

Trust Board Meeting in Public: Wednesday 9 May 2018

TB2018.47

Title	Workforce and Organisational Development Performance Report, Quarter 4, 2017/18
--------------	--

Status	For comment and noting
History	The Quality Committee receives reports for Q1 and Q3. The Trust Board receives reports for Q2 and Q4. The Workforce Committee receives all quarterly reports.

Board Lead(s)	John Drew, Director of Improvement and Culture			
Key purpose	Strategy	Assurance	Policy	Performance

Executive Summary

This report is structured against four main sections; achievements, areas of concern, key activities this quarter, and next steps and actions.

It is likely that we will further refine the way people and workforce themes are reported to the Board once the people strategy is completed to be more aligned with the key themes for action in the strategy.

1. The Trust has shown marginal growth for staff in post in the last 12 months, and continues to recruit in significant numbers both locally and nationally. This increase in staff in post has, resulted in vacancy levels falling to 7.0%. Band 5 nursing vacancy levels continue to be of concern. In response the Trust continues to recruit from abroad with two cohorts of nurses, (25 in total) being recruited in the last quarter.
2. Whilst the Trust has experienced a reduction in its turnover rate, 14.2% at Q4, the number of leavers continues to be too high. The Trust continues to examine ways of improving retention, including focusing on 'hot spots'.
3. As predicted, sickness and absence levels have risen in the last quarter to 3.3%, which is just above the Trust's KPI of 3.2%. Despite this, the Trust compares favourably to national rates of 4.1%, and against the Shelford group, 3.8%.
4. The Trust has been represented at a number of external recruitment events in Q4. OUH has also hosted its own event; the aim of the event was to showcase OUH as an employer of choice and to attract local and national candidates. Although the number of people attending was lower than for similar events in the past, the event attracted high calibre attendees and received favourable media coverage, and will be repeated in 2018/19.
5. The New Joiners Welcome Day has been revised with phase 1 of the changes being implemented in Q4. Feedback for the event has improved following the introduction of the changes.
6. In Q4 the Trust launched its first Women's Network. Meetings will take place each month covering topics such as gender pay gap, flexible working and sexual harassment.
7. The Centre for Occupational Health and Wellbeing (COHWB), reported that it had vaccinated 70.2% of front line staff with the flu vaccine by February 2018. As a consequence the Trust achieved its CQUIN. The department was assisted by 80 ward based vaccinators.
8. The Trust's first Gender Pay Gap report was produced and is now on the Trust's website. As a result of the findings, an action plan has been developed and will be actioned throughout 2018/19.
9. At the end of Q4, the overall statutory and mandatory training compliance rate was 84.9% against a target of 90%. Compliance rates have remained relatively stable through the financial year, and we need to improve them.
10. Agenda for Change (AFC) appraisal rates continue to be disappointing at 62%. The Trust will seek to improve completion rates in 2018/19 as a matter of priority.
11. The staff survey results were released in Q4. The proportion of respondents has increased to 39%, although 43% of the questions elicited a significantly worse score, which impacted on the engagement index dropping from 3.84 to 3.78. This is the same score as 2 years ago, although the National average score has also declined, our results showed a worse than average decline.
Recommendation
12. Trust Board is asked to receive and note the contents of this quarterly summary report

Workforce and Organisational Development Performance Report Quarter 4, 2017/18

Introduction

1.1. This report provides summary information relating to Workforce and Organisational Development (OD) Performance for Quarter 4 (Q4), period 1 January 2018 to 31 March 2018.

- Section A describes key achievements made in Q4.
- Section B details areas of concern.
- Section C outlines Q4's key activities.

1.2. The Trust-level OD and Workforce Performance Dashboard is presented in **Appendix 1** and provides both in-month and rolling 12 month data relating to the principal Workforce KPI's. This information is distributed monthly to management teams for their respective divisions, with the functionality to drill down to ward level.

2. SECTION A: ACHIEVEMENTS

Substantive Workforce Capacity

2.1 Despite the market for staff continuing to be difficult, both locally and nationally, the last three quarters have seen small increases in workforce capacity. This follows an initial reduction in capacity of 69 wte between Q4 of 2016/17 and Q1 of 2017/18. When compared to Q4 2017, the Trust as of Q4 2018 is showing a net gain of 33 wte. These figures exclude Research and Development. The Trust has recruited staff in significant numbers throughout the financial year, however as demonstrated by the turnover levels below, retention in a number of staff groups continues to be problematic. In addition, whilst overall numbers have increased marginally, such gains do not offset reductions in capacity of key staffing groups such as nursing band 5, with a reduction of 317 wte in the last 12 months. As a key determinant of beds opening and closing, reduced capacity amongst this cohort will influence the Trust's performance. Given patterns of recruitment, this situation is unlikely to improve much before the end of summer.

2.2 The increases in staff noted above combined with relatively minor budget wte reductions between Q3 and 4 has meant the vacancy rate falling from 7.4 to 7.0% at the end of Q4. Whilst the reduction is welcome, the vacancy rate continues above the KPI of 5% and pockets of high levels of vacancies across the Trust in both clinical and non-clinical roles continue. Within ward and theatre areas, band 5 vacancies are running at 25% of the budgeted establishment. Within the NOTSS Division this figure is 39%. This staff cohort is predicted to fall in the coming months with the summer graduate intake and international nurses due to be in post by the start of autumn. The recruitment market for Nursing and Midwifery staff continues to be difficult, the reasons for which are well documented.

Agency and Bank Staff

2.3 Year end expenditure on temporary staffing was £38.2m, which is 6.5% of total expenditure. In 2016/17 this was 6.7%, and £37.6m spend.

Sickness Absence

2.4 The monthly absence rates have slowly risen since summer 2017, culminating in a peak in absence in January 2018. Since then absence rates have declined. Whilst reflecting seasonal patterns, this has put an upward pressure on absence rates, albeit at a relatively low level. The low absence rates reflect the work and contribution of line managers, Human Resources staff and FirstCare, combined with effective employment policies. As a result absence at the end of the financial year was 3.3%. The reported position at Q2 was 3.2%. The estimated spend or cost of loss of productivity due to sickness is £11.1m for a rolling twelve month period, equating to a loss of c360 wte.

2.5 The rate of absence in England and Wales is 4.1% and the Shelford group continues at 3.8%. In addition, benchmarking with AUKUH has highlighted that OUH has the second lowest long term and overall absence levels amongst this cohort of Trusts.

2.6 Overall absence rates are low and the challenge will be to improve upon them in 2018/19. Staff groups with relatively high levels of sickness absence are Clinical Support staff at 5.1%, Estates staff 5.0% and Administrative and Clerical at 3.7%. Of the divisions, Women's and Children's have the highest level of absence at 3.7% followed by Medicine Rehabilitation and Cardiac at 3.1%.

Overseas Recruitment

2.7 There have been two further cohorts of European nurses in the last quarter, 17 arrived in January and a further eight in March. The remaining recruits are employed to work part time on the wards whilst they are supported with English lessons to help them to achieve the appropriate level of English language required for NMC registration. It is anticipated that the first cohort will be taking the examination in May 2018. We continue to interview European nurses with NMC Registration and have started nine during the last quarter via the contracted overseas agencies.

2.8 Another two nurses arrive from India to start the OSCE training programme, aiming to obtain NMC registration. The Trust continues to start candidates that were recruited from India and the Philippines; however the process is still slow causing numbers to be low at this time. We anticipate the number of new starters to increase during the summer months.

2.9 The Trust continues to interview nurses from overseas via Skype on a monthly basis with the stipulation that all candidates have already achieved the correct IELTS level. This enables the Trust to recruit at a much faster pace.

Recruitment Events

2.10 A nursing event was held in Q4 to attract talent and showcase OUH as an employer of choice. The event had exhibitors from across the Trust with representation from all clinical divisions, accommodation, Unison and the RCN. The event attracted candidates

locally and nationally with a big push to attract newly qualified nurses and return to practice nurses. Whilst the event had a lower than expected attendance the quality of candidates was high, numbers of offers from the event are still being evaluated. The event also allowed positive media coverage. The Trust is looking to run another event in 2018/19.

2.11 Other Trust events held this quarter included children's nurses and maternity support workers.

2.12 OUH was represented at a number of local and university events, including one at Buckingham's new university, with the aim of attracting talent across the staff groups. The outcomes of these events are being evaluated.

Corporate Induction

2.13 A working group has been reviewing the corporate 'induction' programme with a view to changing its format. The purpose of the changes is to:

- make this more welcoming and personal to each individual new starter, renaming it 'new joiners welcome'.
- provide information about who we are and what our Trust's purpose is. This includes a welcome from an Executive explaining our Trust values, our vision and the Trust's strategy.
- new starters are also provided with information on working for OUH and how they can be supported through staff health and wellbeing.
- provide free car parking and lunch for the first day.

2.14 Phase one of the changes started in January 2018 and has already made an impact which has been demonstrated through improved feedback from the 486 new starters in Q4.

Equality, Diversity and Inclusion Networks

2.15 On 8 March, International Women's Day, the Trust launched its first Women's Network, the network meetings take place each month covering topics such as gender pay gap, flexible working and sexual harassment. During LGBT History Month, the Trust launched the LGBT Network and dates have been planned through-out the year.

Flu Campaign

2.16 The COHWB was instrumental in the Trust achieving the Flu CQUIN this year by vaccinating 70.2% of front line staff between October 2017 and February 2018.

2.17 The COHWB worked alongside over 80 ward based vaccinators to achieve this target which was nearly 5% higher than last year's figures. Plans have commenced for 2018/19

Online Management Occupational Health Referrals

2.18 In Q4, the COHWB successfully piloted the online management referral form within Surgery and Oncology, it is anticipated that this will be an ongoing project through-out 2018/19 so it is cross-divisional.

Policies and Procedures

2.19 The ongoing timetable of reviewing HR policies and procedures to ensure they remain legally compliant continued through-out 2017/18. Seven HR procedures were ratified by the Workforce Committee. Of these, five were reviews of existing procedures and two were new procedures developed in response to organisational need.

2.20 The five procedures reviewed and ratified during 2017/18 were:

- Recruitment and Retention Procedure
- Respect and Dignity at Work (Preventing Bullying and Harassment) Procedure
- Secondment and Acting Up Procedure
- Maternity, Paternity, Adoption and Shared Parental Leave Procedure
- Fixed Term Contract Procedure

2.21 The two procedures developed and ratified during 2017/18 were:

- Staff Leaving the Trust Procedure
- SAS Medical Autonomous Practice Procedure

2.22 As part of the people strategy, the opportunity to simplify our policies has been identified as a key theme.

Respect and Dignity at Work Procedure Launch

2.23 As a result of staff survey feedback, the Respect and Dignity at Work Procedure was launched. This details a new Trust approach to dealing with issues of bullying and harassment. Alongside this, the Bullying and Harassment Support Colleagues were refreshed as Respect and Dignity Ambassadors; we currently have 8 ambassadors across the Trust with a further campaign scheduled for Q1 2018/19

Gender Pay Gap

2.24 The Trust's first Gender Pay Gap report was produced and is now on the Trust's [website](#). The pay gap figures were also submitted to the Government Equalities Office showing a pay gap driven primarily by two factors: the relatively high proportion of men in senior roles and the impact of Clinical Excellence Awards, which are also disproportionately awarded to male doctors. As a result of the findings, an action plan has been developed and will be actioned throughout 2018/19.

3. SECTION B: AREAS OF CONCERN

Vacancy Levels and Staff Turnover

3.1 The turnover levels for the Trust have fallen steadily across the financial year. The current rate of turnover across the Trust is 14.2%. This has fallen from 14.6% at the end of

Q3 and from 14.8% in March 2017. The reason for this change has been in part due to a minor rise in the number of staff in post combined with a minor reduction in the rate of leavers as measured over a twelve month period. The rate of leavers though continues to be too high and is greater than those Shelford Trusts located outside London, which runs at around 10%.

3.2 Band 5 Nursing posts aside, other areas experiencing high turnover levels include Clinical Support staff 17.5%, Allied Health Professionals,(AHPs) 16.0%, Administrative and Clerical 14.7% and Nursing and Midwifery (all grades) 15.5%. Within AHPs, Occupational Therapists at 17.1%, Physiotherapists 19.4%, Diagnostic Radiographers 14.2% and Therapeutic Radiographers 13.4% are all in excess of the Trusts KPI of 12.5%.

3.3 The Trust is examining ways to increase supply and improve retention. International recruitment continues to be explored with regular cohorts planned throughout the next financial year. The new Agenda for Change cost of living increases for 2018/19, if approved, may assist retention going forward, and improve the supply of resources to both the NHS and the Trust. Of particular note is the potential effect upon the lower banded positions within the Trust. The Trust currently pays the Living Wage to staff below the minimum salary set by the Living Wage Foundation. The revised lowest rate of AFC pay under the proposals is set at £8.92 per hour, with the Trust currently paying £7.75.

3.4 A focus group chaired by the Director of Improvement and Culture was held to listen to the views and concerns of EU staff (nurses in particular), relating to Brexit.

Statutory and Mandatory Training

3.5 At the end of Q4, the overall statutory and mandatory training compliance rate was 84.9 % against a target of 90%. Overall compliance rates have remained stable. Divisional performance is highlighted in Table 1, below.

Table 1: Statutory and Mandatory Compliance Rates by Division – Q4

Division/Function	Q1 (2017/18)	Q2 (2017/18)	Q3 2017/18	Q4 2017/18
Clinical Support Services	91.7%	91.5%	91.4%	91.3%
Corporate Services	88.7%	88%	88.6%	89.7%
Operational Services	83.1%	79.7%	81%	81.7%
Children's and Women's	86.7%	86.5%	86.6%	87.2%
Neurosciences, Orthopaedics, Trauma and Specialist Surgery	84.7%	83.8%	82.6%	83.3%
Surgery and Oncology	90.3%	89.6%	88.6%	88.6%
Medicine, Rehabilitation and Cardiac	82.5%	81.8%	81%	82.3%
Research and Development	70.6%	68.1%	65.5%	64.4%
Overall Trust Compliance	85.1%	84.4%	84.4%	84.9%

Agenda for Change Appraisal Compliance

3.6 At the end of Q4 the compliance rate for the completion of AfC appraisals was 62% against a target of 90%. There has been a 1% increase in the compliance rate during the last quarter, but this is still very low and is a priority area for improvement during 2018/19.

3.7 Table 2, below, provides the Q4 compliance rates by Division/Function.

Table 2: Agenda for Change Appraisal Compliance Rates by Division – Q4

Division/Function	Q1 (2017/18)	Q2 (2017/18)	Q3 (2017/18)	Q4 (2017/18)
Corporate	59.8%	48.1%	45.9%	57.4%
Children's and Women's	79.1%	68.5%	62.1%	58.7%
Neuroscience, Orthopaedics Trauma and Specialist Surgery	67.7%	65.3%	65.6%	70.7%
Medicine, Rehabilitation and Cardiac	56.8%	54.9%	50.6%	49.2%
Surgery and Oncology	70.5%	70.2%	70%	67.3%
Clinical Support Services	79.1%	75.1%	70.4%	70.3%
Operations, Service and Improvement	70.1%	66.8%	61.6%	68.1%
Research and Development	50.5%	41.7%	46.8%	45.8%
Trust Average	68.3%	64.5%	61.4%	62%

Occupational Health

3.8 Over the year the number of staff referred to the COHWB by managers has increased to 1665 (1549 last year).

3.9 The 2 highest reasons for referral continue to be due to Mental Health (MH) or Muscular Skeletal (MSK) issues MH 429 (337) and MSK issues 413 (372).

3.10 This is a 27% increase for mental health issues and 11% increase for MSK issues.

3.11 The number of staff accessing EAP for counselling during the last year was 440 (305) this is an increase of 40% from last year.

4. SECTION C: KEY ACTIVITIES IN Q4

Oxford Brookes Recruitment

4.1 The process to transition student nurses from Oxford Brookes into fully qualified roles continues with two keeping in touch days, the second day is scheduled in Q1. Further conversations are due to take place to increase offers to second and third year students. This work is conducted in collaboration with Oxford Health and will be ongoing throughout 2018/19. The goal here is to restore recruitment rates to higher levels of around 75% versus 50% last year.

Streamlining Recruitment and Induction

4.2 A recent project in the Trust, working together with Health Education England, is looking at streamlining junior doctors' recruitment and induction. The purpose of this project is to enhance the smooth transition for doctors from one organisation to another without the need to duplicate pre-employment checks and statutory and mandatory training. The overall aim is to provide a better experience for new starters to the Trust by transferring data via ESR.

4.3 It is anticipated that this will be implemented across all staff groups by Q4 2019.

NHS Staff Survey

4.4 Results overall were lower with 43% of the questions eliciting a significantly worse score, which impacted on the engagement score dropping from 3.84 to 3.78. This is the same score as two years ago, although the National average score has also declined, our results showed a worse than average decline.

4.5 Key themes from the 2016 survey which we focused on last year: Appraisals; Bullying and Harassment; and Health and Wellbeing, have not shown any improvement through the latest survey. This is in part due to the fact that much of the work that was done in response is longer term and will require a sustained focus before we start to see the benefits. These 3 key themes will therefore remain in place for 2018/19.

4.6 The Trust will be focusing on six key themes this year as a combination of the survey specific results and the accompanying free text comments (1042 in total) which includes last year's (as above) as well as the 3 new themes of empowering teams, enabling managers and recognising and valuing our staff.

4.7 Response rates increased slightly to 39% and the Trust-wide findings from the survey were shared through seven participative events across all sites and led by the Senior Executive Team. These were attended by over 330 staff who gave further suggestions for improvements, using an online App, with 93% saying the events were informative.

4.8 This was the launch of the 'Changing Things for the Better' programme which includes a specific email address for staff to continue to contribute, and a leaflet was designed and distributed as a way of increasing the exposure to the Trust wide survey results to a much wider and more inclusive audience.

4.9 This programme is now being rolled out at Directorate level across all Divisions, again with participation by members of the Executive team

Equality, Diversity and Inclusion

4.10 The Trust is preparing for the forthcoming Workforce Disability Equality Standard by exploring the experiences of its disabled staff, starting with a Listening into Action Event on 2 May titled 'Supporting Disability in the Workplace', which includes speakers from Purple Space and the RCN.

5. RECOMMENDATION

5.1 The Trust Board is asked to receive and note the contents of this quarterly summary report.

Author:

John Drew, Director of Improvement and Culture

Workforce Category (WTE)	Feb-18	Mar-18	Diff
Budgeted Staff in Post	11,643.6	11,631.0	-12.6
Actual Staff in Post	10,842.3	10,820.8	-21.5
Temporary Workforce	642.5	733.5	+91.1
Total Workforce Capacity	11,484.8	11,554.4	+69.6

OUH Trust	3.3%	7.0%	14.2%	574.5	159.1	£2,854,270	£994,648	62.0%	84.9%
Division	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Childrens and Womens	3.9%	4.7%	14.3%	57.2	5.2	£357,172	£31,909	58.7%	87.2%
Clinical Support Services	3.1%	8.9%	11.9%	83.7	56.7	£452,086	£345,571	70.3%	91.3%
Corporate	3.0%	-2.0%	13.0%	8.6	12.0	£70,494	£23,957	57.4%	89.7%
Education and Training	0.2%	22.2%	66.7%	0.0	0.0	£0	£0		
Estates	3.9%	5.5%	10.1%	5.4	0.0	£44,676	£0	61.8%	90.8%
Medicine Rehabilitation and Cardiac	3.3%	6.2%	16.4%	163.3	29.2	£823,992	£280,925	49.2%	82.3%
Neurosciences Orthopaedics Trauma and Specialist Surg	3.2%	10.0%	15.2%	131.5	32.5	£593,117	£309,039	70.7%	83.3%
Operational Services	5.8%	4.0%	10.7%	3.8	3.3	£9,737	£8,254	68.1%	81.7%
Research & Development	2.6%		21.5%	1.4	2.4	£5,654	£10,443	45.8%	64.4%
Surgery and Oncology	3.0%	8.0%	13.9%	119.5	17.8	£497,135	£135,086	67.3%	88.6%
Operating Expenses	0.24%		10.99%	0.0	0.0	£0	£0		

