The Queen Elizabeth Hospital NHS
King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (IN PRIVATE)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Dorothy Hosein Chief Executive	Decision		High	Med	Low
	Discussion		√		
	Information	√			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Georgina Goodman Head of Workforce	Strategic	√			
	Operational				
	Governance		**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led)					

Meeting Date: 26 January 2016
Report Title: Workforce – Exception Report

PURPOSE:

To advise the Board of areas of concerns and excellence relating to the Trust's workforce and actions being taken to address them.

SUMMARY:

Currently there are seven areas to consider relating to the Trust's workforce, these being [the]:

I. Sickness absence rate.
II. Level of completed appraisals.
III. Communication & Engagement.
IV. International Nurse Recruitment.
V. Junior Doctors potential strike action.
VI. Streamlining.
VII. New HR Structure.

FINANCIAL IMPLICATIONS / EFFICIENCY SAVINGS / QUALITY IMPROVEMENT:

None as a direct result of this report.

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
√	√	√	√	√	√

RECOMMENDATIONS:

The Board is invited to:

- Note the report.
- Endorse the actions being taken to improve performance.

Workforce – Exception Report

Sickness Absence:

- ***Target: 3.5%***
- ***Performance: (Dec) 4.86%***

The sickness rate across the Trust has decreased slightly this month, but is still well above target.

What actions are being taken to reduce sickness absence?

- The Absence Management Policy is being reviewed at a working group with the initial meeting taking place on 13th January with management, staff side representatives and members of the HR team.

- A paper outlining the incentives for managing absence was presented at the last JSCC meeting which took place on 21st December 2015. Further work is being undertaken with a revised paper to be presented which includes actions and timescales for the consideration of implementation of all incentives.

- Top 50 meetings have taken place between operational leads, HR and Chief Executive to review top 50 highest sickness cases within the Trust. Review meetings have taken place with Occupational Health, HR and Operational Teams.

- A meeting has taken place with Firstcare on 18th December 2015, with management training sessions scheduled for the 25th & 26th January. The Firstcare staff survey results have been presented to HRODG and Workforce Committee.

The revised/individualised sickness absence targets for each of the service groups within the divisions have been in place since 1st April 2015 and performance against targets is being monitored at performance review meetings. The information in the table below illustrates performance against service group targets for November and December this [financial] year.

Service Group	% Target	% Actual Nov	Variation from target %	% Actual Dec	Variation from target %	Monthly Variation %	
Cancer Services	3.7	6.1	2.4	8.1	4.4	2.0	↑
Diagnostic Services	3.0	4.3	1.3	3.3	0.3	-1.0	↓
Emergency Services & Patient Flow	3.0	4.8	1.8	2.8	-0.2	-2.0	↓
Finance & Facilities	5.5	6.3	0.8	6.6	1.1	0.3	↑
Estates	3.4	0.9	-2.5	0.1	-3.3	-0.8	↓
Finance	2.5	2.7	0.2	4.0	1.5	1.3	↑
Hotel services	6.6	8.3	1.7	8.4	1.8	0.1	↑
Human Resources	0.9	2.7	1.8	3.2	2.3	0.5	↑
Medical Services	5.0	6.1	1.1	6.6	1.6	0.5	↑
Patient Experience	2.6	1.6	-1.0	2.1	-0.5	0.5	↑
Patient Safety	1.5	1.1	-0.4	0.2	-1.3	-0.9	↓
Planning & Performance	4.0	3.7	-0.3	4.0	0.0	0.3	↑
Specialist Surgical	3.5	0.8	-2.7	0.8	-2.7	0.0	→

Support Services	1.4	1.9	0.5	2.3	0.9	0.4	↑
Surgical Services	3.2	7.3	4.1	5.2	2.0	-2.1	↓
Theatre Services	3.5	6.1	2.6	6.8	3.3	0.7	↑
Women & Children	3.0	5.5	2.5	5.8	2.8	0.3	↑
Trust	3.50	5.16	1.66	4.86	1.36	-0.30	↓

Appraisals Rate:

- ***Target: 90%***
- ***Performance: (Dec) 82.05%***

The appraisal rate for Trust staff (excluding Bank staff) has decreased again this month. Performance is 7.95% below the target level.

There are currently 19 appraisals overdue by 18 months plus. These are broken down to 4 permanent and 7 bank staff that have never had an appraisal and 4 permanent and 4 bank staff who are overdue.

What actions have been taken to improve performance?

The seriously overdue appraisals continue to be a priority. Proposed appraisal escalation where outstanding appraisals remain uncompleted, despite HR monitoring and no extenuating circumstances, will then be raised with the Head of Workforce and relevant ED to performance manage via Capability/ Disciplinary Policy as appropriate.

Mandatory Training:

- ***Target: 85%***
- ***Performance: (Dec) 90.55% for all 21 Mandatory Subjects***

Mandatory Training continues to be very much business as usual with most subjects being consistently above target.

3 subjects are below target this month.

- Conflict Resolution – 83.94%
- Information Governance – 89.05% (National target of 95% set for this training)
- Resuscitation - 83.94%

An additional Resuscitation Trainer has been appointed and commenced 11th January.

Communication and Engagement:

- ***Target: Average for acute trusts***
- ***Performance: (2014 Staff Survey) Lowest 20% for acute trusts***

The 2015 Staff Survey has now closed and initial results have been received from Quality Health with the full report due in February 2016.

The initial results show a slight improvement overall on the 2014 survey, with 58% of staff who completed the survey either agreeing or strongly agreeing that they would recommend this Trust as a place to work, up from 51% in 2014. Once the full report is received, results will be reviewed and an action plan put in place on how to address any resulting issues.

International Nurse Recruitment:

A total of 18 international nurses started with the Trust on 8 January 2016 with a further 2 nurses to start by 18 January 2016. This group includes a total of 12 Philippine and Indian Nurses and 8 Spanish Nurses.

There are plans to have a cohort of European and non-European Nurses to start with the Trust on 19 February 2016.

The Trust requested a further 20 Certificates of Sponsorships from the Home Office UK Visas and Immigration Department and were informed on 11 January 2016 that the application was successful.

Junior Doctors Strike Action:

As with the previous strike preparation, we have been meeting on a regular basis to ensure that the organisation is prepared for strike actions. A Working Group has been set up to manage the logistics and communications around the potential strike action planned by Junior Doctors.

The days when the Trust will be affected are:

- 12th January 2016 Emergency care only between 8am on Tuesday and 8am on Wednesday 13th January (24 hours).
- 26th January 2016 Emergency care only between 8am on Tuesday and 8am on Thursday 28th January (48 hours).
- 10th February 2016 Full withdrawal of labour between 8am and 5pm

Staff templates were circulated to all departments to collect and collate information about whether staff intended to strike (staff are not obliged to share this information). This was followed up via telephone and face to face meetings to ensure that the staff information was collected and rotas were staffed as for a 'Christmas Day' service.

Departments have now been asked to commence planning for the 48 hour strike.

Streamlining Programme:

The Trust has representatives on all 4 Programme Workstreams and the leads meet up regularly in the Trust to share progress and information. Regular updates will be provided to the Workforce Committee.

Workstreams included in the programme are:

- Recruitment
- Statutory & Mandatory Training
- Medical Staffing
- Occupational Health

New HR Structure:

The consultation process has been concluded and the revised structure is now taking shape. Core HR services will be moving into office accommodation in the 'old social club'. The new structure will support the Trust to achieve financial improvements by reducing costs. It will also refocus on key areas for delivery ensuring that the structure is aligned to this, especially focusing on the significant workforce challenges that need to be addressed. The new structure will concentrate on 'what is core HR business', do it well and review tasks that should either cease or could be redirected elsewhere. It will also ensure that we have the right skills, experience and competencies within the team to deliver a high level of service.