

## Board of Directors Meeting in Public

<b>Subject:</b>	<b>Medical Workforce Report</b>	<b>Date: 5<sup>th</sup> May 2022</b>		
<b>Prepared By:</b>	Rebecca Freeman			
<b>Approved By:</b>	Dr David Selwyn - Medical Director			
<b>Presented By:</b>	Dr David Selwyn - Medical Director			
<b>Purpose</b>				
The purpose of this report is to provide the Board of Directors with an overview of the Medical Workforce. The report will focus on staffing capacity, recent developments, initiatives, and compliance with regulatory requirements.			<b>Approval</b>	
			<b>Assurance</b>	<b>X</b>
			<b>Update</b>	
			<b>Consider</b>	
<b>Strategic Objectives</b>				
<b>To provide outstanding care</b>	<b>To promote and support health and wellbeing</b>	<b>To maximise the potential of our workforce</b>	<b>To continuously learn and improve</b>	<b>To achieve better value</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>Overall Level of Assurance</b>				
	<b>Significant</b>	<b>Sufficient</b>	<b>Limited</b>	<b>None</b>
		<b>X</b>		
<b>Risks/Issues</b>				
<b>Financial</b>	<b>X</b>			
<b>Patient Impact</b>	<b>X</b>			
<b>Staff Impact</b>	<b>X</b>			
<b>Services</b>	<b>X</b>			
<b>Reputational</b>	<b>X</b>			
<b>Committees/groups where this item has been presented before</b>				
None. This report will be presented to the Joint Local Negotiating Committee (LNC) following approval at this Trust Board of Directors meeting.				
<b>Executive Summary</b>				
<p>This is the first Medical Workforce report being presented to the Board of Directors and it is anticipated that this will become a bi-annual report in line with and sitting alongside, the Nursing and AHP Trust Board reports.</p> <p>The report gives an overview of the progress against the regulatory aspects; medical appraisal and revalidation and also describes the progress in medical job planning for 2022-23 and the adherence to the requirements of the 360 Assurance Audit finalised in 2021.</p> <p>The report includes details of both medical vacancies, newly established medical posts and the progress in the recruitment to these posts over the last four years.</p> <p>A summary of the bank and agency expenditure over the last six months is also provided together with the clearly focused aim on reduction in the agency expenditure, going forwards.</p> <p>The report describes the increase in known training posts for August 2022 and the anticipated increase in Specialists, Senior Clinical Fellow and Clinical Fellow posts at Newark Hospital.</p> <p>The work that has taken place in both Anaesthetics and Critical Care (one of our identified</p>				

challenged services) is also included together with the plans to continue to provide further support going forwards.

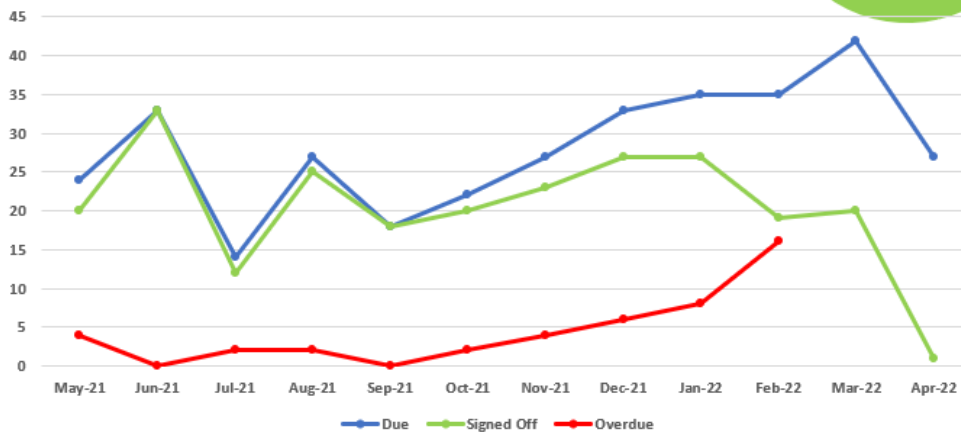
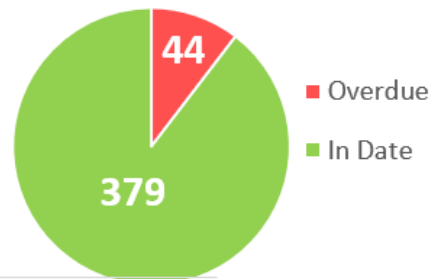
Board is asked to;

- Note the contents of the report, the strategic direction described for the medical workforce
- Comment on the information provided, recognising future reports could be adapted
- Recognise that this work cuts across and feeds into a number of other areas of focus including the Guardian of Safe Working report, Strategic Direction of Medical Training and Education at SFH, the established Medical Workforce Taskforce, the newly created Medical Workforce Transformation Programme along with the development of a wider SFH workforce strategy

**Appraisal and Revalidation**

# Appraisal Figures

- NHSi March 2022 Figure 90%
- 44 are outstanding (20/04/2022)



As can be seen from the figure above, the appraisal compliance for Consultants, Specialists and Specialty Doctors has improved and is now 90%.

This compares very favourably with surrounding local Trusts.

The GMC stipulated ‘light touch’ approach to medical appraisals that was introduced during the Covid-19 pandemic remains in place and the 44 overdue appraisals are being encouraged and supported to complete their appraisal now that a more traditional appraisal requirement has been re-introduced.

Additionally, due to the increase in the numbers of Medical staff in these grades and some recent retirements, a recruitment campaign for more appraisers will commence within the next few weeks.

Senior Clinical Fellows and Clinical Fellows employed by the Trust undertake an annual review of their progress against specified competencies (ARCP) which is where each doctor presents their e-portfolio to a panel of consultant representatives who make an assessment of progress to date. This approach mirrors that undertaken by Health Education East Midlands for the Trainees across the Trust.

Currently there are 80 Senior Clinical Fellows and Clinical Fellows going through this process with assessments currently scheduled for 64 doctors. This novel, supportive and innovative approach to non-training grade doctors, has met with significant regional interest.

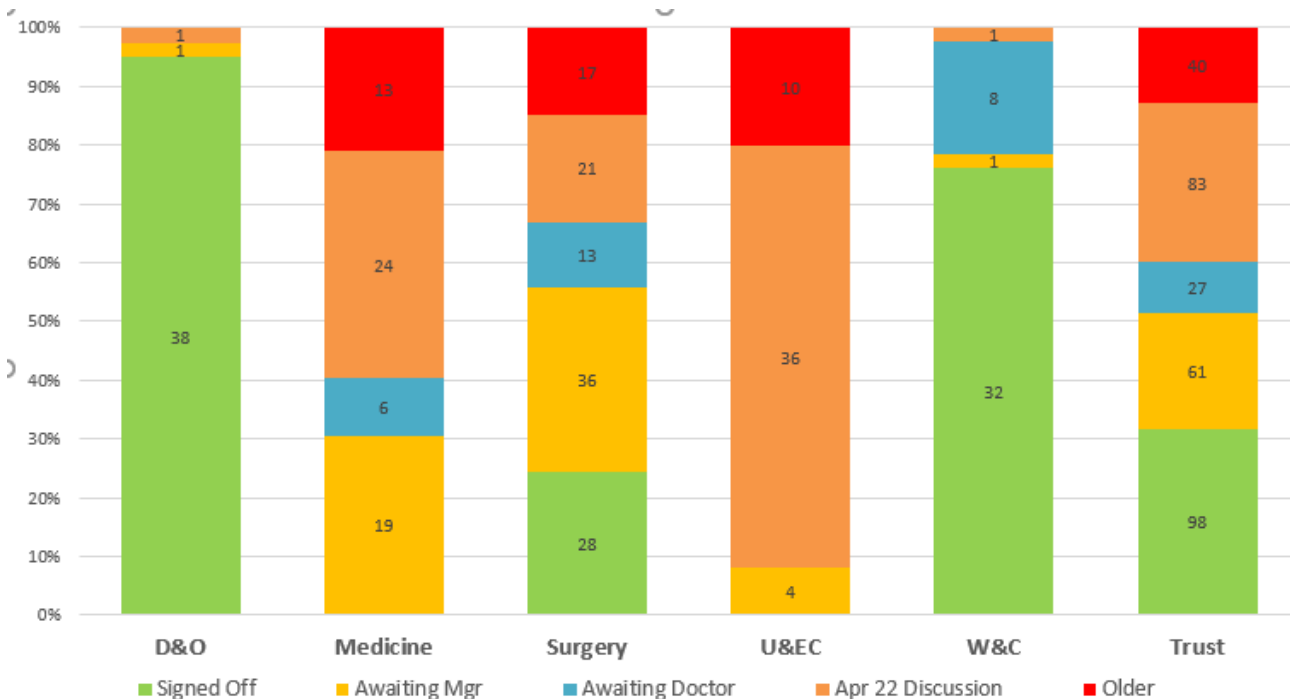
**Revalidation**

From April 2021 until March 2022, 80 doctors were due to be revalidated. 57 doctors were successfully revalidated and 23 were deferred.

The reasons for the deferrals were primarily due to mandatory training being non-compliant and the lack of patient feedback.

Feedback from patients has historically been obtained following their interaction with the doctor, however, due to the number of face to face clinics reducing, it has been difficult in some circumstances to obtain the feedback required from patients to support the revalidation decision. From April 2022 until March 2023 there are 70 doctors due to revalidate, three have been revalidated to date and there have been no deferrals.

**Job Planning**



In 2021 a decision was taken by the MD in conjunction with the LNC and Medical HR, that a light touch approach was taken in relation to job planning due to the pandemic. The direction was that the majority of job plans were rolled over from 2020 to 2021. A small number where substantial change had occurred, were reviewed on an ad hoc basis.

For the 2022/23 job planning year it was agreed that a full review of all job plans would be undertaken, particularly in light of substantial changes to workload and ways of working resultant from the global pandemic. Prior to this being carried out, training sessions on the job planning process were held for Heads of Service/Service Directors and Business Managers.

As can be seen from the above both Diagnostics & Outpatients and Women & Children's have almost completed the job planning process for the year which has enabled any changes to salaries to be transacted. The other Divisions are progressing well, however, due to the recent increase in clinical activity the sign off process has been slightly delayed. Reports detailing progress are being sent to the Heads of Service/Service Directors, HRBP's and Divisional teams weekly for each area.

Job planning was the subject of a 360 Assurance audit (limited assurance) in 2021 and there were two key recommendations of the report, as follows:-

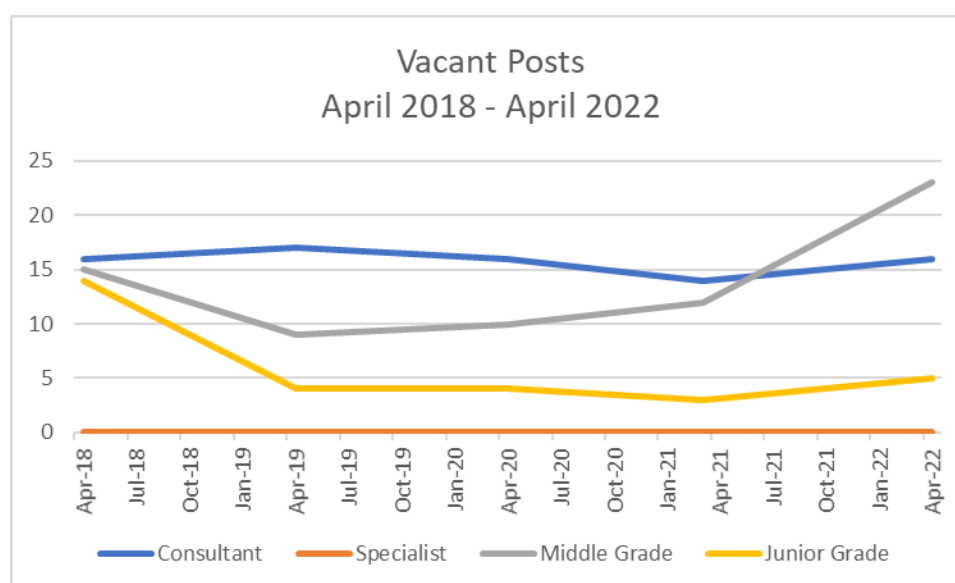
- Any change in programmed activities due to a job plan change must transacted from a payroll perspective from the date of the commencement of the job plan. Where job plan sign off is delayed and there is a change in the programmed activities worked, this results in a delay which can result in doctors being under/over paid. Any delay in job plan sign off is to be monitored. As detailed above, reports are produced and sent to the Divisions weekly detailing the current position.
- A reconciliation takes place between the programmed activities that are paid/job planned on a quarterly basis to ensure that any anomalies are regularly identified and addressed. The last reconciliation was undertaken in February and a further one is planned in May 2022.

## Medical Vacancies

### Vacant Posts

	Apr-22	Mar-21	Apr-20	Apr-19	Apr-18
Consultant	16	14	16	17	16
Specialist	0	0	0	0	0
Middle Grade	23	12	10	9	15
Junior Grade	5	3	4	4	14
<b>TOTAL</b>	<b>44</b>	<b>29</b>	<b>30</b>	<b>30</b>	<b>45</b>

13 HEEM      10 HEEM  
7 HEEM      5 HEEM



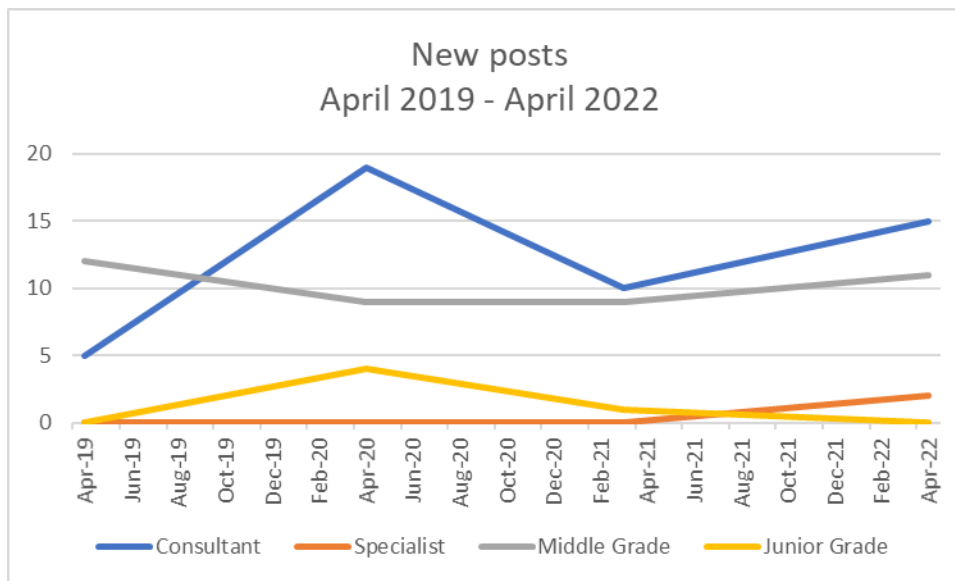
The Graph and table show the current medical vacancies at each grade. The Specialist is a new grade which was introduced in April 2021 as part of the SAS doctor contract reform.

As you can see the number of vacancies have reduced considerably between April 2018 and April 2021, there has however, been an increase in the vacancies this month in middle grades which is primarily due to having 13 trainee vacancies during this rotation at middle grade level across the Trust. Most of these vacancies are in the Medical Division.

### New Posts

#### New

	Apr-22	Mar-21	Apr-20	Apr-19
Consultant	15	10	19	5
Specialist	2	0	0	0
Middle Grade	11	9	9	12
Junior Grade	0	1	4	0
<b>TOTAL</b>	<b>28</b>	<b>20</b>	<b>32</b>	<b>17</b>



The graph and table show the newly established Medical posts from April 2019 until April 2022. It is anticipated that going forward, the new Specialist post which is a Senior level where the clinician can practice independently is likely to feature in the Medical Workforce plan for a number of specialties. The Specialist post is a post that will be of interest to doctors with a considerable number of years of clinical experience that do not want to become consultants but do want to be recognised for their clinical expertise and work at a senior level. It is therefore anticipated that some vacancies at Consultant level detailed above could be converted into specialist post where it is considered appropriate for the service.

### **Bank and Agency Expenditure**

The Trust has encouraged doctors to have a bank post in addition to a substantive post, any additional duty worked is then paid through the bank post this enables payment for any additional duty to be made the following week after the work is carried out which is particularly attractive to trainees. With effect from this month all waiting list work undertaken will be paid through the bank. In the last 6 months bank work has been primarily undertaken by medical staff in Medicine, Surgery and Urgent & Emergency Care, within surgery this is primarily waiting list initiative work. The total expenditure being £3.9m.

The expenditure through agency has again been primarily in Medicine, Surgery and Urgent & Emergency Care and that has equated to £5.3m in the last 6 months. In Medicine, this is primarily due to some long term vacancies at Consultant level and a number of specialties are looking at the possibility of converting some of these vacancies where appropriate to Specialist posts as mentioned above.

A Medical Workforce Review Task & Finish Group has been established and one of the primary objectives of this Trust wide group will be to aim to review and reduce the agency expenditure. This group is chaired by the Associate Medical Director for Workforce.

## **Trainees**

The numbers of medical trainees in the Trust has increased over the last few years and August 2022 will be no exception, to date the Trust will have three additional doctors at Foundation Year 1 level and Specialist Registrar in Paediatrics. There are discussions currently taking place with HEEM relating to additional doctors at Foundation level. The final numbers will be known within the next few weeks and will be included in the next Medical Workforce report.

Work has also taken place reviewing the rotas for both trainees and clinical fellows in Medicine. Following the increase in numbers of Clinical Fellows in Medicine it was felt that that rather than have one rota with 34 doctors on the rota, that should be split into two rotas to ensure that the shifts and the cover on the wards was more even than had been the case historically. The rotas have been developed and consultation is currently taking place with the Trainees and the Clinical Fellows and this move has been received positively.

In the last three years, the Trust has recruited a Chief Registrar, this programme is supported by the Royal College of Physicians and the purpose is to give a registrar at a senior level the opportunity to have a role that has both clinical and management responsibility. The Chief Registrar is mentored by the Medical Director and has a number of management related projects to complete during the year. The previous postholders have found this period of time most beneficial and the Trust is currently advertising for a Chief Registrar to commence in post in August 2022.

## **Areas of Concern and action being taken**

### **Critical Care**

An Executive led Task and Finish Group was established in January 2022 to support Critical Care, where there were a number of vacancies for Medical Staff at all levels. This has provided an opportunity to discuss the difficulties being faced and for key stakeholders to focus on recruitment. All the vacancies at a Junior and middle grade level have been recruited to and all new incumbents apart from one have now commenced in post.

A fixed term consultant has also commenced in post and interviews are taking place Week commencing 2<sup>nd</sup> May 2022 for a substantive consultant for a joint post between Critical Care and ED. There are still a number of vacancies at consultant level and this is a specialty that has considered the specialist post as part of their long term medical workforce plan. An advert has recently been placed for this post and 10 applications have been received. These are currently being shortlisted and interviews being arranged. The Task and Finish group will continue to meet on a fortnightly basis to support Critical Care.

### **Anaesthetics**

A Task and Finish Group has recently been established in Anaesthetics, again there have been medical vacancies at most grades. An exercise has been undertaken to rebase the Medical Establishment in Anaesthetics and also as far as possible split the Anaesthetics and Critical Care establishments which historically there has been one establishment for both areas.

A meeting has also taken place with HEEM to discuss the impact of having vacant trainee slots at short notice has on the service. A recruitment programme is also underway, one substantive consultant has been appointed, interviews are taking place for a fixed term consultant post and this is another specialty that has advertised for a Specialist post and there have been 34 applicants for the post and interviews are being arranged.

It is recognised that there is national concern around historical workforce plans for both these specialities and this group of colleagues has been particularly impacted and stretched during the Covid-19 pandemic.

### **Medical Staffing at Newark Hospital**

A paper is currently being finalised to enhance the Medical Staffing across Newark. This will involve recruiting Specialists to support the Urgent Treatment Centre, Senior Clinical Fellows for the Medical Ward and Clinical Fellows/Foundation Year 3 doctors for the Surgical/T & O Ward.

Currently Newark is staffed by locums particularly for the Medical and Surgical Wards and this paper will aim to provide an opportunity particularly for the Senior/Clinical Fellows to rotate to Newark and enable them to have the time in a sub-acute setting to facilitate non-clinical activity such as clinical audit and quality improvement alongside their clinical work. Feedback from our fellows is that these aspects are often difficult to progress to allow career development. At the same time having a more permanent dedicated staff group across the Newark Hospital campus, should allow us to start to grow clinical activity in line with the Trust's strategic aspirations.

### **Conclusion**

Whilst the Trust has robust controls in place to manage day to day operational medical staffing demands and gaps, there are a number of more strategic areas described in this paper, that will facilitate our recruitment and retention plans for the future medical workforce at SFH.

Trust Board is asked to;

- Note the contents of the report, the strategic direction described for the medical workforce
- Comment on the information provided, recognising future reports could be adapted
- Recognise that this work cuts across and feeds into a number of other areas of focus including the Guardian of Safe Working report, Strategic Direction of Medical Training and Education at SFH, the established Medical Workforce Taskforce, the newly created Medical Transformation Programme along with the development of a wider SFH workforce strategy