

**Board of Directors**

**Subject:** Workforce Report  
**Date:** 22<sup>nd</sup> July 2015  
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**Sickness Absence**

The Trust sickness rate increased in June 2015 to 3.78% from 3.51% in May. The sickness absence rate is lower than the 2014/2015 trend (4.35% June 14). Anxiety/Stress/Depression/Other Psychiatric illnesses was the highest reported reason for sickness absence amounting to 778 working days lost compared to 733 in May. Support continues to be given to managers to manage absence and to sustain the improved sickness absence rate.

Further work is being undertaken by the HR and Occupational Health teams to develop a support pack to be sent to staff reporting absent due to stress anxiety and depression, signposting them to appropriate support organisations.

Newark sickness absence remains high. Additional support is being directed to Newark managers to support them in their management of sickness absence. Analysis has shown there are a significant number of staff with complex and serious long term health issues which contributes to the continued high % of sickness absence; staff are being managed in accordance with the policy.

**Appraisal**

Appraisal compliance increased by 1% in June 2015 to 90%. The 98% compliance target continues to be driven within the divisions. There are now 328 appraisals outstanding compared with 359 in May 2015. All outstanding appraisals are being reviewed by Assistant HR Business Partners and discussed at Confirm & Challenge meetings to drive improvement. Action plans are being reviewed to ensure that appraisals are undertaken in a timely manner and remain compliant.

**Mandatory Training**

Admin and clerical staff are engaging with their new mandatory training requirements and accessing the various e-learning programs in order to complete these. The online workbooks are continuing to prove popular with clinical staff. These solutions provide staff with greater opportunities to complete their mandatory training programmes. Doctors' mandatory training courses have been planned and diarised for the next 12 months. Following feedback received we are trial running the programmes on different days to see if this improves attendance.

**Staff in post**

Staff in post for June 2015 was 3645.07 wte's a very small increase of 2.99 wte's. Essentially workforce establishment is stable with a decrease of 3.76 wte's in month compared to May 2015.

**Pay Spend**

The Pay budget for June 2015 was £14.85m, with spend totalling £15.32m, an overspend of £470k. Fixed Pay (establishment only) was £12.55m in June, underspent by £1.29m. Variable Pay was £2.76m in June 2015, compared to £2.31m in May 2015, an overspend of £1.76m

Registered Nursing variable pay was £846k in June, compared to £677k in May an increase of £169k in month. Some of this is attributable to extra beds opening in ward 54 which were staffed by agency nurses and extra staff for ward 43. Work continues to be undertaken to fully understand these levels of spend.

Medical & Dental variable pay has increased by £145k in month amounting to £1,329m. Whilst some of this is attributable to additional clinics to reduce waiting lists the key issues are long term vacancies in hard to recruit specialities.

## Recruitment update

The HR team continue to work with the divisions to implement recruitment strategies and plans that reduce dependency on bank and agency across the Trust, with particular emphasis on Registered Nursing and Medical vacancies. The Trust work with International Recruitment Agencies progressing to plan targeting known Medical and Registered Nurse vacancies.

**Nurse recruitment:** The Trust has signed contracts with two agencies to support EU and non EU recruitment in 2015. Recruitment drives have been organised for August and September 2015 to the Philippines, Greece, Italy and Romania with new recruits anticipated to commence employment from October onwards. Cohorts of 20 staff have been planned to ensure robust induction. The nurses from the Philippines will commence employment in March, April and May 2016. The Trust is currently running a U.K. campaign using social media and will hold a recruitment open day at the end of September 2015

**Medical recruitment:** Work is focusing on filling the 17 Junior doctor rota vacancies currently anticipated across most specialities. A collaborative approach to filling these posts has been taken across the East Midlands; interviews take place on the 29<sup>th</sup> July 2015. Work has also been undertaken to support recruitment too difficult to recruit to specialties e.g. geriatrics. There is currently a national shortage of Consultants in Geriatrics and Stroke and this situation is not expected to improve in the short term. The vacancies within the department are; 3.0 WTE Consultant Stroke Physicians (including 1 WTE to cover a 3 year career break), 2.9 WTE Consultant Geriatric Physicians, 1.0 WTE Consultant Ortho Geriatric Physician. The department are currently staffing the vacancies by using internal NHS and agency locums. A Recruitment and Retention Premia for Consultants in Geriatrics and Stroke Medicine has been proposed to support recruitment and retention. This is being presented to Finance and Performance Committee for approval on 23<sup>rd</sup> July 2015.

## HEEM

**Trauma & Orthopaedics** – strong progress has been made to improve support and experience for trainees and recent feedback from HEEM visits and the School have recognised this. Final visit is scheduled for 23<sup>rd</sup> July 2015.

**GMC** - Visit to ED took place on 4<sup>th</sup> June 2015, reported issues centred on the interaction between ED and other specialities, workforce sustainability, the quality of locums and the effectiveness of junior doctor forums. Action plans have been developed and HEEM will be working more closely with the Trust in developing a bespoke support package for working with junior doctors.

The overall HEEM action plan is progressing well.

## Allocate Update

Roll out of the Health Roster system continues. Pay was processed successfully through Health Roster for payment in June for four Wards plus pay for all Bank staff. New authorisation levels for Bank & Agency are being addressed and are being incorporated into the electronic system. Further training dates have taken place for clinicians on the Job Plan system; delays identified with the inputting of job plans are due to the complexity and resources available. Junior Drs will be on Health Roster from August. A Full Roll out plan has been produced for Health Roster and is awaiting consideration of resources necessary to accelerate rollout.

## Diversity & Inclusivity

From 1st April 2015 the Workforce Race Equality Standards (WRES) became mandatory. These standards are now included in the NHS Standard Contract and all NHS organisations are required to demonstrate progress against nine indicators; four workforce data metrics, four staff survey findings regarding White and BME experiences, and one Board metric to address low levels of BME representation. Baseline data had to be published by 1<sup>st</sup> July 2015; this data is available on the Trust website. Analysis of the data is to be undertaken and an action plan developed for any challenging results.

The Trust continues to engage on EDS2; the outcomes along with the WRES data will inform the Trust Equality Strategy going forward.