

**Board of Directors Meeting in Public**

<b>Subject:</b>	Medical Workforce Update	<b>Date:</b> 2 <sup>nd</sup> November 2023								
<b>Prepared By:</b>	Rebecca Freeman, Head of Medical Workforce									
<b>Approved By:</b>	David Selwyn, Medical Director									
<b>Presented By:</b>	David Selwyn, Medical Director									
<b>Purpose</b>										
The purpose of this paper is to provide the Board of Directors Meeting with an update of Medical Workforce initiatives currently being taken forward for their assurance.		<table border="1"> <tr> <td><b>Approval</b></td> <td></td> </tr> <tr> <td><b>Assurance</b></td> <td><b>X</b></td> </tr> <tr> <td><b>Update</b></td> <td><b>X</b></td> </tr> <tr> <td><b>Consider</b></td> <td></td> </tr> </table>	<b>Approval</b>		<b>Assurance</b>	<b>X</b>	<b>Update</b>	<b>X</b>	<b>Consider</b>	
<b>Approval</b>										
<b>Assurance</b>	<b>X</b>									
<b>Update</b>	<b>X</b>									
<b>Consider</b>										
<b>Strategic Objectives</b>										
Provide outstanding care in the best place at the right time	Improve health and well-being within our communities	Empower and support our people to be the best they can be								
<b>X</b>		<b>X</b>								
To continuously learn and improve	Sustainable use of resources and estate	Work collaboratively with partners in the community								
<b>X</b>										
<b>Principal Risk</b>										
PR1	Significant deterioration in standards of safety and care	<b>X</b>								
PR2	Demand that overwhelms capacity	<b>X</b>								
PR3	Critical shortage of workforce capacity and capability	<b>X</b>								
PR4	Failure to achieve the Trust's financial strategy	<b>X</b>								
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									
<b>Committees/groups where this item has been presented before</b>										
Some of this information has been presented at People & Culture Committee										
<b>Acronyms</b>										
BMA – British Medical Association O & G – Obstetrics & Gynaecology A & E – Accident & Emergency										
<b>Executive Summary</b>										
<p>The Board of Directors is asked to take assurance from the update that this paper provides and to note the following:</p> <ul style="list-style-type: none"> <li>- the progress with job planning, appraisal, and revalidation</li> <li>- the progress being made in relation to the doctors' mess project</li> <li>- the progress being made to recruit to the vacancies and the support that is being provided by Remedium Partners and the continuing work focusing on the challenged services.</li> <li>- the Medical Workforce Data, the increase in the numbers of doctors of all grades</li> <li>- the challenges that have been experienced by the ongoing Industrial Action.</li> </ul>										

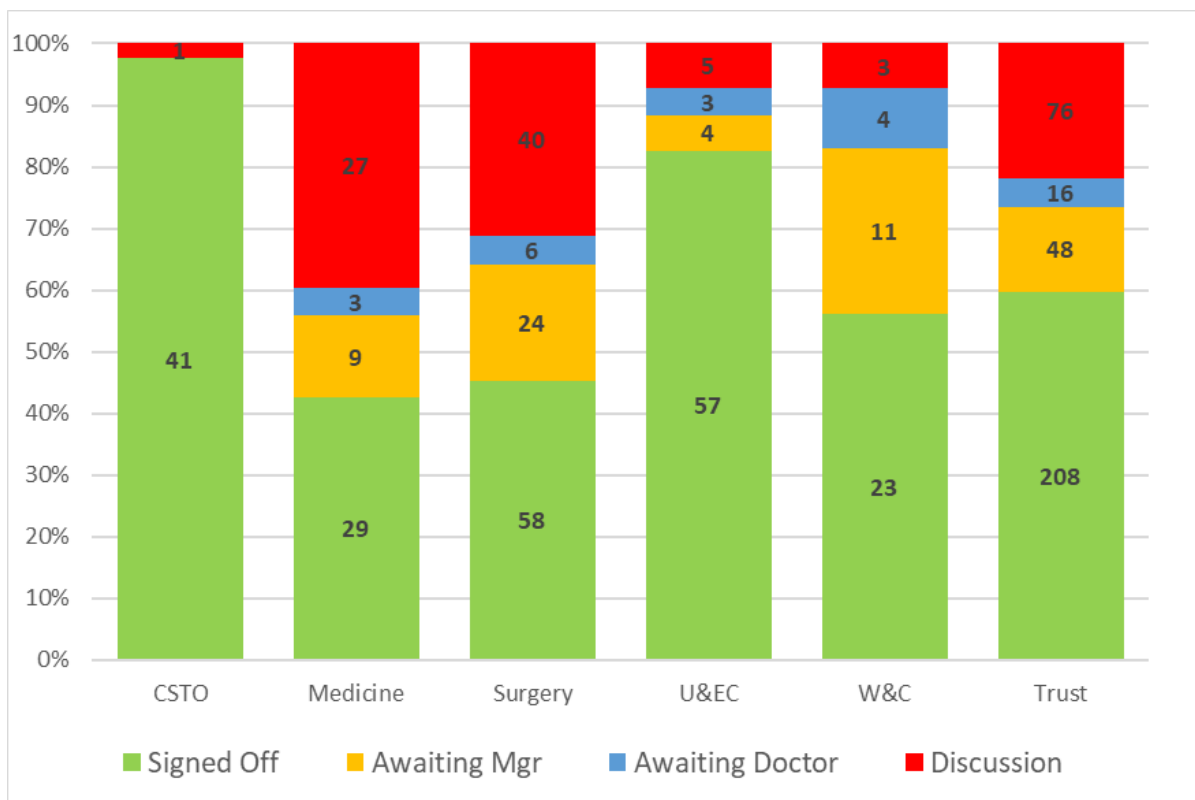
**Looking after our People**

**Job Planning**

The job planning round for 2023/24 continues to progress with a small number of areas continuing to require further support to obtain full sign-off of the job plans.

The chart below highlights the sign off stages for each division and at Trust level for this job planning round. Within the graph, there are also over 70 job plans that have changed for a variety of reasons since April that are shown as signed off within the chart. There are now 45 job plans ready for Trust Job Planning Panels which will be completed by the end of November for those remaining areas.

The Job Planning Toolkit is currently being revised and a draft document will be shared with the Joint Local Negotiating Committee at the next meeting in November. The new toolkit will be introduced for the next job planning round in 2024/25.

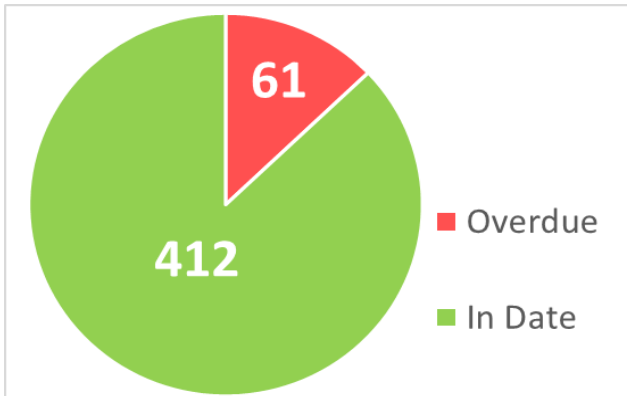


**Appraisal**

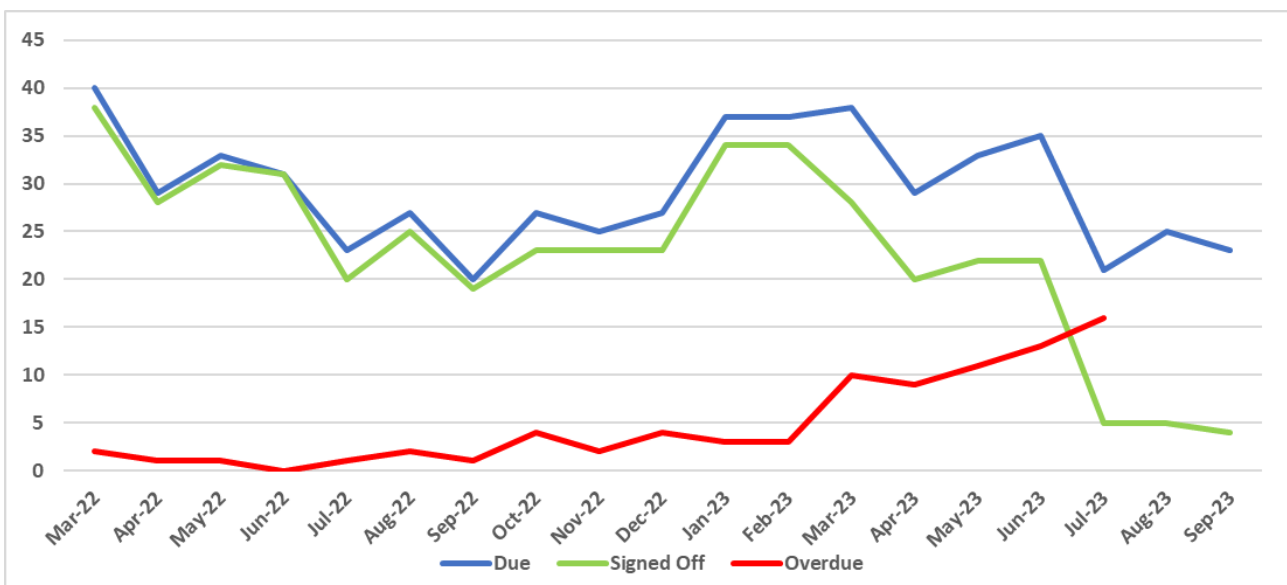
As we approach the winter period where the required numbers of appraisals due to be completed each month reduces, we will generally see the compliance rate increase. Industrial action has, however, had an impact on the completion rates which have reduced from 88% (July) to 87% (September).

The Trust currently has 26 appraisers undertaking appraisals; however, this number will reduce over the next three months with expected retirements, therefore the Associate Medical Director for Workforce will be asking for expressions of interest from colleagues wishing to become a Trust appraiser.

The pie chart shows the number of total appraisals that are compliant and those that are overdue. The Medical Workforce Manager and the Associate Medical Director for Workforce are working closely with colleagues that are still to complete their appraisal.



The graph below shows the gap between the due appraisals versus the completed appraisals.



### Revalidation

There are 63 doctors due to revalidate between April 2023 and March 2024. To date 24 doctors have been revalidated and 7 have been deferred. The deferrals are due to several reasons, including not having patient feedback outputs and extended periods of leave being taken such as maternity leave.

## Complaints made to the General Medical Council

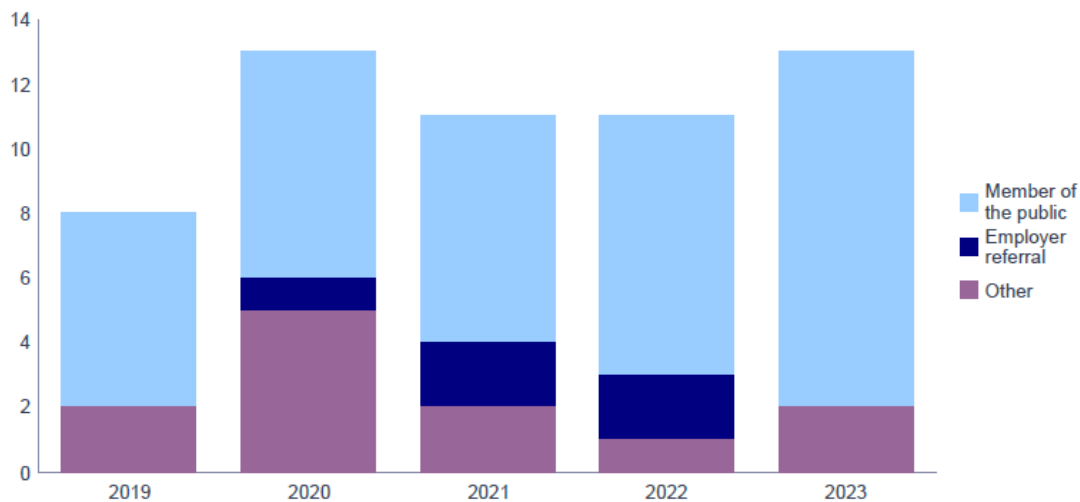
### Complaints breakdown (based on incident location by complaint received year)

Showing data for your selected organisation

	2019	2020	2021	2022	2023
Complaints	8	13	11	11	13

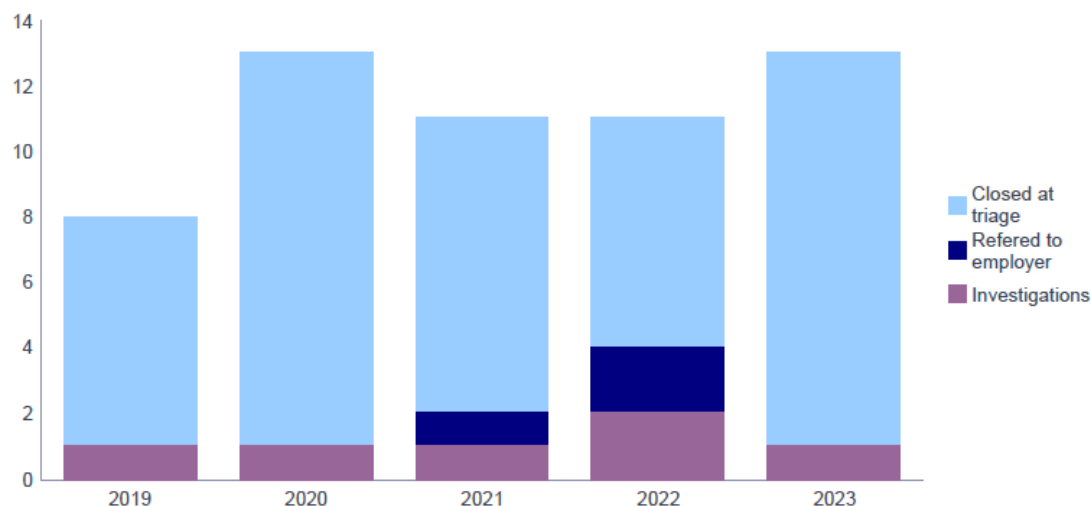
#### Complaint Source

Member of the public	6	7	7	8	11
Employer referral	0	1	2	2	0
Other	2	5	2	1	2



#### Complaint Outcome

Closed at triage	7	12	9	7	12
Referred to employer	0	0	1	2	0
Investigations	1	1	1	2	1



The Charts above show the number of complaints made to the GMC over the last 5 years and the outcome of those complaints. As can be seen the majority of complaints received during this five-year period have been closed at the triage stage.

In the last 12 months, the Trust has referred one doctor to the GMC, this has been a recent referral, therefore isn't included in the figures above. The referral was made as a result of the conduct of the doctor not being in line with the GMC Code of practice.

All of the referrals made by the Trust over the last five years have been as a result of conduct issues.

### **Industrial Action**

Since the last medical workforce update, there have been a number of periods of industrial action taken by the Junior Doctors and Consultants. The most recent period of joint industrial action took place from 7am on Monday 2<sup>nd</sup> October until 7am on Thursday 5<sup>th</sup> October. During this period both Consultants and Junior doctors went on strike. "Christmas Day cover" was provided across both groups of staff. This cover mirrors the rotas that were worked on Christmas Day 2022 with the focus being to provide cover for the emergency pathway and the inpatients wards.

There were no picket lines at the Trust during the more recent periods of industrial action. The Trust has continued to support with a well-being offer including tea, coffee, cold drinks and snacks in the Deli Marche.

The duration and frequency of strike action has had a considerable impact on both staff and patients. Strike fatigue has been described by a number of those affected by the strike action. The work that has been involved in the preparation and the management of each strike is considerable and is having an impact on the timely delivery of other planned projects/tasks.

There are currently no further planned strikes and it is understood that talks are currently taking place between the Government and the BMA.

With regard to the SAS doctors the result of an indicative ballot found that 88% of respondents would be prepared to strike over pay and working conditions.

### **Junior Doctors Changeover**

248 Junior Doctors joined the Trust in August. Overall, there has been an increase of 16 Foundation Programme Doctors and 12 St3+ trainees.

There were 14 posts that had not been filled by Trainees, however, 5 of the 14 have been filled by Senior/Clinical Fellows and one post was filled by a trainee in September, therefore leaving a total of 8 posts unfilled.

### **Clinical Fellows**

A decision was taken to over recruit to the Clinical Fellows in preparation for August Changeover. This has enabled the unfilled training posts in Medicine to be filled. Due to the over recruitment, a number of doctors will be able to support during the winter period.

Recruitment to Clinical Fellows is continuing to ensure that there are doctors available when vacancies arise due to promotion within the Trust or Clinical Fellows accepting training posts.

The Senior Clinical Fellow Medicine rotation for Newark is due to commence within the next few weeks with several fellows now able to rotate to Newark, this will be a phased approach with support being provided by the Medical Lead Consultant at Newark.

Within Trauma & Orthopaedics all the Clinical Fellows required for Newark had been recruited, however, two of the Clinical Fellows have been promoted to Specialty Doctors within the specialty and NHSE have informed the service that the allocation of trainees due to commence in December will be reduced by two specialty trainees. One Clinical Fellow has resigned and a Clinical Fellow due to commence shortly is in Gaza. Therefore discussions are taking place to consider contingency plans for Newark.

### Medical Workforce Data

The figures below show the increase in the Medical Workforce since September 2017 when the Medical Workforce team was established. Since 2017 this Workforce has grown by almost a third with the largest increases in Clinical Fellows, Consultants and Doctors in Training.

#### September 2017

**448 TOTAL**

- 174 Consultants/locum
- 11 Associate Specialists
- 49 Specialty Doctors
- 35 Clinical Fellows
- 174 Doctors in Training (DiTs)

#### September 2023

**715 TOTAL**

- 229 Consultants/locum
- 22 Specialists
- 100 Specialty Doctors
- 106 Clinical Fellows
- 242 Doctors in Training (DiTs)

### Belonging in the NHS

#### Chief Registrar Post

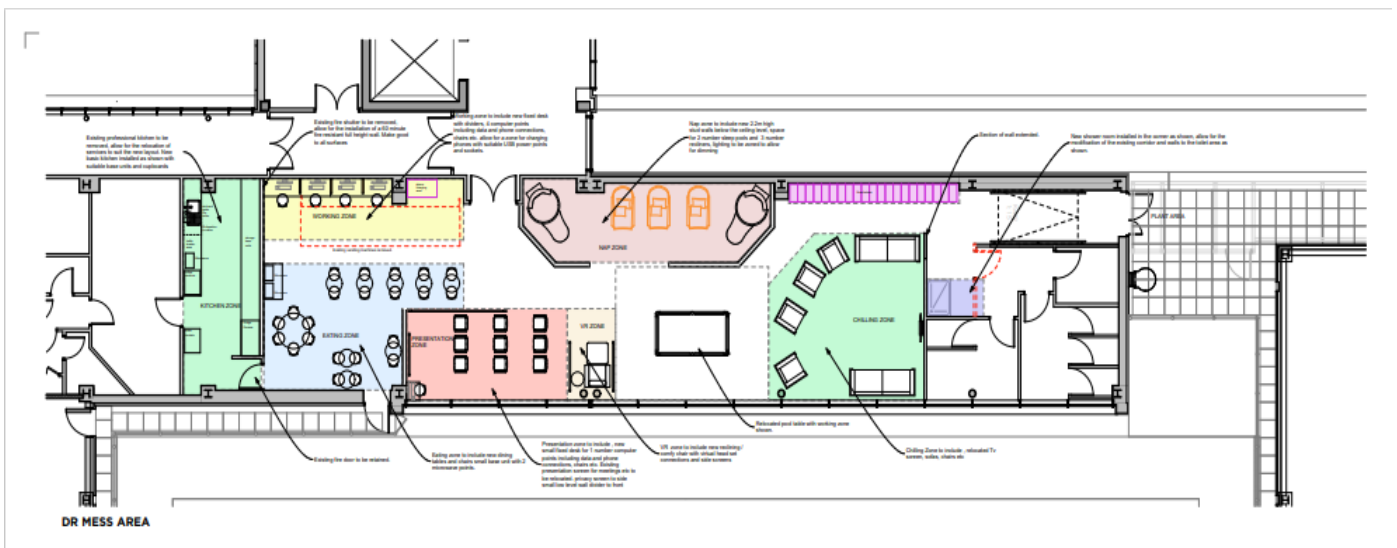
Dr Oliver Smith – a Specialty Registrar in Obstetrics & Gynaecology has been appointed as the Chief Registrar and he commenced in post on 2<sup>nd</sup> August. This programme provides a doctor in training with the opportunity to develop their leadership skills and to take forward quality improvement projects.

Oliver will be instrumental in providing a vital bridge between senior leaders and the trainee workforce which is extremely important during what is proving to be a particularly challenging time.

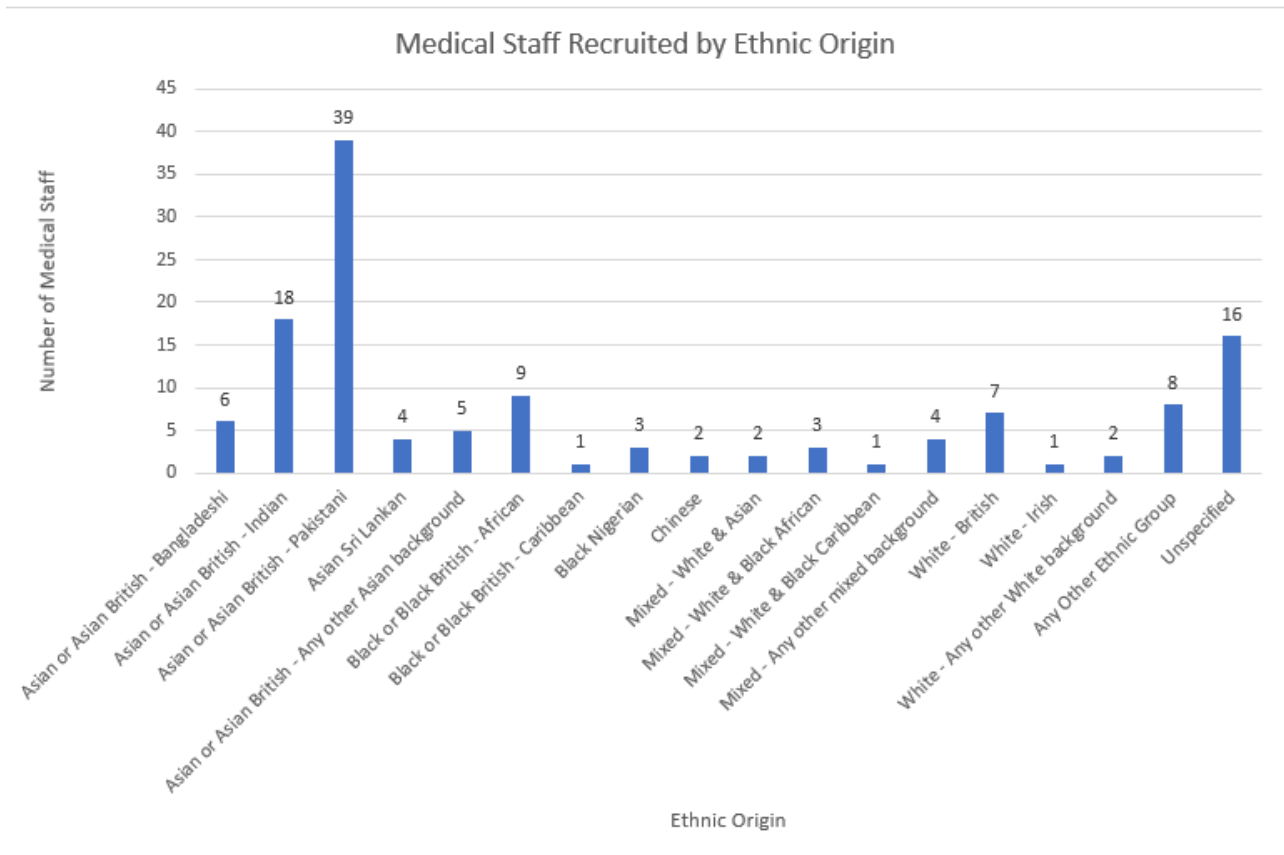
**Doctors Mess**

Work to relocate the Doctors mess from its current location to the Deli Marche is underway. Several meetings have been held with the members of the Task and Finish group and plans have been agreed.

It is anticipated that the work will be completed by December. The new facility will provide a wonderful space for the doctors, it has been said that Sherwood Forest Hospitals will have the best Doctors Mess in the region. There will be various areas that will include an eating area, a rest area, an area for the doctors to work and a changing area. There will be an official opening of the Mess on completion of the work. Whilst the plan has not been formally lockdown, this gives an indication of the development and improvements proposed.



**Medical Staff Recruited by Ethnic Origin**



The chart above shows the number of Medical Staff recruited by ethnic origin between 1<sup>st</sup> October 2022 and 31<sup>st</sup> September 2023. This information excludes trainees as they are allocated to the Trust as part of their rotational training programme.

**Exit Interviews**

1 October 2022 to 30 September 2023	
<b>Doctors in Training (up to ST2 level) &amp; Clinical Fellows</b>	
Number of leavers	27
Number of leavers eligible for an exit interview (excluding flexible retirements and internal moves)	27
Number of exit interviews offered	24
Number of exit interviews conducted	19
% of eligible leavers offered exit interviews	89%
<b>Themes</b>	
<ul style="list-style-type: none"> <li>&gt; Great support</li> <li>&gt; Rest facilities could be improved</li> <li>&gt; Clinical Fellow Programme is really good for new doctors to the UK and very supportive</li> <li>&gt; Experience across different medicine specialties is not consistent</li> <li>&gt; Workload high, especially in Acute Medicine and ED</li> </ul>	
<b>Specialty Doctors, Doctors in Training (ST3+ level) and Senior Clinical Fellows</b>	
Number of leavers	9



Number of leavers eligible for an exit interview (excluding flexible retirements)	9
Number of exit interviews offered	8
Number of exit interviews conducted	5
% of eligible leavers offered exit interviews	89%
<b>Themes</b>	
<ul style="list-style-type: none"> <li>&gt; Would benefit from more career development</li> <li>&gt; More support required for doctors coming from abroad</li> <li>&gt; Need more staff</li> <li>&gt; Well supported</li> </ul>	

<b>Specialists and Consultants</b>	
Number of leavers	10
Number of leavers eligible for an exit interview (excluding flexible retirements)	10
Number of exit interviews offered	10
Number of exit interviews conducted	10
% of eligible leavers offered exit interviews	100%
<b>Themes</b>	
<ul style="list-style-type: none"> <li>&gt; Well supported</li> <li>&gt; Need more staff</li> <li>&gt; Enjoyed working at SFH</li> </ul>	

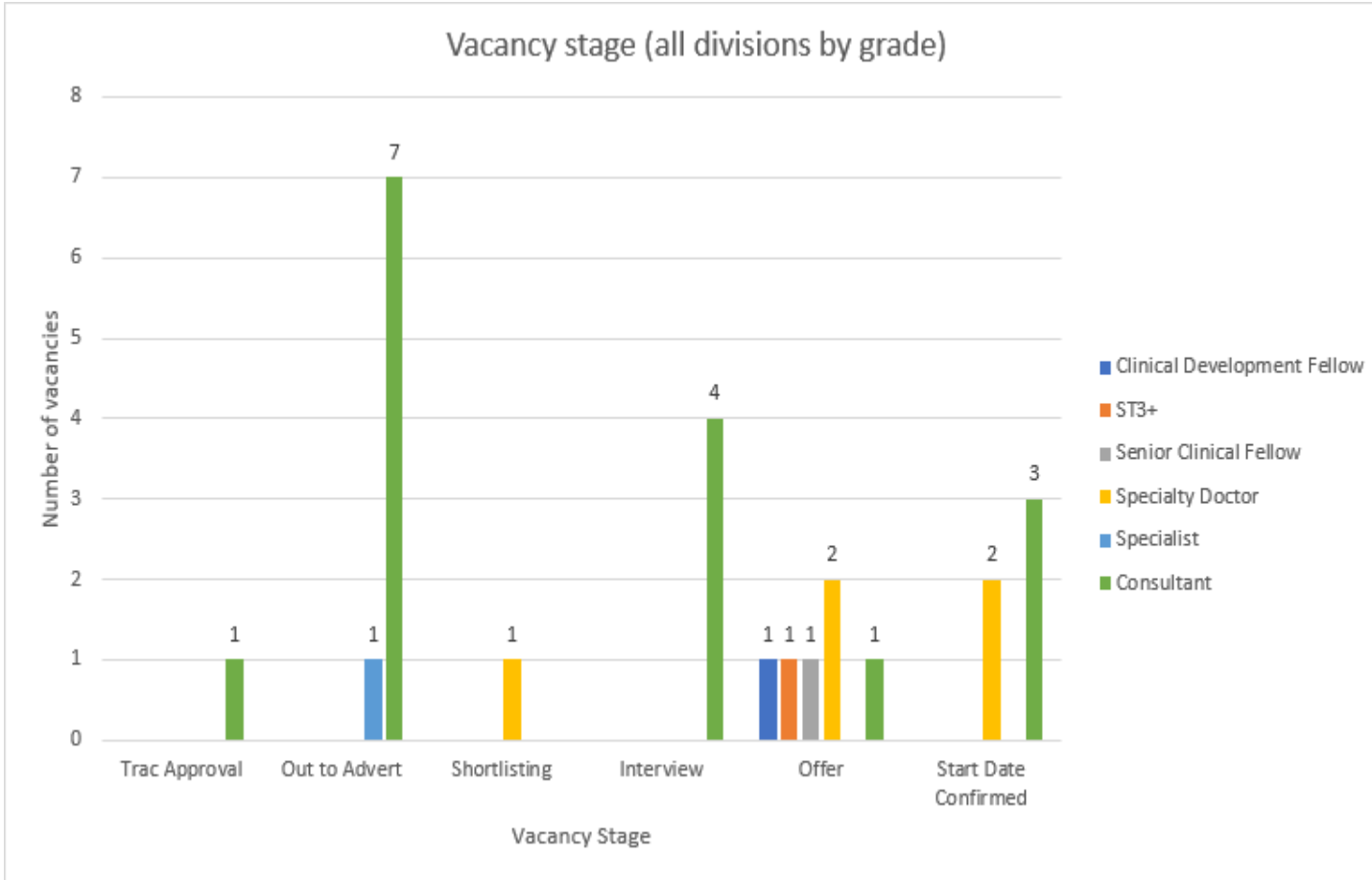
<b>Total number of leavers/exit interviews carried out</b>	
Number of leavers	46
Number of leavers eligible for an exit interview	46
Number of exit interviews offered	42
Number of exit interviews conducted	34
% of eligible leavers offered exit interviews	91%
% of eligible leavers where exit interviews were conducted	74%

For all doctors that leave the Trust other than Trainees who rotate to other Trusts the Medical Workforce Team offer an exit interview. Where trainees leave the training programme, an exit interview is offered. The above shows the number of exit interviews conducted over the last year. The data obtained from the exit interviews is used to improve systems process and to understand what the Trust does well in the eyes of the employees. The summary above shows that 91 % of eligible leavers were offered exit interviews and 74% of interviews were conducted. 4 doctors were not offered exit interviews during the last year, the reasons for not offering interviews can be that the Medical Workforce Team may not have been informed that the individual was leaving, this will have been the situation in the case of the Specialty Doctor. With regard to the Clinical Fellows, these were leavers during July and unfortunately the Medical Workforce Team did not have the capacity to invite everyone to interview due to the work involved in the onboarding of the trainees and Clinical fellows commencing in August 2023 and unfortunately 3 doctors were missed. Although invited to have an exit interview and encouraged to attend, a small number do decline or just do not attend the interview. Themes from the interviews are raised with the relevant areas to enable any concerns to be addressed.



**New Ways of Working**

**Vacancies**



The graph above shows the current recruitment position for Medical vacancies across the Trust. As can be seen 6 offers of appointment have been made and start dates have been confirmed for five successful candidates, three of which are consultants.

The graph also shows that there are 12 consultant posts that are being actively recruited to.

**Remedium Partners**

Remedium Partners have been working closely with the Trust to support the recruitment of Medical posts. The contract with Remedium Partners is for a period of two years and they have been successful in recruiting to several posts as detailed below during the first year.

They have been particularly successful with the Specialty Doctor/Middle Grade posts. Support from Remedium will continue for a further 12 months.

Weekly vacancy progress meetings are held with Remedium and a meeting is planned to discuss future Medical workforce requirements for the Trust with the Chief Executive of Remedium Partners, the Associate Director of People Transformation and the Head of Medical Workforce. Recruitment includes;

- 1 Consultant in Rheumatology
- 1 Fixed term Acute Medicine Consultant
- 7 A&E Specialty Doctors
- 2 Anaesthetic Middle Grades
- 1 O&G Senior Clinical Fellow
- 1 Geriatrics Senior Clinical Fellow

### **Task and Finish Group progress**

The Task and Finish Groups are progressing across the challenged services. With regard to Anaesthetics, interviews are scheduled to take place on 15<sup>th</sup> December with 2 candidates having been shortlisted for the substantive consultant post. There are 6 applicants for the locum consultant post which is currently being shortlisted and interviews are being arranged for mid November.

The consultant in Gastroenterology is currently being shortlisted and there are two applicants.

The Medical Division is currently reviewing the current configuration of the Consultant posts within Haematology.

The Head of Medical Workforce has made contact with Consultants at other neighbouring Trusts requesting support with recruitment to Stroke. Stroke is proving to be the most difficult specialty to recruit to.

The Medical Division has introduced a meeting that will be held on a monthly basis to review the progress of all of the individual task and finish groups within the Medical Division on an ongoing basis, providing additional support where required.

A monthly meeting is also being held with the Head of Medical Workforce and the Divisional General Manager and Clinical Chair in Surgery, Anaesthetics and Critical Care to review progress.

### **Conclusion & Recommendations**

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 relation to the doctors mess project

- Note the progress being made to recruit to the vacancies and the support that is being provided by Remedium Partners and the continuing work focusing on the challenged services.
  
- Note the Medical Workforce data and particularly the increase in numbers of doctors of all grades
- Note the challenges that have been experienced by Industrial Action.