# **Board of Directors Meeting in Public**

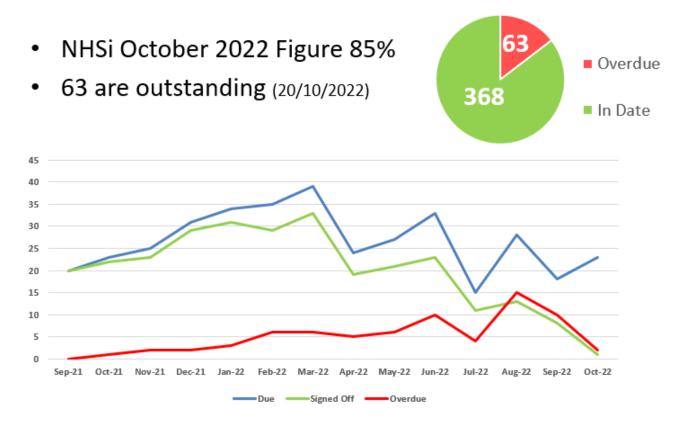
Subject: Prepared By:	Modical Workforco	Report	Date: 3 <sup>rd</sup> Nove	Date: 3 <sup>rd</sup> November 2022		
	Medical Workforce ReportDate: 3rd November 2022Rebecca Freeman					
Approved By:		edical Director				
Approved By:     Dr David Selwyn - Medical Director       Presented By:     Dr David Selwyn - Medical Director						
Purpose	Di David Ociwyii - Ivi					
	The purpose of this report is to provide the Board of Directors Approval vith an overview of the Medical Workforce. The report will Assurance X					
	capacity, recent devel	•	Update	Λ		
			Consider			
and compliance with regulatory requirements. Consider   Strategic Objectives Image: Construction of the second seco						
To provide	To promote and	To maximise the	To continuously	To achieve		
outstanding	support health	potential of our	learn and	better value		
care	and wellbeing	workforce	improve	better value		
Care	and wentering	WORKIOICE	mprove			
X	X	X	X	X		
Overall Level of	Assurance		·			
	Significant	Sufficient	Limited	None		
		Х				
<b>Risks/Issues</b>						
Financial	X					
Patient Impact	X					
Staff Impact	X					
Services	X					
Reputational	X					
Committees/grou	ups where this item	has been presented	d before			
Inclusion Cabinet <b>Executive Summ</b> The report gives a revalidation, description job planning round	an overview of the pro ribes the progress in 1 d for 2023/24.	n at the Board of Dire ogress against the reg medical job planning	gulatory aspects; me for 2022-23 and the	edical appraisal and preparation for the		
The report includes details of the current Medical vacancies, the progress being made in recruiting to these vacancies and describes key areas of focus, with the aim of reducing agency expenditure going forwards. It also notes progress within the most fragile services.						
The report describes a review that is currently being undertaken of the bank rates both within the Trust and across the ICS.						
-	ior doctor fill rate for	August 2022 and the	bid for additional S	· · · · · · · · · · · · · · · · · · ·		
for August 2023.		0		enior Trainee posts		
C C	to the appointment of	-	and how that role wi			

The Board of Directors is asked to:

- Note the contents of the report.
- 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 the Trust and the Medical Transformation Programme.

# Looking after our People

# Appraisal



As can be seen from the figure above, the appraisal compliance for Consultants, Specialists and Specialty Doctors is 85%. The number of doctors that are connected to the Trust as their designated body is 409. Both the compliance figure and the number of doctors connected to the Trust have recently reduced as 27 Senior/Clinical Fellows left the Trust to take up training posts in August.

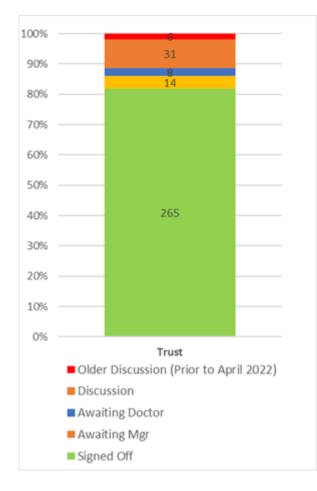
There are 63 appraisals that are overdue and work is being undertaken to encourage these doctors to complete their appraisal.

A recruitment campaign for Trust appraisers was held over the summer with an additional 8 appraisers being recruited, increasing the number of appraisers across the Trust to 31.

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 eportfolio 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 76 Senior Clinical Fellows and Clinical Fellows going through this process. This group of doctors find the ARCP process supportive and they feel it prepares them for a post as a doctor in training which almost all of our Clinical Fellows go on to become.

## Revalidation

From April 2022 until March 2023, 69 doctors are due to be revalidated. To date 28 doctors have been revalidated with 7 doctors being deferred, the main reason for deferral is due to doctors being new to the Trust and not having the information needed to revalidate. 41 doctors are due to be revalidated between January and March 2023.



## Job Planning

82% of doctors have a signed off job plan for this year, this number far exceeds any other Trusts in the region. In addition, there are currently 79 in year changes currently being made to job plans, 31 of the 79 are in discussion whereas 21 are going through the sign off process.

As soon as job plans are fully signed off any changes to programmed activities are reported to pay services to enable changes to salaries to be made in a timely manner.

The Trust job planning toolkit is currently being reviewed in preparation for the 2023/24 round of job planning. This will be presented to the LNC meeting in November, after which it is expected that the job planning process will commence.

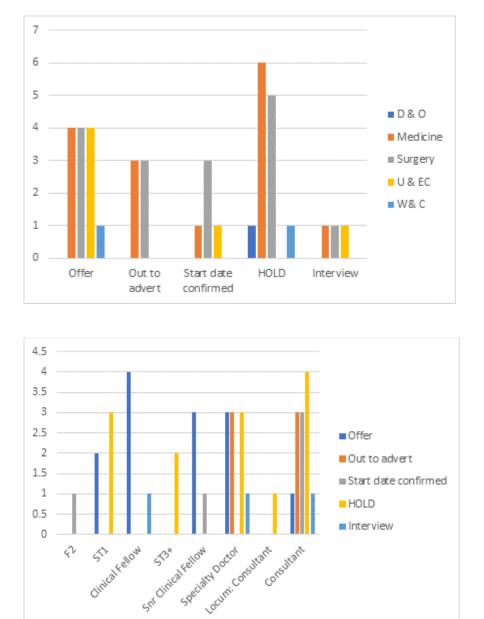


# **Belonging in the NHS**

## **Medical Vacancies**

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Locum Consultant

Consultant

The tables above show the current medical vacancies by Division and grade. These figures don't include any newly established posts. As can be seen from the above, good progress is being made in recruiting to the vacancies. As previously reported, there is a continued focus on recruitment in both Anaesthetics and Critical Care with a Task and Finish group having been established and meeting regularly, recruitment plans have been developed for both specialties with good progress being made.

With regard to Anaesthetics, there has been a review of the establishment which has led to a number of posts at all grades being created. Both the fixed term Consultant and the Specialty Doctor vacancies have been advertised and have attracted some interest. Shortlisting is taking place for both posts and interviews are planned week commencing 7<sup>th</sup> November.

Recruitment for the substantive Consultant and Specialist vacancies is also in progress.

Intensive Care have three remaining vacancies at Consultant level, interviews will be held in November for one substantive post, a candidate who was previously offered a post and declined the post has expressed an interest in a fixed term consultant post and this is being progressed. A trainee has also expressed an interest in coming to Sherwood Forest Hospitals on completion of their training in October 2023.

The other two vulnerable services across the Trust are Haematology and Gastroenterology, whilst neither of these specialties are currently actively recruiting, work is ongoing in both specialties including plans for establishment of speciality Task & Finish groups.

The Trust has recently entered into a single agency agreement with Remedium Partners who are supporting the Trust with the recruitment to the hard to fill vacancies. This arrangement has just commenced, and to date one candidate has been appointed to a fixed term consultant post with five candidates being interviewed for Senior Clinical Fellow and Specialty Doctor vacancies over the next two weeks.

The Operational Medical Transformation Group for Medical Workforce has now been established and is focusing on a number of areas including agency expenditure and in particular, the tracking of agency doctors covering vacant posts.

#### Bank Rates

Work is being undertaken both across the ICS and within the Trust to review the current bank rates. The BMA released rates that it expects to be paid for work undertaken by both consultants and middle grade doctors that is in addition to their contract. These rates are not supported by NHS Employers. However, it is acknowledged that the current Trust bank rates are not equitable across specialties and therefore the review is being undertaken of the rates, together with an escalation process, pending the completion of the work across the ICS along with a regionally review using the East, and West, Midlands Acute Providers forum. The revised bank rates will be presented to the LNC in November.

# Trainees

#### Junior Doctors Changeover in August

The Trust was allocated 230 posts, of these, 216 (94%) of the posts were filled. This is the highest fill rate to date. There are a number of reasons why the Trust don't receive a full allocation of trainees, these can include trainees not passing exams and therefore not being able to take up the posts, trainees declining offers where they have obtained a job elsewhere or there has been a change in personal circumstances. The Trust has a good relationship with Health Education East Midlands and they will endeavour to give the Trust as much notice as possible of likely vacant training posts, so that alternative arrangements can be made in good time. Most of these vacancies have been or are in the process of being filled by Clinical Fellows or Foundation Year 3 doctors, taking a year out of training following completion of the formal Foundation Programme.

The table below shows the percentage fill rate by Division.

Division	Percentage Fill Rate
Medicine	97% (2 vacancies)
Women & Children's	96% (2 vacancies)
Surgery	95% (4 vacancies)
Diagnostics & Outpatients	87.5% (1 vacancy)
Urgent & Emergency Care	79% (5 vacancies)

The new rotas in Medicine as described in the previous paper are in place and initial indications are positive, these rotas provide much improved coverage across the Division. A questionnaire will be sent to the trainees next month to obtain more formal feedback.

An opportunity has arisen for the Trust to bid for additional trainee posts at St3+ level for August 2023. The Trust has bid for an additional 17 posts. It is at this more senior grade of trainee where additional support is needed as there hasn't been an allocation of this grade of trainee since 2008, therefore should any of the bids be successful this will provide much needed senior support enabling the development of more robust rotas.

#### Specialists, Associate Specialists and Specialty Doctors (SAS)

Two SAS Advocates have recently been appointed. The role of a SAS advocate is key in maintaining a strong level of engagement and collaboration amongst SAS staff. And was introduced with the SAS contract reform in 2021. Whilst this role isn't mandatory, the Trust has felt that it is important to invest in this role to support our SAS workforce. We are one of two Trusts in the region that have invested in the SAS Advocate role.

10<sup>th</sup> to 14<sup>th</sup> October 2022 was the SAS doctors week where a number of articles from SAS doctors were included in the Bulletin and one of the Advocates and the SAS Tutor attended the team brief.

#### The Medical Workforce

The Medical Workforce at Sherwood Forest Hospitals is made up of 585 doctors, 342 (58%) Male, 34 of which work less than full time. There are 243 (42%) female doctors 55 of which work less than full time.

#### Age Profile of the Medical Workforce

Age	Headcount	%	FTE
Band		Heads	
21-25	48	8.21	48.00
26-30	107	18.29	106.31
31-35	79	13.50	76.91
36-40	91	15.56	87.54
41-45	81	13.85	78.14
46-50	61	10.43	59.30
51-55	45	7.69	42.93
56-60	43	7.35	39.95
61-65	20	3.42	16.25
66-70	7	1.20	6.13
>=71	3	0.51	1.35
Years			
Grand Total	585	100.00	562.79

The majority of our trainees and Clinical Fellows will be in the top 3 age bands. These are our transient Medical Workforce, the trainees will be rotating between Trusts whilst the majority of our Clinical Fellows will leave after two years to obtain a training post.

Our substantive Medical workforce are in the last 8 age bands. The table shows that there is a significant number of substantive Medical Staff over 50 years of age (118 in total). With the current pension rules, the Trust has seen a significant number of Medical Staff retire, or retire and return where in some cases they have returned on a less than full time basis. Whilst work is ongoing locally to look at mitigating the impact of the pension rules, it is likely that this trend will continue.

#### 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 that will facilitate our recruitment and retention plans for the future medical workforce at the Trust.

Trust Board is asked to;

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