

**BOD 81/2017**

(Agenda item: 12)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**28 June 2017**

**Workforce Performance Report**

**For: Information**

**Executive Summary**

This report shows the position on the workforce performance indicators as at the end of May 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 an increase of £30k in agency spend compared to April. This was all in the Additional Clinical Services staff group where spend increased by £109K. Bank spend has shown a slight decrease since March. Agency spend was 45.44% above the ceiling set by NHSI and overrides have risen slightly since the start of the FY.

The Trust has agreed to centralise the management of all agency spend, this should be effective from September. This will provide greater control over the procurement of agency staffing, provide more detailed data regarding the use of agency workers and prevent accrual issues. An example of savings associated with this is a £7k reduction in the cost of an agency worker in corporate services over a 6 month contract through effective negotiation to ensure they are engaged within price caps.

Bank spend showed little change in Adults and Corporate Services and fell slightly in Older Adults and C&YP. New posts have been authorised to support the recruitment of Flexible Workers and it is anticipated that this should be in place from August. There was a 2% (30K) increase in agency spend for units on the WFMS in May 2017.

55% of agency use was to cover vacancies, 22% for increased workload and 4% for sickness.

Plans to enable greater focus on building the internal staff bank by providing additional resource in the Recruitment Team are in place.

Work is being undertaken to investigate whether the Workforce Management System could be deployed faster following a request from Operations.

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

**Adult**

* Spend increased very marginally to 14.7% (14.6% 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. However there were no surprises in the feedback received: agency workers like the flexibility agency offers.
* There are long lines of Agency workers across the services ensuring that continuity of care is maintained.
* Highest agency use in Bucks and Oxon Clinical Pathways.
* 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**

* Has seen a decrease to 7.46% (7.91% last month).
* Main reasons are:
* Medic spend
* Oxon CAMHS & PCAMHS
* Bucks CAMHS
* Highfield Unit
* Marlborough House, Swindon

**Older People’s**

* Spend has decreased to 6% (7% last month).
* Areas of higher agency spend were – 12.6% in Community Hospitals and 9% in Older Adult Mental Health. Other areas of the Directorate had low agency spend below 5%.

**Corporate**

* Spend has increased to 4.7% (from 2.8% last month).

**Vacancy**

The vacancy rate has increased significantly to 12.45% in May from 8.92% in April. This has been driven by a spike in the Children and Young People Directorate which results from the provision of funding for new contracts and services. The new funding was available from the start of the financial year but was not allocated in April, as a result the vacancy increase in May incorporates two months WTE and therefore overstates the vacancy position in May. The vacancy rate has exceeded the Trust target for the first time in 10 months.

If this funding results in the requirement to recruit to new posts, this would be unplanned additional work for HR and could be a risk.

This increase is overstated in May as it includes budget unassigned in April.

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

Directorate commentary:

**Adult**

* Vacancy rate is 12.9% (11.8% 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 10.6% (increased from -0.1% last month). As noted in the commentary above, if this results in a need to recruit to additional posts this could be a risk as it is unplanned work for HR.
* On-going difficulties recruiting to parts of the Directorate (eg Highfield)

**Older People**

* Vacancy rate has increased to 13.9% (10.5% 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 RMNs to the Fulbrook Centre.
* Update on pre-employment checks for the Out of Hours GP’s –difficulties exist in progressing these checks for recently offered posts.

**Corporate**

* Vacancy rate increased to 12.8% (11.4% last month).

**Sickness**

Sickness has increased slightly in May to stand at 3.86%. The increase has been experienced by all the directorates except CYP Directorate. The current rate is just above the Trust target.

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 with the first meeting due to take place in July.

Counselling Services are being offered to OHFT staff via ex Arena Counsellors as a temporary measure. Occupational Health continues to offer Wellbeing Assessments to all Trust staff.

Directorate commentary:

**Adult**

* Sickness has increased slightly to 4.3% from 4.18%
* 32 cases are under formal management 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 | 29% |
| Other known causes – not elsewhere classified | 11.3% |
| Musculoskeletal  | 10.4% |

**Children & Young People**

* Sickness has decreased to 2.63% (2.8% last month).
* 8 cases are being formally managed under the sickness policy.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses  | 22.7% |
| Other known causes – not elsewhere classified | 10% |
| Benign and Malignant tumours and cancers  | 9.5% |

**Older People**

* Sickness has increase to 4.3% (3.9% last month).
* There are 24 formal Health Capability Cases being managed at present.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 27% |
| Injury / fracture | 14% |
| Musculoskeletal  | 9.3% |

**Corporate**

* Sickness has increased 3.99% (3.74% last month).
* The Office of the CEO and Finance have increased Sickness Absence in May, this will be monitored over the coming weeks.
* Estates & Facilities still presents the biggest challenge.
* Managers within the Corporate areas continue to be contacted monthly for update reports on progress for their staff that have been off work due to sickness who are/have triggered the 3 & 6 months triggers.

Top 3 reasons for sickness –

|  |  |
| --- | --- |
| Anxiety/stress/depression/other psychiatric illnesses | 38.62% |
| Other Musculoskeletal Problems | 11.40% |
| Other known causes – elsewhere classified | 10% |

**Turnover**

The Turnover figure has decreased slightly in May to 14.86% from 15.0% in April. The decrease was driven primarily by a reductions in the Corporate and CYP directorates. However the increase in staff turnover in CYP Directorate since March 2017 is not fully understand at present – it is possible it could be the result of a TUPE out of a service.

**Exit Data**

The top 3 recorded reasons for leaving are:

* Unknown (30% of leavers in April)
* Relocation (27% of leavers in April)
* Career development / better prospects (23% of leavers in April)

The use of an Exit Questionnaire service provided by the Picker Institute is being explored to ascertain whether this would improve the understanding of leaving reasons.

**Recruitment**

A report showing recruitment activity by Directorate is included in the Performance Report. It shows 813 vacancies.

The table below summarises the average timescale in the recruitment process:

**Recommendation**

To note the report for information.

**Author and Title:**

Simon Denton (Acting Head of Employee Relations)

**Lead Executive Director:**

Mike McEnaney