and are likely to be considering retirement within the next few years and work is being undertaken to develop workforce plans in the specific areas that this is likely to affect.

Consultants

Age Range	Fixed Term Temp	Locum	Permanent	Grand Total
31-35		1	1	2
36-40		9	4	37
41-45		5	5	49
46-50		4	4	44
51-55		3	2	37
56-60		4	2	33
61-65		2	2	9
66-70		1		6
>=71 Years			3	3
Total Headcount	29	19	183	231

The chart below shows that we currently have 231 consultants employed by the Trust, 73 are female and 158 male, the chart also shows the full-time and part time split by gender and contract type. This also shows us that 66% of our consultant body work on a full-time basis.

Consultants only

Gender	Fixed Term			Total Headcount
	Temp	Locum	Permanent	
Full Time	24	15	133	172
Female	6	2	36	44
Male	18	13	97	128
Part Time	5	4	50	59
Female	2	1	26	29
Male	3	3	24	30
Total Headcount	29	19	183	231

New Ways of Working

Vacancies

The bar chart below shows the number of Medical Vacancies that are currently being actively recruited to. In total there are currently 45 Medical vacancies and as can be seen below, 27 are currently featuring on the bar chart below. The remaining vacancies have either been recently advertised and are about to be advertised again or the service is considering alternative options which would include looking at other roles/solutions to covering the vacancies.

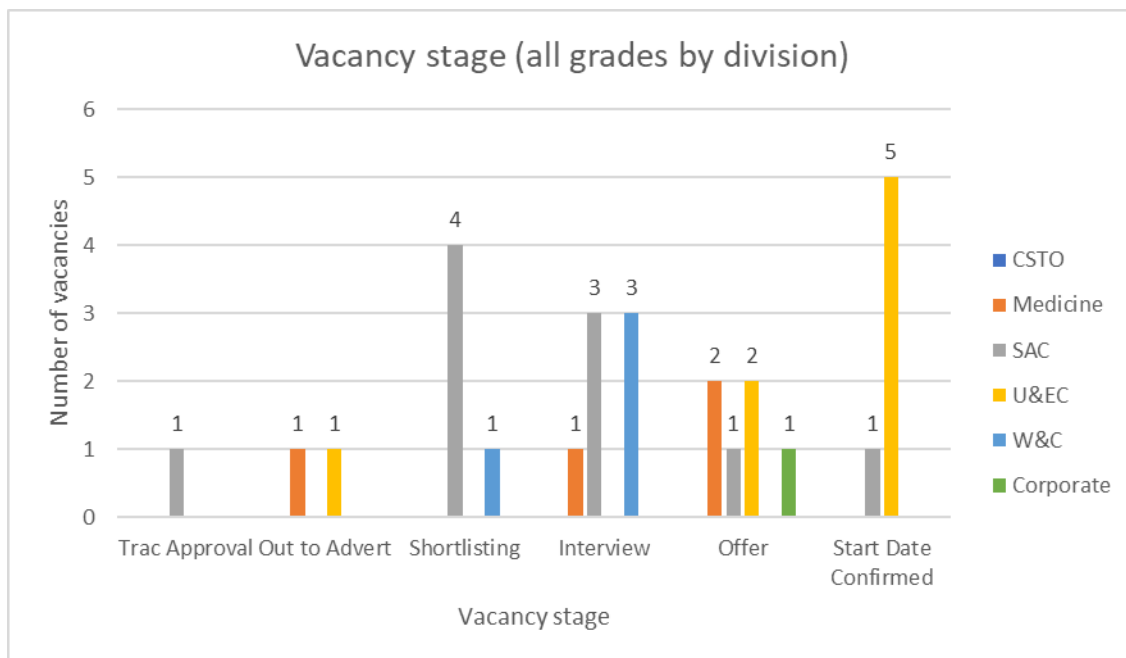
As recruitment to some hard to fill posts nationally is becoming increasingly difficult, the Medical Workforce team are working with Specialties to consider alternatives. This may include appointing to the new Specialist role rather than a Consultant, which is likely to attract more interest as although a doctor does need 11 year's experience in the specialty, they do not need to have their Certificate of Eligibility of Specialist Registration. This also may mean making some changes to responsibilities within specialty teams where a specialist is appointed as the role of Specialist is an expert in a particular sub-specialty rather than having the broad range of responsibilities that a consultant would have within the specialty.

In some areas consideration is also being given to joint Consultant posts across Trusts, initial discussions are taking place with both Chesterfield and Nottingham. Joint posts give Consultants the opportunity to experience working at more than one organisation and particularly with Nottingham working at both a University Hospital and a District General Hospital simultaneously is a unique opportunity and does appeal to candidates who are keen to obtain both the general experience of a District General Hospital and the more specialist experience that at University Hospital can provide.

In a number of specialties, whilst considering the current vacancies and discussing recruitment options with the specialties, discussions are also taking place relating to developing the medical workforce of the future utilising a more 'blended' workforce approach with alternative models.

There are over 90 Specialty Doctors across the Trust, a number of which are keen to progress to become consultants and encouraging the specialties to support these doctors with completing their portfolio of evidence and undertaking any additional training required external to the Trust to enable them to make an application for their Certificate of Eligibility of Specialist Registration is investing in the Senior Medical Workforce for the future.

Some specialties have also collaborated to encourage applicants to apply for Consultant posts that are split between two specialties, posts that have been appointed include ED and Intensive Care, Acute Medicine and Intensive Care and this is being explored further with the aim of developing a Consultant role around an individuals interests that also meets the needs of our services.



Task and Finish Group Progress

Task and Finish Groups are continuing with Anaesthetics, Haematology and Gastroenterology. Since the retirement of a consultant from Stroke Medicine this has also become an area of concern and a Task and Finish Group has been established for that area. The table below shows the focus on each of these fragile specialties and action that is currently being taken.

Group	Action
Anaesthetics	There are a number of vacancies within Anaesthetics at Consultant, Specialist and Specialty doctor levels. The vacancies at Specialty Doctor level have been created due to appointments that have recently been made to

	<p>Specialist posts. It is anticipated that the Department will be able to recruit to the posts at both Specialist and Specialty Doctor level.</p> <p>The area of concern remains recruitment to consultant posts. Both fixed term consultant and substantive consultant posts have been advertised and 6 applications have been received for the fixed term post and 3 applications have been received for the substantive post. Discussions have also been undertaken with Nottingham University Hospitals to consider joint consultant posts and discussions have been undertaken with the Department with a view to converting some consultant posts into specialist posts as it is likely they will be easier to recruit to.</p>
Haematology	<p>A fixed term consultant post has recently been recruited. Another fixed term consultant post is currently being advertised and it is likely this post will be recruited to. This will mean that Haematology will be fully established at Consultant level and further discussion will take place at the next meeting to produce a medium term workforce plan for this department.</p>
Gastroenterology	<p>The Department has three vacancies that are currently being filled by a combination of agency locum doctors and fixed term consultants. A Specialty Doctor post will be advertised within the next week following an informal expression of interest in the Trust being received from an experienced Gastroenterologist who is currently working toward obtaining their Certificate of Eligibility for Specialist Registration to enable them to become a substantive consultant</p>
Stroke Medicine	<p>A Task and Finish group has recently been established for this area and a meeting has been arranged for 27th April 2023 to develop an action plan.</p>

Additional Posts for August

Additional Training Posts

Work is now underway planning for the main changeover in August 2023. The Trust was successful in bidding for Foundation Year 1 posts for August 2022, as part of both the expansion of the Foundation Programme and the planned over recruitment to support the national Medical Workforce plan. As a result, this August there will be an additional 12 posts at Foundation 2 level as these doctors' progress through their training. There will be an additional 3 posts at Foundation Year 1 that were bid for in August 2022 with an agreed commencement date of August 2023.

The Trust has also been successful in bidding for higher Training posts, these include 7 posts that are partially funded by NHSE and a further 8 posts that require Trust funding. The Trust has lost three higher training posts so this has resulted in a net gain of 12 higher training posts.

A breakdown of the posts that have been allocated to the Trust is detailed below.

Specialty	Number of Posts
Respiratory Medicine	2
ENT	2
General Surgery	2
Internal Medicine Trainees	2
Obstetrics & Gynaecology	2
Intensive Care Medicine	1
Paediatrics	3
Rheumatology	1

Given the increase in the number of posts as described above, work is now underway reviewing the rotas for each of the areas in preparation for the main Junior Doctors changeover in August 2023.

Clinical Fellow Recruitment

Interviews have taken place for Clinical Fellows for August 2023 and a total of 27 Clinical Fellows have now been recruited and accepted a post in Medicine, recruitment checks are currently in progress, it is anticipated that these Clinical Fellows will commence in post in June/July ready for the rotation in August 2023.

Conclusion

The Board of Directors is asked to take assurance from the update that this paper provides and is asked to:

- Note the progress being made in relocating and improving the offer around the Doctors Mess
- Recognise the work and successes, that is being undertaken in the Task and Finish Groups to provide focus for the fragile services across the Trust
- Note the increase in Foundation and Specialty Training posts and the recruitment of a Chief Registrar.