Sherwood Forest Hospitals **NHS** NHS Foundation Trust

## Board of Directors Meeting

Subject:	Workforce Report
Date:	30 <sup>th</sup> April 2015
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	Director of Human Resources
Lead Director:	Karen Fisher, Interim Chief Executive

## **Executive Summary**

Staff in post for March 2015 was 3676.52 wte's which remained broadly comparable to February 2015, during quarter 4 staff in post has increased by 3.53 wte's. Trust budgeted establishment was 3886.71 wte's which was a decrease of 5.13 wte's in month, this now brings the vacancy rate to 5.41% at the end of March. During the financial year the Trust has made progress in increasing its staff in post numbers in order to reduce vacancy rates with Registered Nurse staff in post increasing by 36.91 wte's bringing the vacancy rate at the end of March to 5.76% (73.06 wte's, an increase throughout the financial year due to the Keogh investment being set into budgets). Medical staff in post has increased by 12.33 wte's during the financial year with the vacancy rate closing at 2.46% at the end of March. Despite the increase in staff in post the Trust still faces workforce challenges in a number of areas, for Nursing in particular the following areas carry the highest level of Registered Nurse vacancies:

**EAU**-11.13 wte (25% of Registered Nurse budget); **Stroke Unit**-13.94 wte (29%); **Ward 52**-8.98 wte (37%); **Ward 33**-8.45 wte (44%); **Newark Hospital** – 20.88 wte (26%)

To mitigate these high vacancy rates the HR and Nursing teams are in discussions with regards to moving staff flexibly between wards to ensure safe staffing levels at all times and to reduce reliance upon agency and bank spends. The Trust is now pursuing its Registered Nurse Recruitment strategy, and tenders have been awarded to two companies to commence international recruitment within and outside of the EU with the intention to recruit 80 Registered Nurses. The Trust launched it's SFH recruitment brand to attract Registered Nurses to come and work at the Trust, the campaign includes radio adverts, local newspaper interest, videos and a new website has been launched, this will effectively advertise the Registered Nurse recruitment day taking place on the 25<sup>th</sup> April 2015, the campaign is called *'Care to be proud of'*. The Trust also intend to recruit to 50% of Unregistered Nurse vacancies substantively and 50% as fixed term contracts whilst the Trust continues to operationalise the Registered Nurse Keogh plans, there were 63.69 wte's vacancies at the end of March 2015.

Geriatrics Medical is an area of high risk vacancies with 3.9 wte Consultant vacancies in Geriatrics with only 1 substantive Consultant in post, the vacancies are being covered by premium agency staff. A recruitment and retention premium for new and existing staff has been agreed and an advert has been placed in the BMJ to attract candidates. It is likely the Trust will incur premium rate costs for at least 4 months until potential candidates have been appointed, March variable pay stood at £94k.

Total pay in February 2015 was £15.18m, this was a increase of £529k when compared with February total pay spend, £430k of the increase is attributable to the Trust accounting for annual leave accruals for those staff who did not use their annual leave entitlement during 2014/2015. Fixed pay increased by £117k to £12.64m and variable pay also increased in March by £412k to £2.53m. The highest areas of variable pay were:

- **A&E Medical £192k** The Trust currently has 2.2 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. An international Specialty Doctor commenced employment on the 15th March and will be upgraded to a Consultant after a 3 month induction process. There are 5 Specialty Doctor vacancies currently being covered by additional hours and agency. There is 1 Specialty Doctor continuing to complete a supernumerary period and will participate in the rota by the end of April, therefore a reduction in variable pay expenditure is expected for May 2015 reporting.
- Junior Doctor KMH £156k 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. There are also a number of employee relations issues which are
  being managed in accordance with Trust policies and procedures.
- Emergency Assessment Unit £106k £28k due to overtime and additional hours, £71k spend on agency staff, £5k on bank staff. The department has 11.13 wte Registered Nurse vacancies.

# Sherwood Forest Hospitals NHS

## **NHS Foundation Trust**

Nursing variable pay increased during March 2015 by £38k in month with an increase of 169 requested shifts for Nurse bank. The Trust has now agreed the Engagement of Temporary Staffing Policy, it is anticipated that the policy will ensure tighter controls for the booking and authorising of bank and agency staff. Training will be rolled out during April and communications have now been sent out to managers within the Trust that the policy will go live from the 27<sup>th</sup> April 2015.

Sickness absence decreased for a consecutive month in March 2015 to 3.96% from 4.25% in February 2015. This is a positive decrease however the HR department continue to drive further decreases in sickness absence and continue to support managers within the divisions to manage all sickness cases in line with Trust policy. An action plan has been produced as a result of the Sickness Absence Audit to ensure feedback is given to the divisions on performance against the audit template. During May 2015 the HR department will be developing a new Sickness Absence action plan for the 2015/2016 financial year to ensure focus remains on driving reductions in sickness absence and promoting the Health & Well Being agenda. Planned Care & Surgery sickness absence rates increased during March and the HR Business Partner will be reviewing all cases and meeting with areas where sickness was high to ensure appropriate actions have been put in place.

Appraisal compliance increased by 2% in March 2015 to 88%. Reminders continue to be sent to those areas where appraisal compliance is low. NHIS, Radiology, Ward 31 and Ward 32 are areas with 30 or more staff where appraisal compliance is 100%. Mandatory training increased by 1% at the end of March to 83%, the target of reaching 90% compliance by the end of the financial year has been impacted by the Trust's recent operational pressures when mandatory training courses were cancelled to support clinical services. The Trust do not incur a financial penalty from the CCG for not reaching the target.

#### Recommendation

- Note the areas of performance that require improvement.
- Acknowledge the actions being taken to improve performance.

#### Relevant Strategic Objectives (please mark in bold)

To consistently deliver safe, effective high quality care	To eliminate the variability of access to and outcomes
achieving a positive staff and patient experience	from our acute and community services
To reduce demand on hospital services and deliver	To develop extended clinical networks that benefit the
care closer to home	patients we serve
To provide efficient and cost effective services and	
deliver better value healthcare	

Links to the BAF and Corporate Risk Register	Strategy items impact on all strategic objectives
Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution)	
Links to NHS Constitution	
Financial Implications/Impact	
Legal Implications/Impact	
Partnership working & Public Engagement Implications/Impact	
Committees/groups where this item has been presented before	
Monitoring and Review	
Is a QIA required/been completed? If yes provide brief details	