

**BOD 113/2016**

(Agenda item: 14)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**28 September 2016**

**Workforce Performance Report**

**For: Information**

**Executive Summary**

This report shows the position on the workforce performance indicators as at the end of August 2016, except for sickness absence which is a month in arrears.

Overall, staff turnover, the ability to recruit the required numbers at the required speed and the consequential impact on the high usage of temporary staff resource remains the main concern and hence the focus of high levels of activity.

Attention is particularly drawn to the following key points:

**Bank & Agency**

Agency spend has increased this month to 7.34% from 6.93% in July. A major factor in the Agency spend is Medical cover in the Children and Young People’s Directorate and ongoing spend in Highfield (Oxford) and Thames House.

Directorate detail of Agency Spend is shown under respective area charts and are described below

It should be noted that in some services (for example Podiatry) the use of agency staff is initiated and the appropriate revenue follows. This allows income to be generated.

Directorate commentary:

**Adult**

* Spend remains broadly unchanged at 7.4%.
* Main reasons are:
	+ Agency workers covering vacancies in the AMHT’s
	+ 8.5 agency workers are being recruited to deliver Psychological Services in the AMHT’s prior to the restructure of Step 4 services
	+ Long lines of work across the services ensuring that continuity of care is maintained
	+ Additional 4 x Band 6 CPNs added to the establishment of Oxford City AMHT and will be filled by agency until they can be substantively recruited. Agency nurses are covering the delivery of depots in City AMHT due to skill mix imbalance. Social Workers are not always able to deliver depots

 **Children & Young People**

* Spend remains broadly unchanged at 9.1%

* Main reasons are:
	+ Highfield unit
	+ SWB inpatient
	+ Cotswold House
	+ Medic spend
	+ Oxon CAMHS & PCAMHS
	+ Bucks CAMHS
	+ Integrated Therapies
	+ All inpatient Units current have agreed lines of work operating
* Medical vacancies continue to be a challenge in most areas and are being covered by agency/locum.
* Oxon CAMHS/PCAMHS agency psychologists brought in to reduce waiting list.

**Older People’s**

* Spend has increased to 7.3% (6.2% in July)
* Agency spend is above Trust target
* Agency spend has increased consistently across the Directorate except in the South Locality team.

**Corporate**

* Spend has reduced to 5.25% for August (6.93% in July).
* Estates & Facilities – Has increased from 11.22% to 17.5% in Aug –Hub A is using agency to cover vacancies and sickness which is being actively managed
* OPS has decreased significantly following the commencement of a number of new starters
* Finance –Procurement continue to use Agency staff whilst they review provision of service
* IM&T are using a high levels of agency in the Cube & Clinical Information Systems

**Vacancy**

The Vacancy rate has increased to 10.1% in August from 8.2% in July. This has been driven by increases in Older Peoples and Adult Directorates as well as some costing corrections by Finance.

A table showing the recruitment figures for each directorate is included in Page 4 of the Workforce Performance Report.

An analysis of starter & leaver numbers has shown that retention of qualified nurses (Band 5 and above) is a major part of turnover and therefore vacancies. Since 2014 the total number of nurses employed by the Trust has reduced by 212 FTE, with the average number of leavers exceeding the average number of starters. This is translating into agency spend of an average of £1m each month.

Directorate commentary:

**Adult:**

* Vacancy rate increased to 9.8% (7.9% last month)
* Difficult to recruit areas are Staff Nurses for Thames House and CPN’s for Oxford City AMHT and Chiltern AMHT
* A number of Charge Nurses across the Directorate have resigned
* Acting up remains high across the Directorate and this is a risk
* We are losing some Band 7 & 8A nurses to Berkshire. They have really worked hard at developing specialist clinical nursing roles
* Careers events planned for October and November.

**Children & Young People:**

* Vacancy rate 4.7% (43.9% last month)
* Inpatient Units remain difficult to recruit to
* Difficulties in recruiting with Medical Staffing, currently 6 vacancies, 4 of which are in SWB
* Children’s Therapies (including Bucks SALT) have 18 vacancies, there has been a significant number of staff leaving for promotional opportunities elsewhere, relocations and work life balance
* Health Visiting have 17 vacancies
* School Health Nursing has 7 vacancies
* Children’s Community Nursing has 4 vacancies following a number of resignations

**Older People:**

* Vacancy rate to 13.1% (8% last month) = 225 vacancies
* Challenges continue in recruiting to the Mental Health Inpatient and Community areas and Podiatry
* District nursing is currently looking at advertising options as they have had some recent resignations
* Regular recruitment meetings with Abingdon Community hospital are taking place to maximise their recruitment and assess recruitment methods
* Universities have been approached to register for upcoming recruitment fairs and to advertise directly into their careers hubs to attract students

**Corporate:**

* Vacancy rate increased to 11.4% (9.2% last month)
* A review of recruitment to Pharmacy posts has been completed and now alternate recruitment media and attraction is being trialled

**Sickness**

Sickness has increased significantly over the last two months from 3.69% in June to 4.05% in August, although in line with previous years.

Stress, anxiety & depression continues to be the main cause of sickness absence. A business case for the introduction of an Employee Assistance Programme (which could result in reduction in sickness absence levels) has been made. The question of funding for such a scheme, and the continuation of MSK physiotherapy support, will be considered once the half-year forecast is available from Finance. Additionally, Supportive Leadership workshops are being commenced (4 sessions per month), Occupational Health run Stress Workshops. Discussion about stress, anxiety & depression at a level requiring clinical support was discussed at Well Led sub-committee and the need to consider treatment as well as prevention. Further work is required on this area.

Directorate commentary:

**Adult**

* Sickness has decreased slightly to 4.69% of which 2.19% is long term sickness
* 18 cases are being addressed formally all of which are long term sickness cases
* Top 3 reasons for sickness absence:
	+ Stress, anxiety, depression, psychiatric: 33.2%
	+ MSK: 12.6%
	+ Gastrointestinal: 8.25%

**Children & Young People**

* Sickness has increased slightly to 3% of which 1.73% is long term
* 8 cases are being formally addressed
* Top 3 reasons for sickness absence:
	+ Stress, anxiety, depression, psychiatric: 33.2%
	+ Other / unknown: 12.6%
	+ MSK: 11.8%

**Older People**

* Sickness has increased to 4.4%. It had reduced during the past 6 months
* 32 cases are being addressed formally
* The increases were in Mental Health Inpatient and Bucks, Central and North East Locality and the South Locality. Urgent Care absence levels continue to sit below the Trust target.
* Top 3 reasons for sickness absence:
	+ Stress, anxiety, depression, psychiatric: 21.7%
	+ MSK: 11%
	+ Injury / fracture: 8.8%

**Corporate**

* Sickness has decreased to 3.67% (3.9% last month)
* 10 cases are being addressed formally most of which are long term sickness cases with 3 cases addressing short term absences.
* Top 3 reasons for sickness absence:
	+ Stress, anxiety, depression, psychiatric: 37%
	+ Other / unknown: 7.3%
	+ Injury / fracture: 7%

**Turnover**

Turnover has continued its decline from a peak in March of 14.4% to stand at 13.86% in August. This reduction has been experience across all directorates except Older Peoples, which h had seen a consistent increase over the last 10 months. In Older People’s Directorate the turnover continues to be high in Community Hospitals (24 leavers from Community Hospitals in the last 2 months).

The HR Department has introduced a new process to collect information on exit reasons. An initial review of the first 70 staff movement forms received shows:

* 24% moving to another role within the Trust
* 76% leaving the Trust

The single biggest reason for leaving the Trust or moving internally is promotion / better prospects. Free format comments suggest a significant proportion is moving to specialisms / roles that are of particular interest.

Second most common reason for leaving the Trust is relocation. The free format comments show that a significant number of people are relocating due to a change of lifestyle or to be closer to their families.

We will continue to monitor and refine the staff movement forms to identify trends and reasons for leaving.

**Recruitment**

A Recruitment Database has been developed in-house and is being rolled out in the Recruitment Team. This will allow the Recruitment Advisors to better manage the vacancies and candidate pipeline and report actions & alerts. Once implemented the Recruitment Database will be developed further to ease the administration burden by automating processes such as producing offer letters.

This will result in a reduction in the length of time candidates spend in the recruitment process. However managers still require training about the importance of completing recruitment actions in a timely manner and the importance of collecting all candidate documentation at the appropriate points in the recruitment process.

**Apprenticeships:**

**Cohort 2 – September 2016**

We recruited 9 apprentices in total who started in September 201, 8 business / administration across Adult and CYP Directorates and 1 clinical in Adults.

**Cohort 3 – January 2017**

Plans are underway for advert October 2016, assessment day November 2016 with a proposed start date 9thJanuary 2017.

**Values Based Behavioural Framework**

The work recently undertaken by Talent Works in support of the Trust values and associated behaviours is just being completed. The process has gone well and over 100 employees participated in the focus groups and were provided feedback.

The outputs of this work will be presented to the Executive team on 26 September and following that it is planned to incorporate this work across the organisation in PDRs, Trust, Induction and Recruitment.

**Recommendation**

To note the report for information.

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