

TRUST KEY PERFORMANCE INDICATORS

Monitor compliance
February 2014

Ref.	MONITOR COMPLIANCE FRAMEWORK		Target	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	In month Change	Q4 2013/14	Q3 2013/14	Q2 2013/14	Q1 2013/14	YTD 13/14	Q4 2012/13	2012/13	Externally	Internally	
	Referral to Treatment:	Admitted Patient Care (90% of patients treated within 18 weeks)	>=90%	93.57%	91.86%	91.84%	92.26%	89.37%	88.92%	↓	89.16%	91.97%	94.36%	95.49%	93.03%	93.34%	88.86%	Yes	Yes	
		Non Admitted Patient Care (95% of patients treated within 18 weeks)	>=95%	95.15%	95.00%	93.93%	94.30%	94.28%	94.18%	↓	93.13%	94.42%	95.59%	95.65%	95.02%	95.52%	94.71%	Yes	Yes	
		Incomplete Pathways (92% of patients complete pathway within 18 weeks)	>=92%	93.83%	92.43%	92.27%	91.25%	92.05%	92.08%	↑	-	91.25% Dec 13 Snapshot position	93.83% Sept 13 Snapshot position	95.11% June 13 Snapshot position	-	95.24% March 13 Snapshot position	95.24% March 13 Snapshot position	Yes	Yes	
	A&E Clinical Quality: Total Time in A&E Dept	SFHFT (% <4 hour wait)	>=95%	95.77%	96.14%	96.87%	94.28%	93.85%	92.72%	↓	93.29%	95.74%	96.66%	96.73%	95.84%	93.43%	94.34%	Yes	Yes	
		Kings Mill (% <4 hour wait)	>=95%	94.13%	94.70%	95.70%	91.69%	91.39%	89.51%	↓	90.48%	94.04%	95.48%	95.67%	94.27%	91.13%	92.85%	Yes	Yes	
		Newark (% <4 hour wait)	>=95%	99.29%	99.06%	99.20%	98.86%	98.86%	98.98%	↑	98.92%	99.04%	98.75%	98.63%	98.81%	98.78%	99.20%	Yes	Yes	
	Cancer	2 week wait: All Cancers	>=93%	94.04%	95.75%	95.37%	95.26%	96.89%	(96.39%)	↓	(96.28%)	95.46%	93.74%	94.13%	(94.91%)	95.48%	95.83%	Yes	Yes	
		2 week wait: Breast Symptomatic	>=93%	96.55%	84.21%	94.59%	100.00%	96.55%	(87.88%)	↓	(95.31%)	93.16%	95.10%	97.60%	(95.34%)	95.08%	95.54%	Yes	Yes	
		31 day wait: from diagnosis to first treatment	>=96%	100.00%	100.00%	100.00%	100.00%	99.17%	(98.59%)	↓	(99.31%)	100.00%	99.71%	99.70%	(99.70%)	99.30%	99.43%	Yes	Yes	
		31 day wait: for subsequent treatment - surgery	>=94%	100.00%	100.00%	100.00%	100.00%	100.00%	(100.00%)	↔	(100.00%)	100.00%	100.00%	96.67%	(98.97%)	100.00%	98.65%	Yes	Yes	
		31 day wait: for subsequent treatment - drugs	>=98%	100.00%	100.00%	100.00%	100.00%	93.94%	(100.00%)	↑	(97.90%)	100.00%	100.00%	100.00%	(99.38%)	100.00%	100.00%	Yes	Yes	
		62 day wait: urgent referral to treatment	>=85%	88.57%	88.67%	88.80%	94.31%	89.36%	(87.74%)	↓	(86.84%)	90.32%	88.46%	91.37%	(89.27%)	89.29%	90.78%	Yes	Yes	
		62 day wait: for first treatment - screening	>=90%	100.00%	100.00%	100.00%	100.00%	100.00%	(100.00%)	↔	(94.48%)	100.00%	100.00%	100.00%	(100.00%)	97.67%	94.95%	Yes	Yes	
	Data Completeness:	Community Referral to Treatment information	>=50%	86.37%	87.31%	88.22%	88.66%	88.96%	89.21%	↑	89.08%	88.05%	86.30%	81.78%	85.99%	78.46%	74.35%	No	No	
		Community Referral information	>=50%	54.77%	54.01%	53.49%	54.37%	54.38%	53.90%	↓	54.16%	53.96%	54.26%	54.16%	54.14%	54.28%	54.37%	No	No	
		Community Treatment activity - and care contact	>=50%	77.36%	75.51%	75.44%	75.56%	76.11%	76.21%	↑	76.16%	75.50%	77.11%	76.69%	76.42%	67.82%	68.77%	No	No	
	Infection Prevention Control:	MRSA Bacteraemia (No. of cases attributed to Trust) - NB Not applicable for Monitor Compliance @ 01/10/2013	0	1	0	0	0	0	0	↔	0/0	0/0	2/0	1/0	3/0	0	0	No	Yes	
		Clostridium Difficile Infections (No. of cases attributed to Trust)	2	3	4	5	2	2	1	↑	3/6	9/6	11/7	8/6	31/25	12/9	29/36	Yes	Yes	
	Access to Healthcare for people with learning disabilities	Compliance	Compliant							↔								No	No	
	CQC Compliance	compliance points relative to site visits	0							↔										
Monitor Compliance Points											4.0	3.0	1.0	1.0		2.0	N/A			
Governance Risk Rating (GRR)											RED	RED	RED	RED	RED	RED	N/A			

Ref	CONTRACTUAL PERFORMANCE METRICS	Target	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	In month change	Q4 2013/14	Q3 2013/14	Q2 2013/14	Q1 2013/14	YTD 2013/14	Q4 2012/13	Full Year 2012/13
A&E Clinical Quality:	SFHFT (% <4 hour wait) Total Time in A&E Dept	>=95%	95.77%	96.14%	96.87%	94.28%	93.85%	92.72%	↓	93.29%	95.74%	96.66%	96.73%	95.84%	93.43%	94.34%
	Unplanned re-attendance rate within 7 days of original attendance	<=5%	5.36%	4.99%	5.39%	5.38%	5.00%	5.22%	↓	5.11%	5.25%	5.45%	5.53%	5.36%	5.02%	5.70%
	Left without being seen rate	<=5%	1.46%	1.84%	1.58%	1.76%	1.50%	1.87%	↓	1.68%	1.73%	1.73%	1.66%	1.70%	1.73%	2.08%
	Time to Initial Assessment for patients arriving by emergency ambulance (95th percentile - Mins)	<=15	27	25	26	28	26	32	↓	30	27	28	29	28	33	39
	Time to Initial Assessment for patients arriving by emergency ambulance (Median Minutes)	<=16	4	3	4	4	4	5	↓	4	4	4	4	4	5	6
	Time to Treatment (Median minutes wait from arrival to treatment)	<=60	43	47	48	44	46	54	↓	50	46	46	52	48	55	56
Ambulance Turnaround Times	Average Clinical Handover Time (%)	>=65%	64.79%	60.68%	60.98%	60.87%	65.83%	57.07%	↓	61.60%	60.84%	62.16%	61.52%	61.51%	54.69%	55.64%
Delayed Transfer of Care	Trust Total % (at snapshot position)	3.50%	4.37%	4.18%	6.56%	6.68%	5.19%	4.08%	↑	4.65%	5.81%	4.65%	4.54%	4.93%	3.63%	5.97%
Cancelled Operations:	% Of elective admissions	<=0.8%	0.65%	0.48%	0.78%	1.25%	0.98%	1.04%	↓	1.01%	0.81%	0.45%	0.42%	0.64%	0.82%	0.71%
	% Breached 28 day guarantee	<=5%	0.00%	0.00%	3.57%	0.00%	2.86%	0.00%	↑	1.43%	1.23%	2.22%	0.00%	1.26%	0.00%	0.75%
Diagnostic waiting times <6weeks	%	>=99%	99.84%	99.90%	99.47%	98.42%	98.85%	99.79%	↑	-	-	-	-	-	-	-
Choose & Book:	Ratio: Slot issues per booking	<0.05	0.08	0.07	0.11	0.08	0.04	0.05	↓	-	-	-	-	-	-	-
SUS data:	% uncoded within 5 days of month end	<20%	22.22%	23.18%	25.16%	30.89%	12.69%	20.38%	↓	-	-	-	-	-	-	-
Referral to Treatment:	Admitted Patient Care (90% of patients treated within 18 weeks)	>=90%	93.57%	91.86%	91.84%	92.26%	89.37%	88.92%	↓	89.16%	91.97%	94.36%	95.49%	93.03%	93.34%	88.86%
	Non Admitted Patient Care (95% of patients treated within 18 weeks)	>=95%	95.15%	95.00%	93.93%	94.30%	94.28%	94.18%	↓	93.13%	94.42%	95.59%	95.65%	95.02%	95.52%	94.71%
	Incomplete Pathways (92% of patients complete pathway within 18 weeks)	>=92%	93.83%	92.43%	92.27%	91.25%	92.05%	92.08%	↑	-	-	-	-	-	-	-
	18week RTT for direct access audiology completed pathways (treated)	>=95%	99.62%	99.43%	99.68%	100.00%	99.51%	100.00%	↑	99.73%	99.69%	99.56%	99.65%	99.65%	99.35%	99.69%
	Patients on an Incomplete Pathway waiting 52 weeks & Over	0	0	0	1	23	21	10	↑	-	-	-	-	-	-	-
Cancer	2 week wait: All Cancers	>=93%	94.04%	95.75%	95.37%	95.26%	96.89%	(96.39%)	↓	(96.28%)	95.46%	93.74%	94.13%	(94.91%)	95.48%	95.83%
	2 week wait: Breast Symptomatic	>=93%	96.55%	84.21%	94.59%	100.00%	96.55%	(87.88%)	↓	(95.31%)	93.16%	95.10%	97.60%	(95.34%)	95.08%	95.54%
	31 day wait: from diagnosis to first treatment	>=96%	100.00%	100.00%	100.00%	100.00%	99.17%	(98.59%)	↓	(99.31%)	100.00%	99.71%	99.70%	(99.70%)	99.30%	99.43%
	31 day wait: for subsequent treatment - surgery	>=94%	100.00%	100.00%	100.00%	100.00%	100.00%	(100.00%)	↔	(100.00%)	100.00%	100.00%	96.67%	(98.97%)	100.00%	98.65%
	31 day wait: for subsequent treatment - drugs	>=98%	100.00%	100.00%	100.00%	100.00%	93.94%	(100.00%)	↑	(97.90%)	100.00%	100.00%	100.00%	(99.38%)	100.00%	100.00%
	62 day wait: urgent referral to treatment	>=85%	88.57%	88.00%	88.80%	94.31%	89.36%	(87.74%)	↓	(86.84%)	90.32%	88.46%	91.37%	(89.27%)	89.29%	90.78%
	62 day wait: for first treatment - screening	>=90%	100.00%	100.00%	100.00%	100.00%	100.00%	(100.00%)	↔	(94.48%)	100.00%	100.00%	100.00%	(100.00%)	97.67%	94.95%
	62 day wait: consultant upgrade	>=91%	100.00%	100.00%	100.00%	100.00%	100.00%	(100.00%)	↔	100.00%	100.00%	100.00%	100.00%	(100.00%)	86.36%	93.64%
Infection Prevention Control:	MRSA Bacteraemia (No. of cases attributed to Trust)	0	1	0	0	0	0	0	↔	0/0	0/0	2/0	1/0	3/0	0	0
	Clostridium Difficile Infections (No. of cases attributed to Trust)	2	3	4	5	2	2	1	↑	3/6	11/6	9/7	8/6	31/25	12/9	29/36

denotes when the target is a contractual and Monitor performance target that is replicated in the Monitor compliance dashboard

Ref.	QUALITY & SAFETY METRICS	Target			Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	In month change	Q4 2013/14	Q3 2013/14	Q2 2013/14	Q1 2013/14	Q4 2012/13	Q3 2012/13	2012/13	YTD 2013/14	
		G	A	R																
	HSMR	<=100	-	>100							N/A					96.8	118.5	N/A	N/A	
	Patient Incidents (Datix reported)	Catastrophic-Death	0%	-	0%	2 (<1%)	2 (<1%)	2 (<1%)	5 (<1%)	4 (<1%)	3 (<1%)	↓	7	9	3	0	2	3	6	19
		Severe harm	0%	-	0%	4 (<1%)	10 (<1%)	4 (<1%)	9 (<1%)	9 (<1%)	2 (<1%)	↓	11	23	5	1	0	1	3	40
		Moderate harm	<=5%	-	>5%	73 (10%)	50 (5.4%)	51 (6.8%)	65 (6.8%)	46 (5.5%)	53 (5.7%)	↑	99	166	110	60	20	52	154	435
		Low harm	<=23%	-	>23%	159 (21.8%)	265 (28.9%)	221 (29.4%)	299 (31.1%)	222 (26.6%)	225 (24.5%)	↓	447	785	323	228	90	240	787	1783
		No harm	>=72%	-	<72%	492 (67.4%)	591 (64.4%)	473 (63.0%)	584 (60.7%)	551 (66.1%)	635 (69.2%)	↑	1186	1648	1406	1293	473	1325	4152	5533
	Never Event (number of reported events)	0	-	>0	0	0	0	1	0	0	↔	0	1	1	0	0	0	0	2	
	Serious Incidents (reported externally to CCG)	<21	21-27	>28	5	10	6	6	5	9	↑	14	22	16	34	32	31	98	86	
	Infection Prevention Control:	MSSA Bacteraemia (No. of hospital acquired cases)	0	0	2.5	3	1	1	2	3	0	↓	3	4	3	6	3	6	13	16
		E Coli bacteraemia (No. of Hospital acquired cases)	0	2	4	5	6	4	14	4	3	↓	7	24	10	10	13	19	32	51
		E. Coli Urinary Catheter Associated Bacteraemia (No. of hospital acquired cases)	0	0	12	1	1	0	2	1	0	↓	1	3	1	3	1	0	2	8
		Other Urinary Catheter Associated Bacteraemia (No. of hospital acquired cases)	0	0	1	0	0	1	1	0	0	↔	0	2	0	2	1	0	3	4
		Surgical Site Infections (Total Knee Replacement surgery)	0	0	1	0	0	0	0	0	0	↔	0	0	0	0	0	0	0	0
		Surgical Site Infections (Total Hip Replacement surgery)	0	0	1	0	0	0	0	0	0	↔	0	0	0	1	0	0	2	1
	Slips, trips and falls	Total number of Inpatient Falls	-	-	-	152	182	170	215	195	189	↓	384	567	478	462				1891
		Falls rate per 1000 occupied bed days	-	-	-	7.30	8.20	8.11	9.79	9.19	10.21	↑	9.70	8.70	7.73	7.44	New methodology agreed for 2013/14			8.39
		Number of Inpatient Falls resulting in harm				32	39	46	50	38	36	↓	74	72	122	135				403
		Falls rate per 1000 occupied bed days resulting in harm	-	-	-	1.54	1.76	2.20	2.28	1.68	1.82	↑	1.75	2.08	1.98	1.16	New methodology agreed for 2013/14			1.74
	Pressure Ulcer (post admission/avoidable)	Grade 2	<5	>=5<=10	>10	5	17	6	7	9	5	↓	14	30	20	43	54	30	135	107
		Grade 3	<2	>=2<=4	>4	0	2	1	1	2	0	↓	2	4	1	11	9	6	23	18
		Grade 4	0	-	>=1	0	0	0	0	0	0	↔	0	0	0	0	1	2	0	
	Medication related incidents	Total Number of medication errors resulting in any harm	-	-	-	6	10	11	24	7	9	↑	16	45	9	5				59
		Number of medication errors per 1000 occupied bed days resulting in serious harm	-	-	-	0.29	0.00	0.00	0.00	0.00	0.00	↔	0.00	0.00	0.34	0.00	New methodology agreed for 2013/14			0.34
	Cardiac Arrest Calls (outside of ICCU)- 1-5 per 1000 admission)	<3.5 per 1000	>3.5 per 1000	>5 per 1000	2.0	3.0	1.4	3.3	Not Available at time		↑		2.6	1.6	2.2	2.1	3.1	3.0	2.1	
	Eliminating Same Sex Accommodation Breaches (No of breaches)	0	-	>=1	0	0	0	0	0	0	↔	0	0	0	0	0	0	0	0	
	Complaints	No of complaints received in month	<=0.10%	0.11% - 0.19%	>=0.20%	44	70	48	64	62	34	↓	96	182	197	169	219	174	683	644
		% against activity complaints received in month				0.16%	0.16%	0.12%	0.17%	0.14%	0.09%	↓	0.12%	0.15%	0.12%	0.14%	New methodology agreed for 2013/14			0.14%
		(Acknowledgement)	>=96%	81-95%	<=80%	100%	100%	100%	100%	100%	100%	↔	100%	100%	100%	69%	77%	84%	89%	92%
	PALS	Compliments	-	-	-	93	58	46	120	77	111	↑	188	224	231	317	240	246	915	960
		Concerns - volume received	<=0.10%	0.11% - 0.19%	>=0.20%	319	335	293	242	218	152	↓	218	870	1000	800	779	1052	3822	1088
		Concerns - % against activity				0.77%	0.75%	0.69%	0.64%	0.50%	0.38%	↓	0.44%	0.69%	0.80%	0.66%	New methodology agreed for 2013/14			0.67%
		First Line Complaints - volume received	<=0.10%	0.11% - 0.19%	>=0.20%	14	9	7	11	13	7	↓	20	27	41	57	67	55	201	125
		First Line Complaints - % against activity				0.03%	0.02%	0.02%	0.03%	0.03%	0.02%	↓	0.02%	0.02%	0.03%	0.05%	New methodology agreed for 2013/14			0.03%
	Net Promoter	NHS Friends and Family Test (5 start rating scoring)	>=4	>=3.5	<3.5	4.5	4.6	4.6	4.6	4.6	4.6	↔	4.6	4.6	4.6	4.6	2012/13 data not collected in Five Star rating method			N/A
		NHS Friends and Family Test (proportional score) (DH deem above 50 as excellent)	50	45	40	60	64	62	62	63	63	↔	63	62.8	60	61	2012/13 data not collected in Five Star rating method			N/A
	Midwife to birth ratio	1.28	1.30	>1:30	01:30	0.00	0.00	1.28	0.00	0.00	↔	0.00	1.28	1.30	1.28	01:34	01:33	01:32.1	1.29	
	Information Governance (Scores for IG Toolkit)	>=70% scored at Level 2	-	<70% scored at Level 2	72%	72%	72%	72%	72%	72%	↔	72%	72%	72%	72%	72%	49%	64%	72%	
	Nursing Metrics:	Contenance Assessment	>90%	>85%	<85%	84%	90%	83%	84%	83%	90%	-	87%	90%		94%	93%	94%	93%	90%
		Dementia	>90%	>85%	<85%		68%	76%	63%	71%	83%	-	77%	69%	Data not available prior to use of FOCUS IT					70%
		Falls	>90%	>85%	<85%	95%	97%	97%	96%	95%	94%	-	95%	97%		93%	94%	96%	96%	96%
		Infection control	>90%	>85%	<85%	96%	97%	97%	97%	97%	97%	-	97%	97%	Data not available prior to use of FOCUS IT					97%
		Meds	>90%	>85%	<85%	96%	97%	97%	97%	97%	96%	-	97%	97%		90%	94%	93%	94%	97%
		Nutritional	>90%	>85%	<85%	93%	96%	96%	94%	94%	98%	-	96%	96%		90%	82%	87%	86%	96%
		Observations	>90%	>85%	<85%	89%	93%	90%	92%	90%	91%	-	91%	93%		88%	90%	88%	87%	92%
		Pain	>90%	>85%	<85%	88%	91%	83%	85%	87%	88%	-	88%	91%		90%	86%	89%	88%	90%
		Privacy	>90%	>85%	<85%	-	99%	99%	100%	99%	99%	-	99%	99%		95%	98%	95%	96%	99%
		Safeguarding	>90%	>85%	<85%		92%	84%	83%	83%	85%	-	84%	86%	Data not available prior to use of FOCUS IT					
		Staff	>90%	>85%	<85%		91%	96%	94%	94%	93%	-	94%	94%	Data not available prior to use of FOCUS IT					
		Tissue Viability	>90%	>85%	<85%	85%	84%	84%	86%	87%	87%	-	87%	84%		94%	94%	96%	94%	86%

Denotes not applicable at time of report
Not available at time of report publication

Monthly Trend
 ↑ Improved Performance
 ↔ In line with previous period
 ↓ Deterioration in Performance

↑ Achieving threshold improving performance
 ↓ Achieving threshold deteriorating performance
 ↑ Falling threshold improving performance
 ↓ Falling threshold deteriorating performance

TRUST KEY PERFORMANCE INDICATORS

HR/Workforce
February 2014

Code	HR WORKFORCE METRICS	Target effective from 1st April 13 (establishment target based on end of year target requirement)			Dec-13	Jan-14	Feb-14	In month change	Q3 2013/14	Q2 2013/14	Q1 2013/14	Q4 2012/13	Q3 2012/13	YTD 2013/14	
		G	A	R											
	Workforce Numbers	Establishment	< or = 3666.58		>3666.58	3817.00	3808.00	3809.70	1.70	3806.04	3701.07	3666.65	3484.59	3489.59	3724.59
		Staff in Post	-	-	-	3549.38	3575.88	3585.08	9.20	3535.72	3457.03	3411.98	3346.16	3352.58	3468.24
		Vacancies (Diff between Bud. Est. & SIP)	< or = 7.50%	> 7.50% & < 10.00%	>10.00%	-267.62	-232.12	-224.62	7.50	-270.33	-247.17	-254.66	-138.44	-137.01	-256.35
		Turnover Rate (% cumulative YTD)				7.17%	8.08%	8.61%	0.53%	7.17%	4.99%	2.33%	9.73%	7.35%	4.02%
		Turnover Rate (% Rolling 12 months)	<9.45%	>9.45% & <10.40%	>10.40%	9.56%	9.79%	9.89%	0.10%						
	Attendance and Wellbeing - * This is the cost of salary paid to those who were absent due to sickness.	Sickness Absence (%) - Short Term	<1.52%	>1.52% & <1.68%	>1.68%	2.18%	3.14%	2.85%	-0.29%	2.49%	2.35%	2.72%	2.73%	2.63%	2.52%
		Sickness Absence (%) - Long Term	<1.64%	>1.64% & <1.82%	>1.82%	2.38%	1.95%	1.66%	-0.29%	2.20%	2.05%	2.00%	2.44%	2.56%	2.09%
		Sickness Absence (%) - Total	<3.50%	>3.51% & <3.85%	>3.85%	4.56%	5.09%	4.51%	-0.58%	4.69%	4.40%	4.72%	5.17%	5.19%	4.61%
		Absence Cost (£) - Short Term*	-	-	-	£214,768	£291,631	£247,799	£43,832.00	£642,242	£569,107	£660,615	£658,287	£654,933	£1,871,964
		Absence Cost (£) - Long Term*	-	-	-	£232,234	£190,645	£151,119	£39,526.00	£585,561	£509,357	£559,857	£613,486	£660,186	£1,654,775
		Absence Cost (£) - Total*	-	-	-	£447,002	£482,276	£398,918	£83,358.00	£1,227,803	£1,078,464	£1,220,472	£1,271,773	£1,315,119	£3,526,739
		Absence 12 month rolling rate (%) - Short Term	<1.52%	>1.52% & <1.68%	>1.68%	2.57%	2.59%	2.59%	0.00%	2.60%	2.60%	2.55%	2.43%	2.33%	2.58%
		Absence 12 month rolling rate (%) - Long Term	<1.64%	>1.64% & <1.82%	>1.82%	2.17%	2.12%	2.06%	-0.06%	2.20%	2.27%	2.25%	2.28%	2.29%	2.24%
		Absence 12 month rolling rate (%) - Total	<3.50%	>3.51% & <3.85%	>3.85%	4.75%	4.71%	4.66%	-0.05%	4.80%	4.87%	4.80%	4.70%	4.62%	4.82%
		Maternity (WTE on maternity in month)	-	-	-	78.43	66.28	68.97	2.69	78.37	84.76	88.53	87.33	88.50	83.89
	Staff Performance	AFC Rolling 12 month Appraisal completion rate	<79%	>79% & <71%	>71%	78.27%	77.63%	75.54%	-2.09%	78.27%	69.48%	59.37%	46.81%	48.00%	78.27%
		Mandatory Training Completion	<98%	>88% & <98%	>88%	76.00%	77.00%	77.00%	0.00%	76.00%	75.00%	75.00%	74.00%	71.00%	76.00%

Workforce Numbers

- a) Budgeted Establishment - In comparison to last month, budgeted establishment has increased by 1.7wte to 3809.70wte. Budgeted establishment is above the annual plan projection due to the Keogh uplift and CIP that were not delivered.
- b) Staff in post - has increased by 9.20wte to 3585.08 wte in February 2014 from 3575.88 wte in January 2014.
- c) The number of vacant posts is currently 224.62wte which is a decrease of 7.5wte since January 2014. The Trust vacancy rate is 5.90%, the majority of vacancies continue to be in registered Nursing (100.54wte/7.96% vacancy rate).
- d) Turnover - the turnover figure for February was 9.89%, please note this figure represents turnover since April 2013.

Attendance & Wellbeing

- a) In Month - Trust absence levels have decreased in month to 4.51% from 5.09% in January. The absence rate for February 2014 was lower than that of February 2013.
- b) Rolling 12 Months Absence - The rolling 12 month period absence is currently 4.66%.
- c) Absence Cost - The cost of salary paid to absent staff for February 2014 was £398k, for the 12 month rolling year this equates to £4.85m. This is the direct cost of paying staff whilst they are on sick leave and does not account for additional hours/overtime/bank/agency used.
- d) Occupational Health activity - During February 2014 there have been a total of 62 referrals to Occupational Health to support staff at work/returning to work, this compares to last month's figure that stood at 66 referrals.
- e) The highest working days lost were due to anxiety/stress/depression which totalled 886.61 wte days.
- f) The highest number of episodes, which can be mapped back to short term sickness absence was gastrointestinal problems accounting for 162 episodes of absence. This would link with the Norovirus outbreak that took place throughout February.

Workforce Productivity & Staff Costs

- a) Pay Spend - In month the total pay spend was £13.95m, of which £12.03m was fixed pay spend. This is above pay plan of £12.89m
- b) Variable Pay - spend was £1.9m for February 2014 (13.76% of total pay spend), which is an increase against last month.

Staff Training & Development

- a) Mandatory training - the mandatory training rate for January was 77%. An updated figure is due next month.
- b) Workforce planning and training needs analysis have commenced to formulate the workforce plan.

Recruitment & Selection

- a) There were 42 adverts placed in February 2014.
- b) Nursing Recruitment - International recruitment continues as the Trust goes back to Italy mid March to continue with interviewing Registered Nurses. During February 15 nurses were offered employment with the Trust.

Workforce Change

- a) HR have now received all workforce plans that were submitted by the divisions and analysis will be taking place during March 2014 ready for submissions to the LETB's on the 4th April 2014.

Health & Safety

- a) There has been no formal contact between the Trust and the Health and Safety Executive (HSE) this month.

Serious Disciplinary & Tribunal Cases

- a) Activity Summary- There are currently 20 on-going employee relations cases all being managed in conjunction with Human Resources:
- Disciplinary – 7
 - Grievance – 3
 - Harassment & Bullying – 2
 - Capability – 6 (this includes sickness capability cases)
 - Referral – 1
 - Whistleblowing – 1
- b) Since last report one Tribunal case remaining in process.