

Trust Board Meeting in Public: Wednesday 8 May 2019

TB2019.56

Title	Workforce and Organisational Development Performance Report, Quarter 4 2018/19
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Status	For comment and noting
History	Quality Committee receives reports for Q1 and Q3 Trust Board receives reports for Q2 and Q4 Workforce Committee receives all quarterly reports

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

Executive Summary

1. This report provides summary information relating to Workforce and Organisational Development (OD) Performance for Quarter 4 (Q4), from 1 January to 31 March 2019. It also provides some commentary on key points and reflections on the whole of 2018/19.

This report is structured against three main sections; (A) Review of performance and achievements, (B) Areas of concern, (C) Key activities and next steps.

2. There have been a number of improvements in workforce metrics during the course of 2018/19 including;

- Growth of substantive staff: A steady increase of over 150 substantive staff in-year.
- Improved turnover: Trust turnover has reduced from 14.2% (M12 2017/18) to 13.8% at year-end 2018/19.
- Successful international nurse recruitment campaign: resulting in over 80 new NMC-registered nurses now working at the Trust.
- Reduced sickness and absence: reduction to 3.2% from 3.3% in the previous financial year, achieving our goal and remaining low compared to peers.

3. These improvements have been achieved through collaborative working between corporate functions (e.g., workforce, nursing, operations) and the clinical divisions, including implementation of a range of measures contained within a comprehensive Workforce Improvement Plan (WIP) which was developed in response to the NHSI performance undertakings in July 2018, as well as initiatives from year 1 of the refreshed People Strategy (2018-2021). These achievements and improvements are summarised under section A.

4. An improved approach to workforce planning as an integral part of the business planning process has led to an ambitious workforce plan for 2019/20 based on a more detailed set of directorate-level workforce plans than we have had before, which seek to align activity, workforce and finance data. The workforce plan for 2019/20 assumes a growth in substantive staff of 4.41%, which will be partially offset by a reduction in temporary staff of around 2% leading to a net increase in staff of 2.53%. The main drivers of growth are continued growth in international nurses (1.9%), increasing apprenticeships and nursing associates (0.9%), a reduction in turnover (1%) and a TUPE transfer of staff from Oxford Health (0.6%).

5. A number of specific concerns are outlined in section B. These include;

- Low rates of non-medical appraisal and statutory and mandatory training, which are an area of focus including the implementation of values-based appraisals throughout the Trust which is starting to translate into an improvement in appraisal rates.
- The capacity of our recruitment team, which has 5-6 people fewer than the peer median hospital adjusted for size. We propose adding two additional people in the short-term to cope with demand and increase the timeliness of recruitment.
- An increase in referrals to our Centre for Occupational Health and Wellbeing for staff with mental health or stress-related concerns.
- Improving the consistency and integrity of our Employee Relations tracker tool.

6. Overall, workforce remains a key constraint and a risk for the Trust requiring continued focus on a comprehensive set of measures to increase the number of staff available as well as the level of engagement of staff, and their capabilities.
7. The Board has also initiated a programme of work to strengthen our culture and leadership using an approach and set of tools developed by the NHS Leadership Academy. This programme starts with a 'Discover' phase, which will be led and supported by an internal Change Team of around 15 people and will be overseen by a steering committee made up of six Board members and chaired by the Trust Chair.
8. Strengthening Equality, Diversity and Inclusion will also continue to be a priority for 2019/20, with the opportunity to make this an explicit area of focus within the scope of the culture and leadership programme.

Recommendation

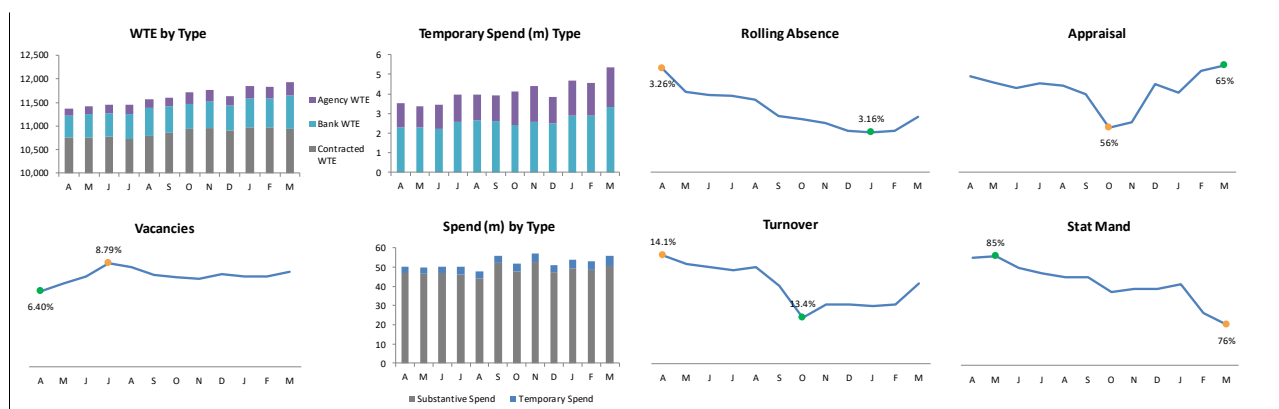
9. Trust Board is asked to note the contents of the report.

WORKFORCE AND ORGANISATIONAL DEVELOPMENT PERFORMANCE REPORT, QUARTER 4 2018/19

1. Introduction

- 1.1. This report provides summary information relating to Workforce and Organisational Development (OD) Performance for Quarter 4 (Q4), from 1 January to 31 March 2019.
- 1.2. Section A provides a review of performance and achievements made in Q4.
- 1.3. Section B provides an update on the workforce concerns and priorities for improvement.
- 1.4. Section C sets out the next steps and priorities for 2019/20.
- 1.5. The front page of the Trust-level OD and Workforce Performance Dashboard is shown below, and provides both in-month and rolling 12 month data relating to the principal Workforce KPI's. A fuller summary of metrics including at directorate level is provided in **Appendix 1**. This information is distributed monthly to management teams for their respective divisions, with the functionality to drill down to ward level. In addition, each month additional information ranking all Clinical Service Units according to turnover, vacancies and temporary staffing usage are also distributed to ensure that targeted action is being taken against the areas of greatest concern.

Figure: Summary of performance during 2018/19 against workforce KPIs



OUH Trust	3.2%	8.1%	13.8%	711.2	289.1	£3,308,063	£2,047,478	65%	75.5%
Division	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Clinical Support Services	2.6%	5.0%	12.2%	40.6	49.7	£214,901	£339,818	76.5%	80.6%
Corporate	3.0%	-3.7%	12.6%	21.4	21.2	£143,414	£175,164	38.0%	77.8%
Education and Training	1.8%	27.9%	0.0%	0.0	0.0	£0	£0		
Estates	5.0%	12.2%	12.7%	0.5	0.1	£5,511	-£1,466	61.7%	75.8%
Medicine Rehabilitation and Cardiac	3.3%	11.6%	15.0%	219.0	59.9	£1,150,773	£409,687	68.1%	74.1%
Neurosciences Orthopaedics Trauma and Specialist Surg	3.4%	9.5%	12.6%	262.3	70.0	£1,143,681	£500,299	64.0%	74.0%
Operational Services	5.0%	0.7%	21.9%	7.3	1.0	£24,242	£3,646	59.5%	68.7%
Surgery and Oncology	3.1%	7.9%	14.6%	159.3	84.6	£618,549	£606,950	65.5%	81.4%
Operating Expenses	0.7%		13.1%	0.0	0.0	£0	£0		
Research and Development	1.69%		12.85%	0.8	2.6	£5,973	£12,017	54.5%	48.7%

SECTION A: REVIEW OF PERFORMANCE AND ACHIEVEMENTS IN Q4

REVIEW OF PERFORMANCE

2. Improvements in performance during 2018/19

2.1. There have been a number of improvements delivered during the course of 2018/19. These include:

- **Growth of substantive staff:** A steady increase of over 150 substantive staff in-year.
- **Improved turnover:** Trust turnover has reduced from 14.2% (M12 2017/18) to 13.8% at year-end 2018/19.
- **Increased use of Bank staff:** Successful implementation of 'Bank First' model, leading to 73% of our total bank and agency capacity being bank staff on average during the course of the year.
- **Successful international nurse recruitment campaign:** resulting in over 80 new NMC-registered nurses now working at the Trust, now arriving at a rate of 15 per month.
- **Reduced sickness absence:** reduction to 3.2% from 3.3% in the previous financial year, achieving our goal and remaining low compared to peer and national benchmarks.

3. Substantive Workforce Capacity

3.1. At the end of Q4 the Trust had 155 wte more substantive staff in post than at the start of Q1, and 25 wte more than at the end of Q3. The Trust has done well to increase its substantive staffing within the financial year despite a challenging environment.

3.2. The tables below show how the staff in post (SiP) position has changed month by month during 2018/19, as well as changes in temporary staffing:

Table: Changes in monthly workforce (permanent vs temporary, and by staff group)

	Q1			Q2			Q3			Q4			% change	
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q4	YTD
Budgeted staff (WTE)	11,890	11,981	12,062	12,156	12,187	12,177	12,238	12,240	12,239	12,275	12,276	12,297	0.5%	3.4%
Staff in Post (WTE)	10,981	10,986	10,964	10,927	10,990	11,060	11,138	11,166	11,112	11,169	11,166	11,137	0.2%	1.4%
Bank (WTE)	459	490	506	534	588	549	536	555	532	617.98	625.96	711.2	33.7%	54.9%
Agency (WTE)	149	171	177	182	187	188	239	256	201	257.44	241.46	289.1	43.8%	94.0%
Overtime (WTE)	162	127	125	135	128	132	128	133	132	122	146	141	6.8%	-13.0%
Total staffing (WTE)	11,751	11,774	11,772	11,778	11,893	11,929	12,041	12,110	11,977	12,166	12,179	12,278	2.5%	4.5%
Shortfall (WTE)	139	207	290	378	294	248	197	130	262	109	97	19		
Shortfall (%)	1.2%	1.7%	2.4%	3.1%	2.4%	2.0%	1.6%	1.1%	2.1%	0.9%	0.8%	0.2%		

ESR Staff Group	Q1			Q2			Q3			Q4			% change	
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q4	YTD
Add Prof Scientific and Technical	460	462	455	453	464	448	444	446	444	421	430	431	-2.9%	-6.2%
Clinical Support Staff	1,761	1,776	1,788	1,776	1,794	1,802	1,800	1,829	1,833	1,870	1,868	1,868	1.9%	6.1%
Administrative and Clerical	2,435	2,450	2,450	2,410	2,420	2,428	2,450	2,436	2,429	2,520	2,509	2,510	3.3%	3.1%
Allied Health Professionals	567	564	561	568	572	580	590	587	576	583	581	583	1.2%	2.9%
Estates and Ancillary	180	182	181	219	213	215	216	211	208	147	147	148	-28.5%	-17.6%
Healthcare Scientists	515	511	512	519	526	521	529	529	523	536	533	531	1.4%	3.0%
Medical and Dental	1,757	1,744	1,731	1,722	1,751	1,760	1,760	1,759	1,754	1,750	1,751	1,728	-1.5%	-1.7%
Nursing and Midwifery Registered	3,307	3,298	3,284	3,259	3,250	3,305	3,350	3,370	3,345	3,343	3,345	3,338	-0.2%	0.9%
Grand Total	10,981	10,986	10,964	10,927	10,990	11,060	11,138	11,166	11,112	11,169	11,165	11,136	0.2%	1.4%

Figures include Research and Development. July 18 increase in Estates & Ancillary staff due to recoding between staff groups

- 3.3. The total workforce capacity has also increased, particularly in the last quarter of the financial year, with substantial growth in temporary staff usage in support of the urgent care pathway during the peak winter months as well as extra capacity to deliver against elective care priorities, notably patients waiting more than a year for treatment. In Q3 the average usage per month was 773 wte. In Q4 this rose to 914 wte per month. There was a sharp rise in temporary staffing during March, which is mostly attributable to the need to cover a peak in substantive staff being on leave.
- 3.4. Nursing and midwifery qualified staff have increased by 17 wte from Q3 to Q4 quarters and by 54 wte between the start of Q1 and the end of Q4. However, challenges in our ability to recruit Band 5 nurses are concerning.
- 3.5. The Trust continues to maintain a watching brief over the potential impact of Brexit on our workforce. EU staff numbers for all staff groups will be carefully monitored. Future reports will provide updated information on this cohort of staff.
- 3.6. International nursing recruitment continues to be an integral part of the Trust recruitment strategy with 15 nurses per month now arriving from India and expected to continue at that rate during 2019/20. In addition the SUWON Division plans to recruit 40 surgery nurses from the US during 2019/20. International recruitment combined with reduced turnover levels should increase Band 5 nursing staff in post over the next 12 months.
- 3.7. The Trust's staff turnover level at the end of 2018/19 was 13.8% compared with 14.2% at the end of 2017/18 and a peak of 15.2% in September 2017. Whilst the volume of leavers has decreased, ongoing supply issues continue to influence staff numbers. The NOTSSCaN Division achieved the biggest reduction in staff turnover during the year from 14.0% to 12.6%, as a result of a coordinated set of actions which have been shared with the other divisions, in order to spread best practice.
- 3.8. Vacancies are measured as the difference between the budgeted establishment and the contracted wte in post on the last day of a particular month. As staff in post rises or falls vacancy levels fluctuate. At the end of Q3 there were 936 wte vacancies which equated to 7.9% of budgeted establishment. At the end of Q4 there were 962 wte vacancies, which equated to 8.1% of budgeted establishment. This increase in vacancies has been due primarily to an increase in establishment between quarters.
- 3.9. This financial year has seen a suite of reports that have been made available including a top 10 Clinical Support Units (CSU) list. The Dashboard that is shown in Appendix 1, as well as being sent to HR/divisional teams, can also now be accessed by all staff via the Trust's management information system (Orbit+). The report highlighting the top 10 CSU list will also be made available via Orbit+ during June.

4. Sickness and Absence

- 4.1 The Trust-wide sickness absence rate at the end of Q4 (end of 2018/19 financial year) was 3.2%, in line with the Trust's target of 3.2%, and lower than the 3.3% sickness absence rate at the end of the 2017/18 financial year. This compares well with the average staff sickness absence rate for the NHS in England and Wales (4.3%).

5. Temporary Staffing (Agency and Bank staff)

- 5.1. Spending on temporary staff in 2018/19 was 7.9% of total pay expenditure, which was higher than 2017/18 (6.5%), due to planned schemes to increase staff availability during the winter months to meet demand for urgent and elective care.
- 5.2. Three staff incentive schemes were implemented during the winter months to support the delivery of both urgent and elective care standards, which increased the use of bank and agency spend. These included the Flexible Staffing Pool, the Winter Incentive Scheme (for urgent care) and Waiting List Initiatives (for elective care). These schemes were successful in increasing our staff availability and capacity to deliver patient care, by increasing the number of beds available.
- 5.3. 73% of our bank and agency staffing was supplied through the Bank (managed through NHS Professionals) enabling our own staff to choose to work additional hours. Bank wte fill per month is very dependent on initiatives which are operational at the time and work continues with NHS Professionals to increase recruitment levels across all staff groups in line with the hotspot areas.

6. Non-Medical Annual Appraisal Compliance

- 6.1. At the end of Q4 the compliance rate for the completion of non-medical annual appraisals was 64.5% against a target of 90%. There has been a slight increase in the compliance rate during the last quarter (2.2%), but these rates remain very low.
- 6.2. The table below provides the compliance rates by division/function, showing that CSS has managed to achieve a much higher compliance rate than other divisions, primarily through a structured and disciplined approach to tracking compliance at a detailed level which has been shared with HR Business Partners in the other divisions. Another factor has been that the Society of Radiographers publicised the need for an up to date appraisal for incremental pay increases, which led to an improvement in compliance. It could be expected that the link in the new Agenda for Change pay deal between appraisals and pay increments will have a similar effect across all staff groups. The rate of appraisals is particularly low in the Corporate Division, although it varies markedly by function.

Division/Function	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19
Corporate	57.3%	53.8%	45.2%	38.0%
Neuroscience, Orthopaedics Trauma and Specialist Surgery	67.5%	66.5%	66.0%	64.0%
Medicine, Rehabilitation and Cardiac	52.4%	54.1%	61.7%	68.1%
Surgery and Oncology	63.8%	60.0%	59.2%	65.5%
Clinical Support Services	68.8%	66.2%	73.0%	76.5%
Operational Services	77.0%	66.2%	69.5%	59.5%
Research and Development	50.0%	48.9%	50%	54.5%
Trust Average	61.5%	60.6%	62.3%	64.5%

7. Statutory and Mandatory Training

- 7.1. At the end of Q4, the overall statutory and mandatory training compliance rate was 75.5% against a target of 90, which represents a deterioration of 4.4%.
- 7.2. The deterioration in compliance rate is partly attributable to the introduction of some new mandatory training (e.g., anti-radicalisation training and changes to the safeguarding training), without taking sufficient account of what is appropriate for specific staff groups or the timescales for completion. The process to introduce and manage statutory and mandatory training is being reviewed and will be brought to the Workforce Committee to better manage the introduction of any new modules.
- 7.3. Statutory and mandatory training compliance rates by division throughout the year are shown below.

Division/Function	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19
Clinical Support Services	90.7%	88.3%	85.7%	80.6%
Corporate Services	89.1%	86.4%	85.2	77.8%
Operational Services	80.6%	78.5%	74.4%	68.7%
Neurosciences, Orthopaedics, Trauma and Specialist Surgery	82.6%	82.3%	78.7%	74%
Surgery and Oncology	88.1%	87.3%	85.8%	81.4%
Medicine, Rehabilitation and Cardiac	81.9%	81.1%	78.2%	74.1%
Research and Development	60.8%	55.9%	54.5%	48.7%
Overall Trust Compliance	83.3%	82%	79.9%	75.5%

ACHIEVEMENTS IN Q4

8. Workforce Improvement Plan

- 8.1. The Workforce Improvement Plan (WIP) is the integrated improvement plan developed in response to the NHSI performance undertakings through which we will address the concerns and seek to close the gap between the current position and what was needed to deliver our 2018/19 priorities and leading the workforce programme into 2019/20 and year two of the People Strategy. Workforce remains one of the areas linked to the NHS Improvement Undertakings which is progressing well.
- 8.2. The WIP has ten work streams which are:
- People Strategy (2018/19 priorities)
 - Strategic workforce planning
 - Short-term initiatives
 - Workforce hot spots
 - Nursing, Midwifery, AHPs and Carers
 - Medical Workforce
 - Non-clinical workforce

- Leadership, ownership and capability building
- Governance and performance reporting
- Systems-wide activity

8.3. Progress against the WIP is tracked and reviewed through monthly progress reviews with the senior workforce team and through the bi-monthly Workforce Committee, chaired by the Acting Chief Operating Officer. In 2019/20, the WIP will support the Integrated Improvement Plan and will focus on the priority areas for the Trust. The workforce team will continue to progress initiatives against these ten work streams, and the associated actions contained within the People Strategy.

9. Recruitment

International Recruitment

- 9.1. During Q4 there were 39 nurses from the overseas recruitment campaign that started the OSCE training with the education team. Since the Trust commenced this round of overseas recruitment 82 nurses have now completed and passed the OSCE and are now working as registered nurses in the Trust.
- 9.2. The nursing recruitment team visited India again in Q4 for a further recruitment campaign which included a focus on Band 5 obstetric nurses.

Graduate Recruitment

- 9.3. The Trust continues to hold transition conversations with Brookes Nursing students with the view to offer jobs to an increased number in 2019/20. The Trust held its third 'keeping in touch' day with third year Brookes students in March with a focus on wellbeing, and further transition conversations are planned for 2019/20.
- 9.4. The Trust has applied for eight trainees under the expanded national Graduate Management Trainee Scheme (GMTS); four for general management, two for finance, one for HR and one for analytics. Under the revised scheme there is a requirement for the trainees to be offered placements across the local health system and we are coordinating with both Oxford Health and Oxfordshire CCG to finalise the proposed schedule. We will find out in June how many GMTS trainees we have been allocated.

Recruitment Campaigns and Events

- 9.5. In 2018/19 the Trust held and attended 20 events which is an increased number on previous years. During Q4 the Trust held/attended the following events:
- Oxford Nurse Careers Fair in February, at the John Radcliffe Hospital
 - Oxford Jobs Fair, Town Hall, in March
 - Department for Work and Pensions Event - Spring Into Your Future, in March
 - Apprenticeship open evening at the John Radcliffe Hospital
 - NOTSSCaN Mini-Recruitment day, in January 2019
 - Nursing Associate role and programme, in March 2019
 - Drop in sessions for existing staff for apprenticeship week, in March 2019

- 9.6. Our Oxford Nurse Careers Fair in February was attended by 70 candidates and 25% received job offers by the Trust either on the day or following the event. These offers included theatres, ward based posts and nursing assistant roles and covered our hospitals in Oxford and the Horton General Hospital in Banbury.
- 9.7. The apprenticeship open evening was one of the busiest events with 114 young people registering their interest in working at the Trust.

Recruitment performance

- 9.8. We regularly benchmark the performance of our recruitment function against a cohort of NHS trusts which use the same software platform (TRAC). In Q4 the cohort had grown from 93 to 121 NHS trusts, and OUH was the sixth fastest as judged by the time to recruit for all large trusts (defined as having over 200 candidates), with an average of 23 working days from the date the conditional offer letter is sent to the date pre-employment checks clear. However, our internal target for this metric is 20 days, and our team is now extremely stretched and this is a concern outlined in the next section.

Open Borders

- 9.9. Open Borders is a scheme to aid the retention of Band 5 nurses. It enables nurses to move roles within the Trust without going through a full recruitment process. The scheme was launched in Q3 and since the launch, 11 Band 5 nurses have been supported to move internally.

10. Volunteer Services

- 10.1. Volunteers continue to provide additional help and support to staff which ultimately improves the patient, family and service user experience. It is also worth noting that the role of volunteers is prominent in the new ten year plan for the NHS.
- 10.2. During 2018/19 the service has continued to identify, increase and enhance volunteering opportunities across the Trust including the satellite sites. In Q4 the service recruited 42 volunteers, totalling 131 new recruits during 2018/19. In Q4 the service commenced supporting the following new areas:
- Pharmacy – JR & Churchill Hospital Sites
 - Wantage Maternity Unit
 - Swindon Renal Unit
- 10.3. Since October 2018 the Trust has been working with the Oxford Hub, a student volunteer service, and so far 28 student hub volunteers have started, with another 6 progressing through pre-employment checks. These volunteers have been placed on the Trauma Ward, Level 4, and the Pharmacy department in a range of roles. Further placements will be to the Transfer Lounge. It is thought that this could be scaled up to around 100 volunteers.
- 10.4. The volunteer services marketing/recruitment brochure entitled Your Guide to Volunteering 2018/19 has proved to be a useful information toolkit. The toolkit is available for applicants to view online and is also displayed in all public areas across the Trust. This will be updated for 2019/20.
- 10.5. 2018/19, the total amount of money raised by the Volunteer Bookstall from the weekly sale of books was a fantastic sum of just over £21,000. A lot of this money

goes towards purchasing equipment to benefit patients with the recent purchase of a new reminiscence computer at the cost of £7,794 for the Trauma Ward for use with patients who have dementia.

10.6. Planning is underway for Volunteers Week (1-7 June) which is a national celebration to thank volunteers for their contribution. In 2019/20 the Trust will be hosting Summer Strawberry Cream Tea Parties both in Oxford and at the Horton General Hospital in Banbury during the week.

11. Work Experience

11.1. In Q4 the Trust hosted 92 work experience placements, a total of 464 placements were supported throughout 2018/19. The summer programme titled 'An Introduction to the NHS' was again oversubscribed so the team is looking to provide an autumn programme in 2019/20.

11.2. Marketing for work experience has increased with newly designed intranet and internet pages, marketing materials and an event pull-up banner. The Trust continues to have gold accreditation with Fair Train, outlining our high quality provision of work experience placements.

12. Retire and Return Scheme

12.1. The NHS 'retire and return' scheme aims to enable the NHS to retain valuable skills, knowledge and experience to deliver safe patient care whilst also helping support older staff as they approach retirement and wish to continue working, and to do so cost effectively where it provides value for money.

12.2. The number of staff retiring and returning to the Trust continues to increase, demonstrating this is a valuable scheme, supporting the Trust's recruitment and retention strategy. This has been cited as an important factor in improving retention within the NOTSSCaN division.

12.3. During 2018/19, 35 employees retired, claimed their NHS Pension and returned to the Trust, some working in the same role, on the same or reduced hours, or returned to another area of the Trust. Planning ahead, a further 19 employees have opted to retire and return between April and September 2019 and a number of other employees are currently considering their retirement options with a view to doing the same.

12.4. In 2019/20 a retire and return roadshow is planned, aligning to the refresh of the Retire and Return Procedure.

13. Medical Staffing

13.1. During Q4 the medical staffing recruitment team moved to a new model of working which allows the team to focus on the individual stages of recruitment, this has proven to be a success resulting in positive feedback from the divisions.

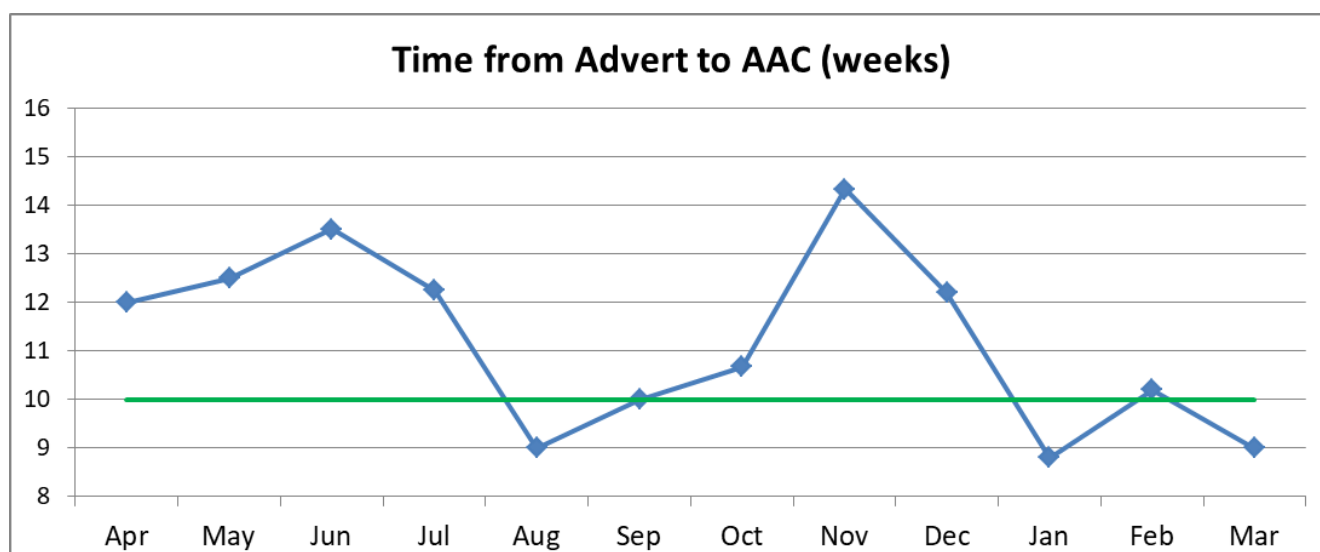
13.2. The Emergency Department have worked with medical staffing and the Oxford Medical Illustrations team to develop and promote three attractive fellowship roles. In November the Emergency Department team flew to India to promote these roles. The trip was a success as the Trust has made eight offers and each candidate has a planned Q1/Q2 2019/20 commencement date, dependent on visas.

13.3. As a new initiative, Health Education Thames Valley arranged a 'Foundation Year 1 (FY1) Welcome Event' which the medical staffing team, current FY2s and some of

the consultant body attended to promote the Trust. The event gave the Trust an opportunity to speak to the doctors who have applied for the FY1 programme to encourage them to take placements in Oxford.

Consultant Recruitment

13.4. In 2018/19 the Trust held 39 Advisory Appointment Committees (AAC's), appointing 49 Consultants. In early 2018/19 the number of available AACs was impacted by panel availability requiring the Trust to introduce new measures to improve KPI compliance (10 weeks from date of advert to the date of the AAC), following the introduction of these measures, the only AACs to fall outside of the 10 week KPI are those that have been requested by the division. The graph below demonstrates the improvement in KPI performance during Q4.



Local Clinical Excellence Awards

13.5. In Q4 the Trust held the 2018 Local Clinical Excellence Award round, which recognise and reward NHS consultants who perform over and above the standard expected of all aspects of their role; clinical care, teaching, research and leadership. Awards were made to 173 consultants, and it was inspiring to see such a high calibre of applications.

Doctors in Training (DiT) Streamlining project

13.6. We are participating in a national 'Streamlining' project intended to make it easier for doctors in training to move between NHS hospitals by reducing the need to repeat various checks each time (e.g., previous NHS service, pay protection and statutory training details). This has already helped to reduce the volume of information requested from the doctors, and the workload for our staff. Further work remains to be done to create an interface between the system which we use to track our training information (ELMS) with the Electronic Staff Record (ESR). A solution is being developed with the system providers and should be in place for the August junior doctors change-over.

14. Workforce Planning

14.1. Workforce planning is a core theme in our three year People Strategy, our Workforce Improvement Plan and our strategic Trust objective of 'Building Capability.'

- 14.2. For 2019/20, a revised methodology was introduced, incorporating close integration with the business planning process and bottom-up, directorate-level planning. There remain substantial local and national constraints on our ability to recruit and retain staff, including: high cost of living and low local unemployment in Oxford; substantial national supply shortages in key clinical areas; the impact of national policies including EU exit; the removal of bursaries; and a need for the Trust to improve our levels of employee engagement, appraisal and statutory and mandatory training.
- 14.3. Our 2019/20 workforce plan is based on analysis of our workforce forecasts, on the expected activity for 2019/20, as well as the key challenges, measures to mitigate these and the ongoing risks to activity of our workforce constraints. This year's plans have been developed at directorate-level with a view to aligning activity, workforce and finance information.
- 14.4. Our workforce plan for 2019/20 is ambitious with a proposed increase in substantive staff of 4.41%, which will be partially offset by a corresponding reduction in temporary staff of around 2%, leading to a net increase of 2.3%.
- 14.5. The main elements of our workforce plan are:
- **Increasing our substantive staff;** by reducing our staff turnover by a further 1%, as well as a specific focus on international nurse recruitment, growing our nursing associates and apprentices, improved productivity and a reduction in bank and agency.
 - **Expanding international nurse recruitment;** with c. 180 nurses expected to join us in-year (+1.9%).
 - **'Growing our own' staff;** e.g., by doubling the number of apprenticeships (+0.9%); recruiting a further 100 nursing associates; career development pathways and accredited programmes; higher conversion rates for nursing students; skill mix reviews; introduction of new or extended workforce transformation posts; upskilling and retraining.
 - **'Hotspots';** continuing to identify and target focused activity on workforce hotspots i.e., areas and staff groups with particularly high turnover and vacancy rates.
 - **Recruitment;** continued recruitment campaigns and open days; rolling advertisements; return to practice; incentive schemes; targeted pay premia.
 - **Retention;** fast and effective action on sickness, disciplinary, bullying and harassment; greater use of mediation; 'stay interviews'; improved 'new joiners' welcome; new starter reviews (at 1, 3 and 9 months); retire and return campaigns; team development using the *Affina Team Journey*.
 - **STP-wide planning;** working with other NHS organisations on joint initiatives e.g., recruitment.
 - **Service improvements;** introducing new and improved models of care driven by capacity, technology, innovative treatments and workforce constraints e.g., nurse-led clinics; dictation software to improve productivity in clinic planning and provision.
 - **Integration of flexible staffing into workforce planning;** delivered through our highly successful 'Bank First' approach and Flexible Staffing Pool.

15. Agenda for Change (AfC) Pay Deal

- 15.1. The newly formed project board met on 9 April 2019 to review progress with the implementation of the new national 3-year pay deal, as we begin the second year of the process.
- 15.2. The key actions and timelines are in two phases:
- **Phase 1;** focuses on the removal of the Band 1 pay grade and transition to Band 2 for those staff affected - Refuse Porters, Linen Room Assistants, and Catering staff (Horton only). Work is in hand to communicate with these staff individually and begin a 30 day consultation period, with the transition to be concluded in June. Adjustments will be backdated to April 2019.
 - **Phase 2;** begins with the removal of the auto-increment function on ESR for new starters and internal promotions, with effect 1 April 2019. By April 2021, grade step progressions and pay journeys for all staff will depend on evidence of a completed appraisal and compliance with statutory and mandatory training.
- 15.3. The main focus of the project board is to ensure the Trust has undertaken all steps necessary to ensure the pay deal is delivered in a timely fashion, and give assurance regarding exceptions to process. The project board is supported and informed by the AfC pay deal working group and will deliver changes in accordance with national guidance and that meet the requirements of the Trust.

16. Exit Survey

- 16.1. In Q4 the resourcing team re-launched the exit survey following a review of the questions and how the survey is issued to staff that are leaving the Trust. Previously the survey was not sent to staff and was only available on the intranet. The survey is now sent direct to staff leaving the Trust with a personalised email asking them to reconsider, directing them to their HR team to discuss their options. The re-launch has already seen an increase from 15 respondents a month to 46 a month (167% increase), the data will be reviewed periodically at Workforce Committee and the Nursing and Midwifery Recruitment, Retention and Education (NMRRE) steering group to help formulate the Trust's retention action plans.

17. Staff Survey - Sharing the Survey Results through Listening Events

- 17.1. Trust-wide listening events for staff, across all five main OUH sites branded as 'Changing Things for the Better' were held towards the end of Q4. The events were prepared by the organisational development team working closely with the communications team, and were facilitated by members of the executive team. We also invited Oxford Hospital Charity to promote their Small Grants Fund that will help to 'Change Things for the Better' and gave examples of the kind of projects already funded, as well as details on how to apply for further funding.
- 17.2. Trust-wide, we will continue to focus on six themes that emerged following the 2017 Staff Survey as they remain a priority:
- Recognising and valuing each other
 - Supporting and developing managers
 - Empowering teams
 - Dignity, respect and fairness

- Meaningful appraisals
- Health and wellbeing at work

17.3. Following these events a programme of directorate-specific events are being held within the divisions to share the directorate-level results with teams, invite them to consider the results, reflect on what was going well and what might be needed in terms of focused actions to 'Change Things for the Better'.

17.4. A summary of key themes and actions plans following the directorate events will be provided to the Board to review outcomes and consider implications for future events.

18. Corporate Induction

18.1. Corporate induction – or 'New Joiners' Welcome – takes place every Monday and is an important opportunity to create a positive first impression with new joiners, roughly half of whom have never worked in the NHS before.

18.2. In the early part of 2018/19, the design and flow of the day was redesigned. Key changes made were; ensuring an Executive Director is present to welcome new starters, improving the information pack, rationalising the content and improving the logistics of the 'signing in' process. Refreshments and lunch on the first day were also included. Oxford Hospitals Charity supports these changes with some funding and are glad to see that recent changes have made a big difference in the welcoming of new joiners to the Trust.

18.3. The changes have evaluated well with feedback scores for the various sessions gathered on the day through Mentimeter typically falling in the range 7-8 out of 10. However, there is further room for improvement and the action group is in the process of reviewing the feedback to identify further changes.

19. Policies and Procedures

19.1. The ongoing timetable of reviewing HR policies and procedures to ensure they remain legally compliant, reflect best practice and meet the needs of the Trust continued in 2018/19 with eight HR policies/procedures ratified by Workforce Committee. Of these, six were reviews of existing policies/procedures and two were new procedures developed in response to organisational need.

19.2. The six procedures reviewed and ratified during 2018/19 were:

- Equality Impact Assessment Procedure
- Fit and Proper Persons Policy
- Staff Accommodation Policy
- Freedom to Speak Up – Raising Concerns (Whistleblowing) Policy
- Temporary Staffing Booking Procedure
- Non-Employee Payment Procedure

19.3. The two procedures developed and ratified during 2018/19 were:

- Adult Apprenticeship Procedure
- Young Apprenticeship Procedure

19.4. As of 31 March 2019, 33 HR policies/procedures (57%) were in date, with a further 25 policies/procedures at varying stages of the review cycle (from first review by the author to awaiting ratification by the relevant committee) with a view to ensuring that all policies are brought up to date over the coming months.

19.5. Work to increase the number of HR policies/procedures in date is ongoing and includes:

- A reminder to the policy/procedure author three months before the review date that their policy/procedure will be due for review to enable them to factor this into their diary.
- Regular follow ups with policy/procedure authors to check on the progress of their review(s).
- Regular discussions with the Director of Workforce regarding overdue policies/procedures, including the Director of Workforce following up with the policy/procedure author.
- Reporting to the Workforce Committee regarding the number of policies/procedures due for review and progress of the reviews.
- Where appropriate, the combining of related policies/procedures to reduce the overall number of policies e.g., incorporating the Buying and Selling of Annual Leave Procedure into the Annual Leave Procedure.
- A review of non-workforce policies/procedures that currently fall under the remit of the Workforce Directorate, to consider which directorate is the most appropriate location for the policy.

20. Equality, Diversity and Inclusion

20.1. The Trust has undertaken a number of actions to advance equality, diversity and inclusion (EDI) and to help work towards the Trust's EDI Objectives 2016-2020. This work has included reporting as part of the Trust's statutory requirements: gender pay gap reporting; the workforce race equality standard (WRES); and requirements under the Public Sector Equality Duty (PSED). For each of these requirements, gaps within the Trust have been analysed and actions to address any gaps have been developed and incorporated into the Trust's EDI Action Plan.

20.2. Key Activities undertaken in the financial year 2018/19 include:

- **Employment for All**; the Trust became a pilot site for the Employment for All Programme developed by NHS Employers. This training programme is designed to support managers to recruit more inclusively. Uptake of the training has been good, with feedback demonstrating it is having a positive impact on recruitment practice.
- **Workforce Disability Equality Standard (WDES)**; the Trust successfully piloted the WDES prior to its full implementation in Summer 2019. Christine Rivers, the National WDES Implementation Lead stated she was impressed with the Trust's performance and is using the WDES report as an example of best practice. Disabled staff were engaged in the identification of barriers to their experience and an action plan was developed as a result.

- **Equality Monitoring;** communications about improving equality monitoring within the Trust have begun to circulate to highlight the importance of monitoring and what the information is used for. This is an ongoing action.
- **Respect and Dignity Ambassadors;** further recruitment for Respect and Dignity Ambassadors was undertaken, bringing the total number to ten and helping ensure that a number of staff groups and Trust sites are represented.

20.3. In addition to these actions, a number of events were held in 2018/19 to embrace diversity within the Trust. These included:

- **Eid;** the Trust held its annual Eid party to celebrate Eid and raise awareness of Islam.
- **Black History Month;** an event was organised with a talk about Mary Seacole. The event also included a black history quiz.
- **International Disability Awareness Day;** stalls were held in the Trust to promote different support available for disabled people within the local area. Local organisations such as Restore and Headway were involved.
- **LGBT+ History Month;** a series of communications were circulated providing information on the issues LGBT+ people face and the contributions notable figures have made to society.
- **International Women's Day;** a well-attended event was held to celebrate this day which included a confidence workshop and a talk on Leadership from a local businesswoman who has built up a successful business in construction, which is a traditionally male-dominated sector.

21. Governance

Workforce Committee

21.1. In 2018/19, the Terms of Reference for the Workforce Committee were reviewed and the business of the committee changed to ensure divisional KPI compliance was being reviewed along with topical matters that were being escalated to Trust Management Executive (TME). The Chair of the Committee is now the Interim Chief Operating Officer, to ensure that the agenda is focused on supporting the operational needs of the divisions. Future papers for TME will need to be considered by Workforce Committee before they can proceed, strengthening the governance arrangements and the sharing of knowledge across the divisions.

Workforce Improvement Plan

21.2. Regular progress reviews have been put in place to track the implementation of the Workforce Improvement Plan and the key actions from the People Strategy. These are chaired by the Director of Improvement and Culture, and attended by the sponsoring Non-Executive Director, interim Director of Workforce, and the HR business partners from all divisions, as well as the Trust Project Management Office. It is proposed that these should continue regardless of the status of the NHSI performance undertakings as a forum for accountability, problem-solving and sharing

good practice across divisions (e.g., improvements in turnover in NOTSSCaN and improvements in appraisal compliance in CSS).

SECTION B: AREAS OF CONCERN

22. Non-medical appraisals and statutory and mandatory training

- 22.1. The implementation of Values-based Appraisals (VBAs) continues and 514 appraisers have now been trained in how to use the new format, and how to ensure that the appraisal conversation is as valuable as possible for staff. The feedback from these sessions has been uniformly positive. According to ELMS, we have roughly 2,500 appraisers so around 20% have been trained so far and a Train-the-Trainer approach has been adopted so that we now have 12 trainers across all divisions. These trainers have been asked to track progress centrally. For example, NOTSSCaN will offer a further 160 places in 2019 and SUWON have arranged training for a further 102 appraisers
- 22.2. It is recognised that the current electronic learning management system (ELMS) which records the appraisal rate is not user friendly. For example, we are not able to track the proportion of appraisals which have been carried out using the VBA format. Therefore the contract for the current system has been extended for a further 12 months whilst the Trust conducts a full scoping exercise to develop a comprehensive specification of requirements and conduct a procurement exercise to find a system which is easy to use and appeals to all stakeholders. It is anticipated that the new system will be procured in Q2.
- 22.3. The demands on line managers' time, especially during the winter months and the latter part of 2018/19, have made it difficult to find the time to carry out appraisals, especially where there are high vacancy levels within teams and departments. Divisions are looking at ways to mitigate this by planning appraisals during periods of the year when the demands on managers are not as severe, and also introducing simpler versions of the VBA template.
- 22.4. As described in section A, compliance with statutory and mandatory training has also deteriorated during the course of the year. A sharper decline in recent months is partly attributable to the introduction of some new mandatory training (e.g., anti-radicalisation training and changes to the safeguarding training) without taking sufficient account of what is appropriate for specific staff groups or the timescales for completion. The process to introduce and manage statutory and mandatory training is being reviewed and will be brought to the Workforce Committee to better manage the introduction of any new modules.

23. Recruitment performance and capacity

- 23.1. The key performance indicators (KPI's) which recruitment use to track the effectiveness and responsiveness of our recruitment process are:
- **10 weeks;** from the date the advertisement is placed to a start date being agreed with the candidate.
 - **20 days;** from the date the conditional offer letter is sent to the date pre-employment checks clear.
- 23.2. Q4 has seen a deterioration in performance against these two KPIs, particularly in NOTSSCaN and CSS divisions. Discussions are taking place with the recruitment managers and further analysis has been conducted to identify the top reasons for

recruitment delays. In Q1 2019/20 the recruitment team has planned an improvement event to review processes and identify areas to streamline processes and improve partnership working.

Division	Number of Candidates	20 Day	10 Week
Corporate	27	78%	56%
MRC	32	50%	53%
NOTSSCaN	43	33%	42%
CSS	25	28%	20%
SUWON	51	57%	65%

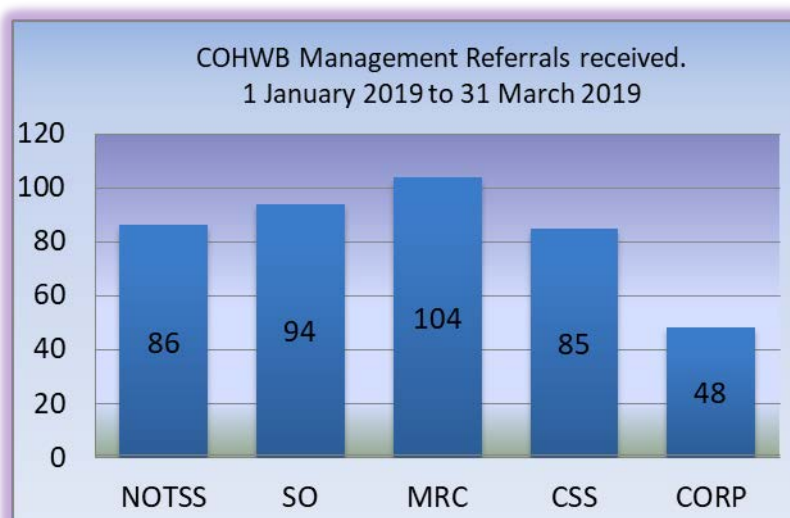
23.3. The top delays in recruitment are analysed routinely in order to address the root causes. The top three delays in Q4 were: COHWB checks; manager delays (shortlisting/interview outcome delays); and delays in vacancy control forms.

23.4. Recruitment Manager Training was launched in 2018/19 and includes a session on inclusive recruitment. The training has continued to run throughout Q4 across the Trust with around 50 managers trained. Following very positive feedback at the monthly Staff Briefing session and from the evaluations, the training will continue to be delivered throughout 2019/20.

23.5. Benchmarking (provided by the NHS Institute's Model Hospital tool) indicates that our recruitment team is very small relative to our peers, with 1.4 recruiters per £100m of turnover (i.e., 14 wte) compared to most Shelford Group Trusts, which are in the range 1.7-2.3 per £100m. This implies that we are 5-6 recruiters short of the capacity needed for a trust of our size and complexity. At present the recruitment team are processing 700 candidates which is affecting the achievement of the recruitment KPI's. Each team member is responsible for processing 70-75 candidates which is excessive. We propose to increase the size of the team by adding two recruiters.

24. Centre of Occupational Health and Wellbeing (COHWB)

24.1. During Q4 the number of staff referred to COHWB by managers was 417. The table below shows the number of management referrals received by division in Q4.



- 24.2. During Q4, 126 members of staff were seen for mental health issues including diagnosed mental health conditions plus personal and work-related stress symptoms. The growing trend for this type of referral is a concern both locally and nationally.
- 24.3. Mental health workshops continue, as part of the ongoing programme, offered in house, during this quarter 336 staff members attended. Resilience sessions have currently been suspended due to low uptake with the main reason for cancellation being capacity issues in clinical settings.
- 24.4. In Q4, nursing staff from COHWB and four divisional nursing colleagues attended Mental Health First Aid training aimed at improving the understanding of factors affecting mental health, providing a better understanding of signs and symptoms for a range of mental health conditions and in particular understanding the mental health first aid measures to consider for someone experiencing a mental health crisis. Further work is being undertaken with regard to this as part of the wider Mental Health Framework.
- 24.5. The following is a summary of mental health initiatives and activities which we have taken:
- Stress management courses
 - Line management training in “creating a mentally healthy workplace”
 - Mindfulness courses x 3 per year
 - Resilience training within teams
 - Induction session on raising awareness of mental health and emotional well-being *start well stay well* sessions
 - COHWB has been working as part of a sleep and rest group exploring to find ways to improve staff rest and sleep options
 - Employee Assistance Programme.-Which provides fast access to counselling and support
 - Launched and promoted the *Think, Pause, Recharge* campaign to encourage staff to take breaks
- 24.6. The final annual data for staff accessing the Employee Assistance Programme counselling was as follows:
- 330 members of staff accessed face to face counselling
 - 42 members of staff received structured telephone counselling
 - 124 members of staff received a “one off” clinical call with issues being resolved without the need for ongoing input
 - 6 members of staff received video counselling
 - 8 members of staff accessed computer-based CBT
- 24.7. In 2018/19 112 members of staff were seen for musculo-skeletal (MSK) issues with some receiving advice only. 168 employees received physiotherapy treatment within the COHWB during this period. Many of the MSK referrals are now received via self-referral but currently no comparable data is available.

- 24.8. Display Screen Equipment online training has been added to the mandatory training matrix for the Trust and an increasing number of staff are now complying with legislation by receiving risk awareness training and completing self-assessments. This has of course created a demand for advice by line managers following the e-learning which will be monitored going forward.
- 24.9. The final figure for the 2018/19 flu programme was 67% for frontline staff. This is an 8% decrease in uptake from the previous year's programme. The target set for 2019/20 is 80% of frontline staff and a working party is being set up to address the issues/challenges identified from this year's programme.

25. Employee Relations Tracker

- 25.1. Despite work being done to bring the Employee Relations Tracker up to date to reflect all of the employee relations cases occurring across the Trust, this is still not done consistently across the Trust. This represents a key risk, and also has an impact on our ability to report against the Workforce Race Equality Standard (WRES) data and carry out Equality Impact Assessments. Work has already commenced with the provider of the tool to refresh the content of the Employee Relations tracker and training will be provided to the human resources teams in Q1 2019/20. It is expected that the tracker will be updated and fully live by Q2 2019/20.

SECTION C: KEY ACTIVITIES FOR 2019/20

26. Culture and Leadership

- 26.1. The Board has agreed to a programme to improve staff culture and leadership, based on an approach and set of tools developed by the NHS Leadership Academy which is now part of NHS Improvement. The programme begins with the 'Discover' phase, which is expected to last 3-6 months, and will be led by an internal Change Team of 10-15 people with some target expert support from an external OD expert. Progress will be overseen by a steering committee of six Board members, chaired by the Trust Chair and including the Chief Executive. The Board will receive an interim report at the July Board meeting.
- 26.2. Following a successful kick-off briefing meeting held at the end of March, there will be a training day for the Change Team on 9 May to go through the six diagnostic tools which form the basis of the Discover phase. We have also decided to carry out a 'stock take' of our many existing interventions on culture and leadership (e.g., Values-Based Interviews, various training programmes etc.) to check that they are coherent with each other and the direction we agree to take after the Discover phase.
- 26.3. We will also link the culture and leadership review with the OUH Strategy refresh given the need to ensure alignment, and based on a strong theme in the feedback at the Strategy Away Day on 24 April that culture should feature more prominently and more explicitly in the refreshed strategy.

27. Homeward Event – 1 June 2019

- 27.1. In response to staff survey and exit survey data, on 1 June the Trust will be hosting an event called Homeward which aims to put healthcare professionals in touch with Oxfordshire's property professionals. The event is a joint event with Oxford Health and South Central Ambulance Service. At the event staff from all three organisations can meet developers, estate agents, housing associations, mortgage/help to buy advisers, Age UK and the Oxfordshire City Council to discuss housing options.

28. Equality Diversity and Inclusion

28.1. In the forthcoming 12 months, the Trust will continue to meet its statutory reporting requirements and develop the Trust's EDI action plan as a result of this. Key actions that will be undertaken in 2019/20 include:

- Continued promotion of equality monitoring.
- Strengthening Staff Networks, empowering staff to identify and drive change relating to EDI.
- Implementation of Disability Passports, supporting managers and disabled staff to have meaningful conversations about reasonable adjustments in the workplace.
- Implementation of Cultural Ambassadors Scheme, ensuring that Trust disciplinary processes do not disproportionately impact BME staff.
- Improving the gender pay gap in Clinical Excellence Awards.
- Preparation for the Equality Delivery System process and renewal of the Trust's EDI Objectives.

28.2. The intention is to ensure that various strands of the EDI agenda are included within the scope of the Trust-wide culture and leadership review, given that many of the issues and action require the engagement of all staff and improvements made will benefit all staff.

29. Trust Doctor Terms and Conditions of Service

29.1. The 2016 Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) came into effect in August 2016 after NHS employers and the British Medical Association (BMA) stated the 2002 Terms and Conditions of Service for Medical and Dental Staff were no longer fit for purpose. It is stated by NHS Employers that the 2016 Terms and Conditions of service are not intended to apply to any doctor or dentist not in an approved training programme therefore in Q4 a paper was submitted to TME which proposes new Trust Terms and Conditions of Service. Following a consultation with stakeholders, a further paper is due to TME and the Local Negotiating Committee in Q1 2019/20 with the aim of implementation towards the end of 2019.

30. Coaching and Mentoring

30.1. In Q4, qualified coaches and mentors were asked to come forward to join a register so the Trust can provide qualified coaches and mentors for staff. Eight staff registered as a coach/mentor and a number of employees expressed an interest in becoming a coach/mentor. An application has been made to the Oxford Hospitals Charity small grants fund for funding to run accredited coaching and mentoring courses.

31. Leadership Talks

31.1. The series of Leadership talks open to all staff has been well received so far with the first talk by Megan Reitz being given on 'Speaking Truth to Power' and the second by ex-Trust Chairman Dame Fiona Caldicott reflecting on her career and experiences as a leader. The next talk is scheduled for 29 May and will be given by Jane Gunn, an experienced mediator, on 'The Magic of Conflict'. Jane will also run a mediation workshop for a group of staff on the same day.

32. Staff Recognition Awards 2019

- 32.1. Planning for the Staff Recognition Awards 2019 is underway.
- 32.2. The first Sponsor Group has been held to consider key decisions such as the date, venue for the Trust-wide Staff Recognition Awards ceremony and the nominations. There will be three further Sponsor Group meetings scheduled this year prior to the event, chaired by Paula Hay-Plumb, Non-Executive Director.
- 32.3. The awards ceremony will take place on Wednesday 4 December at the Town Hall in Oxford. Nominations will be welcomed for a six week period from Monday 3 June to Friday 12 July. Most categories are for staff to make nominations, and there will also be a Patients' Choice category for patients and relatives to nominate staff.
- 32.4. As in previous years, each division will host an event to recognise those members of staff who were nominated in each of the Award categories, to personally thank them for their contribution. Divisional awards ceremonies will take place in November in advance of the Trust-wide awards ceremony in December.

John Drew
Director of Improvement and Culture
May 2019

Appendix 1 – Key workforce metrics by division and by directorate

Clinical Support Services	2.6%	5.0%	12.2%	40.6	49.7	£214,901	£339,818	77%	80.6%
Directorate	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Clinical Support Services Division Management	4.4%	15.1%	6.4%	0.0	2.8	£0	£30,589	42.9%	86.0%
Pathology and Laboratories	2.3%	-4.3%	12.6%	0.1	6.0	£1,017	£21,575	77.7%	80.9%
Pharmacy	3.4%	2.3%	10.6%	1.7	7.2	£5,252	£48,484	61.9%	74.4%
Radiology Imaging	2.3%	8.6%	9.8%	12.8	28.2	£86,052	£204,711	79.3%	84.0%
Critical Care Anaesthetics PreOperative Assessment Pai	2.8%	12.0%	16.3%	26.0	5.6	£122,580	£34,460	84.3%	79.5%

Medicine Rehabilitation and Cardiac	3.3%	11.6%	15.0%	219.0	59.9	£1,150,773	£409,687	68%	74.1%
Directorate	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Acute Medicine and Rehabilitation	3.5%	13.5%	15.3%	140.3	29.9	£725,211	£211,672	65.2%	74.3%
Cardiology Cardiac and Thoracic Surgery	3.2%	10.4%	16.0%	55.8	19.4	£333,727	£165,948	74.0%	79.7%
Medicine Rehabilitation and Cardiac Division Management	0.3%	-1.6%	12.6%	0.0	0.0	£0	£0	38.9%	74.8%
Specialist Medicine	3.2%	6.2%	12.7%	23.0	10.5	£91,835	£32,066	68.9%	68.0%

Neurosciences Orthopaedics Trauma and Specialist Surg	3.4%	9.5%	12.6%	262.3	70.0	£1,143,681	£500,299	64%	74.0%
Directorate	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Childrens	3.2%	3.2%	11.6%	48.0	0.1	£203,332	£263	59.2%	72.2%
Neurosciences	3.0%	16.1%	10.0%	62.3	10.8	£286,536	£94,202	72.2%	69.1%
Neurosciences Orthopaedics Trauma Spec Surg Division	2.8%	-7.5%	7.6%	0.0	2.1	£1,123	£12,538	51.9%	76.1%
Specialist Surgery	3.1%	9.4%	12.4%	53.9	9.9	£241,688	£76,415	51.9%	68.4%
Orthopaedics	3.7%	11.7%	13.1%	52.2	38.8	£213,754	£271,888	71.4%	81.1%
JR and WW Theatres	4.4%	12.9%	18.7%	45.9	8.3	£197,248	£44,993	57.1%	85.8%

Surgery and Oncology	3.1%	7.9%	14.6%	159.3	84.6	£618,549	£606,950	66%	81.4%
Directorate	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
Gynaecology	3.8%	13.3%	15.5%	19.1	6.4	£37,964	£40,940	79.9%	86.4%
Gastroenterology Endoscopy and Churchill Theatres	4.4%	10.0%	13.6%	46.8	17.3	£178,176	£95,536	59.1%	81.4%
Oncology	2.7%	-0.5%	15.0%	27.7	15.9	£118,064	£99,673	65.1%	78.3%
Renal	2.4%	11.0%	13.0%	23.9	4.0	£86,611	£26,721	75.3%	83.5%
Surgery	2.3%	18.9%	17.8%	31.4	36.6	£120,850	£269,383	68.8%	81.8%
Surgery and Oncology Division Management	1.3%	-28.6%	14.0%	0.8	1.0	£5,029	£7,946	56.5%	87.4%
Maternity	3.9%	5.8%	14.2%	9.5	3.3	£71,855	£66,751	53.2%	82.3%

Corporate	3.0%	-3.7%	12.6%	21.4	21.2	£143,414	£175,164	38%	77.8%
Directorate	Sickness	Vacancy	Turnover	Bank WTE	Agency WTE	Bank Spend	Agency Spend	Appraisals	Stat Mand
AHSN	2.3%	38.9%	21.3%	0.4	0.0	£19,564	£-7,115	26.7%	60.9%
Assurance Directorate	4.0%	-0.4%	13.0%	1.3	3.1	£3,434	£37,729	38.9%	79.1%
Central Trust Services	0.1%	0.7%	43.6%	0.3	4.1	£4,336	£89,859	0.0%	48.6%
Communications	2.1%	-18.8%	4.5%	0.0	0.0	£-1	£0	9.5%	79.1%
Finance and Procurement	2.6%	-3.9%	8.9%	4.0	9.3	£54,383	£33,975	36.6%	76.5%
Human Resources and Admin	2.1%	-13.2%	17.6%	2.2	4.2	£17,796	£18,857	58.2%	75.8%
Medical Director	1.3%	10.9%	5.2%	0.0	0.5	£0	£2,048	47.7%	80.8%
Planning	4.1%	-1.1%	6.6%	0.4	0.0	£1,470	£0	63.6%	85.8%
Chief Nurse Patient Services and Education	3.7%	-9.1%	16.2%	8.0	0.0	£19,872	£-147	33.0%	75.0%
OHIS Telecoms and Med Records	3.5%	-12.6%	11.5%	5.0	0.1	£22,561	£-42	29.8%	82.2%
Improvement and Culture	1.21%	11.37%	32.71%	0.0	0.0	£0	£0	22.2%	66.4%