

MEETING

Agenda Item:

Subject:

Workforce Report

Date:

Thursday 30 October 2014

Author:

Lauren Tilstone - Workforce Information Manager, Kate Lorenti, Deputy Director of Human resources

Lead Director:

Karen Fisher, Executive Director of Human Resources

Executive Summary

In summary, workforce key performance indicators for September indicate positive improvements in the number of staff employed, particularly registered nurses and doctors. Sickness absence rates remain at levels below those reported during the same period last year despite increasing by 0.1% in month. Appraisal rates require significant attention in order to reach the 98% target.

Staff in post numbers continue to rise month on month with the Trust now employing 67.66 wte additional staff than on 1 April 2014. September saw a positive movement of 35.96 wte additional staff being employed. The transaction of CIPs led to a reduction in the budgeted establishment of 9.08 wte to 3879 wte's. The number of vacant posts fell by 45 wte, this reduction was due to increased staff in post numbers as identified above (+35.96 wte) and the removal of vacant posts (9.08 wte) resulting from transacting CIPs. At the end of September the Trust had 220.44 wte vacant posts. The vacancy rate now stands at 5.68% in month, a decrease of 1.15%.

Registered Nurse vacancies reduced by 55 wte's to 74 wte's and Medical & Dental staff vacancies reduced to 17.96 wte's. The nursing workforce holds the highest number of vacancies both in numerical and percentage terms. Registered Nurse vacancy levels remain an area of concern, a number of initiatives continue to be progressed in order to recruit additional nursing numbers. A recruitment campaign in Ireland will take place in October 2014 to recruit Newly Qualified Nurses who will be registered in February 2015. Other international recruitment options are being explored for Registered Nurses; recruitment for Registered Nurses remains challenging, locally, nationally and internationally. The Trust is an active partner of the East Midlands Medical Recruitment Collaborative and anticipate that medical appointments will be made in future months from this approach.

Pay expenditure remains a considerable challenge and is significantly above plan.

The Pay budget for September was £13.81m, with pay spend totalling £14.55m this meant a £672k overspend in month, despite actions taken to reduce the run rate. Fixed Pay increases reflect the increasing numbers of staff in post. Variable Pay remains at an unacceptable rate of £2.25m in September, compared to £2.27m in August.

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, a low number of 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.

Sickness absence The Trust sickness rate in September increased by 0.1% to 3.68%, the sickness absence rate continues to remain lower than the 2013/2014 trend. Anxiety/stress/depression continues to be the highest absence reason for the Trust with 606 working days lost in September compared with 955 working days in August 2014. Short term sickness stood at 1.95% an increase of 0.34% in month and long term decreased by 0.24% to 1.73%. Focus remains on embedding the new Sickness Absence Policy within the divisions to drive improvement.

Appraisal compliance Appraisal compliance decreased by 2% in September 2014 to 82%. The 98% compliance target is still being driven, with regular reminders being sent to managers on the number of outstanding appraisals within the divisions. There are now 576 appraisals outstanding compared with 513 in August 2014. There were 39 late returns for September sent in October which has therefore affected the compliance rate.

Recommendation for the Board of Directors:

- Note the workforce information presented
- Acknowledge the actions being taken to improve performance

Relevant Strategic Objectives (please mark in bold)	
Achieve the best patient experience	Achieve financial sustainability
Improve patient safety and provide high quality care	Build successful relationships with external organisations and regulators
Attract, develop and motivate effective teams	

Links to the BAF & Corporate Risk Register	
Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution)	All HR policies and procedures are produced in line with CQC standards. Where targets aren't met, this can provide a risk to quality of care and financial position.
Links to NHS Constitution	Staff – your rights and NHS pledges to you Staff – your responsibilities
Financial Implications/Impact	Reporting of staff numbers which have an impact on pay spend.
Legal Implications/Impact	Non compliance with mandatory training targets can impact upon litigation cases
Partnership working & Public Engagement Implications/Impact	N/A
Committees/groups where this item has been presented	N/A
Monitoring and Review	Executive Director of HR monitors performance and actions on a monthly basis. Trust workforce performance is also tracked via a number of performance meetings, specifically the monthly Confirm & Challenge which are chaired by the Deputy HR Director.
Is a QIA required/been completed?	N/A