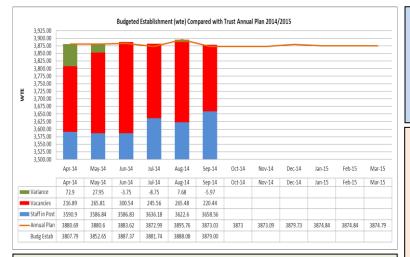
<u>Board of Directors –October 2014</u> Workforce Report – September 2014 Position

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



Vacancies:

- The Trust's vacancy position has decreased in September 2014 to 220.44wte vacancies from 265.48 wte's vacancies in August 2014.
- The **vacancy rate** now stands at **5.68 %** compared to 6.83% in August 2014.
- The vacancy rate has decreased due to an increase in the Trust's staff in post position and the transaction of cost improvement plans in month.
- The Registered Nurse staff group vacancies decreased by 55.06 wte's in month, 25.72 wte's was due to increase in staff in post and the remaining 29.34 wte's was a reduction in budgeted establishment due to unidentified CIP and non ward based nursing.

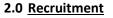
Budgeted Establishment:

- At the end of September 2014 budgeted establishment was 3879.00wte's which was a decrease of 9.08 wte's in month.
- Cost improvement plans have been transacted in September which has been reflected in the decrease in budgeted establishment above.

Staff in Post:

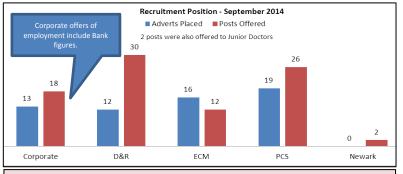
- Staff in post for September 2014 was 3658.56wte's which was an increase of 35.96 wte's.
- The Trust recruited 29 Newly Qualified Nurses in and 2 International Nurses in September 2014.
- The Trust now employs an additional 5 wte's in the Medical & Dental staff group which has resulted in a decrease in vacancies to 17.96 wte's.

Vacancy Rate - Number of Vacancies Compared to Budgeted Establishment per Staff Group			
Admin & Clerical	5.92%	54.98	
Allied Health Professionals	-0.67%	-1.26	
Ancillary	-11.04%	-4.48	
Medical & Dental	4.10%	17.96	
Registered Nurse	5.92%	74.03	
Scientific & Professional	3.23%	6.49	
Technical & Other	13.29%	32.87	
Unregistered Nurse	6.81%	39.85	
Grand Total	5.68%	220.44	



Movement in Month

- 60 adverts were placed throughout September, compared to August when 61 adverts were placed.
- **90 posts were offered to candidates** throughout September 2014, this compared to 70 posts in August.
- At the end of September there were **195 candidates** within the recruitment system compared to 227 in August 2014, **27** of those candidates had breached the 3 week pre-employment check target **13%** compared with 15% in August 2014.
- Reasons for breaches to the pre employment target were delays in receiving references and candidates providing proof of DBS clearance.
- There were no Consultant appointments in September 2014.



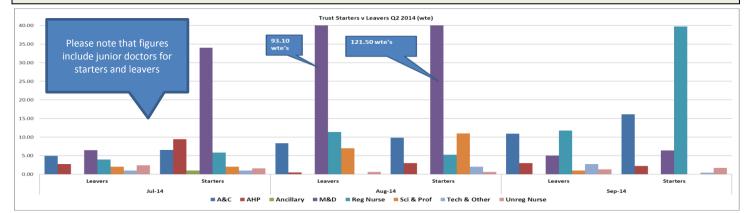
 Development of SFH recruitment brand - A recruitment brand and marketing strategy is currently in the process of being developed to attract potential candidates to the Trust.

• The Recruitment team has supported local recruitment fairs to promote SFH as a local employer for a variety of professions

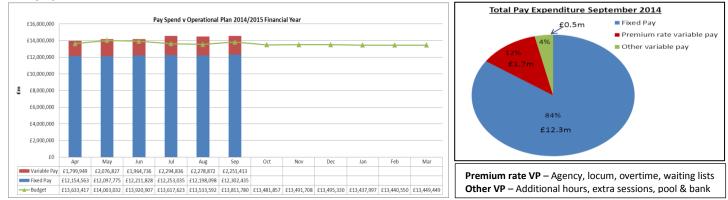
Registered Nurse Recruitment Initiatives

The Trust is pursuing a number of initiatives to drive Registered Nurse recruitment, these include:

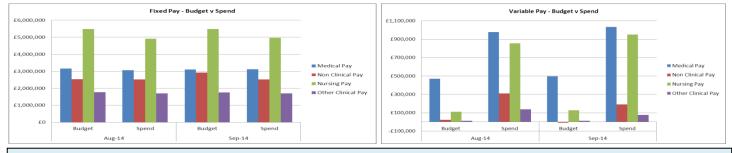
- Trip to Ireland The Trust attended a University recruitment fair on the 14th October 2014 in Ireland to attract Newly Qualified Nurses due to register in February 2015.
- International recruitment in Athens on the 17th & 18th of November 2014
- Open day at Kings Mill Hospital 1st November 2014
- NUH Recruitment Fair 24th October 2014



3.0 Pay Spend - Source Financial Ledger



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

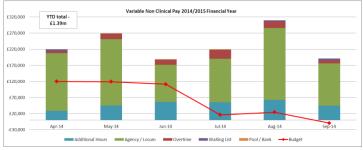


• In September 2014 the pay spend totalled £14.55m, which was £672k overspent, this is the normalised pay position and does not have any non recurrent costs within it, for example one off redundancy payments.

- Variable Pay cost £2.25m in September 2014 compared with £2.27m in August 2014.
- The top 5 areas for variable pay spend were:
 - Cardiology Medical £195k Locum medics covering Consultant vacancies, recruitment plans are in place, a candidate is due to start 3rd November, further one off costs were incurred for Cardiology in month due to on call agency payments being made for the last 6 months.
 - A&E Medical £172k The high spend in this area is mainly due to the Trust shortages for middle grade cover, with the gaps being covered by Agency staff, there are other areas of spend on Consultant Extra cover (£10k) and variable pay due to cover for an F1 vacancy.
 - Transformation £143k The Transformation team are utilising Project Managers with specific skill sets in order to drive forward key projects, as part
 of discussions to identify cash releasing savings a number of changes will be made to reduce expenditure.
 - Junior Doctor KMH £120k The agency spend in this area is attributable to sickness cover, 8 training vacancies and additional junior posts that have been funded in T&O to improve the quality of training. Middle grade cover is also accounted for within this budget line.
 - KMH Emergency Assessment Unit £82k The department has 10 wte's vacancies and mainly utilising agency staff to cover vacant shifts.

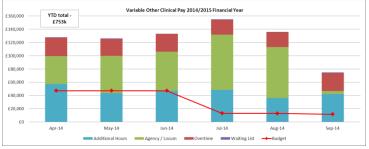


Nursing VP – VP totalled £952k in September 2014, this was an increase compared with August of £96k. Agency spend totalled £517k in September which was an increase of £79k in month, the highest reasons recorded by the divisions for booking agency were, vacancy cover, Keogh and 1:1 nursing. The use of the Trust's Bank increased by £25k totalling £225k in month. Agency use peaked to £517k in September the highest so far in the financial year, the Trust has seen a gradual increase since April 2014 for Nursing variable pay.



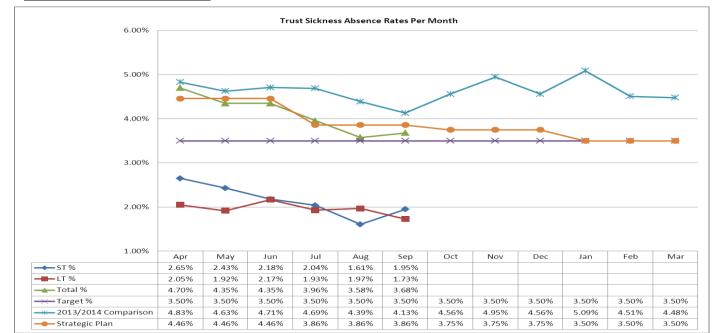
Non Clinical VP – After a sharp increase in August for non clinical variable pay, the spend decreased in September to £75k which was a reduction of £60k. The Trust has undertaken a review of the interim agency staff utilised.

Medical VP – Variable Medical pay totalled £1.03m in September 2014, this was an increase of £55k in month. Waiting list initiative payments increased in September. Variable Medical pay has fluctuated throughout the financial year with July being the highest month. Agency and locum spends are the main area of challenge for the Medical workforce.

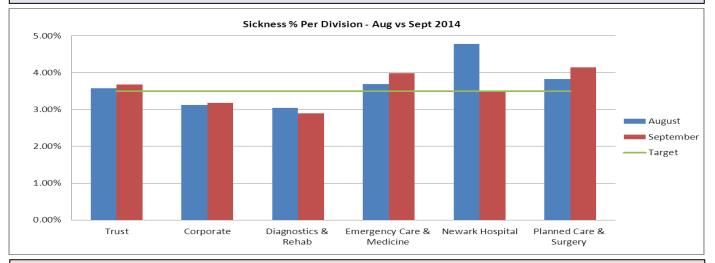


Other Clinical VP– Other clinical variable pay use has decreased in September with the main decrease being seen within the agency/locum spend. The Trust spent £44k in month on additional hours payments.

4.0 Sickness Absence – Source ESR

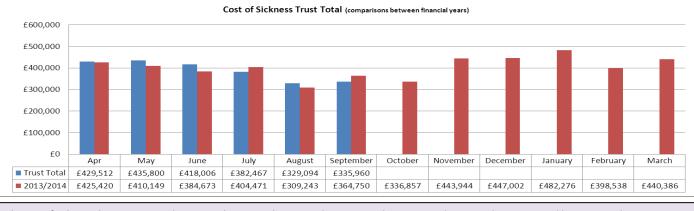


- Sickness absence increased in September to 3.68% compared with 3.58% in August 2014.
- Sickness absence compared with 2013/2014 financial year positively continues to track below the trend, the focus will be to maintain this to the end of the financial year.
- In August there were 511 episodes of sickness absence, this compares to 431 in September 2014. This correlates with the
 increase in short term sickness absence compared with the decrease in long term.
- 4002 working days were lost due to sickness absence in September 2014, this compared to 4006 working days in August 2014.
- The HR department are proactively reviewing 20+ days absence on a bi weekly basis to ensure that cases are being managed effectively in order to reduce long term sickness absence.
- Focus continues on the implementation of the new Sickness Absence Policy to embed procedures at departmental level.
- The Trust may see an increase in numbers of appeals against dismissal and employment tribunal claims as staff are progressed through the new procedure within the Sickness Absence Policy.



After an increase in Sickness absence for Newark in August this decreased in September. Corporate, Planned Care & Surgery and Emergency Care & Medicine increased sickness absence in September. The below shows the top 5 areas of sickness absence by working days lost, Theatres and Maternity featured in the Top 5 in August also, although it should be noted that these two areas have large numbers of staff within their departments. Work is being undertaken with these areas to ensure appropriate absence management and the development of action plans to address issues.

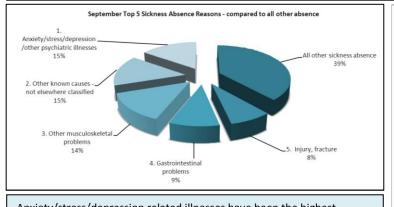
Department	Working Days Lost	Highest Absence Reason
Theatres KMH	230.60	Other Musculo
Maternity	191.41	Genito Urinary
KMH Emergency Assessment Unit	137.80	Other Musculo
Ward 23 Cardiology/CCU	102.04	Other Musculo
Ward 43 Respiratory	90.00	Other Known Causes



The cost of sickness absence was £335k in September 2014. The year to date cost stands at £2.33m, the cost in the same period last year was lower £2.29m.

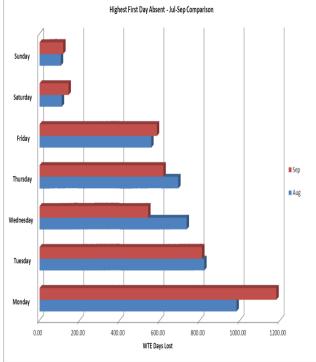
Trends & Themes

- Monday has been the highest first day absent for every month of the financial year, in September the number of absences that started on a Friday increased. The Admin & Clerical staff group had the highest number of working days starting on a Friday totalling 203 working days.
- So far the Trust has lost 6.31 working days per employee between April and September 2014, this compares with 6.9working days lost in the same period of the 2013/2014 financial year.

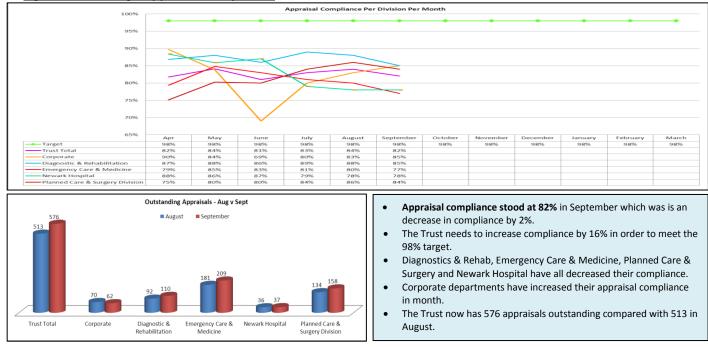


Anxiety/stress/depression related illnesses have been the highest sickness absence reason for every month of the 2014/2015 financial year. There are a number of focus groups being arranged throughout November and December to understand the reasons behind anxiety/stress/depression related illnesses and to develop initiatives and interventions.

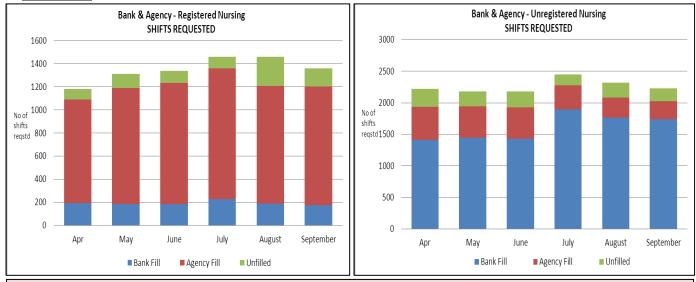
Other known causes continues to be an absence reason that is used when entering absence onto the system and managers are reminded on a monthly basis to avoid using 'unknown causes' and 'other known causes'.



5.0 Agenda for Change Appraisal Compliance



6.0 Nurse Bank



The number of requested shifts reduced in September 2014. For Registered Nurses the Trust continues to rely heavily on agency staff to fill vacant shifts. For the Unregistered Nursing staff group the Trust positively has increased its reliance upon the bank and reduced agency which is attributable to the recruitment drive for Unregistered Nurses to the Trust's Bank.

A new process for out-of-hours Agency Bookings via the Duty Nurse Managers commenced at the beginning of August 2014. This process is currently being refined and will enable tighter control for out-of-hours Agency bookings. As part of the SLA with the HTE framework all Agencies will have to leave a signed timesheet copy in the area worked as well as have a reference request from the Nurse Bank system to be able to invoice for payment. Nurse Bank processes have been reviewed intensively to ensure robust controls are included.

7.0 Employee Relations

