Royal United Hospital Bath NHS

NHS Trust

Report to:	PublicTrust Board	Agenda item:	10
Date of Meeting:	26 June 2013		

Title of Report:	Quarterly Workforce Strategy Update – 2013/14
Status:	For Information
Board Sponsor:	Lynn Vaughan, Director of Human Resources
Author:	Sue Smith, Deputy Director of Human Resources
Appendices:	1: Quarterly Workforce Strategy Update – 2013/14
	2: HR Scorecards (Trust, Surgery, Medicine, Corporate & Facilities)

1.	Purpose of Report (Including link to objectives)

To highlight and describe progress against the main workforce related priorities for the Trust, as outlined within the Workforce Strategy, for this financial year.

2.	Summary of Key Issues for Discussion

- The Workforce Strategy, associated policies, people management training, and KPI monitoring, provide an excellent framework within which to manage workforce issues;

- Over 200 people attended the Nurse Recruitment open Day on 8th June: as well as offering an opportunity to gain career advice and learn more about the Trust, interviews were also held on the day for both Registered Nurses and Healthcare Support Workers;

- A consultation is underway to explore the potential benefits of introducing the HR Business Partner model into the Trust. Feedback from the consultation will be taking place on 25th June 2013;

- Whilst overall performance against key performance indicators in the areas of appraisal and turnover remain on track, issues underpinning sickness in Surgery and Facilities mean that sickness overall currently sits at 3.7%, on trajectory to hit 4.1% against a year-end target of 3.2%;

- Achievement of harmonisation of on-call payments remains problematic and opportunities to achieve the QIPP terms and conditions savings now need to be pinned down but may have employee relations consequences.

3.	Recommendations (Note, Approve, Discuss etc.)

Trust Board is asked to note the report, provide a steer where appropriate and be satisfied that the priorities and actions being taken are both appropriate and necessary to support the Trust in delivering its service objectives.

4.	Care Quality Commission Regulations (which apply)

Outcomes 12,13 and 14

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5.	Legal / Regulatory Implications / NHS Constitution (NHSLA / ALE etc.)
NHSLA standards 1, 2, 3,5,	

6.	Risk (Threats or opportunities link to risk on register etc.)
Ensure a workforce is in place to deliver a safe service that is fit for purpose. Details of risks and mitigating actions are monitored through Strategic Workforce Committee.	

7.	NHS Constitution
3a. Staff – your rights and NHS pledges to you,	
3b. Staff – your responsibilities, and NHS values.	

8.	Resources Implications (Financial / staffing)
HR and Finance resources to model and cost creative solutions and negotiate difficult change.	

9.	Equality and Diversity
This strategy supports equitable opportunities for staff across the trust.	

10.	Communication
Work programmes impacting on staff can be communicated widely.	

11.	References to previous reports
Management Board – Workforce Strategy Quarterly Update (March 2013)	
Trust Board – Equality Objectives paper 2013/14 (March 2013)	

12.	Freedom of Information
Public.	

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Workforce Strategy Update – Quarter One

1. Introduction

1.1 The purpose of this report is to highlight progress within quarter one against the main workforce related priorities for the Trust that have been identified and agreed within the Workforce Strategy for 2013/14.

1.2 This report also provides an opportunity to review progress against key performance indicators within the Workforce Strategy, which serve to identify any emerging issues or risks in relation to the key workforce themes which have the potential to impact on our ability to deliver operational services.

2 Background

2.1 Staff are the Trust's most valuable resources, both in terms of the contribution that they make to the delivery and quality of patient care but also in terms of financial investment. As such, the effective management of staff should be the highest priority for all managers and supervisors.

2.2 Through the Workforce Strategy, the Trust Board explicitly directs that all staff should be managed in line with the pledges to staff laid down in the NHS Constitution, Trust values and the RESPECT behaviours. Trust Board members are expected to role model these behaviours and values and personally uphold the pledges.

3 Workforce Aims and Objectives

Current performance against KPIs: A detailed HR Scorecard is reviewed by the Strategic Workforce Committee on a monthly basis. HR scorecards are also circulated to all divisional / directorate management teams, in addition to individual performance management reports to each cost centre manager (**Appendix 2**). The Committee also regularly reviews workforce risks.

3.1 Planning effectively for future work

3.1.1 **Workforce Planning System and Processes:** A draft annual workforce plan has been developed in support of the 2013/14 business plan. This workforce plan is based on the **Six Steps Methodology** to integrated workforce planning, advocated by Skills for Health. This is a practical approach to planning that ensures we have a workforce of the right size with the right skills and competences at divisional and directorate level. Progress against both divisional / directorate plans and plans by staff group as relevant, will be monitored by the Strategic Workforce Committee on a quarterly basis.

Cumulative turnover is at 1.5%, albeit that it has increased in Corporate to 2.3%. Forecast for turnover at year end, at 8.8% is above target of 8.0%,

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however the Trust continues to benchmark well against other similar sized organisations.

3.1.2 **Health Education England (HEE):** The landscape for developing staff has changed dramatically since April 2013. HEE is responsible at strategic level for the education, training and personal development of NHS staff. There are Local Education and Training Boards (LETBs) for each region, whose role is to work together to develop, educate and train the future NHS workforce.

The Trust is a member of the West of England LETB Membership Council covering Bristol, North Somerset, South Gloucestershire, Bath and North East Somerset, Gloucestershire, Swindon and Wiltshire.

The West of England Membership Council is supported by an local Education Group with responsibility for identifying opportunities, innovations and priorities for transformational change in the healthcare workforce. It is responsible for developing ideas into formal investment proposals and to oversee local implementation of delegated programmes of work funded by the LETB. The HR Director represents the trust on both the Membership Council and the education groups.

3.1.3 From 1st April 2013, tariffs have been introduced to fund placements for medical undergraduates and non-medical students. The aim is to move tariffs of £34,623 (undergraduates) and £3,175 (non-medical students) per student over a twelve year period. The medical undergraduate tariff replaces the former Service Increment for Teaching (SIFT) funding stream and the non-medical placement tariff is new.

3.1.4 **E Rostering:** The project team continue to pilot the e-rostering interface with ESR on ITU and William Budd, the latter area now working to parallel payroll runs to enable issues to be identified and addressed. Within this pilot the management Dashboard is also being piloted. However, a move to full functionality and further rollout is dependent on agreement being reached between the trust and SMART, the provider of the e-rostering software, regarding an information governance issue. It is expected that this matter will be resolved in month.

3.1.5 **Job Planning:** A new round of job planning is currently underway. Additional support is now in place for each division within the Medical Workforce team to support this process and all Clinical Leads are asked to maintain the momentum. QIPP savings schemes continue to target changes to Consultant job plans, which requires strong clinical leadership to implement.

3.1.6 **Shaping the Future Workforce Conference:** This conference took place on 9th May 2013, a key focus being how the Trust might deliver patient safe services across seven days. The recommendations for action are now with will be submitted to the three workforce planning groups – Nursing, Scientific and Medical & Dental, to review and identify actions for each of the key staff groups, with over view of progress to be undertaken by the Strategic Workforce Committee.

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3.2 Recruiting the Best Staff

3.2.1 Vacancy rates against funded establishment have risen to 2.2% in month, exacerbated by a 1.9% vacancy rate in Surgery and 10.2% vacancy rate in Corporate. The target KPI is 1.5%.

3.2.3 **Nurse Recruitment:** An open day was held on Saturday, 8th June to support full nurse recruitment and also augment the nurse pool supporting the operational gap, flexible beds and anticipated turnover. Over 200 people attended and as well as offering an opportunity to gain career advice and learn more about the Trust, interviews were also held on the day for both Registered Nurses and Healthcare Support Workers. Fully supported by senior nurses from across both divisions, early indicators suggest this was extremely successful event, with a full update due at the next Nursing Workforce Planning Group. 36 job offers have been made to date. Subject to Trust Board decision, further investment in additional nursing posts is expected which will require continued focus on recruitment to this group.

3.2.4 **Medical Recruitment**: Following the recommendations of the Emergency Care Intensive Support Team, recruitment is already in hand for additional consultant posts for Emergency Department and Medical Assessment Unit. The new rotation,of 36 Foundation doctors, commence their induction on 31st July with the remaining 134 doctors starting on 7th August.

3.2.5 **Disclosure and Barring Service (DBS) Update Service:** With effect from 17th June 2013, the new Update Service will offer greater portability of DBS checks at a reduced cost. Work is underway to amend the Pre and Post Employment Checks Policy accordingly and systems and processes within the Recruitment Team have also been reviewed to support this change.

3.3 Developing our Workforce for Success

3.3.1 **Appraisal:** Appraisal rates remain at 85% but underlying issues are emerging within Surgery where appraisal rates have dropped to 80.7% and Corporate which remains at 84.5%;

A recent audit report, *Review of HR Monitoring Information*, May 2013, followed up on the recommendations of a previous audit on the completion of appraisals. At the time of the audit, in February 2013, the auditors noted that there had been a significant improvement in the proportion of appraisals that were being undertaken, with a completion rate of 85.7% compared to just 54.8% twelve months previously. Actions have been agreed to address issues of consistency identified in the report.

Over the coming months the appraisal process will be reviewed in the context of performance related pay progression for Agenda for Change staff, following the national agreement in February 2013.

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3.3.2 **Medical Revalidation:** Between January and March 2013, Responsible Officer's (RO) were scheduled to revalidate. The RUH's RO has been successfully revalidated.

The Trust has trained 47 doctors as Medical Appraisers who are responsible for appraising 262 doctors with a prescribed connection to the RUH.

The Trust is running two processes for revalidation, a paper based process, and a web enabled process. A review of the two processes will be undertaken in October to determine the preferred option for the future.

3.3.3 **Local Induction:** In order to address a low return-rate (compliance) for the Local Induction Checklist a review of local induction content was undertaken during Jan & Feb 2013. As a result a condensed, simplified Checklist was launched in April 2013, aiming to improve the Q4 compliance rate of 50%.

3.3.4 **Mandatory Training Compliance Reporting:** The Training Compliance Manager has worked closely with Business Intelligence Unit (BIU) to develop a visible and transparent tool, STAR, which enables users to view up to date mandatory training compliance by individual, team or subject.

A project plan for the roll out of STAR has been produced. Phase 1 has focused on testing the tool with Subject Matter Experts (SMEs) and raising awareness with senior managers. The object of the project is improve mandatory training compliance and to reduce administration in producing reports.

Mandatory training covers some 20 different competences, specific to key groups: SMEs continue to performance manage compliance levels which are impacted by the ability of managers to release staff to undertake their training.

3.3.5 **NHSLA:** Following the NHSLA inspection in Feb 2013, 100% compliance was achieved on all standards relating to training. Further work is being undertaken to update the on-line prospectus to provide more detail about mandatory training available for staff and follow up individuals who persistently 'do not attend' training. STAR will address this and will provide staff with a link to the prospectus when they identify they require training.

3.3.6 **Training Doctors Induction:** A project is underway to implement a new e-induction programme for doctors in training; this will be ready for the August 2013 intake. Existing content has been adapted by RUH SME's and assessment questions have been developed to test knowledge. The programme will enable the RUH to robustly measure junior doctor mandatory training compliance.

3.3.7 **Mandatory Training e-assessment:** The RUH is adopting the e-assessments developed to meet the national core skills mandatory training framework. A project plan for rolling out the assessments has been produced. The first assessment to be piloted is Fire.

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3.3.8 **SLM Development:** An SLM training needs analysis has been conducted with Clinical Leads and an outline programme and approach has been agreed. The first programme will launch in October 2013. The programme will be developed in-house and will be co-developed with SME's and Clinical leads. This will be supported by the investment monies agreed at management Board in May subject to final Trust Board approval.

3.3.9 **Productive Leader:** The Facilities management team have completed the Productive Leader modules and the financial management team are part way through the programme, due to complete in July 2013.

3.4 Staff as Stakeholders for Success

3.4.1 **Staff Engagement:** A new staff engagement programme has been developed for 2013/14, further details of which are provided in a separate paper. Feedback from three 'reference groups' has informed the plan, namely Staff Side, Staff Governors and the Lean Change Agents. In addition, director and divisional/ directorate staff engagement actions have been agreed.

3.4.2 **Raising Concerns:** Following Francis, there is a clear driver for all NHS employers to ensure that concerns are raised and then listened to, at every level of the organisation. Creating a genuine culture of openness across all areas of the trust is now paramount and the Raising Concerns Policy and supporting information will be re-launched over the summer months in support of this, as part of the Staff Engagement Programme.

3.4.3 **People Management Training:** Staff engagement is an intrinsic element of the Trust's People Management programme, comprising local update training to support line managers in dealing effectively with conduct, performance, and sickness, as well as centralised training on management skills & techniques to support appraisal, performance management and effective recruitment. Additional one-to-one coaching is also provided for managers by the HR Directorate team on an on-going basis.

3.5 Valuing a Diverse Workforce

3.5.1 **Equality Objectives:** In line with the Department of Health guidance for implementing the Equality Delivery System (EDS), the equality objectives for 2013/14 have been published. The next Employee Monitoring Report will go to September Strategic Workforce Committee.

3.5.2 **BME Career Progression:** A report has been produced following an invitation to BME staff to provide feedback on their experience of career progression opportunities at the RUH. This report is due to considered in detail by the Strategic Workforce Committee in July, however key concerns have already been remitted to Management Board in May 2013.

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3.6 Maintaining a Healthy Workforce

3.6.1 **Sickness Absence:** The Trust sickness absence rate is currently 3.7%, compared to the planned reductions in absence rate of 3.2%. There are multiple factors that contribute to sickness absence, one of the key reasons being work pressure felt by staff. The Safer Staff Group monitor the top two reasons for absence, namely 'Back and Other musculoskeletal problems' and 'Anxiety/stress/depression/other psychiatric illnesses'.

3.6.2 **Stress:** A revised approach to Stress Audits has been agreed through the Safer Staff Group. The approach incorporates an initial risk assessment, with local stakeholders, followed by an audit based on the questionnaire developed by the Health & safety Executive, administered by the Health & Safety team. The line manager will then be supported to convert the findings of that audit into a targeted action plan with key stakeholders from the department. Action plans will be monitored for progress by the Safer Staff Group. Having been successfully piloted within Day Surgery, this approach is now being rolled out throughout the Trust.

3.6.3 **Health & Wellbeing Project:** The Trust has been invited to participate in a health and wellbeing project facilitated by NHS Employers. To date a scoping exercise has been undertaken to better understand what is currently available within the Trust and a facilitated session is to be run later in August to scope areas for improvement. Divisions / Directorates will be contacted with a time and date to ensure their full engagement.

3.7 Valuing all, rewarding excellence

3.7.1 **Pay and Performance:** The recent changes to the Agenda for Change Pay Framework (AfC) which took effect from 1st April 2013 represent a significant shift in approach for the way performance is measured and potentially rewarded in the NHS. The new arrangements create real opportunities for employers to reframe their pay policies within Agenda for Change (AfC) and for senior managers, particularly bands 8c and above, to create a wholly new framework if desired linked to Executive pay and administered through the Remuneration Committee. The proposed plan for implementation is scheduled for July Management Board and will then be reported to Trust Board.

3.7.2 **Reward:** NHS Employers have now confirmed that the decision to run the 2013 / 2014 round of Employer Based Clinical Excellence Awards (EBAs) is at the discretion of local employers i.e. the Trust. In total 25 Consultants received EBAs in 2012 / 2013 and a further two applicants at Level 9 Awards were approved to continue. The total cost of the 2012 / 13 round was £149,272.

In light of the Terms and Conditions QUIPP project, Management Board have been asked to offer a recommendation as to whether or not the Trust should run EBAs in 2013/14 or whether to secure this as a QIPP terms and conditions saving.

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3.7.3 **Harmonisation:** Despite lengthy negotiations and a variety of options being explored, a Trust wide approach to remuneration for on call duties for AfC staff has yet to be   achieved. This situation creates a risk around equal pay and / or staff being   unwilling to undertake such duties. Management board have been asked to provide a steer on next steps, as in the absence of a negotiated way forward, the Trust will need to consider unilateral action, with employee relations consequences.

3.7.4 **Terms and Conditions:** Work is on-going to identify ways in which the Trust might approach the need to make savings from 2013 and beyond in relation to a reduction in the cost of employment. This QIPP savings target represents c 0.4% of our pay bill. The Trust is proposing a 5 pronged approach to identifying and negotiating savings in the cost of employment:

- Reducing the cost of absence
- Using existing flexibilities within the national pay framework (e.g. EBAs)
- Review of local policies enabled by national agreement (e.g. Travel & Subsistence)
- Review of local policies and other benefits   (e.g. Carer's leave)
- Exploration of Annex K once Foundation Trust is achieved

3.8   Enabling the HR Directorate to deliver the strategy

3.8.1 **Recruitment Team:** Building on the work already undertaken by the Every Patient Matters Transformation project to streamline recruitment processes, the leadership of the team has also been reviewed and enhanced with the appointment of a Recruitment Manager in March and an interim Deputy Recruitment Manager this month, to support a more customer oriented approach and quicker turnaround of candidates from interview to start date.

3.8.2 **Increasing Management Capability:** 'Recruiting the Best Staff' training is now available into 2013. This classroom based session works in partnership with the Recruiting Manager's Handbook which is provided to every recruiting manager and is designed to take them through the process on a step by step basis.

3.8.3 **HR Business Partner:** A consultation has been underway over the past month to explore the potential benefits of introducing the HR Business Partner model for the Trust. A key benefit of this model is enhanced HR support for the roll out of service line management and a dedicated senior HR Business Partner role within each of the senior Divisional / Directorate teams. Feedback from the consultation will be taking place on 25th June 2013.

3.8.4 **Occupational Health:** Capacity within the Occupational Health team has been compromised following the loss of a number of key external contracts, necessitating a reduction in staffing accordingly. In light of this, partnership

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options are being explored with a host organisation that will ensure robust support for the health and wellbeing agenda.

4. Recommendation

4.1 Trust Board is asked to note the contents of this report and be satisfied that the priorities and actions being taken are both appropriate and necessary to support the Trust in delivering its service objectives.
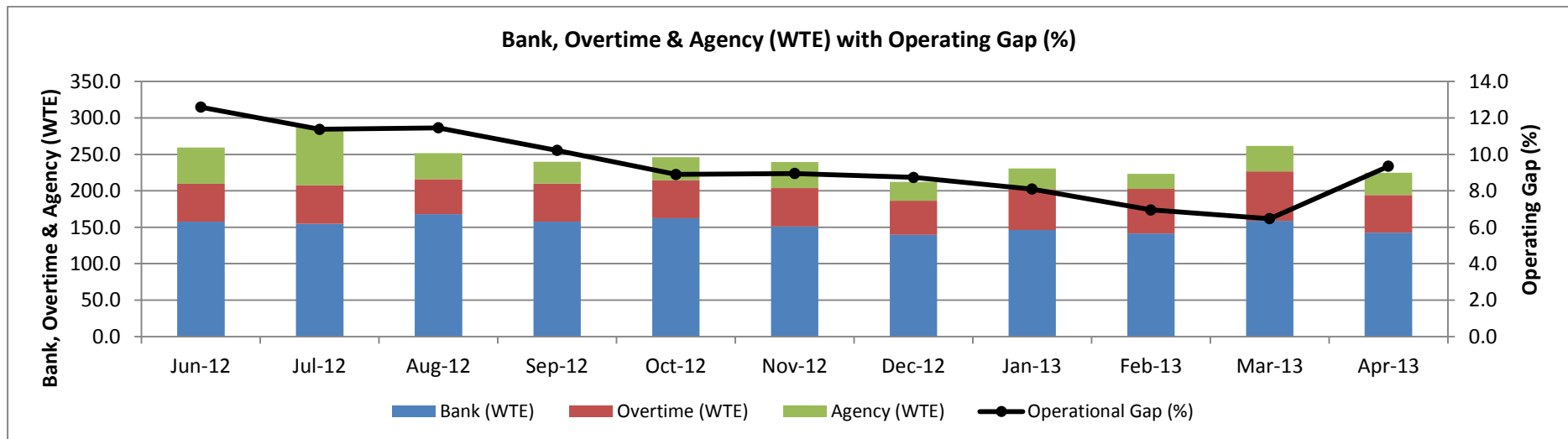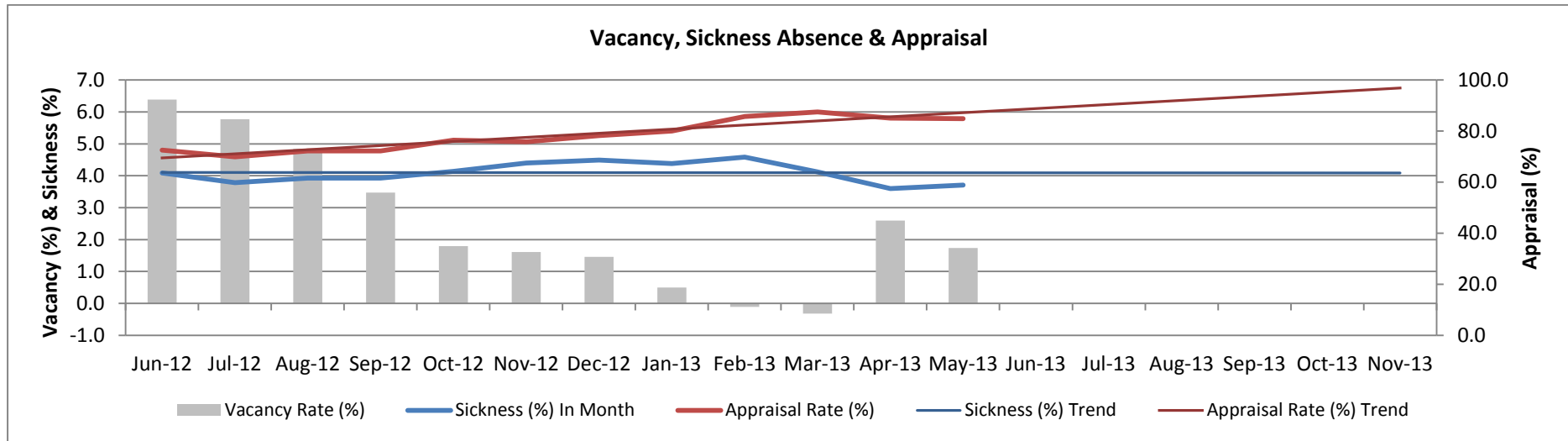
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Trust HR Scorecard	KPI	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	
														Trust
Headcount		3842.0	3837.0	3886.0	3908.0	3920.0	3931.0	3945.0	3975.0	3985.0	3989.0	4000.0	4018.0	
Budget (WTE)		3470.9	3440.7	3432.8	3433.8	3393.8	3393.9	3388.1	3388.1	3388.0	3388.1	3452.5	3442.0	
Contracted (WTE)		3249.2	3242.1	3266.4	3314.6	3333.0	3339.2	3338.8	3371.2	3391.7	3399.1	3363.0	3382.2	
Actual (WTE)		3360.4	3393.1	3388.8	3406.4	3426.0	3445.7	3439.0	3455.4	3461.3	3487.0	3504.9	3501.5	
Sickness (%) In Month		4.1	3.8	3.9	3.9	4.1	4.4	4.5	4.4	4.6	4.1	3.6	3.7	
Sickness (%) Quarterly Average	3.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	3.6	3.7	A
Sickness (%) Year End Forecast	3.2%	4.0	3.9	3.9	3.9	3.7	3.7	3.7	3.8	3.8	3.8	4.5	4.1	
Other Absence (%)		3.1	3.0	3.0	3.0	2.9	2.9	2.8	2.9	3.2	3.2	3.2	Data N/A	
Vacancy Rate (%)		6.4	5.8	4.8	3.5	1.8	1.6	1.5	0.5	-0.1	-0.3	2.6	1.7	
Vacancy Rate (%) - Quartely Average	1.5%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2.6	2.2	A
Bank, Overtime, Agency (%)		7.4	8.1	7.2	6.7	6.9	6.7	6.0	6.4	6.2	7.1	6.3	Data N/A	
Operational Gap (%)		12.6	11.4	11.5	10.2	8.9	8.9	8.7	8.1	7.0	6.5	9.3	Data N/A	
Bank (WTE)		157.7	154.9	168.0	157.6	162.6	151.0	139.5	146.3	141.4	158.7	142.5	Data N/A	
Overtime (WTE)		51.9	52.7	48.0	52.4	52.0	52.9	46.8	56.1	61.3	68.0	51.6	Data N/A	
Agency (WTE)		49.9	79.8	35.7	29.9	31.7	35.8	25.9	28.4	20.6	34.8	30.6	35.0	
Cost of Bank		£421,529	£401,294	£430,821	£403,268	£425,377	£388,743	£384,273	£402,419	£736,738	£426,284	£426,284	Data N/A	
Cost of Agency		£310,789	£267,081	£118,651	£254,423	£287,104	£349,074	£228,057	£306,375	£255,778	£357,101	£301,934	£277,800	
Turnover (%) In Month		0.8	0.6	0.7	0.9	0.6	0.6	0.8	0.6	0.7	0.8	0.7	0.7	
Turnover (%) Cumulative	2.0%	2.1	2.8	3.5	4.3	4.9	5.5	6.4	7.0	7.6	8.5	0.7	1.5	G
Turnover (%) Year End Forecast	8.0%	8.6	8.3	8.3	8.7	8.4	8.3	8.5	8.4	8.3	8.5	8.6	8.8	
Appraisal Rate (%)		72.5	69.9	72.3	72.2	76.5	75.8	78.2	80.0	85.7	87.5	85.1	84.8	
Appraisal (%) Quarterly Average	85.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	85.1	85.0	G
Appraisal Rate (%) Year End Forecast	85.0%	86.2	87.1	87.9	86.5	86.2	84.3	83.1	82.4	83.5	87.5	100.0	100.0	

Other Absence (%) = Unauthorised Absence, Maternity Leave & Special Leave	This is any absence recorded on ESR that is not Sickness Absence.
Bank, Overtime, Agency (%) = Bank (WTE) + Overtime (WTE) + Agency (WTE) / Bank (WTE) + Overtime (WTE) + Agency (WTE) + Contracted (WTE)	This shows bank, overtime & agency as a percentage of the total available workforce as WTE.
Operational Gap (%) = Vacancies (WTE) + Sickness (WTE) + Other Absence (WTE) / Budget (WTE)	This shows the percentage of WTE that is lost from the budget.

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Vacancy, Sickness Absence & Appraisal

Legend: Vacancy Rate (%), Sickness (%) In Month, Appraisal Rate (%), Sickness (%) Trend, Appraisal Rate (%) Trend

Bank, Overtime & Agency (WTE) with Operating Gap (%)

Legend: Bank (WTE), Overtime (WTE), Agency (WTE), Operational Gap (%)

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Surgery HR Scorecard

Surgery HR Scorecard	KPI	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	
Headcount		1506.0	1502.0	1514.0	1514.0	1521.0	1525.0	1521.0	1529.0	1527.0	1531.0	1541.0	1540.0	
Budget (WTE)		1299.0	1289.7	1290.1	1290.5	1276.1	1276.1	1276.1	1276.1	1276.1	1276.2	1319.8	1317.8	
Contracted (WTE)		1266.4	1262.8	1269.0	1288.2	1294.5	1291.4	1283.8	1286.4	1306.8	1299.6	1287.7	1300.1	
Actual (WTE)		1275.8	1310.3	1289.3	1290.5	1307.5	1321.1	1308.3	1304.2	1316.2	1329.1	1337.2	1336.6	
Sickness (%) In Month		4.2	4.0	4.3	3.8	3.8	4.0	4.2	4.0	4.4	4.6	4.1	4.3	
Sickness (%) Quarterly Average	3.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	4.1	4.2	A
Sickness (%) Year End Forecast	3.2%	4.0	3.9	3.8	3.8	3.6	3.6	3.6	3.6	3.6	3.8	4.8	4.6	
Other Absence (%)		4.1	3.5	3.7	3.8	3.6	3.4	3.2	3.2	3.2	3.3	3.3	Data N/A	
Vacancy Rate (%)	1.5%	2.5	2.1	1.6	0.2	-1.4	-1.2	-0.6	-0.8	-2.4	-1.8	2.4	1.3	
Vacancy Rate (%) - Quarterly Average	1.5%											2.4	1.9	A
Operational Gap (%)		10.0	9.0	8.9	7.5	6.0	6.4	6.7	6.9	5.2	5.6	9.8	Data N/A	
Bank (WTE)		38.3	37.3	38.2	51.3	48.9	45.2	41.7	50.4	44.1	52.6	50.8	Data N/A	
Overtime (WTE)		17.1	18.1	17.7	18.2	17.4	17.8	15.7	21.1	25.9	28.3	16.6	Data N/A	
Agency (WTE)		13.1	40.7	10.7	13.4	14.3	20.2	10.5	11.5	8.9	17.2	15.5	14.5	
Cost of Bank		£112,725	£108,286	£108,985	£143,531	£137,307	£140,860	£133,452	£159,752	£141,990	£163,916	£163,916	Data N/A	
Cost of Agency		£85,437	£46,254	£65,733	£130,970	£143,869	£168,925	£115,761	£88,510	£98,736	£131,280	£121,356	£95,372	
Turnover (%) In Month		0.9	0.6	0.6	1.1	0.3	0.6	0.8	0.5	0.7	0.8	0.5	1.0	
Turnover (%) Cumulative	2.0%	2.4	3.0	3.7	4.7	5.0	5.6	6.5	6.9	7.6	8.4	0.5	1.5	G
Turnover (%) Year End Forecast	8.0%	9.6	9.1	8.8	9.5	8.6	8.5	8.6	8.3	8.3	8.4	5.8	9.1	
Appraisal Rate (%)		67.0	63.5	65.3	66.3	74.7	76.0	78.6	81.9	85.0	84.9	81.0	80.5	
Appraisal (%) Quarterly Average	85.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	81.0	80.7	A
Appraisal Rate (%) Year End Forecast	85.0%	81.6	82.5	82.8	81.7	84.3	85.0	85.2	85.4	85.7	84.9	100.0	100.0	

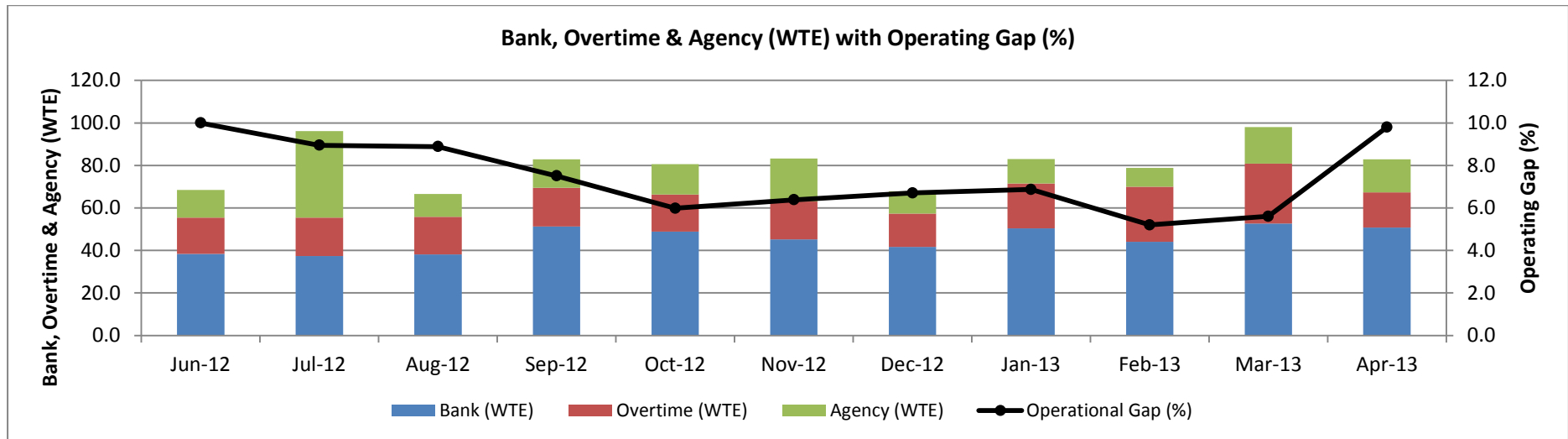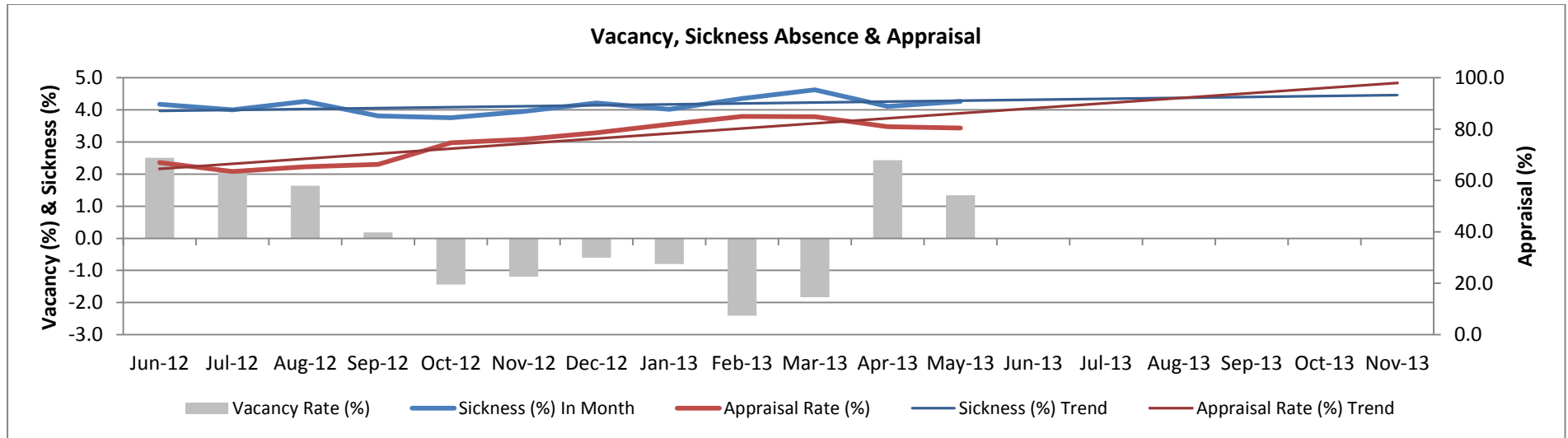|	
Other Absence (%) = Unauthorised Absence, Maternity Leave & Special Leave	This is any absence recorded on ESR that is not Sickness Absence.
Bank, Overtime, Agency (%) = Bank (WTE) + Overtime (WTE) + Agency (WTE) / Bank (WTE) + Overtime (WTE) + Agency (WTE) + Contracted (WTE)	This shows bank, overtime & agency as a percentage of the total available workforce as WTE.
Operational Gap (%) = Vacancies (WTE) + Sickness (WTE) + Other Absence (WTE) / Budget (WTE)	This shows the percentage of WTE that is lost from the budget.

Author: Sue Smith, Deputy Director of Human resources	Date: 17th June 2013
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Vacancy, Sickness Absence & Appraisal

Legend: Vacancy Rate (%) · Sickness (%) In Month · Appraisal Rate (%) · Sickness (%) Trend · Appraisal Rate (%) Trend

Bank, Overtime & Agency (WTE) with Operating Gap (%)

Legend: Bank (WTE) · Overtime (WTE) · Agency (WTE) · Operational Gap (%)

Author: Sue Smith, Deputy Director of Human resources	Date: 17th June 2013
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Medicine HR Scorecard

	KPI	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	
Headcount		1501.0	1499.0	1525.0	1545.0	1553.0	1560.0	1572.0	1604.0	1610.0	1597.0	1619.0	1623.0	
Budget (WTE)		1391.8	1380.8	1379.6	1379.6	1362.9	1362.9	1357.1	1357.1	1357.0	1357.1	1379.5	1379.5	
Contracted (WTE)		1297.5	1294.1	1304.0	1331.0	1332.1	1330.5	1340.8	1370.8	1373.7	1380.9	1359.1	1371.2	
Actual (WTE)		1363.8	1344.8	1363.1	1378.6	1372.4	1371.7	1375.5	1403.2	1398.0	1403.0	1417.6	1426.9	
Sickness (%) In Month		3.8	3.5	3.6	3.6	3.6	3.6	3.9	3.9	4.2	3.5	2.8	2.9	
Sickness (%) Quarterly Average	3.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2.8	2.8	G
Sickness (%) Year End Forecast	3.2%	4.1	4.0	3.9	3.8	3.6	3.6	3.5	3.5	3.4	3.4	3.2	2.9	
Other Absence (%)		3.1	3.3	3.3	3.1	3.1	3.5	3.3	3.4	4.0	4.1	3.9	Data N/A	
Vacancy Rate (%)	1.5%	6.8	6.3	5.5	3.5	2.3	2.4	1.2	-1.0	-1.2	-1.8	1.5	0.6	
Vacancy Rate (%) - Quarterly Average	1.5%											1.5	1.0	G
Operational Gap (%)		12.3	11.5	11.9	9.8	8.8	9.7	8.7	7.0	6.1	5.1	8.2	Data N/A	
Bank (WTE)		89.5	92.8	98.3	77.8	81.9	76.7	72.0	70.9	70.1	76.3	72.2	Data N/A	
Overtime (WTE)		13.2	12.5	12.0	13.0	14.9	15.9	12.6	16.6	17.0	20.3	20.0	Data N/A	
Agency (WTE)		31.5	28.0	19.0	11.5	11.8	11.8	9.5	13.7	11.2	12.8	15.1	15.8	
Cost of Bank		£250,322	£245,838	£263,741	£205,412	£220,976	£217,067	£207,725	£200,880	£189,140	£213,096	£213,096	Data N/A	
Cost of Agency		£184,586	£157,354	£117,531	£84,106	£112,823	£138,838	£90,838	£167,873	£140,496	£181,428	£144,728	£118,663	
Turnover (%) In Month		0.7	0.7	0.8	0.7	0.8	0.6	0.8	0.6	0.7	1.3	0.7	0.7	
Turnover (%) Cumulative	2.0%	2.2	2.9	3.7	4.4	5.1	5.8	6.6	7.2	7.9	9.2	0.7	1.4	G
Turnover (%) Year End Forecast	8.0%	8.9	8.7	8.9	8.7	8.8	8.7	8.8	8.6	8.6	9.2	8.0	8.1	
Appraisal Rate (%)		74.0	69.9	73.5	73.2	74.9	72.5	76.8	77.5	86.0	88.9	87.7	86.9	
Appraisal (%) Quarterly Average	85.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	87.7	87.3	G
Appraisal Rate (%) Year End Forecast	85.0%	81.8	83.1	85.5	85.3	84.3	81.4	80.8	79.9	81.9	88.9	100.0	100.0	

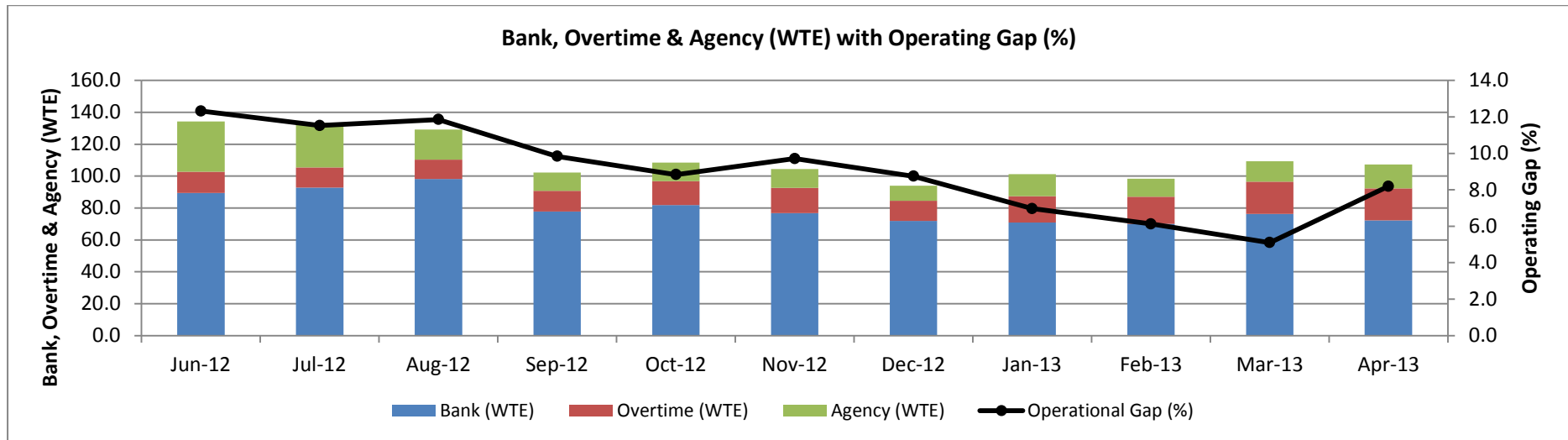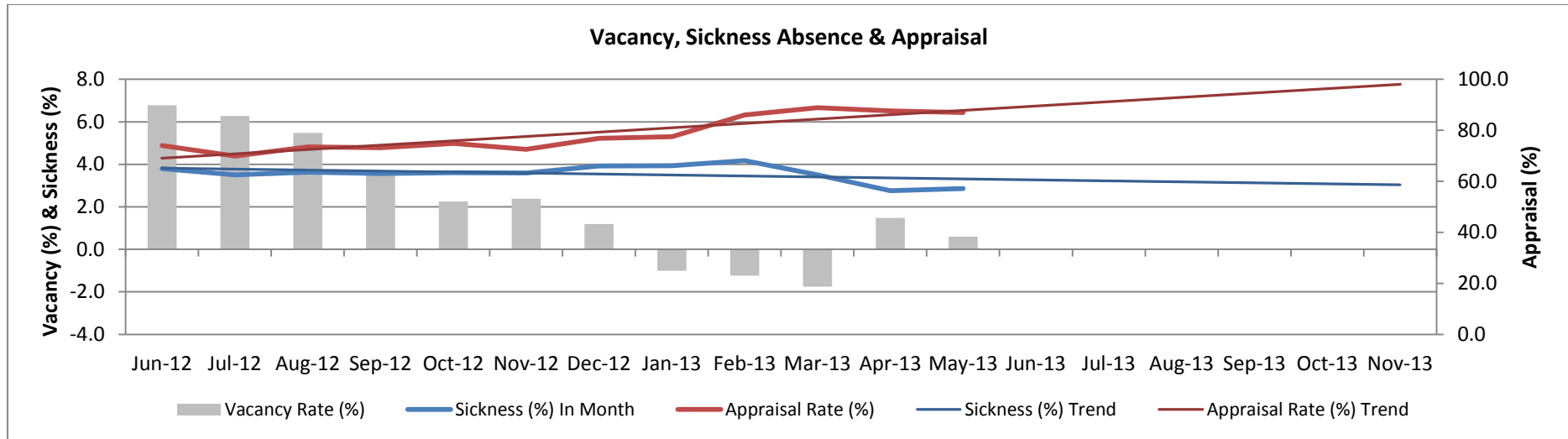|	
Other Absence (%) = Unauthorised Absence, Maternity Leave & Special Leave	This is any absence recorded on ESR that is not Sickness Absence.
Bank, Overtime, Agency (%) = Bank (WTE) + Overtime (WTE) + Agency (WTE) / Bank (WTE) + Overtime (WTE) + Agency (WTE) + Contracted (WTE)	This shows bank, overtime & agency as a percentage of the total available workforce as WTE.
Operational Gap (%) = Vacancies (WTE) + Sickness (WTE) + Other Absence (WTE) / Budget (WTE)	This shows the percentage of WTE that is lost from the budget.

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Vacancy, Sickness Absence & Appraisal

Legend: Vacancy Rate (%) | Sickness (%) In Month | Appraisal Rate (%) | Sickness (%) Trend | Appraisal Rate (%) Trend

Bank, Overtime & Agency (WTE) with Operating Gap (%)

Legend: Bank (WTE) | Overtime (WTE) | Agency (WTE) | Operational Gap (%)

Facilities HR Scorecard

	KPI	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	
							Facilities							
Headcount		444.0	446.0	450.0	437.0	445.0	452.0	457.0	452.0	456.0	465.0	464.0	465.0	
Budget (WTE)		433.1	433.1	433.1	433.1	430.1	430.1	430.1	430.1	430.1	430.1	402.8	402.8	
Contracted (WTE)		374.1	373.9	372.0	373.9	380.6	386.8	389.0	389.5	387.5	394.3	398.8	398.2	
Actual (WTE)		402.1	412.3	407.6	407.2	412.9	414.5	416.9	415.9	414.7	423.2	424.5	413.6	
Sickness (%) In Month		5.6	4.7	4.8	5.9	7.1	8.1	7.1	7.3	7.4	5.4	5.5	5.6	
Sickness (%) Quarterly Average	3.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	5.5	5.6	R
Sickness (%) Year End Forecast	3.2%	5.2	5.1	4.9	4.9	4.7	4.9	5.2	5.4	5.4	5.8	8.4	7.2	
Other Absence (%)		1.2	1.1	0.8	1.0	1.1	0.7	1.0	1.1	1.3	1.2	1.1	Data N/A	
Vacancy Rate (%)	1.5%	13.6	13.7	14.1	13.7	11.5	10.0	9.6	9.4	9.9	8.3	1.0	1.1	
Vacancy Rate (%) - Quarterly Average	1.5%											1.0	1.1	G
Operational Gap (%)		19.2	17.7	20.2	20.5	19.5	17.1	17.2	17.2	15.8	14.5	7.6	Data N/A	
Bank (WTE)		18.8	16.2	21.5	20.1	16.6	15.6	16.5	15.5	18.0	17.6	12.3	Data N/A	
Overtime (WTE)		20.1	20.3	16.2	18.4	16.5	17.3	17.0	16.4	16.8	17.5	13.5	Data N/A	
Agency (WTE)		0.7	4.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.0	0.0	0.0	
Cost of Bank		£34,854	£28,066	£37,857	£35,704	£27,972	£26,928	£30,955	£26,875	£30,906	£31,360	£31,360	Data N/A	
Cost of Agency		£1,046	£0	£0	£0	£0	£0	£0	£0	£0	£3,781	£3,937	£0	
Turnover (%) In Month		0.5	0.2	0.9	0.9	0.5	0.9	0.4	1.5	0.4	0.0	1.1	0.0	
Turnover (%) Cumulative	2.0%	1.0	1.2	2.1	3.1	3.5	4.4	4.8	6.4	6.8	6.8	1.1	1.1	G
Turnover (%) Year End Forecast	8.0%	3.8	3.6	5.1	6.1	6.0	6.6	6.4	7.6	7.4	6.8	12.9	6.4	
Appraisal Rate (%)		89.2	84.0	82.7	78.0	81.3	79.4	78.3	83.3	90.0	92.6	90.5	93.1	
Appraisal (%) Quarterly Average	85.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	90.5	91.8	G
Appraisal Rate (%) Year End Forecast	85.0%	100.0	100.0	100.0	100.0	93.4	86.1	79.9	79.0	81.3	92.6	91.2	94.7	

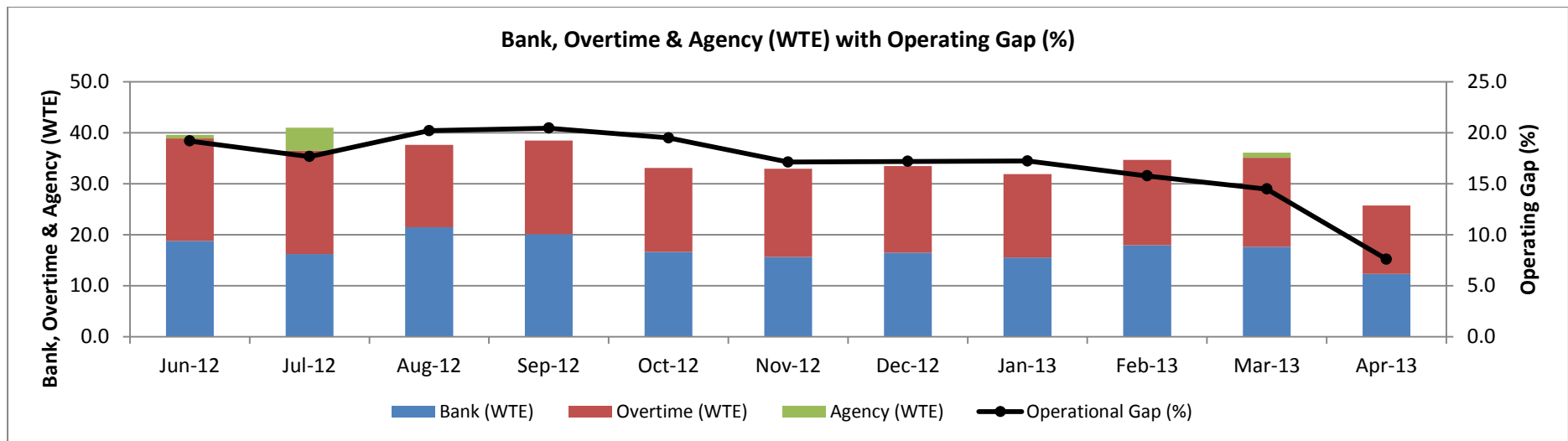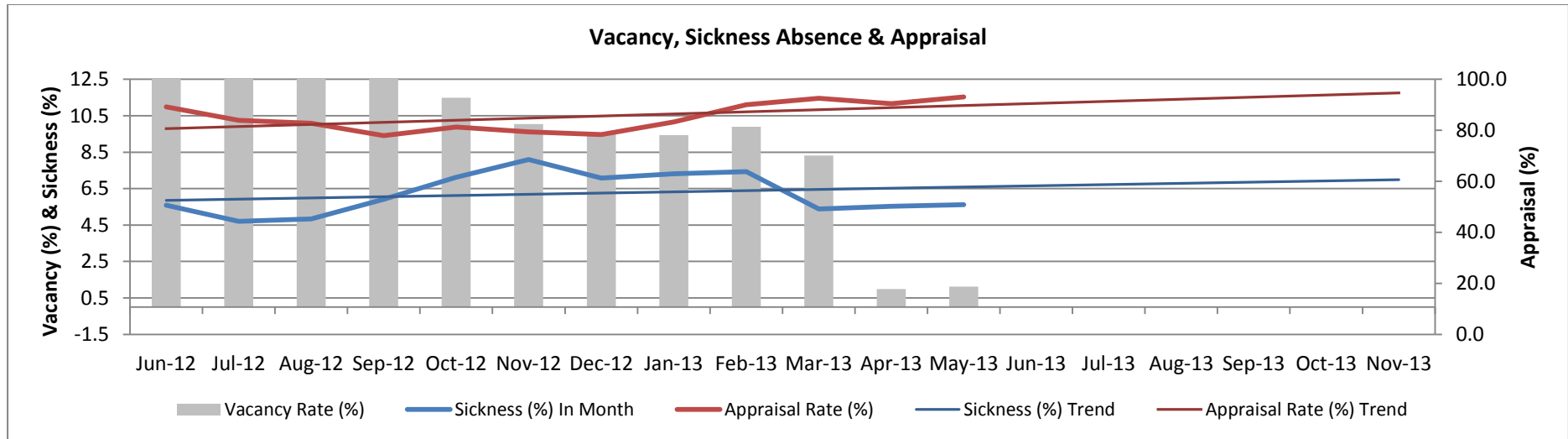|	
Other Absence (%) = Unauthorised Absence, Maternity Leave & Special Leave	This is any absence recorded on ESR that is not Sickness Absence.
Bank, Overtime, Agency (%) = Bank (WTE) + Overtime (WTE) + Agency (WTE) / Bank (WTE) + Overtime (WTE) + Agency (WTE) + Contracted (WTE)	This shows bank, overtime & agency as a percentage of the total available workforce as WTE.
Operational Gap (%) = Vacancies (WTE) + Sickness (WTE) + Other Absence (WTE) / Budget (WTE)	This shows the percentage of WTE that is lost from the budget.

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Vacancy, Sickness Absence & Appraisal

Legend: Vacancy Rate (%) | Sickness (%) In Month | Appraisal Rate (%) | Sickness (%) Trend | Appraisal Rate (%) Trend

Bank, Overtime & Agency (WTE) with Operating Gap (%)

Legend: Bank (WTE) | Overtime (WTE) | Agency (WTE) | Operational Gap (%)

Corporate HR Scorecard

	KPI	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	
		Corporate												
Headcount		362.0	359.0	366.0	371.0	369.0	361.0	363.0	359.0	361.0	364.0	369.0	359.0	
Budget (WTE)		327.5	317.6	310.5	311.2	305.3	305.4	305.4	305.4	305.4	305.4	327.6	319.1	
Contracted (WTE)		288.1	287.8	297.7	298.8	301.7	305.8	300.6	300.6	299.6	300.8	292.5	288.4	
Actual (WTE)		294.7	300.5	305.4	306.9	309.4	313.5	314.6	307.8	305.8	307.2	297.5	300.6	
Sickness (%) In Month		3.2	3.1	2.6	3.3	4.3	4.6	4.5	3.7	3.3	2.7	2.4	2.6	
Sickness (%) Quarterly Average	3.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2.4	2.5	G
Sickness (%) Year End Forecast	3.2%	2.2	2.7	2.8	3.0	3.2	3.3	3.4	3.5	3.5	3.3	3.5	2.7	
Other Absence (%)		1.7	2.1	2.1	1.7	1.6	1.8	1.6	1.8	2.2	2.1	2.4	Data N/A	
Vacancy Rate (%)	1.5%	12.0	9.4	4.1	4.0	1.2	-0.1	1.6	1.6	1.9	1.5	10.7	9.6	
Vacancy Rate (%) - Quarterly Average	1.5%											10.7	10.2	R
Bank, Overtime, Agency (%)		5.4	5.4	5.4	4.9	7.1	5.8	5.0	4.2	3.1	5.1	2.8	Data N/A	
Operational Gap (%)		16.8	13.3	9.9	10.0	7.8	6.5	6.9	6.7	6.8	6.2	15.5	Data N/A	
Bank (WTE)		10.9	8.4	9.9	8.2	14.9	13.2	8.8	8.3	7.6	10.4	6.9	Data N/A	
Overtime (WTE)		1.1	1.4	1.3	2.1	2.6	1.8	1.2	1.6	1.4	1.9	1.5	Data N/A	
Agency (WTE)		4.6	6.6	6.0	5.0	5.6	3.8	5.9	3.2	0.5	3.8	0.0	4.8	
Cost of Bank		£22,856	£18,510	£19,426	£18,323	£38,173	£3,199	£10,277	£12,515	£371,532	£14,137	£14,137	Data N/A	
Cost of Agency		£39,720	£63,474	-£64,613	£39,347	£30,412	£41,311	£21,458	£49,992	£16,547	£40,611	£31,912	£63,766	
Turnover (%) In Month		0.9	0.9	0.3	0.9	0.9	0.3	1.6	0.0	0.9	0.3	1.4	0.9	
Turnover (%) Cumulative	2.0%	2.4	3.4	3.7	4.6	5.5	5.8	7.4	7.4	8.3	8.6	1.4	2.3	R
Turnover (%) Year End Forecast	8.0%	9.8	10.1	8.8	9.2	9.4	8.7	9.8	8.8	9.0	8.6	16.5	13.8	
Appraisal Rate (%)		82.7	76.8	80.6	84.4	85.4	84.4	83.7	80.1	82.7	86.0	84.8	84.2	
Appraisal (%) Quarterly Average	85.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	84.8	84.5	A
Appraisal Rate (%) Year End Forecast	85.0%	88.2	87.3	88.9	91.5	92.4	91.2	89.1	86.1	85.0	86.0	87.8	87.4	

Other Absence (%) = Unauthorised Absence, Maternity Leave & Special Leave	This is any absence recorded on ESR that is not Sickness Absence.
Bank, Overtime, Agency (%) = Bank (WTE) + Overtime (WTE) + Agency (WTE) / Bank (WTE) + Overtime (WTE) + Agency (WTE) + Contracted (WTE)	This shows bank, overtime & agency as a percentage of the total available workforce as WTE.
Operational Gap (%) = Vacancies (WTE) + Sickness (WTE) + Other Absence (WTE) / Budget (WTE)	This shows the percentage of WTE that is lost from the budget.

Vacancy, Sickness Absence & Appraisal

Legend: Vacancy Rate (%), Sickness (%) In Month, Appraisal Rate (%), Sickness (%) Trend, Appraisal Rate (%) Trend

Bank, Overtime & Agency (WTE) with Operating Gap (%)

Legend: Bank (WTE), Overtime (WTE), Agency (WTE), Operational Gap (%)

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