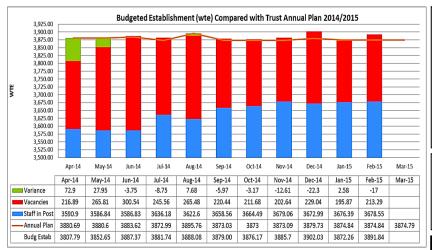
<u>Board of Directors – March 2015</u> <u>Workforce Report – February 2015 Position</u>

1.0 Budgeted Establishment, Staff in Post and Vacancies – Source ESR & Financial Ledger



Vacancies:

- The number of vacancies at the end of January was 213.29 wte's, an increase of 17.42 wte's attributable to an increase in establishments as outlined above.
- The vacancy rate now stands at 5.48%, compared with 5.06% in January 2015.
- Top 3 Areas for vacancies are:
 - Service Improvement 24.18 wte's Admin & Clerical vacancies
 - KMH EAU 17.67 wte's 12.14 wte's attributable to Registered Nurse vacancies
 - Stroke Unit 15.65 wte's 13.94 wte's attributable to Registered Nurses

Budgeted Establishment:

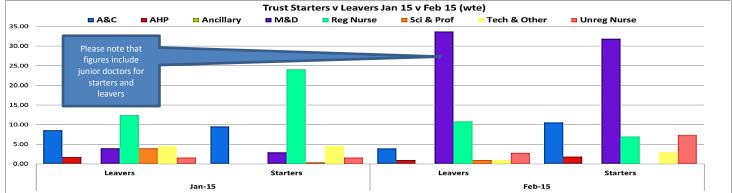
- At the end of February 2015 the budgeted establishment was 3891.84, an increase of 19.58 wte's.
- The increase is due to budget holder reconfiguration in various departments across the Trust. 11.12 wte's are attributable to changes in Planned Care & Surgery.
- Annual plan numbers are based on budget not staff in post.

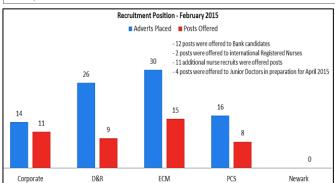
Staff in Post:

 Staff in post for February was 3678.55 wte's, an increase of 2.16 wte's, broadly comparable to January 2015.

Vacancy Rate - Number of Vacancies Compared to Budgeted Establishment per Staff Group		
Admin & Clerical	3.54%	32.58
Allied Health Professionals	-0.68%	-1.23
Ancillary	-19.41%	-7.81
Medical & Dental	4.45%	19.48
Registered Nurse	6.24%	79.39
Scientific & Professional	8.17%	16.64
Technical & Other	3.65%	9.08
Unregistered Nurse	11.10%	65.15
Grand Total	5.48%	213.29

2.0 Recruitment - Source NHS Jobs and ESR





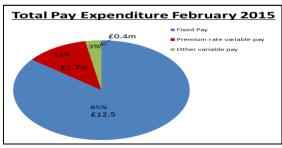
- The Nursing Recruitment strategy for 2015/2016 has now been approved and now being implemented. HR, Nursing and Divisions will work together to support delivery.
- A local recruitment open day for Registered Nurses will take place on the 25th April 2015, final arrangements are now being put in place.
- The Trust continues to operate within a highly competitive recruitment market for Medics and Nurses locally, nationally and internationally which is impacting upon the Trust's ability to recruit to vacant posts currently.
- The Trust has invited tenders for international recruitment within the EU and to recruit outside of the EU. It is the ambition to recruit 40 EU nurses in 2 cohorts to start in July and October 2015 and a cohort of 40 non EU nurses to start in November 2015.

Movement in Month

- 22 adverts were placed throughout February 2015, compared to 86 in January 2015. The decrease is due to the Trust continuing to hold non critical posts.
- 41 posts were offered to candidates throughout February 2015, this compared to 81 posts in January 2015.
- At the end of February there were 133 candidates within the recruitment system compared to 149 in January 2015, 14 of those candidates had breached the 3 week pre-employment check target, 10% compared to 7% in January 2015. The main impact of this is being seen with internal bank candidates who the recruitment team are awaiting references from line managers within the Trust.
- Reasons for breaches for pre-employment checks were delays in receiving references and candidates providing proof of DBS.
- Junior Doctor changeover took place during February and there was only one vacancy as an outcome in Medicine, this post has now been appointed to and is due to start at the beginning of April 2015.
- Throughout February there were 4 Newly Qualified Registered Nurses and 4 International Registered Nurses who commenced employment with the Trust. 2 of the International Registered Nurses commenced employment as Health Care Support Workers due to currently awaiting their NMC pin number.

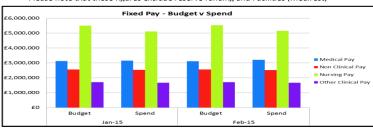
3.0 Pay Spend — Source Financial Ledger

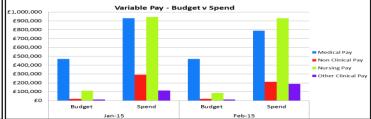




Premium rate VP – Agency, locum, overtime, waiting lists Other VP - Additional hours, extra sessions, pool & bank

*** Please note that these figures exclude reserve funding and Facilities (Medirest)

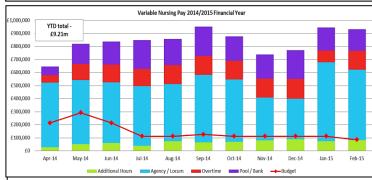


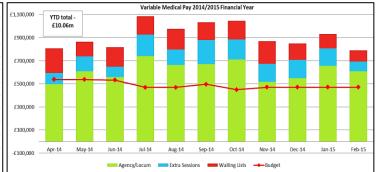


- Pay budget for February 2015 was £13.48m, with pay spend totalling £14.65m, overspend of £1.16m. Pay spend decreased by £78k in month.
- Fixed Pay was £12.53m in February 2015, underspent by £371k.
- Variable Pay reduced to £2.12m in February but remained at an unacceptable rate, this compared to £2.27m in January, an overspend in month of £1.53m.
- The reported financial position continues to monitor against the original £26.4m deficit within the financial ledger, recent forecasting that has been undertaken by the Finance department has forecasted a planned £32.7m deficit.

Top 3 areas of variable pay (VP) spend:

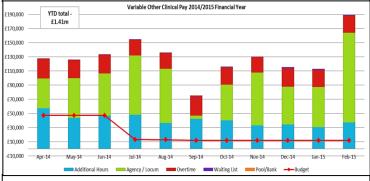
- A&E Medical £153k The Trust currently has 3 Consultant vacancies being covered by agency staff and additional hours, the Trust has successfully made 1 Locum Consultant appointment due to commence on the 1st June 2015. The Trust also has an international Specialty Doctor commencing employment on the 1st March with the intention of upgrading to a Consultant after a 3 month induction process. There are also 5 Specialty Doctor vacancies currently being covered by additional hours and agency. There were 2 Specialty Doctors completing supernumerary periods, 1 has now been incorporated into the rota and 1 will participate in the rota by the end of April, therefore a reduction in variable pay expenditure is expected.
- Junior Doctor KMH £126k The Trust continues to utilise extra cover to meet the increased demand at a premium rate of variable pay for Registrars and Junior Medics. Additional doctor cover has been put in place for the hospital at night provision.
- Cardiology Medical £116 During February the Trust had 2 Locum Consultants participating in a 24 hour on call pattern premium rate. The third and final substantive Consultant commenced employment with the Trust at the beginning of March and a reduction in the use of variable pay is expected as an outcome.

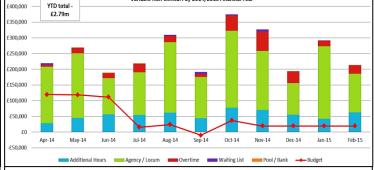




Nursing VP - Totalled £931k in February 2015, this was a decrease of £13k in month. Agency spend decreased by £66k as well as pool/bank spend by £11k. During February there was an increase in additional hours and overtime payments to Trust employees of £65k, this is reflected in the number of unfilled shifts by bank and agency, where the Trust has sourced internal staff to do

Medical VP - Totalled £790k in February 2015, the lowest spend since the beginning of the financial year, and a £140k decrease in month. The main impact of Medical variable pay continues to be within A&E Medical, Junior Doctor KMH and Cardiology as outlined above. Agency and locum spends decreased by £45k in month. additional hours and overtime to mitigate the impact. See section 7.0.



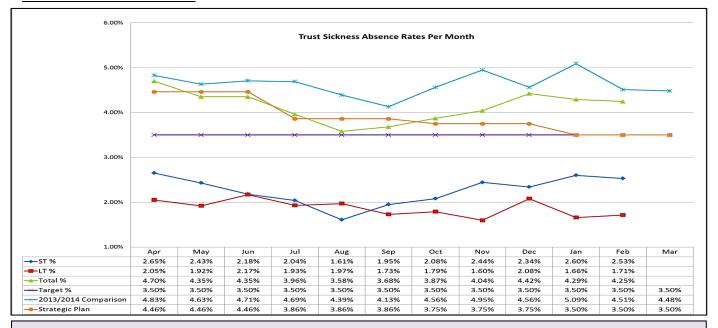


Variable Non Clinical Pay 2014/2015 Financial Year

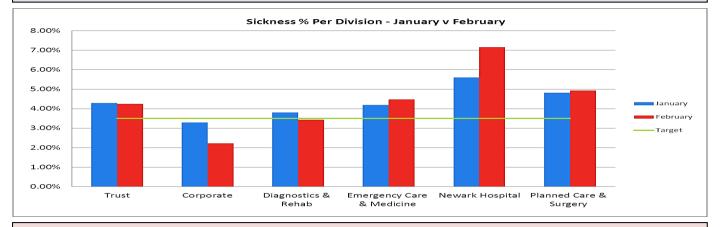
Other Clinical VP – Totalled £189k in February 2015, an increase of £76k, with the main impact due to agency spend which totalled £126k in month, an increase of £70k. The highest agency spend was in Radiology £40k for the Ultrasound in SAU pilot scheme, additional cover has been used to support the Trust during black alert. Pharmacy spent £15k due to 13 wte vacancies.

Non Clinical VP - Totalled £212k in February 2015, a decrease of £78k in month. Agency spend totalled £122k in month a reduction of £108k. The main area of variable pay spend is Executive Directors (£61k in month).

4.0 Sickness Absence - Source ESR



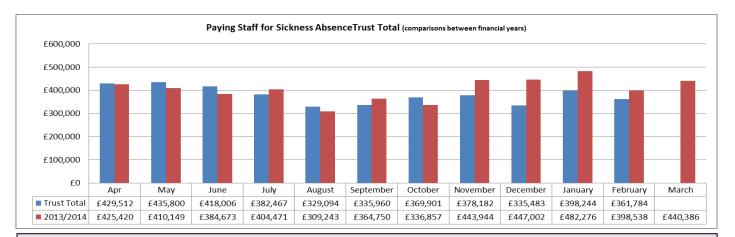
- The Trust sickness rate decreased for a consecutive month in February 2015 to 4.25% from 4.29% in January 2015. The rate continues to remain lower than the 2013/2014 trend, rolling YTD stands at 4.13% compared with 4.64% in the same period.
- Short term sickness stood at 2.53%, a 0.07% decrease in month.
- Long term sickness increased by 0.05% to 1.71%. Long term sickness continues to be proactively reviewed on a bi weekly basis by the HR Team.
- There were 608 episodes of sickness absence in February 2015 compared with 678 in January 2015.
- The Trust lost 4352.61 working days in January 2015 compared with 4859.86 in February 2015.
- The Sickness Absence Audit for Quarter 3 disappointingly showed an average of 34% compliance with sickness absence management in accordance with the Trust policy. Where managers are not following the policy and taking appropriate action, this will have a negative effect and cause an increase in sickness absence, HR will therefore undertake focused work with managers to ensure policy compliant going forward.



- Emergency Care & Medicine, Newark and Planned Care & Surgery all increased sickness absence rates during February 2015, a predicted increase due to the pressures the Trust has faced during December and January.
- Corporate decreased sickness absence rate by 1.07% mainly due to a decrease in long term sickness absence.
- Diagnostics & Rehab also decreased sickness absence in February 2015 by 0.36%, short term sickness standing at 2.16%. The HR Business Partners within D&R will be holding master classes throughout March 2015 for managers to assist in embedding further the Trust's Sickness Absence Policy.
- Newark is a particular concern as there has been a focus on sickness absence management at Newark the 1.55% increase in February is
 due to long term sickness in the month, Minor Injuries, PPC and Minster Ward all have long term sickness cases that are being
 supported by HR. Work continues on the implementation of the sickness absence action plan that was approved by the Workforce & OD
 Committee and further work is being undertaken by the Assistant HR Business Partner to understand the increase in February.

Top 3 Areas of Sickness Absence (FTE Days Lost) & Actions to Address

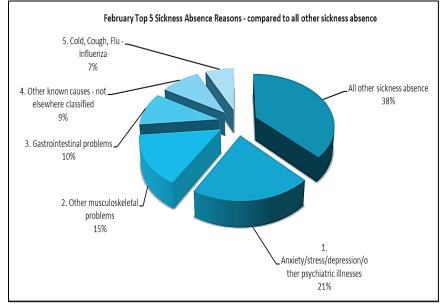
- Theatres KMH 322.75 working days A meeting between the HR Business Partner and the Theatre Manager is taking place to discuss each sickness absence case in detail. Sickness is also being discussed at each Confirm & Challenge meeting.
- KTC Nursing Staff 137.56 working days Posters and signs regarding hand hygiene are to be displayed within the department to tackle frequent gastrointestinal sickness absences. By working in partnership with Occupational Health staff have been able to return to work sooner.
- Stroke Unit 125.52 working days Focused work is being undertaken with the Ward Manager to review each case and progress staff through the Sickness Absence Policy. The Assistant HR Business Partner is also working with deputies on the ward to begin to undertake sickness absence management to support.



The cost of paying salary to absent staff was £361k in February 2015, with £4.17m being the cost FYTD.

Trends & Themes

- Monday was the highest first day absent in February with 168 absence beings reported on a Monday (28%) compared to 175 in January 2015 (25%). The admin and clerical staff group reported the highest number of episodes on a Monday (49 episodes)
- Per whole time equivalent staff in post the cost of sickness absence stands at £1134 for the period of April 2014 to February 2015.
- Per whole time equivalent staff in post the number of working days lost for the period April 14-Feb 15 was 13.59 days, this compares with 15.14 working days in the same period of 2013/2014 financial year.



Anxiety/stress/depression was the highest absence reason for a consecutive month losing 895 working days compared with 865 in January 2015.

The Trust's Health & Safety Manager is running a series of Stress Management Sessions for line managers across the Trust, the purpose of the training is to enable managers to identify signs of stress within the workplace and to create actions to address as an outcome. The training will also provide guidance to managers on how to complete a stress risk assessment.

The Trust continues to offer Resilience training to staff which is being provided to help staff deal with stress which is either work or personal related.

Monday Highest First Day Absent Analysis & Intended Actions

Further analysis has been undertaken into Monday being the highest first day absent for the Trust.

The top 2 staff groups are:

- Registered Nurse 310 episodes starting on a Monday
- Admin & Clerical 305 episodes starting on a Monday

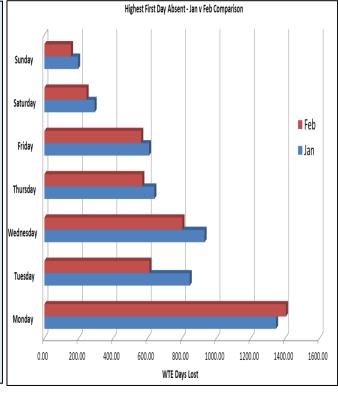
The top 3 departments are:

- Theatres 68 episodes starting on a Monday
- KTC Nursing 31 episodes starting on a Monday
- Pharmacy 30 episodes starting on a Monday

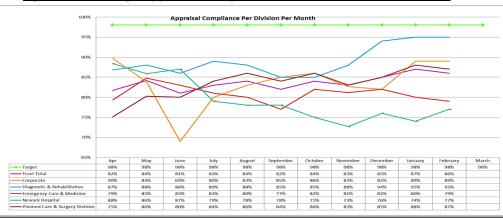
Two staff were identified as having 4 or more episodes of sickness absence starting on a Monday which have already been addressed with the HR Business Partners.

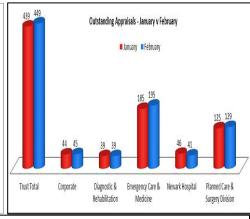
ACTIONS:

- For the top 3 identified departments, the HR Business Partners are going to meet with managers to identify trends and top offenders, where particular staff are showing a repeated first day absence as a Monday they will be managed in line with Trust policy.
- HR will pull together information for each area and this will be presented back to the department by the HR Business Partner for action.



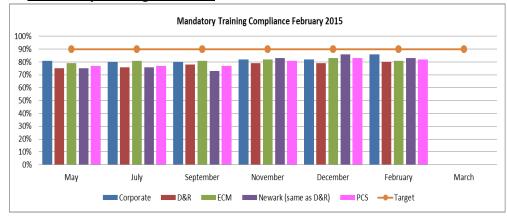
5.0 Agenda for Change Appraisal Compliance — Source ESR and Manager Returns





- Appraisal compliance **decreased by 1%** in February 2015 to **86%**. The 98% compliance target continues to be driven within the divisions, however it is acknowledged that a number of areas have faced significant pressures and been unable to release clinical staff to undertake appraisals.
- There are now **449 appraisals outstanding** compared with 439 in January 2015.
- Corporate maintained and 89% compliance rate in month
- D&R are 3% off the 98% compliance target with 95% compliance in February
- ECM have decreased for a consecutive month to 79%, it is acknowledged that the division have faced significant pressures since December 2014
- Newark have increased compliance by 3% in month to 77%
- PCS have reduced compliance rate by 1% during February to 86%
- Radiology and the Stroke Unit are two areas with more than 50 staff and are 100% compliant with appraisals

6.0 Mandatory Training – Source ESR

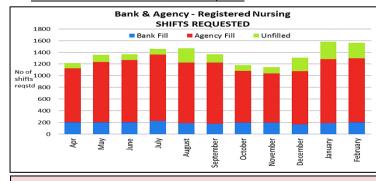


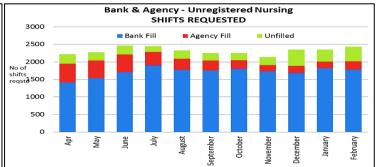
The Trust's mandatory training compliance at the end of February was 82%, an increase of 1% from January 2015:

- Corporate increased compliance by 4% in month.
- Diagnostics & Rehab increased compliance by 3% in month
- ECM increased compliance by 1% in month
- Newark decreased compliance by 2% in month
- Planned Care & Surgery increased compliance by 1% in month

From April 2015 the mandatory training compliance will decrease by approximately 8% as the new national mandatory training standards are being implemented whereby many admin and clerical staff will now have to undertake additional mandatory training that they previously did not have to undertake. All affected staff have been informed of these new training requirements.

7.0 Nurse Bank – Source Nurse Bank System





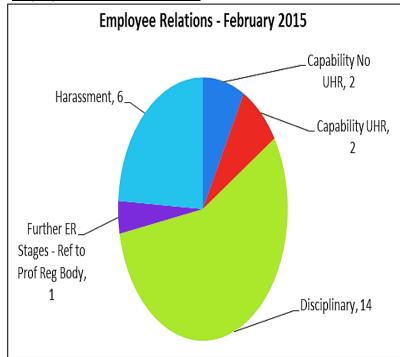
The number of requested shifts for Registered and Unregistered Nurses in January and February peaked when compared to the rest of the financial year, the average requested shifts between April and December was 3623 and this increased in January to 3931 and 3995 shifts in February (an increase of over 300 shifts each month). The increase in requested shifts is due to additional capacity open.

Registered Nurse Fill Rates – Bank fill rates in February increased to 13% an increase of 1% from January, and agency fill rate also increased to 70% compared with 69% in January.

Unregistered Nurse Fill Rates – Bank fill rates decreased to 73% in February compared to 78% in January, the increase in requested shifts has impacted on the Trust's ability to fill with in house bank staff and therefore the agency reliance increased in February to 10% from 8% in January. The sharp increase in number of requested shifts was not expected and this has impacted on the Trust's ability to fill unregistered shifts with in house bank staff. On average the number of unfilled shifts between April and November was 349 shifts, in December, January and February this increased to an average of 673 shifts being unfilled. This has been mitigated by substantive employees undertaking overtime and additional hours which is also reflected in the Trust's February pay spend.

It should also be noted that February had a half term week and bank staff tend to work on bank so that they are able to work flexibly to accommodate caring needs. Another recruitment drive to the bank has been undertaken for Unregistered Nurses.

8.0 Employee Relations - Source ESR



The pie chart shows that there were 25 employee relations cases on-going at the end of February 2015 compared with 37 in January 2015. A reduction as a number of cases have been finalised in month. The disciplinary cases include investigations and those due to go to a hearing. UHR stands for underlying health reason.

Workforce Change:

Newark Consultation – The Newark Consultation for management arrangements has now started and aims to address a number of key leadership factors at the Newark site. A proposed structure has now been shared with the staff at Newark and consultation runs until the 24th March 2015 with a view to implement the new structure on the 1st April 2015. 1:1 consultations have taken place with those staff members who are affected directly and the wider team at Newark are being encouraged to feed back thoughts/concerns regarding the structure for the management team to consider before the 24th March.

9.0 HR Update

9.1 Launch of the Trust's Performance Management Framework - Appraisal & Capability Policy

The HR department have now launched the new Appraisal and Capability Policies and a number of management workshops have taken place throughout February and March. Managers across the Trust have so far been very positive. It is envisaged that the new paperwork and policies will provide a clear framework for managers to implement a performance management culture, paperwork is aligned to the Trust's Quality for All agenda and have been developed so that paperwork is easier to use and aligns to the Trust strategic objectives.

http://sfhnet.nnotts.nhs.uk/humanresources/deptbrowse.aspx?recid=6687&mode=new

9.2 ESR – Employee & Supervisor Self Service

The formal training sessions for ESR Employee and Supervisor Self Service have now been completed with over 1400 staff now being set up with access. The system allows staff to view and amend their personal details and view their mandatory training records, thus providing staff with ownership of their own information.

9.3 Revised Redundancy Pay Entitlements (AFC Staff)

NHS Employers have now published the revised redundancy pay entitlements for those staff working under Agenda for Change Terms & Conditions after an agreement with the Unions which will come into force on 1st April 2015. The main points to note are:

- For those earning less than £23,000 per year (full time equivalent), the redundancy payment will be calculated using notional full-time annual earnings of £23,000, prorated for employees working less than full time.
- For those earning over £80,000 per year (full time equivalent) the redundancy payment will be calculated using notional full-time annual earnings of £80,000, prorated for employees working less than full time.

http://www.nhsemployers.org/case-studies-and-resources/2015/03/pay-circular-agenda-for-change-2-2015

9.4 2015/2016 Pay Award

The new Pay Circulars for Agenda for Change staff have now been published by NHS Employers for 2015/2016 pay award following the NHS trade unions' acceptance of the Government pay offer at the NHS Staff Council's meeting. Key points to note for the pay award are:

- Band 1-2 points 1-2 Bottom of the scales increase to £15,100
- Band 1, 2 & 3 points 3-8 1% uplift plus £200
- Band 3-6 points 9-29 1% uplift
- Band 7 8a points 26-33 1% uplift
- Band 8a- Band 8c points 34-42 increment freeze and 1% uplift
- Band 8c Band 8d points 43-54 increment freeze and 1% uplift

9.5 Staff Engagement

It is recognised by the Trust that further work needs to be undertaken to engage employees with the recent Staff Survey and Friends and Family results being disappointing and the Trust's turnover rate currently standing at 12.39%. In order to improve engagement the HR department are scoping current engagement activities and will hold a staff focus group to inform the Staff Engagement Strategy.