

Human Resources - Quarterly Workforce Report

Quarter 3 – 2014/2015 Financial Year

Board of Directors Meeting – 29th January 2014

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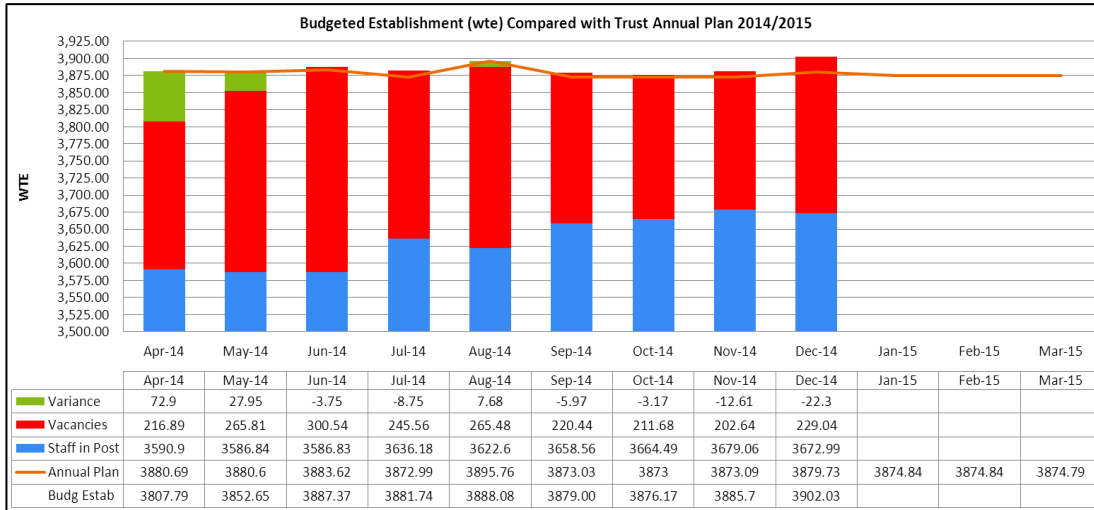
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1.0 Introduction & Summary

This report focuses on the key performance indicators for the Trust's workforce which are monitored monthly and quarterly, this report presents the quarterly position for the Trust specifically October, November and December 2014. The report is presented by Karen Fisher, Executive Director of Human Resources and has been written and prepared by the Deputy Director of HR and the Workforce Information Manager, along with other relevant leads within the HR function.

The report contains the Trust position for establishments, staff in post, fixed and variable pay, sickness absence and appraisal information. There are other information streams that aim to compliment the workforce information provided and to update the Board of Directors on the Trust progress against the key HR targets.

2.0 Budgeted Establishment, Staff In Post and Vacancies – Source ESR & Integra (Finance System)



Vacancy Rate - Number of Vacancies Compared to Budgeted Establishment per Staff Group	Q1 (ave)	Q2 (ave)	Q3 (ave)
Admin & Clerical	11.68%	5.04%	5.36%
Allied Health Professionals	7.36%	1.17%	-1.01%
Ancillary	-7.42%	-10.25%	-15.60%
Medical & Dental	8.13%	3.74%	3.07%
Registered Nurse	15.47%	8.49%	5.54%
Scientific & Professional	3.95%	2.60%	5.17%
Technical & Other	3.59%	5.85%	5.83%
Unregistered Nurse	12.53%	9.52%	11.25%
Grand Total	6.71%	6.28%	5.55%

1. The above chart shows the Trust position for staff in post and vacancies against the Trust's annual plan for the 2014/2015 financial year. Budgeted establishment is shown in the table.

2. The above table shows the vacancy rate comparisons between quarter 1, quarter 2 and quarter 3.

Budgeted Establishment

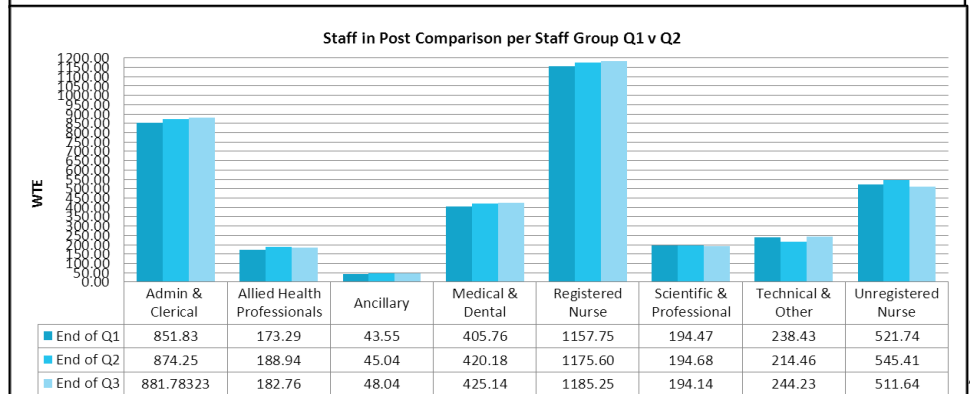
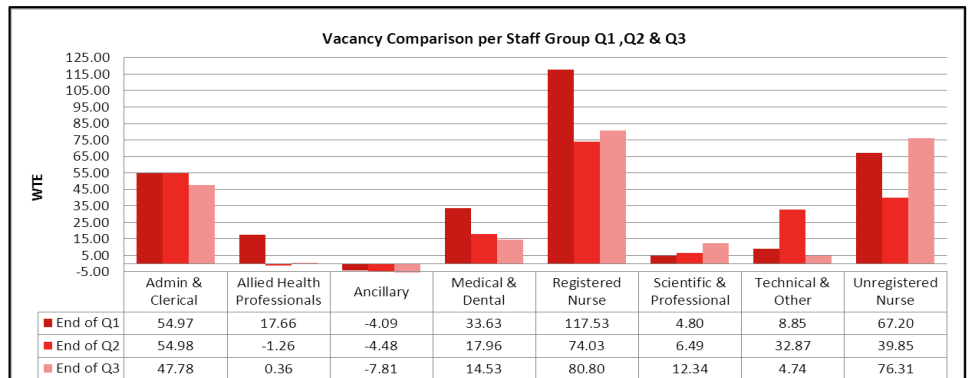
- Establishment was 22.3 wte's above annual plan at the end of quarter 3
- Establishments increased by 23.03 wte's in quarter 3 bringing the closing establishments to 3902.03 wte's.

Staff in Post

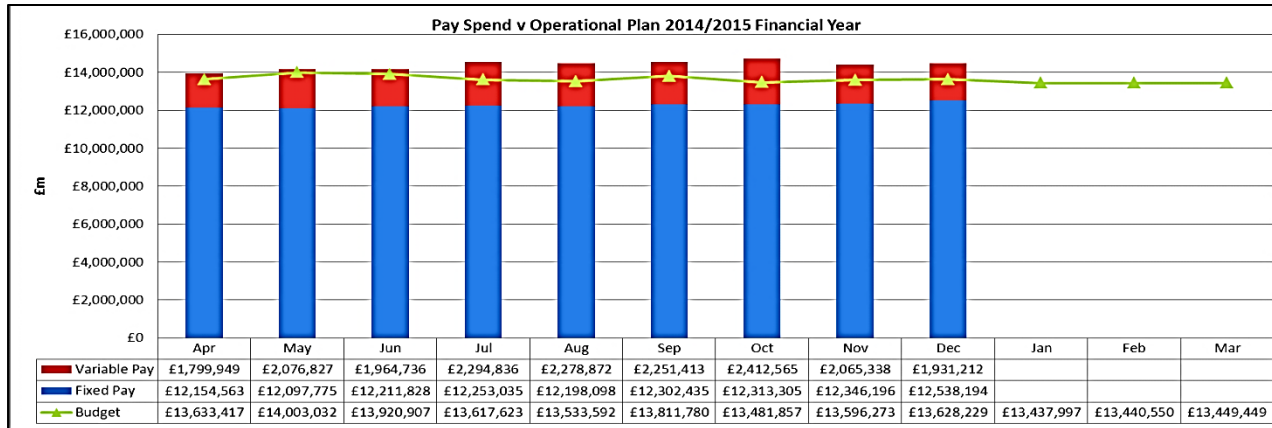
- Staff in post increased by 14.43 wte's in quarter 3, 9.65 wte's attributable to an increase in Registered Nurses which reflects the continued work being undertaken to vacant posts.
- There are 35 international Registered Nurses within the recruitment process currently who are due to start between now and the end of March 2015.
- From the beginning of the financial year staff in post has increased by 82.09 wte's, the Registered Nurse staff in post has increased by 26.47 wte's and the Medical staff in post has increased by 16.27 wte's. The Trust has recruited a total of 97.83 wte Registered Nurses since the beginning of April 2014.

Vacancies

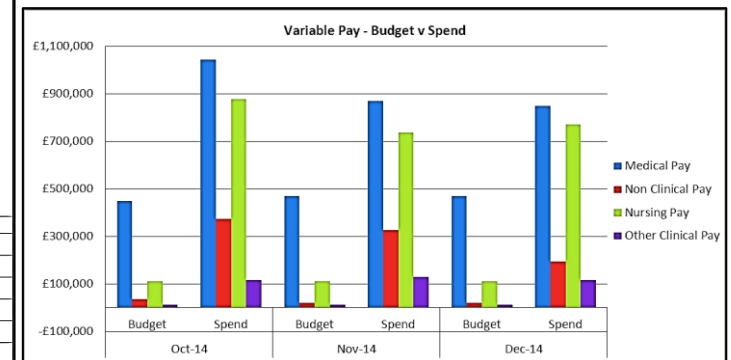
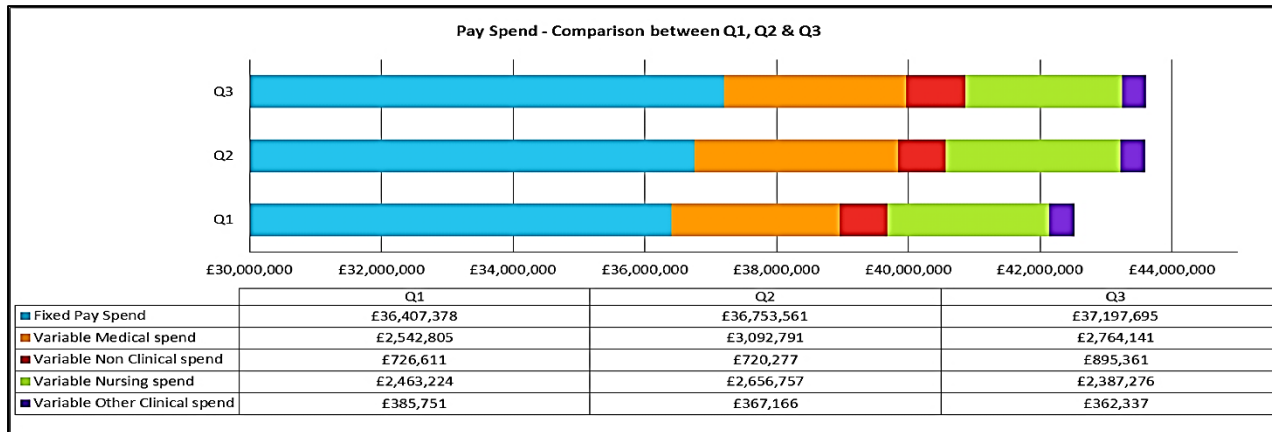
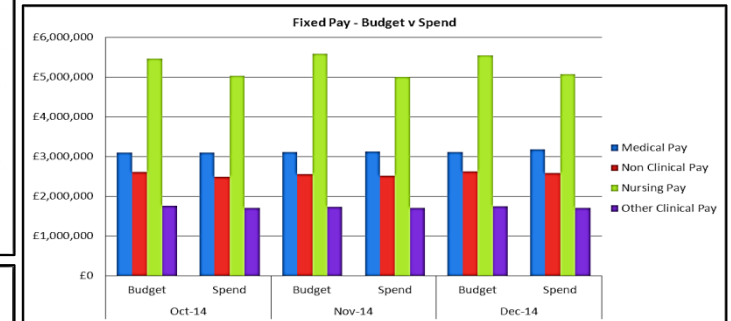
- The vacancy rate at the end of quarter 3 was 5.87% with 229.04 wte vacancies at the end of December, this compared to 5.68% at the end of quarter 2. The increased position is due to an increase in establishments.
- In quarter 3 the Registered Nurse staff group saw an increase in vacancies of 6.77 wte's due to minor budgeted establishment increases across a number of areas, the Unregistered Nurse staff group vacancies have increased by 36.46 wte's due to the implementation of the Keogh Nursing numbers to mitigate the impact on Health Care Support Workers.
- The Ancillary vacancies are showing as a minus figure as there is work to be undertaken to recode staff within ESR and the financial ledger.



3.0 Pay Spend – Fixed and Variable Pay – Source Integra (Finance System)



1. The adjacent chart shows pay spend against the operational plan for the 2014/2015 financial year. **The figures do not include reserve funding or Facilities pay spend.**
2. The below charts show break down of fixed and variable pay spends against budget.



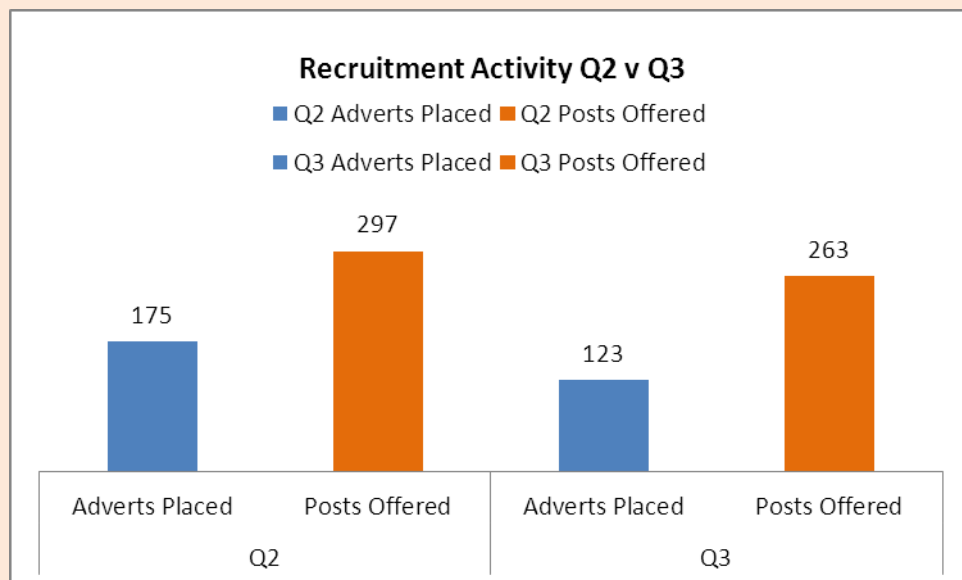
Pay Spend

- **Pay spend** totalled £43.60m in quarter 3, this compared to a £43.57m spend in quarter 2, an increase of £28k, a position that is broadly comparable between quarters.
- **Pay budget** for quarter 3 was £40.70m, this meant a £2.9m overspend which compared to a £2.61m overspend in quarter 2.
- **Fixed pay spend** increased in quarter 3 to £37.19m compared to £36.75m spend in quarter 2, this position is reflective of the increased staff in post. Fixed pay in quarter 3 is underspent by £1.73m.
- **Variable pay spend** decreased to £6.40m in quarter 3 which compared to £6.83m in quarter 2 a £427k decrease.
- The top 3 areas for variable pay spend in quarter 3 were:
 - **A&E Medical** - £604,308k – There has been a high number of vacancies amongst the Medical staff in A&E for Middle Grade and Consultant levels which have been backfilled by use of agency and existing staff to cover the gaps in the rotas. At the end of December there were 4 Consultant vacancies and 6 Specialty Doctor vacancies. Since November the Trust has also incurred a cost pressure due to 2 Specialty Doctors working supernumerary period until the end of February 2015. The Trust are working with recruitment agencies to address gaps. Extra cover has also been utilised for Consultant, Specialty Doctor and Junior grades during the extreme pressures the Trust has experienced during quarter 3.
 - **Junior Doctor KMH** - £344,744k – The Trust has 4 extra junior doctors in T&O and General Surgery to enhance rota compliance and improve the quality of training, in April 2015 this will be funded as fixed pay. There has also been variable pay used in order to utilise extra cover at junior level to address the pressures within the Trust.
 - **KMH Emergency Assessment Unit** - £248,487k – In quarter 3 the Emergency Assessment Unit ran on an average of 13.35 wte vacancies, 9.33 wte of which were Registered Nurse vacancies. These vacancies have been covered by overtime payments, agency staff and additional hours payments to Band 7, 6 and 5 Nurses.
- In quarter 3 there was a significant increase in non clinical variable pay by £175k, the areas of increase were Service Improvement £172k increase compared to quarter 2, PAS Benefits £54k increase and Executive Directors £144k. Service Improvement utilised agency staff to cover vacancies that have now been recruited to. PAS Benefits spend was attributable to the implementation of Medway PAS where overtime costs were incurred mainly during November. Executive Directors incurred variable pay costs due to interim Director level posts.

4.0 Recruitment

Recruitment Team Update – (Source NHS Jobs)

Below highlights the recruitment activity that took place within quarter 3, with a comparison to quarter 2:



- The number of adverts decreased during quarter 3 due to the Trust taking the decision not to recruit to non critical posts.
- The Trust has 35 Registered Nurses from international recruitment campaigns due to start between now and the end of March – the Trust has taken the decision to start international recruits as Band 2 Unregistered Nurses to retain candidates, once they have proof of their pre-registration pin number. It is felt that this will also enhance the quality of the induction process. Once the pin number from the NMC has been received the Trust will transfer the international recruits to Band 5.
- There are 15 Medical vacancies being funded by variable pay, as the posts are recruited to, vacancies will be transferred to fixed pay. These vacancies will be reflected in establishments from April 2015.

Hard to Fill Areas

The Trust continues to face particular difficulties with recruitment to Medical posts particularly within:

- Radiology
- Stroke
- Geriatrics
- Emergency Medicine

The Trust continue to work with specialist international medical recruitment agencies to support medical recruitment. The Trust are also working on developing attractive recruitment packages to attract candidates.

Consultant Appointments

The following Consultant appointments were made in quarter 3:

- Occupational Health – Dr Lyndon Wall - expected start date 2nd February 2015
- Cardiology – Dr Se Asim Riaz – expected start date 3rd March 2015
- Ophthalmology – Dr Pryanka Sharma – expected start date February 2015

Workforce Plan Sets Out Second Year of Nursing Growth

The HSJ has identified that nurse training places will increase for a second year. Based on workforce plans that have been submitted to Health Education England adult nurse training places have increased:

- Adult nursing – increased by 4.2%, equivalent of 555 extra places
- Children’s nursing – increased by 7.4%, equivalent of 161 extra places
- Mental Health nursing – increased by 3.2%, equivalent of 100 extra places
- Learning Disability nursing – increased by 1.7%, equivalent of 11 extra places.

The Director for Strategy and Workforce Planning at Health Education England has said that due to the increased supply that has been added and return to practice campaigns that have been launched nursing growth should be sufficient, Health Education England will continue to be vigilant and keep nursing numbers under review. Health Education intend to source 1000 return to practice nurses back into the system during 2015.

It is recognised that the *NHS Five Year Forward View* set out a clear vision for creating more Registered Nursing posts within the community setting. As it stands currently nurses are moving towards the acute sector post Francis review.

This is a positive move from HEE, however the Trust will continue to face difficulties recruiting Registered Nurses whilst nurse training is undertaken for a three year period, therefore the Trust will continue to pursue international recruitment options.

More information is available at the following link:

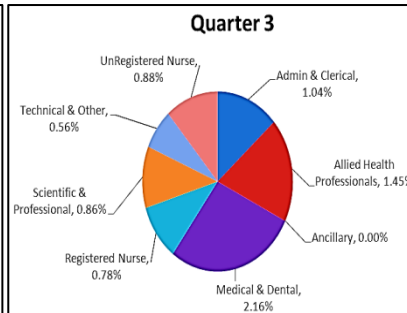
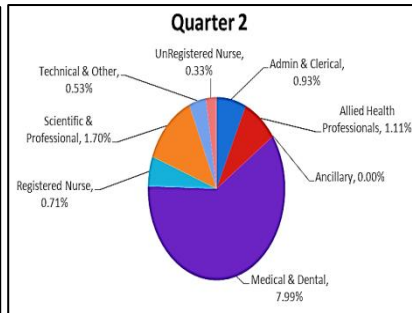
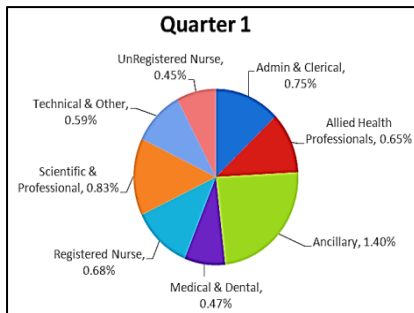
<http://www.hsj.co.uk/news/exclusive-workforce-plan-sets-out-second-year-of-nursing-growth/5077744.article>

Executive Director Approval

The Trust has now taken the decision to ensure that each vacancy that goes out to advert has gained approval from an Executive Director before the advertisement stage. This has helped the recruitment team process the flow and ensure that only adverts for critical posts to the Trust are advertised.

5.0 Turnover – Starters, Leavers and Exit Interviews – Source ESR

The below information shows starters, leavers and turnover figures for the quarter with comparison to previous quarters.

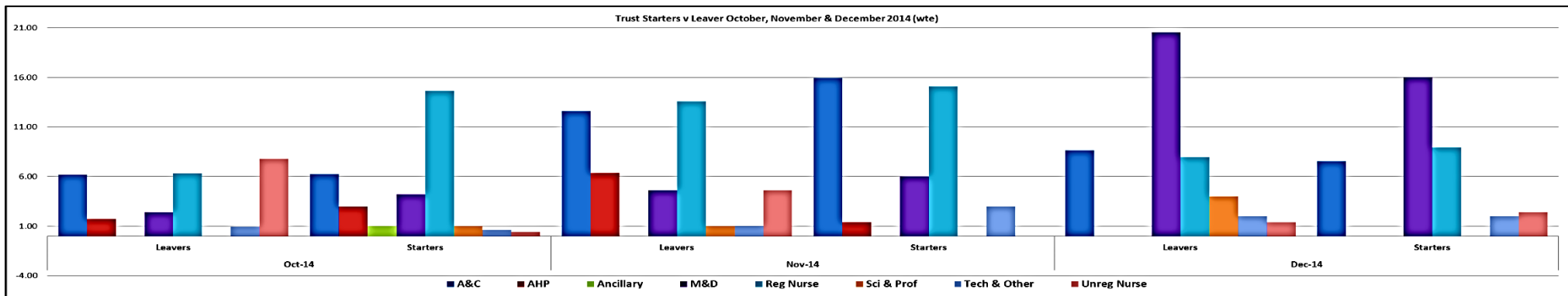


Average Turnover Rate Q1
0.66%

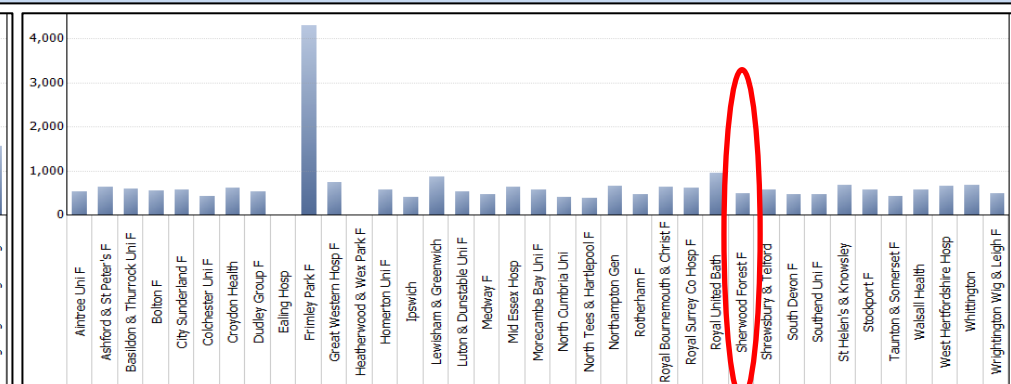
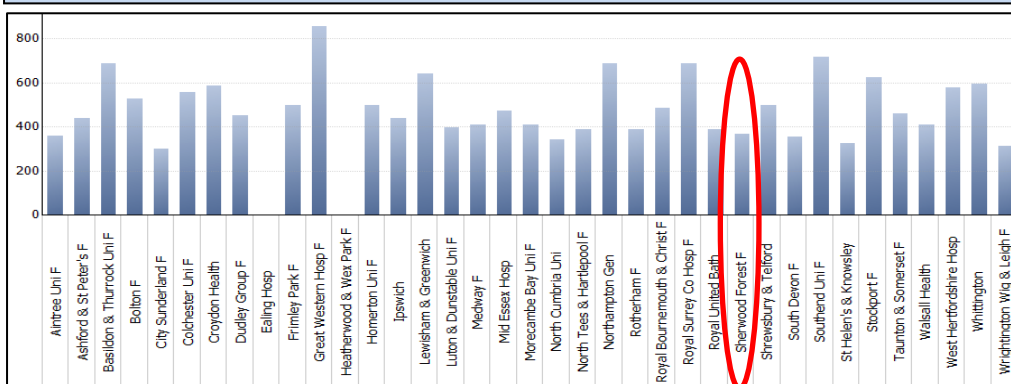
Average Turnover Rate Q2
1.61%

Average Turnover Rate Q3
1.03%

- Turnover has decreased in Q3 compared with Q2, this was an expected decrease due to the junior doctor changeover in August 2014, there was a small changeover in December 2014.
- There were **109.44 wte starters in Q3** compared to 249.08 wte's in Q2, 38.64 wte's were Registered Nurse starters which is reflective of the recruitment campaigns the Trust has undertaken. The decrease in new starters is attributable to the increase during August 2014 for junior doctor changeover and September 2014 when there was a newly qualified nurse intake.
- There were **113.71 wte's leavers in Q3** compared to 175.54 wte in Q2, the highest number of leavers were within the Registered Nurse staff group (27.83 wte's), leaving reasons included relocation and work life balance.
- There was 1 dismissal from employment in Q3.
- There were 6 retirements in Q3 compared to 4 in Q2– none returning as flexi retirees.



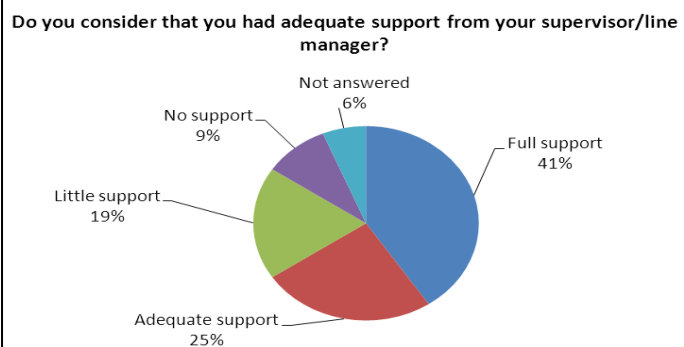
Benchmarking Data –October 2014 data - Source Health & Social Care Information Centre – The below data compares SFH with other Acute Medium sized Trusts and measures data over 12 months. The information excludes Dr's in training, locums and bank staff.



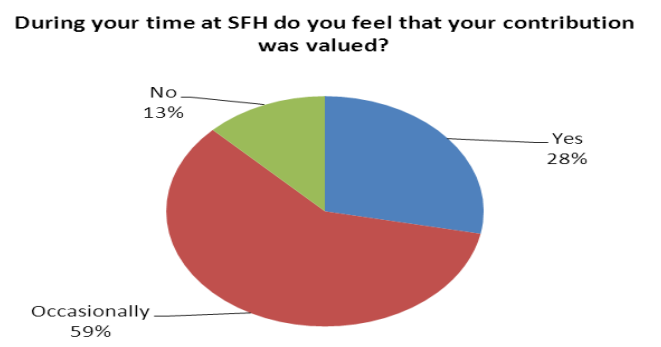
Exit Interviews – Key Messages from Quarter 3 – Exit Interview Returns from Staff

The below information provides a brief summary from quarter 3 to highlight key messages from the staff who undertook an exit interview prior to leaving the Trust.

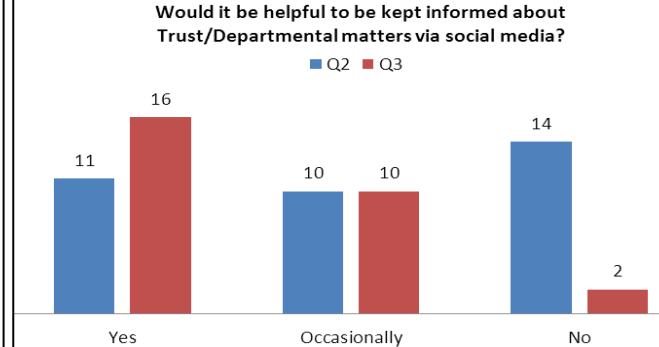
32 staff participated in the exit interview process in quarter 3, this compared with 43 staff in quarter 2. After an increase in the satisfaction score in quarter 2, there has been a decline from 3.77 to 3.65 in quarter 3, 1 stands for 'poor' and 5 is 'positive'. It is noted that there has been a decline in positive responses, however it should be acknowledged that these results are against the backdrop of a challenging quarter for the Trust.



41% of respondents felt that they had full support from their line manager, there was also a positive increase within the Staff Survey when respondents were asked 'My immediate line manager is supportive in personal crisis', positive results increased by 3% from 69% in 2013 to 72% in 2014.



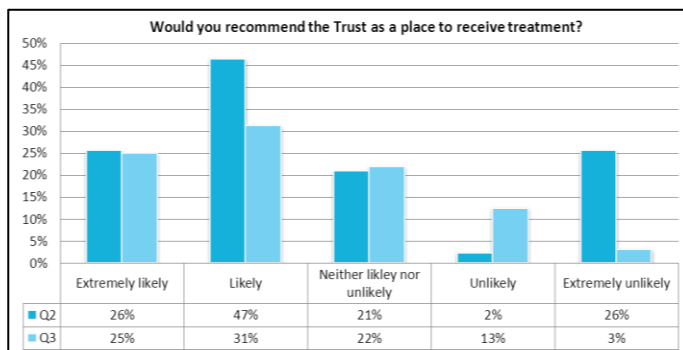
59% said that their contribution occasionally felt valued compared to 53% in quarter 2, the Trust aims to improve this. When staff were asked, as part of the 2014 Staff Survey, how satisfied they were with the extent the organisation values their work, responses decreased by 3% when compared with the 2013 results and was 4% below the national average.



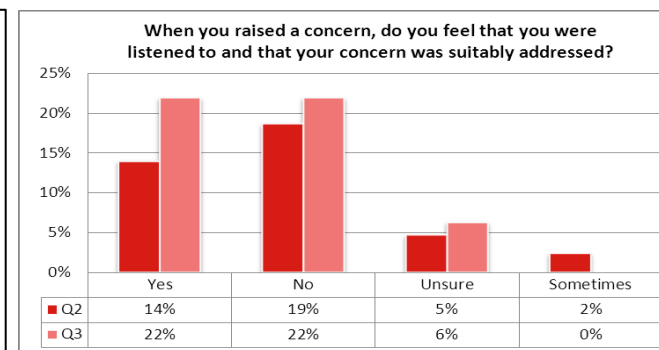
A new question was added in quarter 2 to gain an understanding on the Trust's use of social media. There was a significant shift in quarter 3 in staff saying that they would find the use of social media helpful. The Staff Survey showed that staff felt the effectiveness of communication between senior managers and staff had declined by 2%.



Positive results in terms of recommending the Trust as a place to work in quarter 2 stood at 68%, this declined to 56% in quarter 3. This also declined in the Staff Survey with 56% of respondents in 2013 saying they would recommend the organisation declining to 52% in 2014. Further analysis of the data will be undertaken to understand the results further and will be reported back to the Board next month.



In quarter 2 73% of respondents in the exit interviews said that they would recommend the Trust as a place to receive treatment, this decreased to 56% in quarter 3. This also falls in line with the Staff Survey in 2014 as positive results reduced by 2%. Further analysis of the data will be undertaken to understand the results further and will be reported back to the Board next month.



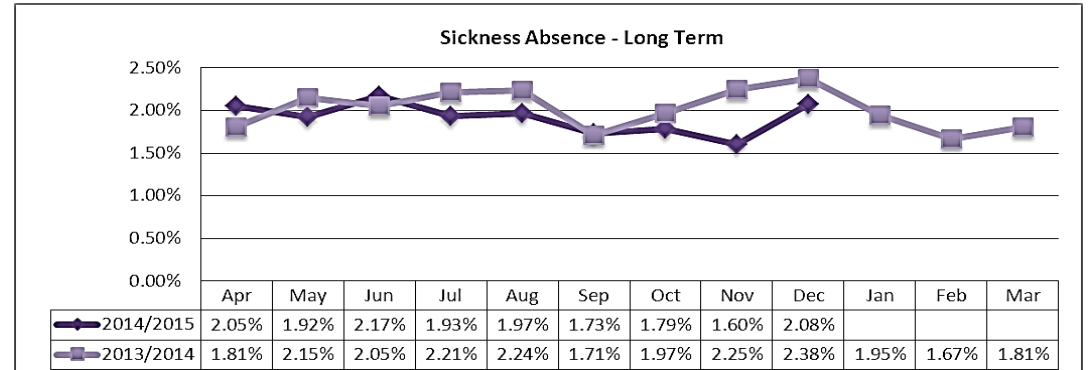
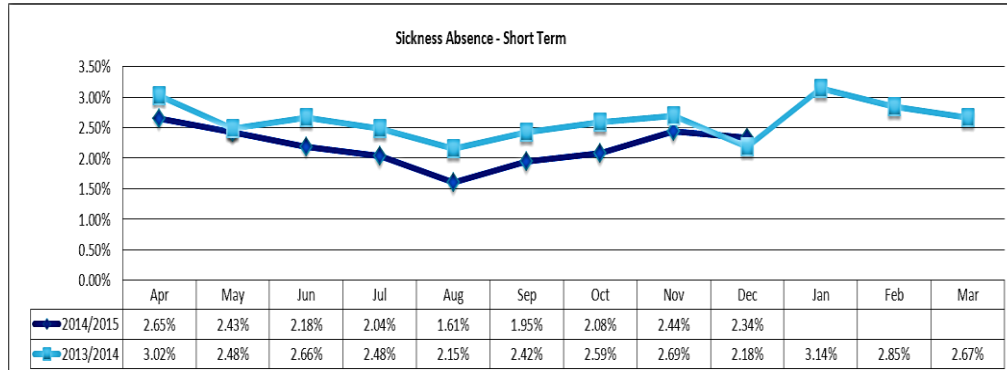
37% of respondents in quarter 2 stated that they raised a concern during their time at SFH this compared to 44% in quarter 3. Of those 44%, 22% felt that managers had listened to their concerns compared with 14% in quarter 2. Staff Survey results show that 45% of staff who responded to the survey felt confident that the organisation would address their concern.

The below comments are taken directly from the Exit Interviews, the feedback shows a mixture of negative and positive comments, going forward the trust will be looking to build on the positive comments:

- Re-deployment of staff a problem i.e. site co-ordinators sending staff to other wards. This results in poorly patients being moved unnecessarily to ensure safe care. Patients don't like being moved.
- Overall good working relationships, but certain teams could be more supportive.
- Friendly helpful environment, great place to start my career.
- Line manager very supportive, learned a lot from shadowing opportunities and exposure to opportunities to learn.

6.0 Sickness Absence – Source ESR

The below graphs provide information on sickness absence rates for the Trust per month for short term, long term, total and cost of sickness absence.

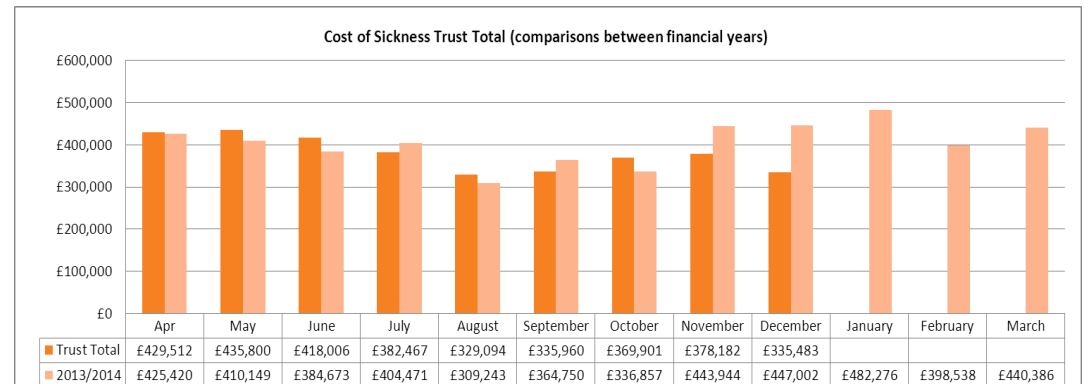
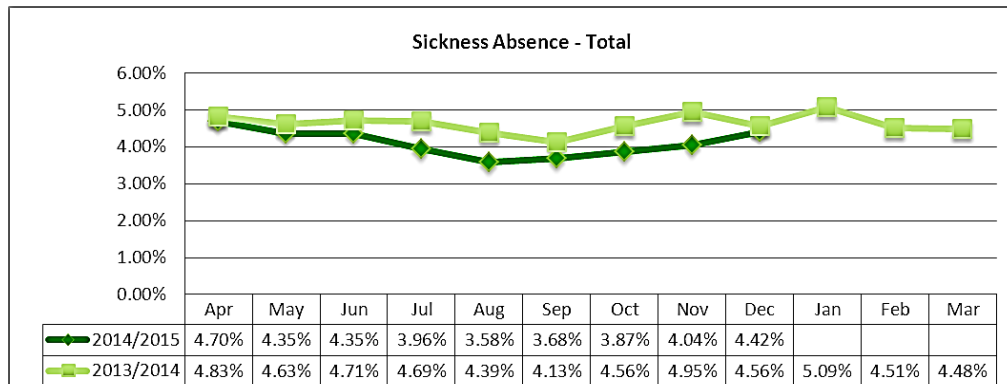


Short Term Sickness Absence

- Short term sickness for Q3 stood at **2.28%** which compared to Q2 when the figure stood at **1.86%**.
- Short term sickness absence has increased during quarter 3 and has gone against the 2013/2014 trend in December
- Assistant HR Business Partners are reviewing actions that have been taken for areas where short term sickness is high

Long Term Sickness Absence

- The long term sickness absence rate for Q3 stood at **1.83%**, this compared to **1.73%** in Q2.
- Long term sickness absence increased during December, however did track below the sickness absence rate for the same period of 2013/2014
- Managers are supported by the HR Team to manage long term sickness proactively.

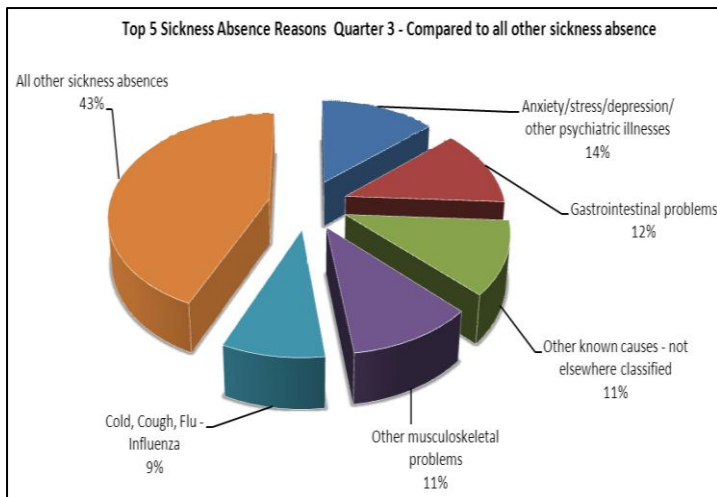


Total Absence

- Total sickness absence in Q3 stood at **4.11%** this compares to Q2 which was **3.74%**.
- The highest sickness absence reason for the quarter was anxiety/stress/depression related illnesses, losing 1884 working days within the quarter, this was a decrease of 741 working days when compared to quarter 2.
- The Trust has lost 11.10 working days per whole time equivalent from April to December 2014. In the same period of 2013/2014 12.24 working days were lost per whole time equivalent.
- There has been a month on month increase from September 2014, this is consistent with 2013/2014 trend excluding December 2014, where previous years have seen a decrease and this year saw an increase. Work is being undertaken to understand the reasons for increase.

Cost of Sickness Absence

- The cost of sickness in Q3 totalled **£1.08m**, this compared with Q2 which was **£1.04m**.
- The financial year to date cost of sickness absence stands at **£3.41m**
- Per whole time equivalent the cost of sickness absence stands at £929 for the period of April to December 2014.
- The figures above represent the cost of paying staff to be off sick from work not the cost of cover.



Health & Wellbeing Agenda

- The Committee are currently considering the Trust's approach to the NICE Smoking Cessation guidelines and the NICE Guidance on Obese and Overweight Adults.
- The Committee has been promoting Dry January in conjunction with the Communications team to encourage staff to give up alcohol for one month.
- The staff counselling service have now confirmed that online counselling will be made available during 2015, consideration is currently being given to how this service will be promoted and used effectively.
- The Committee are reviewing all of the stress resources and interventions that are provided so that it is clear to staff at the Trust the pathways available to them.
- A member of the HR Team will be attending the 'Mentally Health Workplace Training' in order to support the Trust with being proactive with stress/depression related illnesses

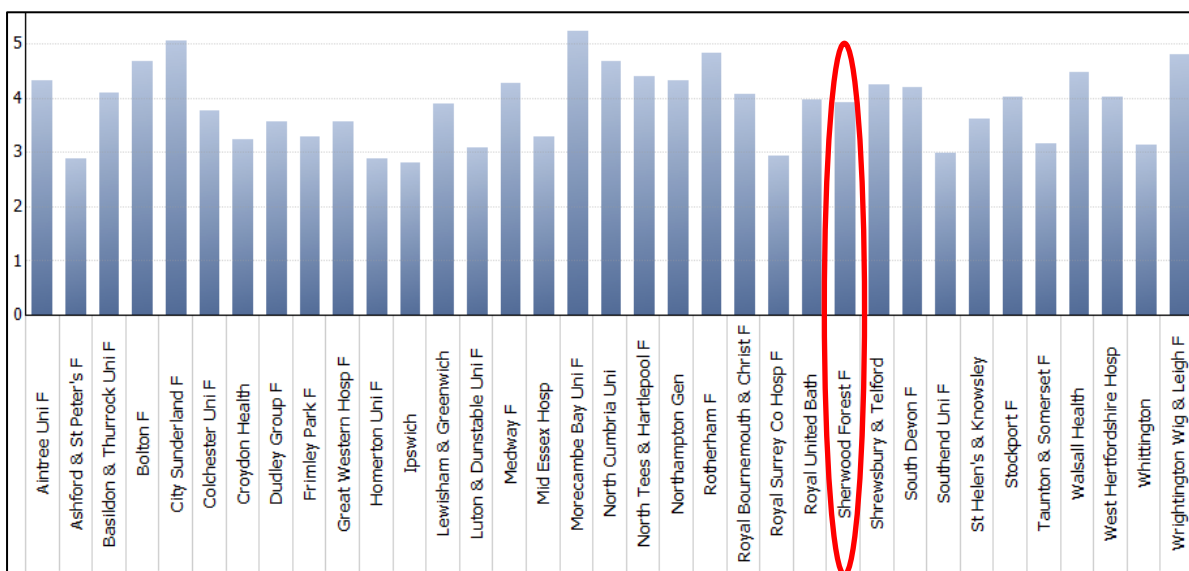
Occupational Health Update

- Number of SFT Manager referrals attended in last three months increased by 11% compared with same period in 2013. The number of SFT Manager referrals offered appointments within <10 days of receipt of referral in last 3 months is 80%, compared with only 46% during same period in 2013.
- The number of 'front line' staff vaccinated against flu at end of December is 69% (2701 staff vaccinated). This is the highest uptake of all Trusts within the East Midlands.
- Resilience training, delivered by OH nurses, has been embedded into the Trust Leadership and Management course, there has been positive feedback from delegates of first session held 12th December 2014
- Provision of OH health and wellbeing 'drop in' clinics are at all Trust sites. The clinics are an opportunity for staff to discuss any health and wellbeing concerns they have with an Occupational Health Nurse. Also on offer is advice on weight management, blood pressure checks, lifestyle advice and onward signposting to other specialist services. Brief intervention for smoking cessation and alcohol use is also available. The clinics are held at all hospital sites.

Benchmarking Data – September 2014 data (latest data available from the Health & Social Care Information Centre)

Benchmarking Data
 This chart shows raw data from ESR produced by the HSCIC. The bar chart shows how Sherwood Forest Hospitals compares in terms of sickness absence with other medium Acute Trust's. Q1 identified that the Trust had a higher sickness absence rate at the end of March 2014 of 4.68% compared with a 3.70% rate overall for Acute Medium Trusts. Q2 showed that at the end of June 2014 the Acute Medium Trust sickness absence rate was 3.79% which was slightly higher than March 2014, and the Trust compared to this with a higher sickness absence rate of 4.57%, a reduction compared with the information that was presented in quarter 1, this corresponds with our internal information. Q3 has shown that as the end of September 2014 the Trust had an overall figure of 3.93% compared with 3.91% for all Acute Medium Trusts. **Please note that Medirest staff are included in these figures.**

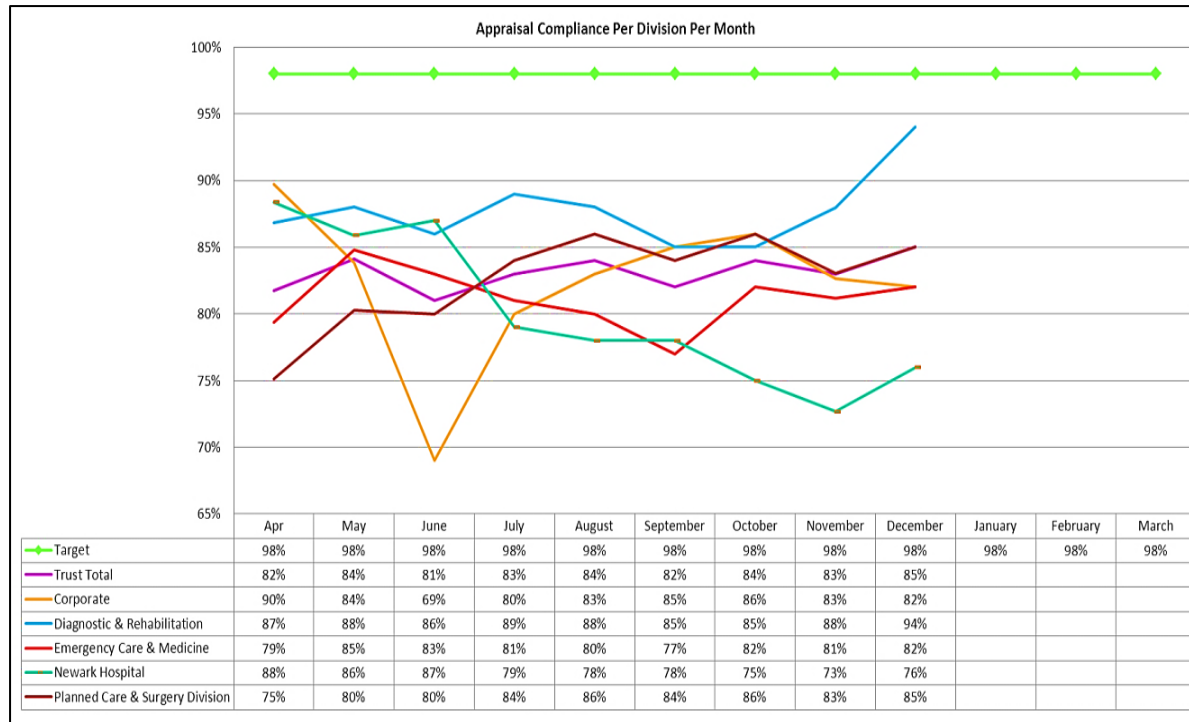
The below table shows the sickness rates for other Keogh Trust's for September 2014 with the average sickness rate being 4.24%, positively SFH was 0.31% below the average rate.



September Benchmarking Data from HSCIC	
Keogh Trusts	%
Colchester Hospital University NHS Foundation Trust	3.78
Tameside Hospital NHS Foundation Trust	5.10
Blackpool Teaching Hospitals NHS Foundation Trust	4.34
Basildon and Thurrock University Hospitals NHS Foundation Trust	4.11
East Lancashire Hospitals NHS Trust	4.78
North Cumbria University Hospitals NHS Trust	4.70
United Lincolnshire Hospitals NHS Trust	4.71
George Eliot Hospital NHS Trust	4.20
Buckinghamshire Healthcare NHS Trust	3.30
Northern Lincolnshire and Goole Hospitals NHS Foundation Trust	4.35
The Dudley Group NHS Foundation Trust	3.58
Sherwood Forest Hospitals NHS Foundation Trust	3.93
Medway NHS Foundation Trust	4.29
Burton Hospitals NHS Foundation Trust	4.25

7.0 Appraisal Compliance (Agenda for Change) – Source ESR and Manager Returns

The compliance target for the 2014/2015 financial year has been set at 98%, from the 1st April 2014 only those who are eligible for an appraisal will be measured in the compliance figure. For example those staff on maternity leave will be removed from the report.



Appraisal compliance improved by the end of quarter 3 by 3%, closing at 85% at the end of the quarter.

The Diagnostics & Rehab division has made the most significant improvement in quarter 3 increasing compliance by 9%.

Emergency Care & Medicine increased their compliance rate in quarter 3 by 5%.

Newark Hospital has the lowest compliance rate at 76% although improvement was made in December 2014.

All non compliant appraisals across all divisions are being reviewed and managers are developing plans to achieve compliance.

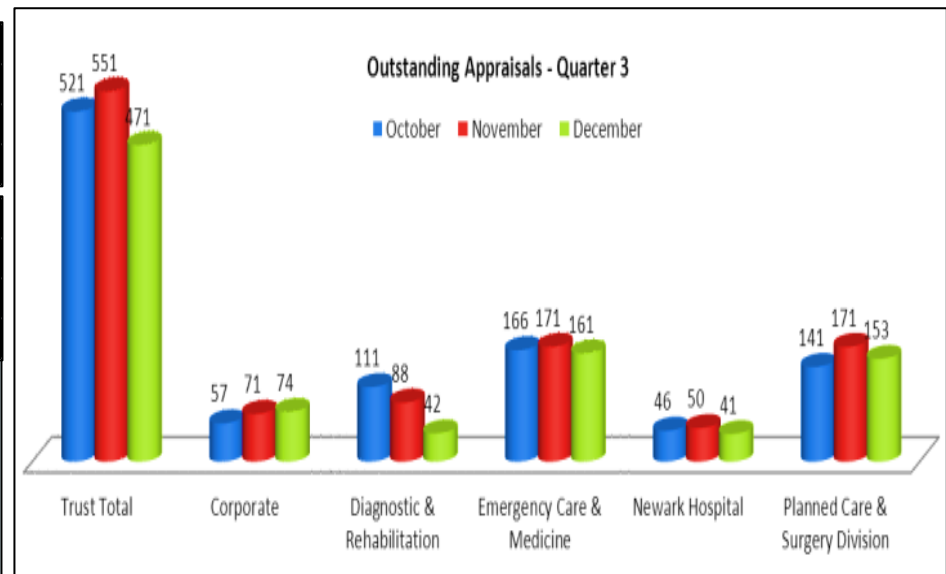
The Trust continues to drive the 98% compliance target with areas of low compliance are also being addressed via divisional confirm and challenge meetings and directly with line managers.

Organisation	No of Staff	% Compliance
KMH - Generic (Radiology)	59	100%
Pharmacy SFH	101	100%
Community Midwives KMH	53	100%

Organisation	Outstanding	% Compliance
Cardiorespiratory Technical	25	19%
Ward 23 Cardiology/CCU	21	38%
Ward 21 Surgery	16	59%

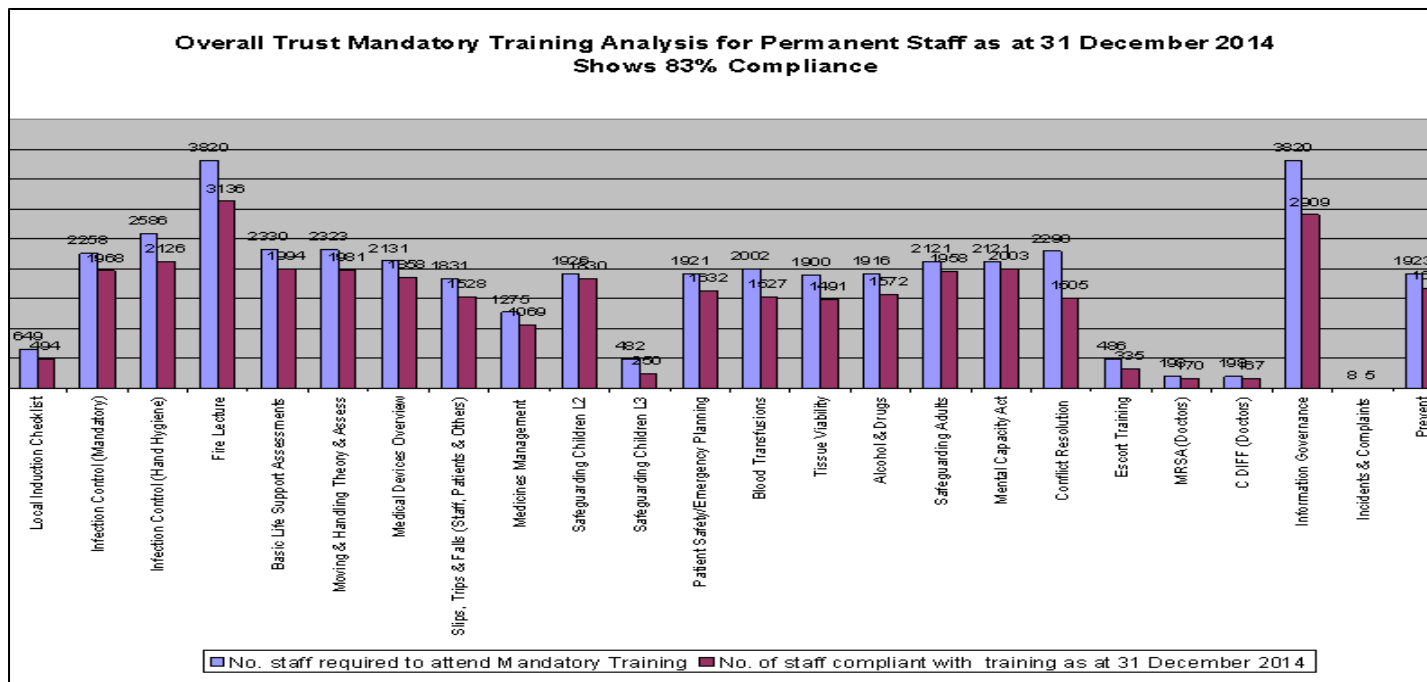
The above tables show:

- Top 3 areas with 50 or more staff with 100% compliance – the achievement should be noted and managers recognised for their efforts
- Top 3 areas with the highest amount of appraisals outstanding – the HR department are working with managers in order to address poor performance.



8.0 Training, Education & Development

The target for mandatory training completion is 90%. The graph shows compliance by course at the end of September 2014:



Compliance by Division and Increase in Quarter

Trust – 83% (increased by 3%)
 Corporate – 82% (increased by 2%)
 Diagnostics & Rehab - 79% (increased by 1%)
 Emergency Care & Medicine - 83% (increased by 2%)
 Newark Hospitals - 86% (increased by 13%)
 Planned Care & Surgery – 83% (increased by 6%)

HEEM Action Plan Update

The Trust received a visit from HEEM in October 2014 in which many good practices in training and education were identified. A number of patient safety issues were also identified which were passed onto the CQC. A comprehensive action plan led by the Deputy Director for Training, Education and Development has been formulated that addresses these and other issues and is now monitored by the Trust's Workforce and OD Committee on a monthly basis.

HEEM will be visiting the Trauma and Orthopaedic department, which was their main area of concern, in February and June of this year in order to assure themselves that satisfactory progress is being made.

Vision West Notts Studio School

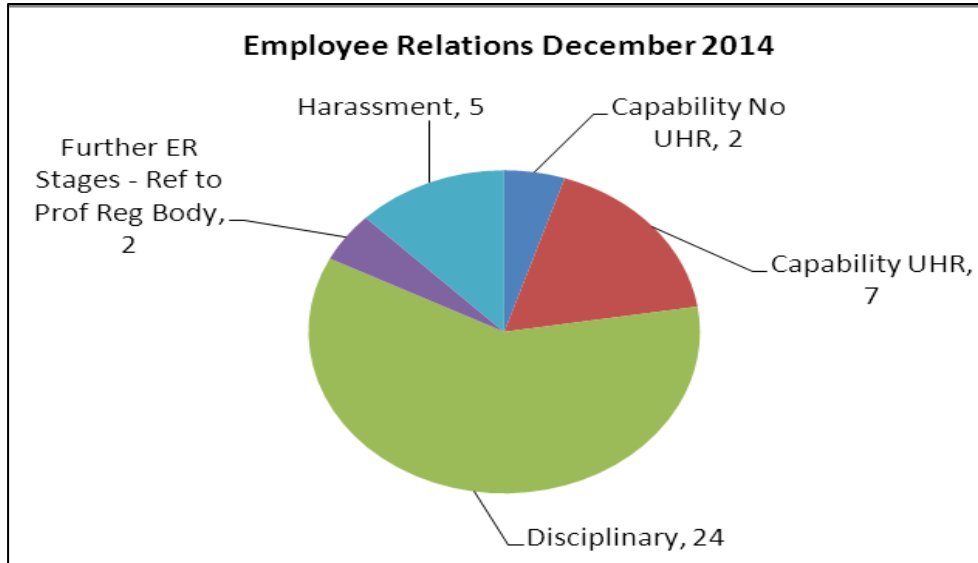
In September 2014 Vision West Notts College launched its Studio School located at their Chesterfield Road site in Mansfield. The Studio School is based upon a national model of good practice and was formally opened in November 2014 by Lord Karan Bilimoria who is the Government minister responsible for studio school education. Studio schools are a new and unique learning experience for 14-19-year-olds of all abilities. The school has approximately 180 students with a year-round opening and a 9am-5pm working day which feels more like a workplace than a school. Students are required to wear smart business attire and the school is run using strong work place values and behaviours. Working closely with local employers, studio schools offer a range of academic and vocational qualifications including A Levels and GCSEs in English, maths and science, as well as work placements linked directly to employment opportunities in the local area.

The Vision Studio School will encourage and support a 'can-do' approach and develop self-assured, confident and well-rounded young people that employers will want to take on and nurture as employees. The Vision Studio School offers a vibrant, dynamic learning experience for all abilities that enables progression into employment or on to university-level study. Graduates of the studio school will have a significant competitive advantage in a challenging jobs market. The Vision West Notts College Studio School has a particular emphasis on health and social care studies, engineering and logistics as well as more traditional subjects. The school has asked the Trust to partner with them in order to help develop future work ready employees and to provide work experience placements and master classes to its students. This is a fantastic opportunity for the Trust to develop its widening participation priorities and to raise the Trust's profile as an employer of choice. In April 2014, Vision West Notts College asked the Deputy Director for Training, Education and Development to become a governor on the Studio School Board of Governors to help lead, shape and develop the school to ensure employers needs are being met through its education programmes and to develop a future NHS workforce.

The Trust has over 100 different professions that make up the running of the organisation and is well placed to offer young people a unique opportunity to experience these different professions. The TED Department has had a well established work experience placement programme for many years and in 2013/2014 enjoyed over 76 work experience placements at the Trust. The TED Department has also enjoyed strong links with West Notts College for several years as well by supporting its pre-registration nursing cadet programme where students studying health and social care have the opportunity to undertake nursing work placements at the Trust as part of a taster programme. Many of these then go on to pursue a career in nursing or different branches of health and social care. In 2014 the TED Department also created its first pre-medical student work experience programme which gives students who are considering applying to join a university medical school a taster opportunity of our undergraduate medical education training programmes.

The Deputy Director of TED has been working with a number of key leads across a range of professions to go and deliver several master classes at the Studio School over the next 6 months in order to encourage young people to consider a career in the NHS. The areas that are currently scheduled to deliver master classes include Physiotherapy & Occupational Therapy, MEMD, Pre-registration nursing, Resuscitation, Health Informatics, Library & Knowledge Services, Pharmacy, Audio Visual & Specialist Education Support, Finance and Human Resources.

9.0 Employee Relations



The pie chart shows that there were 40 employee relations cases on-going at the end of December 2014 compared with 37 in September 2014. The disciplinary cases include investigations and those due to go to a hearing.

UHR stands for underlying health reason, all capability cases relate to sickness absence management in line with the policy.

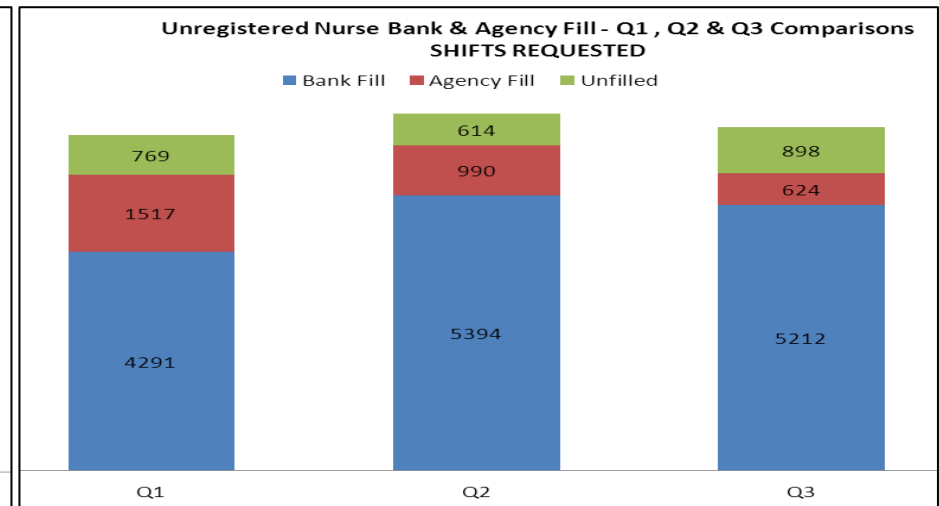
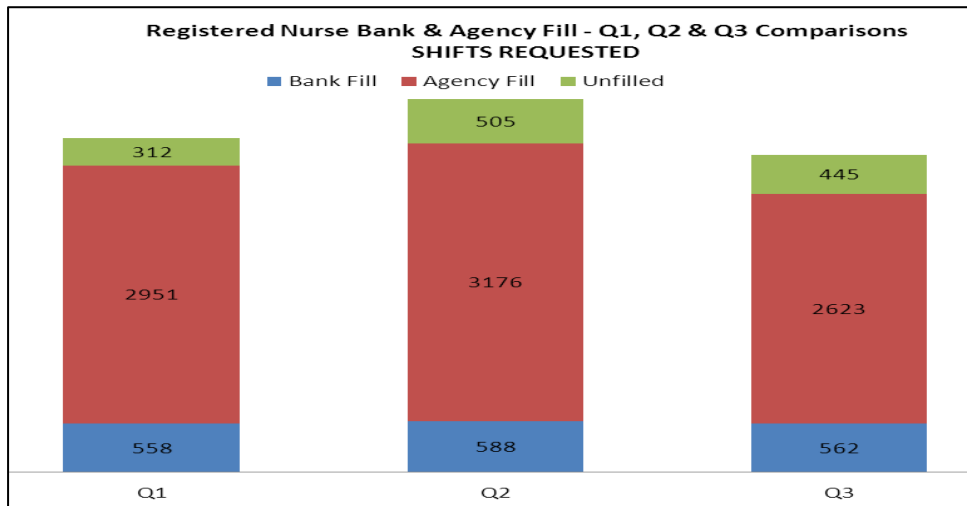
The Trust has received a collective grievance from Pathology regarding holiday pay in light of the Lock v British Gas case. The Trust anticipates further grievances with regard to holiday pay as the law limiting time period for the time employees are allowed to claim does not come into effect until July 2015. The HR department are currently scoping out potential areas of risk for the Trust and will provide regular updates.

Workforce Change:

Pathology – The Pathology workforce change has now been completed.

Ward 21 – Ward 21 was merged with Ward 14 in December 2014, all Registered and Unregistered Nurses were redeployed to vacancies elsewhere in the Trust.

10.0 Nurse Bank



There was a reduction in quarter 3 of bank and agency used for Registered Nurses, this is reflective of the additional Registered Nurses that have been recruited. Positively bank are able to fill the majority of shifts for Unregistered Nurses, however during the Christmas period bank and agency staff did not wish to work and this reflected in the numbers.

The Nurse Bank has actively recruited Health Care Support Workers and this has had a positive impact on the number of Health Care Support Worker shifts filled as Bank.

The Trust are currently working towards a centralised Admin & Clerical Bank in place by April 2015.

11.0 Staff Survey

2013 Results & Action Plan

The Staff Survey results were released in December 2013, since then work has been undertaken across the Trust by divisions, working groups and committees to develop the action in response to the survey findings. The below outlines a high level action plan, and progress against these actions for quarter 3. The Trust has linked the work that is done as an outcome of the Staff Survey to the Trust's Quality for All agenda.

Action Point	Actions to be taken	Progress Update	Intended Outcome
Improving communication between senior managers	<ul style="list-style-type: none"> Ensuring that information is cascaded to staff Regular departmental meetings Managers to undertake 1:1 meetings with staff Senior managers to visit clinical areas to listen to staff 	<ul style="list-style-type: none"> Each division is working to improve communication via methods such as senior managers walking the floor of departments in order to understand services and day to day operations better. Team Brief is being delivered within departments across the Trust CEO holds regular Drop In Sessions. Internal Assurance Team visits are taking place within ECM Senior managers have visited areas to consult thoughts and provide feedback within DRD, particularly focusing on the demotivating and motivating factors from the discussions. 'Talk Time' has been held with between Senior Managers within DRD and Pharmacy, this will be rolled out further across the division throughout the year. Departmental posters have been developed within DRD to embed Quality for All Open door policy is being promoted across the Trust 	<ul style="list-style-type: none"> Staff becoming aligned to work priorities of the Trust and work areas. Improved staff engagement Staff receiving key messages
Focus on appraisal and training	<ul style="list-style-type: none"> Review quality of appraisals and align new appraisal to 'Quality for All' Ensuring staff can access personal development opportunities Increase of Mandatory Training 	<ul style="list-style-type: none"> Appraisal paperwork has been reviewed and changed with a plan to roll out at the beginning of February 2015. Appraisal rates have increased in the last quarter, the divisions have discussed appraisal compliance at service line meetings/confirm and challenge sessions and focus groups are being undertaken within ECM to support areas of concern. Training needs are being discussed at appraisals and PDP's developed accordingly. More capacity has been built in for training in 2014/2015 which is a response to feedback from the divisions. A new elearning work book is being piloted throughout October to allow further access to mandatory training that doesn't focus on face to face interventions. 	<ul style="list-style-type: none"> Appraisal compliance achieved Trust wide. Embedding 'Quality for All'
Focus on staff experience regarding contact with patients and other colleagues	<ul style="list-style-type: none"> Roll out of Dementia Awareness training Implement new Bullying & Harassment policy Undertake focus groups with staff regarding stress related absences 	<ul style="list-style-type: none"> Dementia training is being rolled out and is an on-going programme The policy has been approved and an implementation plan and tool kit is in the process of being developed. The focus groups are being scheduled for November with a variety of staff being invited to attend in order for robust actions to take place as an outcome. 	<ul style="list-style-type: none"> Improved staff experience
Improve Datix reporting	<ul style="list-style-type: none"> Review of Datix to ensure robust reporting system 	<ul style="list-style-type: none"> Data has been made available in quarter 3 	<ul style="list-style-type: none"> Enhanced reporting and data retrieval

2014 Results – The below outlines data that has been published by Quality Health and the comparisons against other Acute Trusts are from those who used Quality Health to undertake their survey.

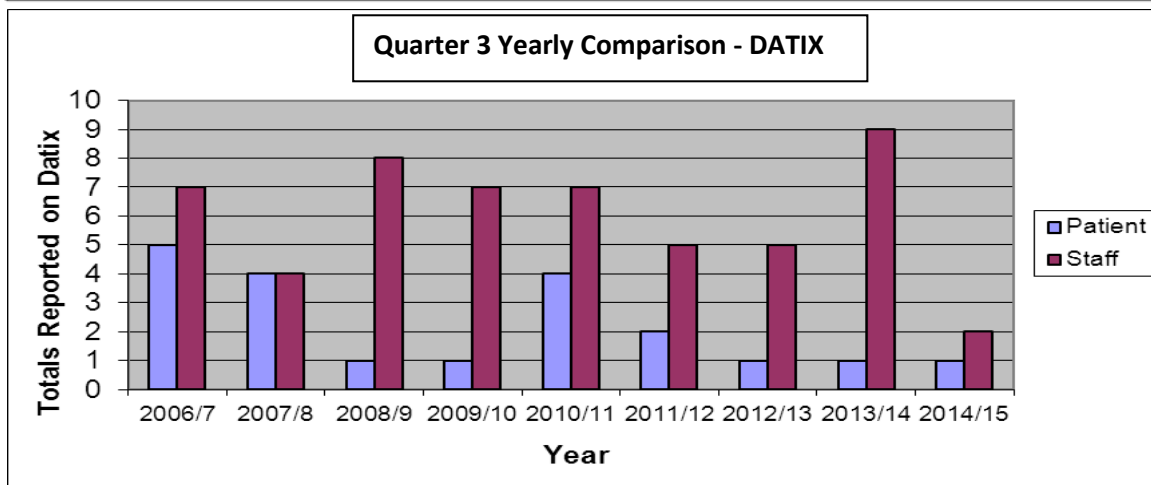
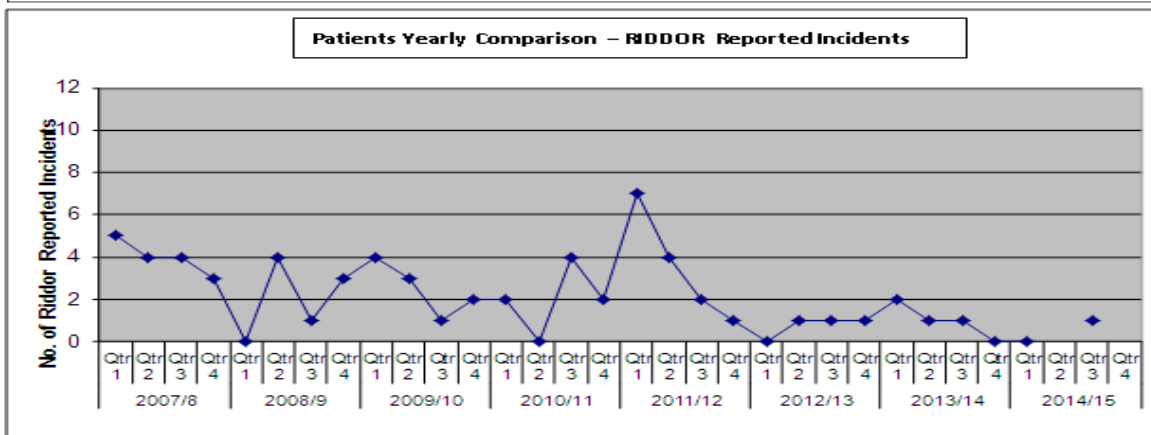
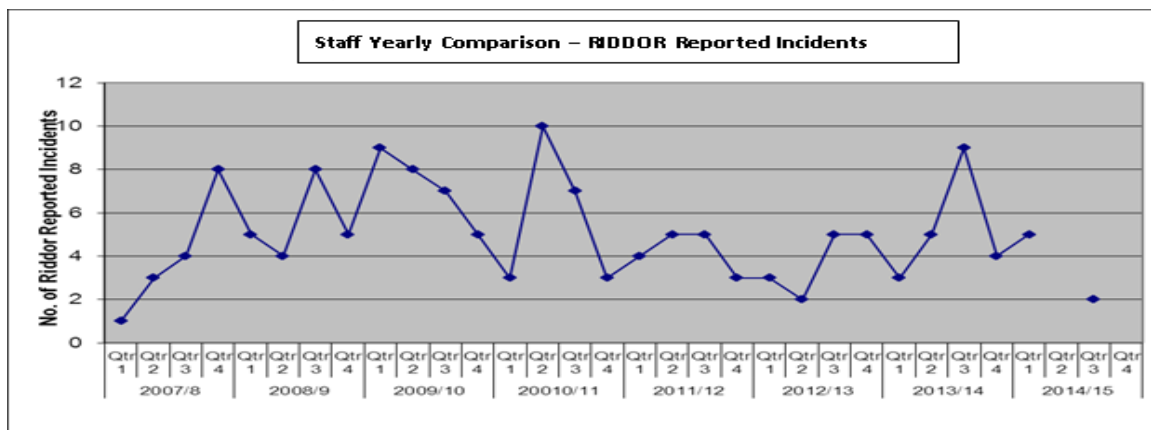
The national results will be released in February 2015. There were 89 questions asked of staff within the survey for 2014. Out of those 89 questions:

- 31 questions demonstrated improvement
- 37 questions showed deterioration
- 14 questions results remained the same.
- 7 questions were either new questions and therefore no comparison available, or questions where improvements/deterioration could not be measured.

Divisional action plans will be created as an outcome of receiving the results of the survey and will be reported at the next quarterly Board meeting.

		Highlights	Areas of focus for improvement during 2015 in line with QIP	Comments																																																				
C	Communicating and working together	<p>4b. Team members have a set of shared objectives</p> <table border="1"> <caption>Data for 4b: Team members have a set of shared objectives</caption> <thead> <tr> <th>Year/Category</th> <th>Strongly disagree</th> <th>Disagree</th> <th>Neither agree nor disagree</th> <th>Agree</th> <th>Strongly agree</th> </tr> </thead> <tbody> <tr> <td>2013%</td> <td>6%</td> <td>6%</td> <td>13%</td> <td>49%</td> <td>26%</td> </tr> <tr> <td>2014%</td> <td>3%</td> <td>6%</td> <td>9%</td> <td>57%</td> <td>25%</td> </tr> <tr> <td>Acute %</td> <td>3%</td> <td>6%</td> <td>13%</td> <td>58%</td> <td>20%</td> </tr> </tbody> </table>	Year/Category	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	2013%	6%	6%	13%	49%	26%	2014%	3%	6%	9%	57%	25%	Acute %	3%	6%	13%	58%	20%	<p>12c. I would recommend my organisation as a place to work.</p> <table border="1"> <caption>Data for 12c: I would recommend my organisation as a place to work</caption> <thead> <tr> <th>Year/Category</th> <th>Strongly disagree</th> <th>Disagree</th> <th>Neither agree nor disagree</th> <th>Agree</th> <th>Strongly agree</th> </tr> </thead> <tbody> <tr> <td>2013%</td> <td>5%</td> <td>12%</td> <td>28%</td> <td>41%</td> <td>15%</td> </tr> <tr> <td>2014%</td> <td>5%</td> <td>13%</td> <td>30%</td> <td>40%</td> <td>12%</td> </tr> <tr> <td>Acute %</td> <td>6%</td> <td>11%</td> <td>28%</td> <td>40%</td> <td>15%</td> </tr> </tbody> </table>	Year/Category	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	2013%	5%	12%	28%	41%	15%	2014%	5%	13%	30%	40%	12%	Acute %	6%	11%	28%	40%	15%	<p>4b - increased by 7% compared with 2013 and was 4% above national average.</p> <p>12c – decreased by 4% and was 3% below national average. The Trust will look to improve this in line with the quality improvement plan during 2015 by 10% (62%)</p>				
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12.0 Health & Safety



Accidents and Incidents

- There were two staff and one patient related accident reports submitted to the Health and Safety Executive under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 during quarter 3.
- One of the Staff RIDDOR reports relates to a member of pharmacy staff hit on the hands and arms by the pharmacy robot picking head. The head was dislodged whilst the staff member was trying to free a blockage on one of the high shelves within the robot. The picking head which weighs approximately 10 Kg fell through about 4 meters onto the staff member's hands and arms. There was no serious injury on this occasion but time was lost by the staff member due to the bruising and swelling caused by the impact. An internal investigation has taken place and the methods of clearing blockages within the pharmacy robot have been altered to reduce the risk of any reoccurrence.
- The patient RIDDOR report submitted relates to a patient suffering a fractured neck of femur in a fall in a bathroom at the time of the power outages at King's Mill on 9 December 2014. There was no lighting in the bathroom at the time of the fall and it is thought this infrastructure problem contributed significantly to the fall. A root cause analysis of the incident is being conducted with the assistance of estates colleagues.

Sharp Safety

- Work continues on assessing the use of medical sharps within the Trust and on finding alternatives to traditional non-safety sharps wherever practicable. Medirest have now joined the Trust sharps safety working group and a number of suggestions from them regarding signage are currently being worked through.
- A trial of blunt fill and filter needles is also taking place on wards 33 and 34.

Contact with the Health & Safety Executive

- There has been no new formal contact between the HSE and the Trust during Quarter 3 of the year.
- The Trust did receive some formal feedback from the HSE inspector that carried out an inspection of how the Trust manages work related violence and aggression.
- The inspector found no material breach of health and safety law in relation to the management of work related violence and aggression. The feedback received via email has been turned into an action plan and this plan will be monitored at the Trust Health and Safety Committee held on a bi-monthly basis.

13.0 HR Developments

The below provides a summary of key information that the Board of Directors may wish to be aware of:

Workforce Race Equality Standards

Further to reports highlighting disparities in the number of BME people in senior leadership positions across the NHS, plus lower levels of well-being amongst the BME populations, the NHS Equality and Diversity Council are consulting on two standards to improve equality across the NHS, to be implemented in April 2015.

Firstly a Workforce Race Equality Standard (WRES) will require NHS organisations to demonstrate against a number of indicators of workforce equality, importantly a specific indicator to address the low levels of BME Board representation.

The second proposal is whether the Equality Delivery System (EDS2) should become mandatory. Currently voluntary, this toolkit aims to help organisations improve services they provide for their local communities and better working environments for all groups.

NHS England agreed to consult on the incorporating the WRES and EDS2 in the 2015/16 standard NHS Contract. CQC and Monitor are considering using the standard to help assess whether organisations are 'well-led'.

Non Guaranteed Overtime and Holiday Pay

The EAT judgment *Fulton v Bear Scotland Limited* and *Wood v Hertel (UK) Limited*, delivered on 4 November 2014, confirmed that non-guaranteed overtime pay should be included in calculation of a worker's holiday pay.

Advice from NHS Employers recommend that employers are best advised to calculate holiday pay by taking into account any overtime that is required in order for an individual to carry out their contractual duties, otherwise badged as 'non guaranteed overtime'. The Trust is working with HR Directors regionally to ensure a consistent approach and further work is being done internally to understand the impact of this ruling for the Trust. Work being undertaken to scope out the potential impact of this ruling for the Trust and establish if there is a financial risk in regard to backdated claims.

Industrial Action

Industrial action is due to take place on the 29th January with staff striking regarding the 2014 national pay negotiations. Strike action will be starting at 9am and ending at 9pm followed by 1 month of work to rule. Managers are being asked to approach staff in order to understand their intentions and forward plan. The control centre will be in place from 8.15am-9.15pm. EMAS will also be undertaking strike action on this day from 12pm-12am, the Trust are developing contingency plans to manage the impact of this. A further 24 hour strike is planned for the 25th February, further details are yet to be released by NHS Employers.

The local Trade Unions have informed the Trust that they will be taking action at the following times on the 29th January:

- GMB, Unite, Unison – 9am-9pm
- Society of Radiographers – 8am-2pm
- Royal College of Midwives – 1pm-3pm

NHS Employer Updates

NHS Evidence to the Pay Review Bodies NHS Employers has now published their evidence to the NHS Pay review body and the Doctors and Dentists review body, both submissions have been based on feedback collected from employers. Recommendations include changes to unsocial hours provisions in order to support services opening at all hours. **More information is available at:** <http://www.nhsemployers.org/news/2015/01/nhs-employers-evidence-to-the-pay-review-bodies-published>

Views on Retirement Is Changing – Research released by the Department for Work and pensions has shown that people are considering working to a later retirement age supported by working flexibly. Two thirds of people that were surveyed felt that stopping work altogether was not the best way to retire. The NHS Working Longer group was established to review the implications of an ageing workforce and have produced guidance for employers to follow. **More information is available at:** <http://www.nhsemployers.org/news/2015/01/our-views-of-retirement-are-changing-according-to-recent-government-research>

Electronic Staff Record - Self Service

EMPLOYEE SELF SERVICE - The ESS module gives all employees the benefit of the ownership of their personal information, the system enables staff to view and or edit their own information. Staff have the opportunity to:

- Edit address details
- Edit/add bank details
- Edit/add phone numbers
- Edit/add emergency contact details
- View online payslips and P60
- View mandatory training details
- View professional registration dates

1100 staff have now been set up on ESR with more staff enquiring on a daily basis.

SUPERVISOR SELF SERVICE – The SSS module within ESR allows line managers to view and edit the information of the staff that they are responsible for. Training is currently being rolled out across the Trust including Mansfield and Newark and managers so far have been very keen to utilise the benefits of the system.

The Electronic Staff Record (ESR) has a wide range of capabilities that the Trust are keen to roll out within the new financial year.