

**BOD 68/2017**

(Agenda item: 13)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**24 May 2017**

**Workforce Performance Report**

**For: Information**

**Executive Summary**

This report shows the position on the workforce performance indicators as at the end of April 2017, 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:

**Temporary Staffing Spend**

There has been a decrease of £1m in agency spend compared to March, returning agency spend to “normal” levels after the spike in March (due to accrual of invoices for units not on the WFMS and recoding of medical agency spend).

The HR Department is looking at building the internal bank by moving this activity and resource into the main Recruitment Team. This would help to accelerate recruitment to the internal bank. The department is also working towards getting all agency shifts booked and recorded through the Workforce Management System which would improve reporting of usage and staffing levels.

Bank spend remains fairly static with limited recruitment due to team capacity. Agency spend was 64.91% above the ceiling set by NHSI. NHSI overrides have remained largely static but show a steady decline in the last 6 months.

There was a 12% (103K) decrease in agency spend for units on the WFMS in April 2017. 53% of agency use was to cover vacancies, 21% for increased workload and 4% for sickness.

Directorate detail is shown under respective area charts and further described below:

**Adult**

* Spend decreased to 14.6% (18.8% last month).
* Main reasons are:
* Agency workers are covering vacancies in the AMHT’s to ensure that caseloads are not excessive however we are struggling to recruit enough agency staff.
* Number of agency staff in AMHT’s moving into permanent roles.
* Agency staff met with to explore what would encourage them onto a permanent contract and what they find more attractive about agency work.
* There are long lines of Agency workers across the services ensuring that continuity of care is maintained.
* Project to offer long days to substantive staff to increase retention.
* Patient acuity an issue across the Directorate.
* Number of staff on suspension, from the wards, being backfilled by agency.

**Children & Young People**

* Spend has decreased to 7.9% (12.6% last month)
* Main users of agency are:
* Swindon, Wilts and BaNES

**Older People’s**

* Spend has decreased to 7% (14.5% last month).
* Agency spend was 11.9% in Community Hospitals, 13.3% in the South Locality and 7.2% in Older Adult Mental Health. Other areas of the Directorate had low agency spend.

**Corporate**

* Spend has reduced to 2.8% (from 7.2% last month).
* Overall, the trend on temporary staffing spend continues to reduce. \*The month of March was a skew on this trend.

**Vacancy**

The Vacancy rate has increased slightly this month to 8.9% in April from 8.0% in March but still remains below the 9.0% Trust target. Over Financial Year 2016-17 the vacancy rate has shown a significant downturn from 10.48% in April to plateau below the Trust target over the last six months.

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

Directorate commentary:

**Adult**

* Vacancy rate is 11.8% (11.4% last month).
* Difficult to recruit areas remain unchanged. Ashurst, Kestrel, Kingfisher and Bucks South AMHT.
* Middle manager level acting up remains high.

**Children & Young People**

* Vacancy rate is -0.1%. 48 posts are currently live on NHS jobs.
* On-going difficulties recruiting to parts of the Directorate (eg Highfield)

**Older People**

* Vacancy rate has increased to 10.5% (9.4% last month).
* Difficult to recruit to posts are CPN and Community Mental Health Practitioner vacancies in South Bucks. District Nursing in the South Locality and Registered Nurse vacancies in Community Hospitals.
* Reviewing recruitment with Abingdon Community Hospital managers.
* Process agreed to ensure pre-employment checks are completed for Out of Hours GP’s.

**Corporate**

* Vacancy rate decreased to 11.5% (16.22% last month).

**Sickness**

Sickness has decreased in April to stand at 3.71% from a peak in December 2016. This reduction can be traced to a fall in short-term sickness episodes especially *Cold/Flu*. All directorates have seen a decline in sickness as we move out of the Winter period and into the new financial year.

Absence due to stress and anxiety remain a concern. The Trust is working with trade union representatives to apply a Management Standards Approach to workplace stress, Mindfulness Sessions have been run and the HR Department is looking at a procurement process to establish an Employee Assistance Programme.

The Occupational Health Department have been piloting Wellbeing Assessments since mid-April.

Directorate commentary:

**Adult**

* Sickness has decreased to 4.18% from 5.37%
* This decrease is likely to be explained by seasonal fluctuation and the robust management of capability health cases.
* 35 cases are under formal management, an increase from 28 last month with HR staff working closely with managers to ensure that the policy is adhered to, moving staff into informal and then formal sickness absence as appropriate.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 35.1% |
| Gastrointestinal | 11.28% |
| Colds and ‘flu | 7.7% |

**Children & Young People**

* Sickness has decreased to 2.8% (3.3% last month).
* 6 cases are being formally managed under the sickness policy.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 30.3% |
| Other known causes – not elsewhere classified | 11.8% |
| Cold and ‘Flu | 10.4% |

**Older People**

* Sickness has reduced to 3.9% (438% last month). Majority of the sickness absence was short term.
* There are 25 formal Health Capability Cases being managed at present.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 28% |
| Cough, colds & ‘flu (An increase of 10% on last month) | 11% |
| Gastrointestinal | 9.6% |

**Corporate**

* Sickness has decreased 3.74% (5.4% last month).
* Estates & Facilities still presents the biggest challenge, however sickness absence has reduced to 7.46%, significantly lower than 10.88% in March.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 35.5% |
| Other known causes | 17.2% |
| Other Musculoskeletal Problems | 15.48% |

**Turnover**

The Turnover figure has increased slightly in April to 15.0% from 14.62% in March.

The ongoing increase in turnover is experienced across all staff groups, except *Clinical Support*, and has been most significant in the Children and Young People Directorate.

**Exit Data**

The top 3 recorded reasons for leaving are:

* Career development (23% of leavers in April)
* Workload / work content (23% of leavers in April)
* Unknown (23% of leavers in April)

**Recruitment**

A report showing recruitment activity by Directorate is included in the Performance Report. It shows 754 vacancies.

Activity has included:

* Attended Careers Fair for nursing at Bedford University (Forensic, CAMHS and District Nursing were represented). All contacts have been followed-up. District Nursing has arranged for some shadowing days;
* Forensic service attended Oxford College to run Health & Social Care interviews with students.

A Home Office audit of processes surrounding applications for Certificates of Sponsorship was conducted in April 2017. The report is awaited.

**Recommendation**

To note the report for information.

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