

TRUST BOARD

Date of Meeting: 26/02/2013	Agenda Item No: 5.4	Enclosure: 6
Intended Outcome:		
For noting ✓	For information	For decision
Title of Report: Workforce Report		
Aims: To update the Trust Board on the workforce performance.		
Executive Summary: This report summarises Trust performance against a range of workforce indicators for month ten (January) of 2012/13. This month the number of contracted staff, overtime and turnover have risen slightly, and sickness has stayed fairly steady. Appraisal rates overall have remained steady but below trajectory and the coverage of mandatory training continues to increase but remains a key area for attention.		
Overview of key areas for consideration or noting: As above.		
Specific implications and links to the Trust's Strategic Aims:		
Ensure we provide high quality, safe and effective care for all our patients including meeting essential standards of safety and quality as set out by the CQC		✓
Develop a viable integrated clinical strategy for secondary care services which is sustainable and affordable		
Develop a new healthcare facility in West Cumbria that is fit for the 21st century		
Achieve sustainable financial balance through the delivery of the Trust's internal Cost Improvement Programme, securing a viable contract income from our GP commissioners and contributing to the system wide cost reductions		✓
To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust		✓
Recommendations: The Trust Board is recommended to note the content of the report and the measures being put in place to bring key performance indicators to an acceptable standard.		
Prepared by: Judith Anderson HR Development and Equality Manager	Presented by: Damian Gallagher Director of Human Resources and Organisational Development	

Contents & Target Summary

Section	Subject	Status
1	Summary / Narrative	Not applicable
2	Staff in Post	Amber
3	Overtime	Amber
4	Turnover	Green
5	Sickness	Amber
6	Employee Relations	Not applicable
7	Occupational Health	Not applicable
8	Appraisal	Amber
9	Mandatory Training	Amber

Key	
Green	Significant Progress
Amber	Progress
Red	Limited / No Progress

1. Summary

<p>Staff in Post</p>	<p>Staff in post for the Trust as a whole is 2994.97 WTE at January 2013. This equates to an increase of 67.07 WTE when compared to the equivalent month in 2011/12 and an increase of 4.09 WTE compared to December 2012 (2990.88 WTE).</p> <p>The largest two staff groups are qualified Nursing & Midwifery (1077.18 WTE) and Admin & Clerical (630.56 WTE). Currently the Trust has a total of 315.15 WTE Medical and Dental staff and 483.39 WTE providing Additional Clinical Services.</p> <p>Temporary staffing cost for January 2013 (agency cost) is at 7.3% against a target of 2% (year to date is 6.7%). The aim is to reduce the reliance on agency medical staff by 50% within 18 months and completely within 3 years.</p>
<p>Overtime</p>	<p>Total overtime for January 2013 is £424,161 compared with £411,584 for the month of December 2012. Medicine and Surgery have fallen whilst Family and Clinical Support (former division) has increased.</p> <ul style="list-style-type: none"> • Prime is overtime worked above the normal weekly contracted hours of 37.5. • Basic is overtime worked by part time staff up to full-time normal weekly contracted hours of 37.5 i.e. 'Additional Basic Pay'.
<p>Turnover</p>	<p>Annualised turnover (headcount) for non-medical staff at January 2013 is 10.05%. There were 35 non-medical staff leavers during January (0.94 %).</p>
<p>Sickness Absence</p>	<p>Current available information (from reports on 12 February 2013) shows the Trust sickness absence rate for January 2013 as 5.36% compared with 5.42% for December 2012; rates in Estates and Family & Support Services have increased.</p> <p>HR Business Partners are actively supporting managers within each Division in implementing the sickness management procedure. To date, 64 cautionary review hearings have taken place with 34 First Written Absence Cautions and 4 Final Written Absence Cautions issued.</p> <p>HR Business Partners are monitoring absence on a regular basis to assist the achievement of the Trust target of 3.5%.</p>
<p>Occupational Health</p>	<p>Self-referral figures include face to face appointments and telephone contact. The increase in routine appointments is mainly due to flu vaccinations and the measles outbreak. The current uptake for flu vaccinations is 56.9% of the relevant workforce – this is a big improvement on last year's final total of 47.9% and an average of 44% for the NHS as a whole.</p>

Workforce Report for Trust Board as at end of January 2013

<p>Appraisal</p>	<p>The annualised percentage of appraisals, including Consultants, completed at Trust level over the last 12 months to January 2013 has remained fairly steady this month at 70.63% (70.11% in December 2012).</p> <p>Actual performance against the trajectories is detailed on pages 14-15. Corporate Services dipped against its trajectory in the summer but has been closing the gap each month since September. Estates & Facilities has exceeded its trajectory and hit the 80% and Medicine is also ahead of trajectory but still slightly short of the target. With 2 months remaining this financial year the Surgical division and Family Services (largely the new Surgical Clinical Business Unit) is the greatest cause for concern. Overall the Trust is slightly below trajectory but the gap has narrowed from September 2012. SMT will discuss progress against trajectories to help ensure that the targets are met in the remaining 2 months of the financial year.</p>
<p>Mandatory Training</p>	<p>Figures are now being compiled to take account of the revised organisational structure and therefore comparison figures are not available in some areas for November 2012. The report has also been extended to include information on resuscitation training (information on European Paediatric Life Support-EPLS, will be added to a future report).</p> <p>All areas are showing improvement across the range of required training and Estates and Facilities has maintained its achievement of above Trust target.</p> <p>In relation to resuscitation training, figures are starting to increase, but from a low base in some areas. Regular courses are run in-house by the Trust Resuscitation Officers (NLS places are offered through the Northern Region). Attendance has improved recently, particularly for ILS, however uptake is not at full attendance for all courses which would enable the key requirements to be met.</p> <p>Although significant progress has been made, there is still much work to be done if targets are to be met this financial year. A gap analysis of clinical business unit performance against each trajectory will be discussed at SMT on a 2 weekly basis during the final quarter of the financial year.</p>
<p>Staff Experience</p>	<p>This section monitors the progress being made against the Staff Survey Action Plan. Although we score well in the survey for some things (fewer staff than average having to work extra hours; equality and diversity training; flexible working and experience of errors) we did less well on others (management support; communications; fairness of incident reporting and staff recommending the Trust as a place to work). Staff focus groups have been held across Divisions in order to produce specific actions for each area in the survey that requires improvement and key performance indicators to achieve the improvements. Action plans were presented to the Board on 27 November 2012.</p> <p>An Away Day led by our Chief Executive was held on 6th December at which middle managers and heads of departments worked within their Clinical Business Units to tailor the plans and actions to their own areas. Each Clinical Business Unit has drawn up their own action plan and the results fed back to SMT. Those plans were approved at each Clinical Business Unit's board meeting in January 2013 and the plans are now being introduced and monitoring systems established. The new Workforce Committee has established a working group to look at staff survey data in more detail and conduct regular monitoring of the actions to demonstrate improvements.</p>

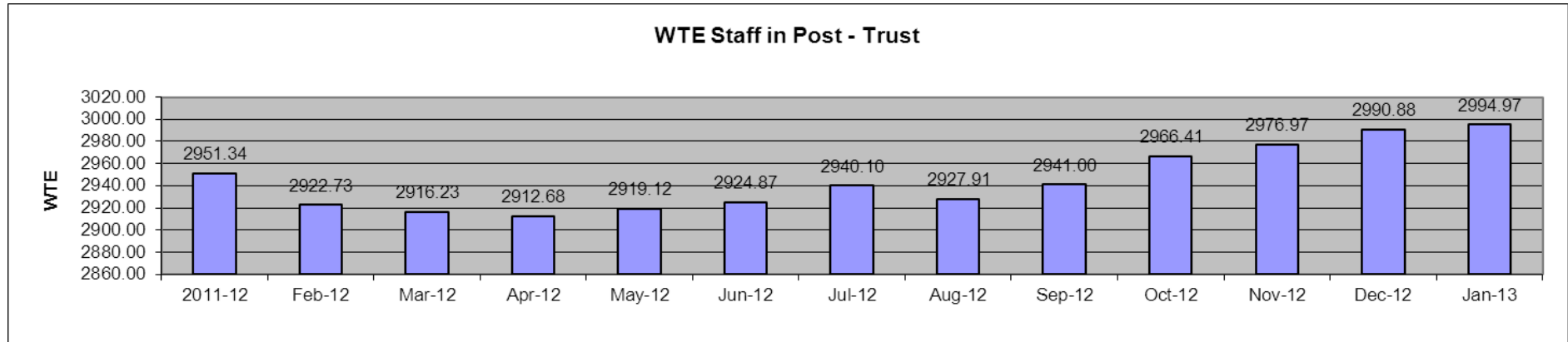
Workforce Report for Trust Board as at end of January 2013

2. Staff in Post

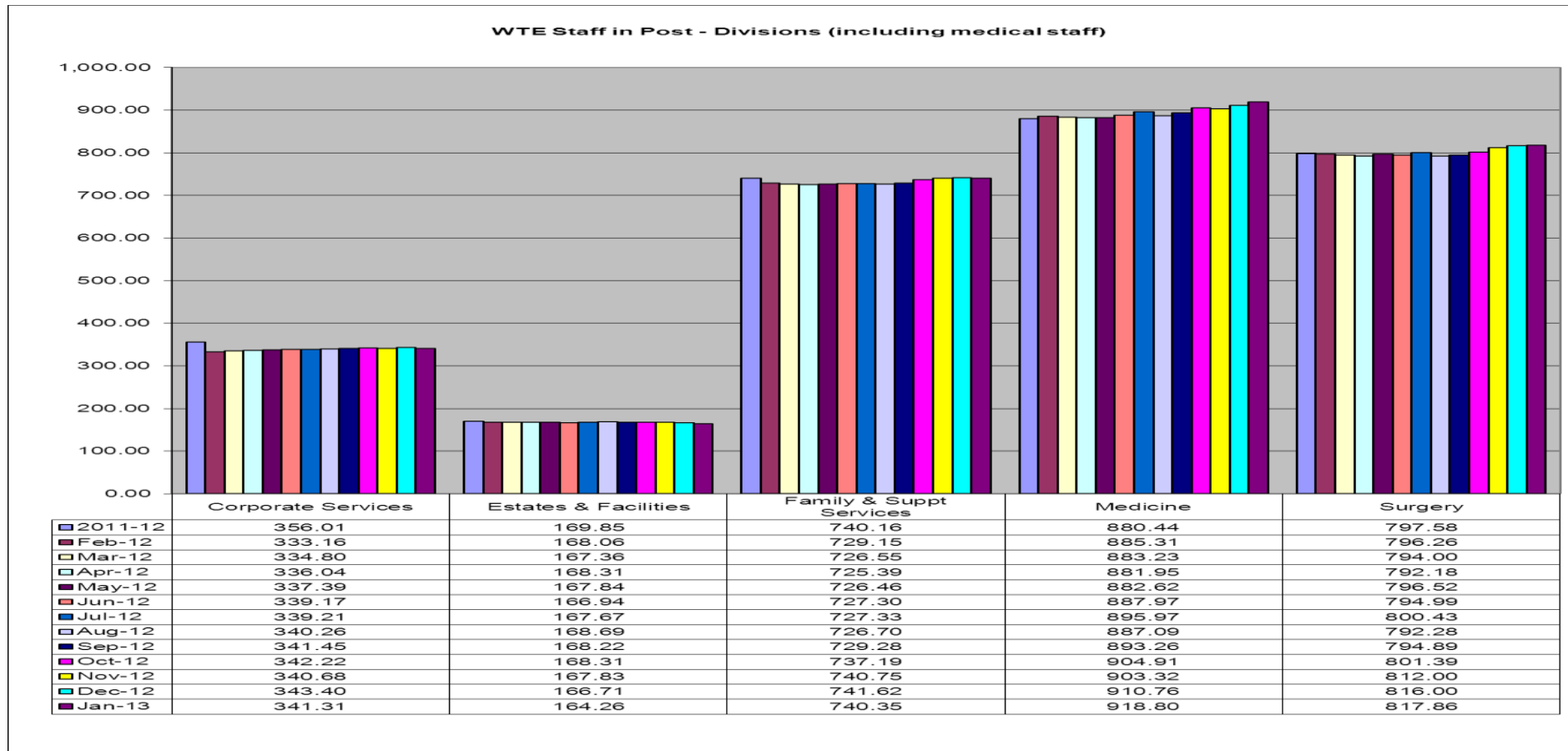
Staff Group	2011-12	Feb 12	Mar12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec12	Jan 12	Jan 13
	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Additional Professional & Technical	94.15	96.17	95.80	96.28	96.18	94.89	94.34	94.00	95.37	97.35	97.67	97.70	97.10	99.60
Additional Clinical Services	465.58	460.65	461.20	461.15	461.72	463.43	463.27	463.63	468.27	478.61	473.32	481.62	459.88	483.39
Admin & Clerical	653.14	640.43	639.04	635.90	636.63	638.53	636.71	635.62	634.15	633.58	629.16	631.28	640.39	630.56
Allied Health Professionals	130.80	129.68	129.22	130.51	131.41	131.88	131.98	131.26	131.14	134.63	133.49	134.45	130.50	134.13
Estates & Ancillary	194.89	190.94	190.24	191.40	192.33	193.15	193.87	193.99	194.02	195.71	196.23	194.93	190.80	192.94
Healthcare Scientists	63.61	62.11	62.61	61.61	58.31	59.39	60.97	61.07	61.97	61.97	60.07	60.91	64.61	62.01
Medical & Dental	300.15	306.07	305.59	304.39	304.59	303.59	318.09	306.49	312.73	314.06	318.36	315.96	304.23	315.15
Nursing & Midwifery (Registered)	1049.03	1036.68	1032.53	1031.45	1037.95	1040.01	1040.85	1041.85	1,043.35	1,050.51	1,068.67	1,074.03	1040.39	1,077.18
Trust	2951.34	2922.73	2916.23	2912.68	2919.12	2924.87	2940.10	2927.91	2941.00	2966.41	2976.97	2990.88	2927.90	2994.97

Staff Group	2011-12	Feb 12	Mar12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec 12	Jan12	Jan 13
	Head	Head	Head	Head	Head	Head	Head	Head	Head	Head	Head	Head	WTE	Head
Additional Professional & Technical	112	115	115	117	119	118	118	118	121	123	124	123	115	125
Additional Clinical Services	759	759	762	768	785	790	788	792	793	803	801	816	758	822
Admin & Clerical	822	802	799	796	797	801	800	800	798	798	794	797	804	798
Allied Health Professionals	194	194	192	193	193	190	187	185	185	190	190	192	196	192
Estates & Ancillary	274	276	275	275	276	276	278	279	280	287	289	288	273	285
Healthcare Scientists	67	65	66	65	63	64	65	66	66	66	64	64	68	66
Medical & Dental	375	382	383	384	383	381	396	387	394	394	397	396	382	396
Nursing & Midwifery (Registered)	1417	1415	1402	1,394	1,395	1,395	1,395	1,395	1391	1,400	1422	1,424	1418	1425
Trust	4020	4008	3994	3992	4011	4015	4027	4022	4027	4061	4079	4,102	4014	4,107

Workforce Report for Trust Board as at end of January 2013



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3. Overtime

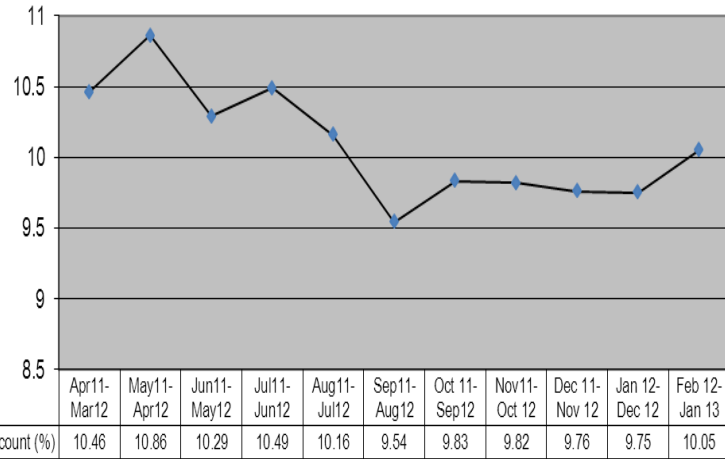
	Apr 2011 – Mar 2012			April 2012			May 2012			June 2012			July 2012		
	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total
Corporate Services	137,798	32,588	170,386	15,668	3,515	19,194	15,684	4,386	20,070	16,517	3,229	19,746	9,992	4,012	14,005
Estates & Facilities	422,758	165,599	588,357	48,454	15,560	64,014	35,544	11,294	46,838	39,698	12,928	52,626	42,501	22,961	65,462
Family & Support Services	906,468	170,623	1,077,091	99,098	19,848	118,946	69,3645	15,417	84,003	72,379	13,135	85,514	84,336	21,050	105,386
Medicine	877,821	97,910	975,731	119,364	26,694	146,059	73,696	13,259	86,955	73,358	17,356	90,709	111,658	15,114	126,772
Surgery	466,869	113,132	580,000	68,233	24,153	92,386	47,136	20,744	67,910	60,703	8,115	68,819	61,439	18,226	79,664
TOTAL	2,811,713	579,852	3,396,565	350,818	89,769	440,598	241,424	65,130	306,554	262,650	54,764	317,414	309,926	81,363	391,289

	August 2012			September 2012			October 2012			November 2012			December 2012		
	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total	Basic	Prime	Total
Corporate Services	12,744	2,954	15,698	11,526	4,729	16,256	15,455	3,453	18,908	14,436	4,100	18,536	13,919	3,265	17,183
Estates & Facilities	47,757	17,321	65,078	53,961	26,368	80,329	47,161	22,903	70,064	49,938	19,261	69,199	47,019	14,647	61,667
Family & Support Services	83,299	16,382	99,681	93,439	16,082	109,521	87,669	21,470	109,139	104,716	23,487	128,202	92,312	25,477	117,788
Medicine	79,854	18,734	98,589	85,611	19,319	104,930	102,813	34,379	137,192	83,250	21,727	104,977	86,332	21,396	107,728
Surgery	80,661	13,307	93,968	62,826	8,321	71,147	82,050	21,470	104,975	64,476	20,083	84,559	75,366	31,952	107,318
TOTAL	304,315	68,698	373,013	307,363	74,819	382,182	335,148	105,130	440,278	316,816	88,657	405,473	314,948	96,737	411,584

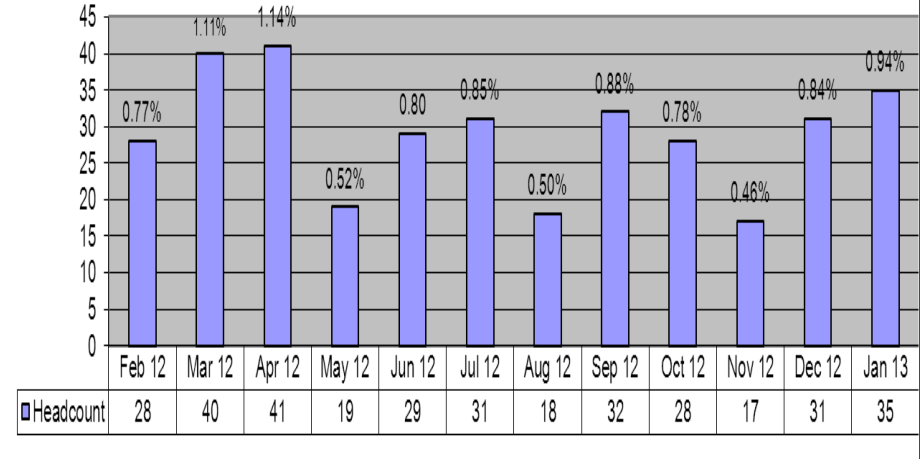
	January 2013			YTD total (from April 2012)		
	Basic	Prime	Total	Basic	Prime	Total
Corporate Services	16,756	3,548	20,304	142,697	37,203	179,900
Estates & Facilities	44,927	15,796	60,723	456,960	179,039	635,999
Family & Support Services	117,834	29,049	146,882	904,444	201,396	1,105,840
Medicine	77,798	24,369	102,167	893,730	212,347	1,106,077
Surgery	70,452	23,632	94,085	673,343	191,487	864,830
TOTAL	327,767	96,394	424,161	3,071,174	821,472	3,892,646

4. Turnover

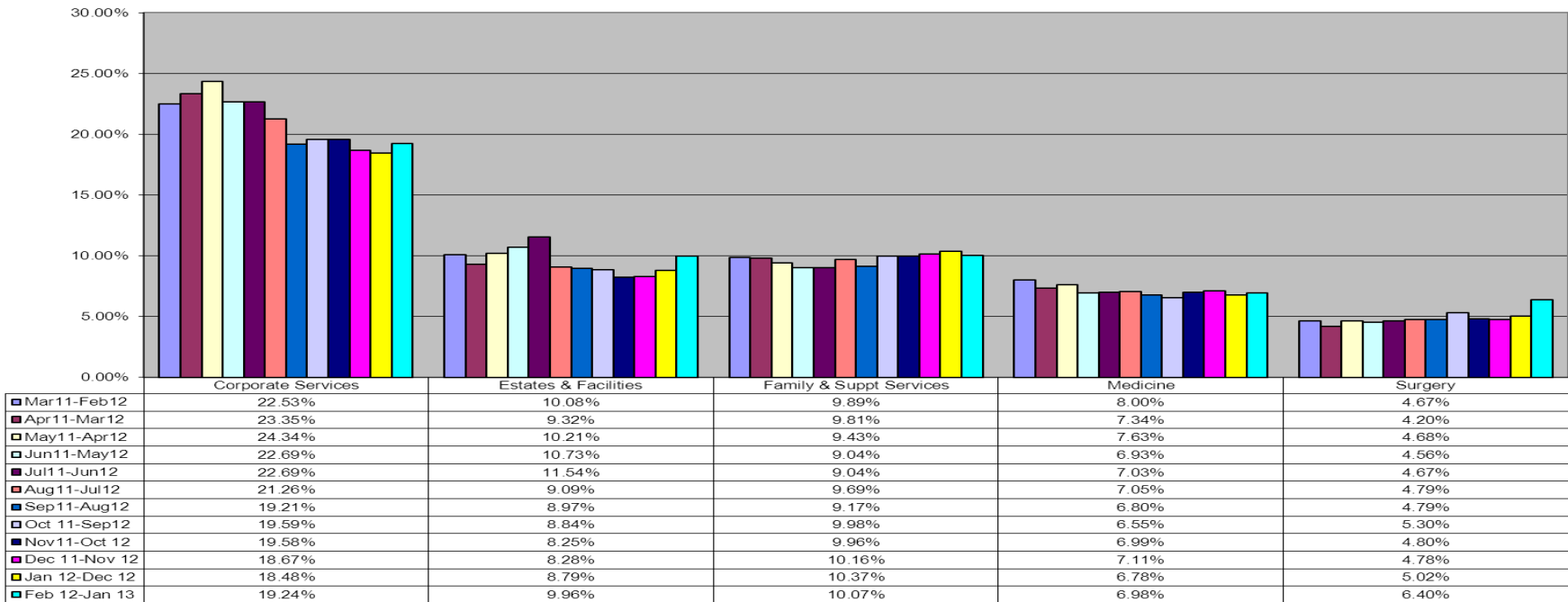
Annualised Turnover (excluding medical staff)



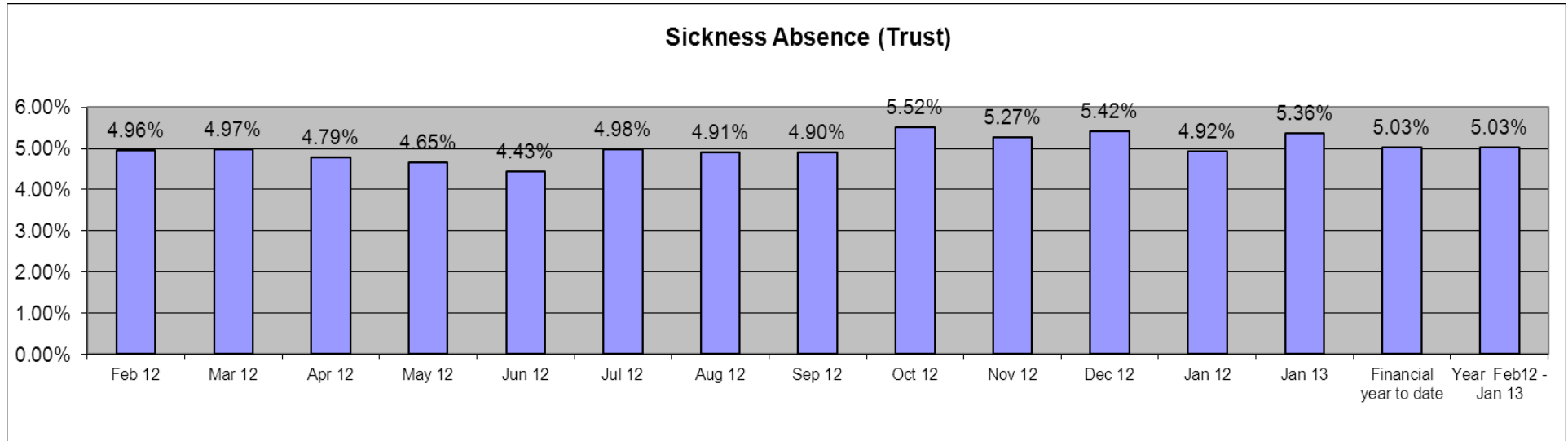
Leavers by Headcount (excluding medical staff)



Turnover by Headcount % - Divisions (excluding medical staff)



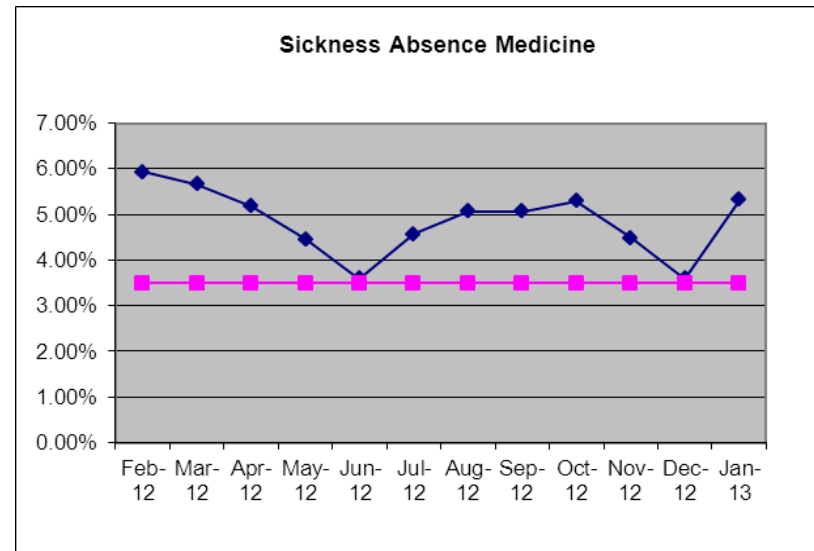
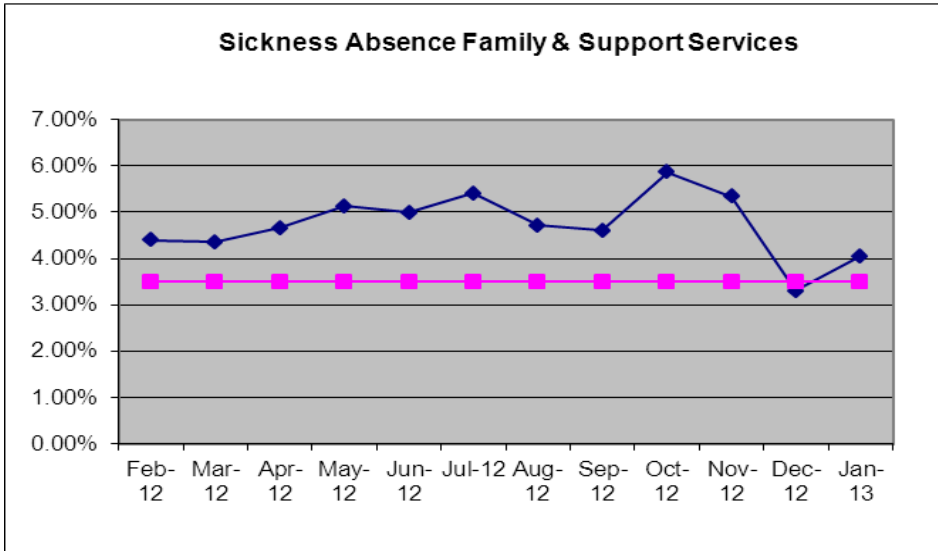
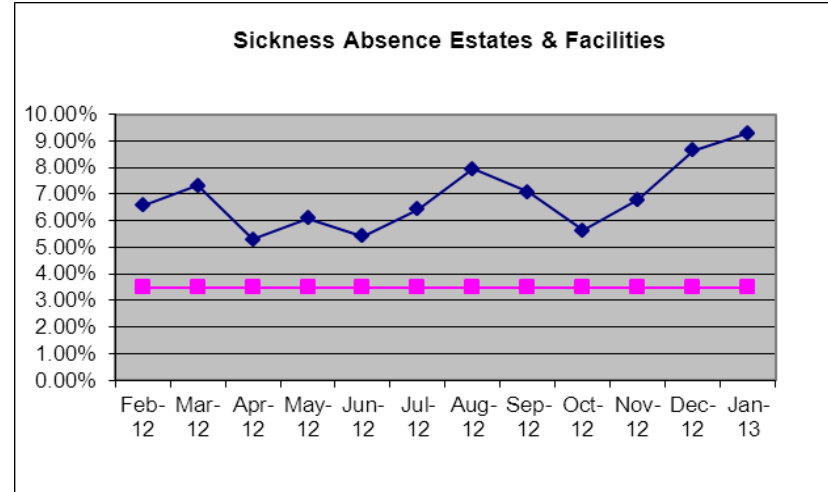
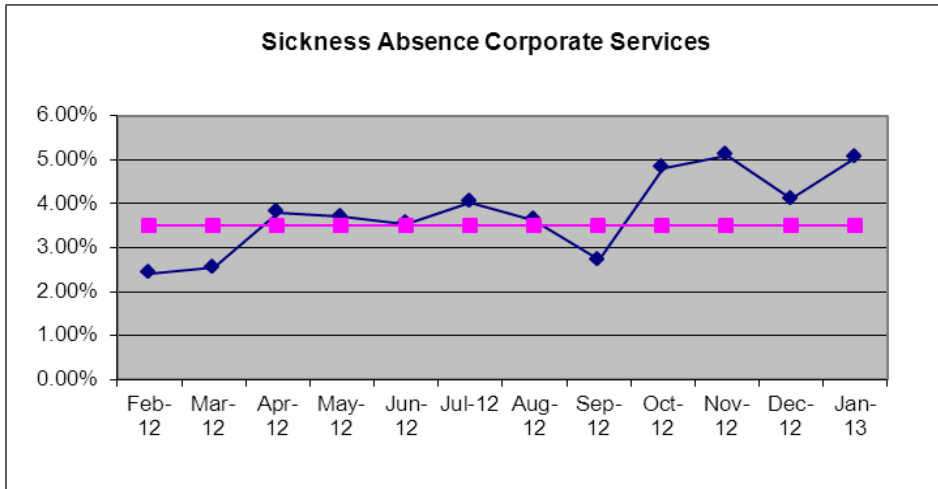
5. Sickness Absence



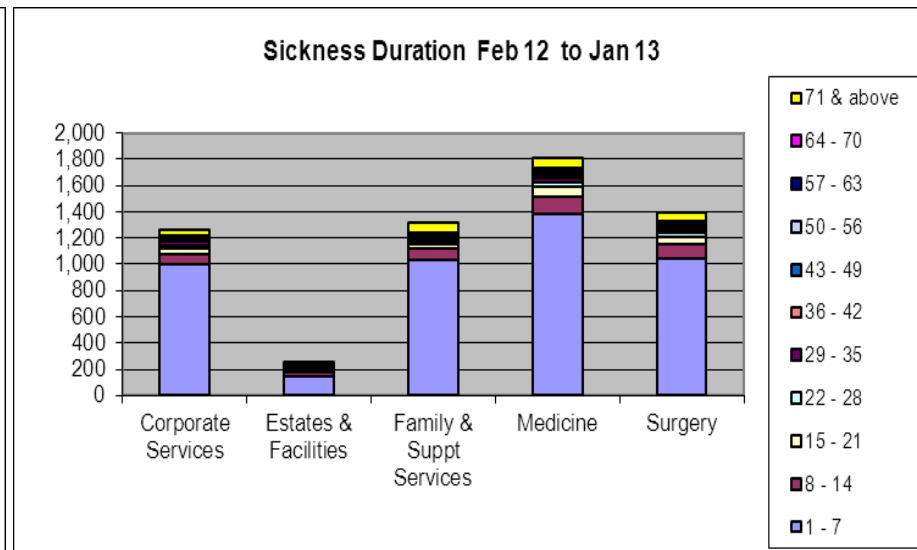
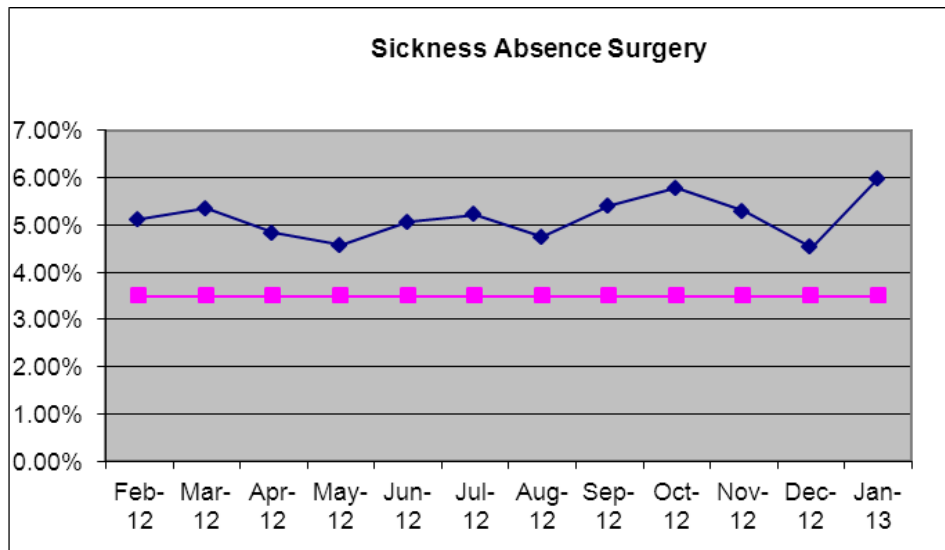
Division percentages

Division %	2011/12	Feb 12	Mar 12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov 12	Dec 12	Jan 12	Jan 13	YTD
Corporate Services	2.69	2.41	2.54	3.79	3.69	3.54	4.03	3.63	2.59	4.91	5.22	5.58	1.81	5.04	3.94
Estates & Facilities	6.89	6.58	7.32	5.30	6.10	5.42	6.42	7.95	7.07	5.63	6.80	8.64	6.83	9.29	6.60
Family & Support Services	3.80	4.40	4.35	4.66	5.14	4.99	5.52	4.72	4.62	5.76	5.37	3.95	4.21	4.05	4.88
Medicine	5.72	5.93	5.66	5.19	4.49	3.60	4.52	5.12	5.18	5.29	4.62	5.30	5.65	5.33	4.59
Surgery	4.56	5.12	5.35	4.82	4.57%	5.06	5.30	4.79	5.40	5.75	5.57	6.11	5.68	5.98	5.04
Trust	4.62	4.96	4.97	4.79	4.66	4.43	5.02	4.94	4.93	5.52	5.27	5.42	4.92	5.36	4.83

Sickness Target Trackers 2012/13



Workforce Report for Trust Board as at end of January 2013



Sickness Absence Cautionary Hearings	2010/11	2011/12	2012/13											
			Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
No action, further monitoring	-	2-	-	-	1	-	-	-	1	1	1	-		
Targets set	3	9-	-	4	1	-	-	-	-	-	-	-		
First Written Absence Caution	10	16-	1	1	1	-	1	1	1	2	3	-		
Final Written Absence Caution	-	-	-	-	2	1	-	-	-	1	-	-		
Other action:	-	-	-	-	-	-	-	-	-	-	-	-		
Total	13	27	1	5	5	1	1	1	2	4	4	0		

Sickness Absence Cautionary Appeals	2010/11	2011/12	2012/13												
			Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	
Sickness absence decision upheld	1	3	-	-	-	1	-	-	-	-	-	-	-		
Sickness absence decision overturned	-	-	-	-	-	-	-	-	-	-	-	-	-		
Total	1	3	0	0	0	1	0	0	0	0	0	0	0		

6. Employee Relations

Disciplinary Outcome	2010/11	2011/12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov12	Dec12	Jan13	Feb13	Mar13	YTD 2012/13
Informal	1	-	-	-	-	-	-	-	-	-	-	-			-
Recorded counselling	1	8	-	5	1	-	1	1	-	1	4	1			14
First Written Warning		-	-	-	-	-	-	-	-	-	-	-			-
First Written Warning & transfer		-	-	-	-	-	-	-	-	-	-	-			-
Final Written Warning	4	2	-	1	-	-	-	-	-	-	-	-			1
Final Written Warning & transfer (as alternative to dismissal)		-	-	-	-	-	-	-	1	-	-	-			1
Final Written Warning & downgrading (as alternative to dismissal)		1	-	-	-	-	-	-	-	-	-	-			-
Final Written Warning & transfer & downgrading (as alternative to dismissal)	3	-	-	-	-	-	-	-	-	-	-	-			-
Dismissal	6	4	-	-	-	1	-	-	-	1	1	-			3
Total	15	15	0	6	1	1	1	1	1	2	5	1			19

Disciplinary Appeals	2010/11	2011/12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov12	Dec12	Jan13	Feb13	Mar13	YTD 2012/13
Disciplinary decision upheld	4	1	-	-	-	-	-	-	1	-	-	1			2
Disciplinary decision overturned	-	1	-	-	-	-	-	-	-	-	-	-			-
Total Disciplinary Appeals	4	2	0	0	0	0	0	0	1	0	0	1			2

Grievance Outcomes	2010/11	2011/12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov12	Dec12	Jan13	Feb13	Mar13	YTD 2012/13
Withdrawn	2	4	-	-	1	-	-	-	-	1	-	-			2
Resolved at Stage 1 (informally)	4	7	1	2	-	1	1	1	-	2	3	2			13
Resolved at Stage 2	5	6	2	-	-	-	1	-	1	4	-	-			8
Resolved at Stage 3	1	2	-	-	-	-	-	-	1	-	-	-			1
External mediation	1	-	-	-	-	-	1	-	-	-	-	-			1
Total	13	19	3	2	1	1	3	1	2	7	3	2			25

Workforce Report for Trust Board as at end of January 2013

7. Occupational Health

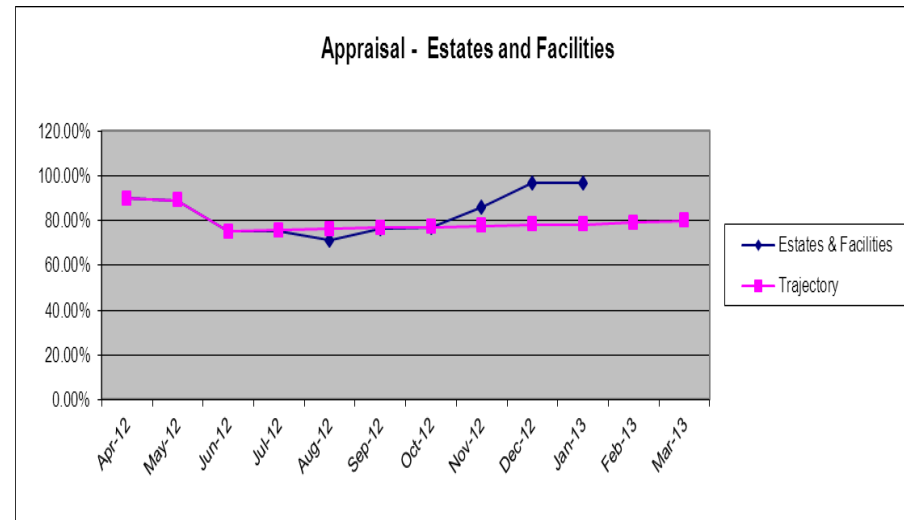
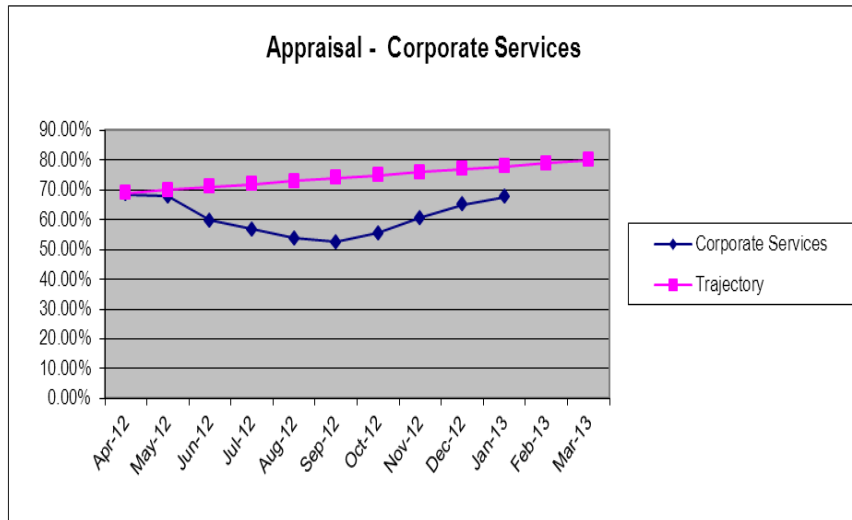
Cumberland Infirmary	2010/11 (Aug 10 on)	2011/12	Feb12	Mar12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov 12	Dec 12	Jan13
Pre-Employment Acute Staff	250	244	14	21	42	39	21	50	31	25	34	51	32	31
Pre-Employment Non Acute Staff	22	29	1	-		-	5	-	-	-	1	-	1	-
Pre-Employment Placements	114	14	2	-	5	1	2	4	2	0	0	1	-	12
Managers Referral (brackets - stress related)	335 (28)	399 (28)	47	35 (6)	39 (3)	51 (4)	25 (1)	30 (0)	13 (1)	16 (1)	14 (7)	34 (5)	15 (2)	66 (0)
Self Referral (brackets - stress related)	289 (13)	217 (7)	26	17 (1)	14 (4)	13 (4)	14 (2)	11 (1)	21 (1)	26 (1)	26 (1)	11 (3)	8 (0)	13 (0)
Nurse Review Appointments	175	95	5	4	4	9	11	3	1	2	7	1	4	13
Other Routine Nursing Appointments	1869	2633	181	201	175	514	286	314	335	677	1690	444	264	305
Doctor's Appointments	169	368	29	50	21	36	25	49	39	50	47	57	26	43
<u>TOTAL</u>	3223	3999	305	328	300	663	389	462	442	796	1819	599	350	483
DNA	368	349	32	25	27	44	31	34	32	10	19	41	58	104

West Cumberland Hospital	2010/11 (Aug 10 on)	2011/12	Feb12	Mar12	Apr 12	May 12	Jun 12	Jul 12	Aug 12	Sep 12	Oct 12	Nov 12	Dec 12	Jan 13
Pre-Employment Acute Staff	115	172	14	8	24	14	10	10	21	19	16	16	11	16
Pre-Employment Non Acute Staff	5	0	-	-		-	-	-	-	-	-	-	-	-
Pre-Employment Placements	149	62	1	1	2	5	5	2	1	4	-	2	5	2
Managers Referral (- stress related)	265 (23)	322 (25)	25 (2)	29 (3)	37 (1)	37 (1)	35 (1)	36 (2)	40 (0)	25 (1)	37 (1)	43 (2)	24 (0)	59 (0)
Self Referral (brackets - stress related)	425 (50)	596 (94)	61 (3)	60 (8)	39 (4)	34 (6)	34 (3)1	45 (3)2	50 (4)	26 (3)	44 (5)	40 (3)	26 (3)	61 (11)
Nurse Review Appointments	118	174	10	11	8	8	8	10	6	16	6	10	6	11
Other Routine Nursing Appointments	1148	1165	112	124	124	134	78	132	68	253	663	205	50	71
Doctor's Appointments	114	115	14	14	26	11	9	9	16	16	18	23	18	25
<u>TOTAL</u>	2339	2606	237	247	260	243	179	246	202	359	784	339	140	245
DNA	111	193	22	26	7	15	18	15	16	18	35	44	15	23

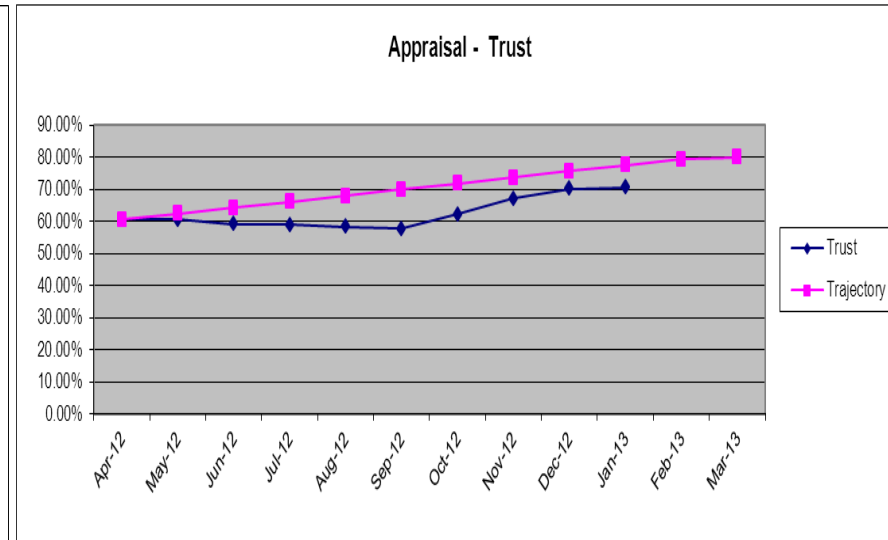
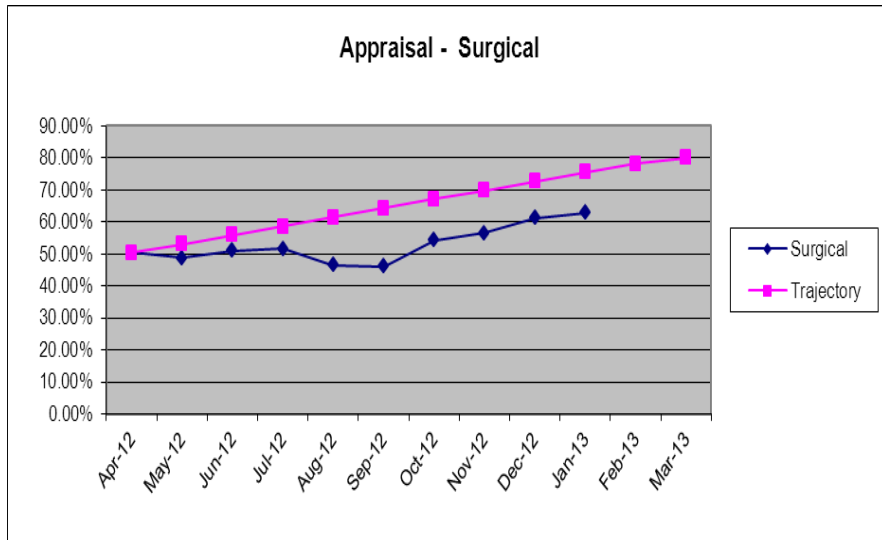
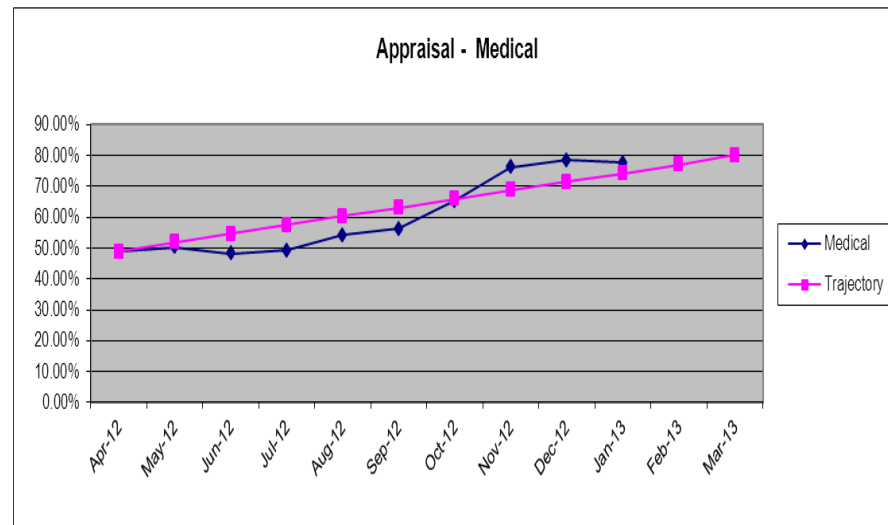
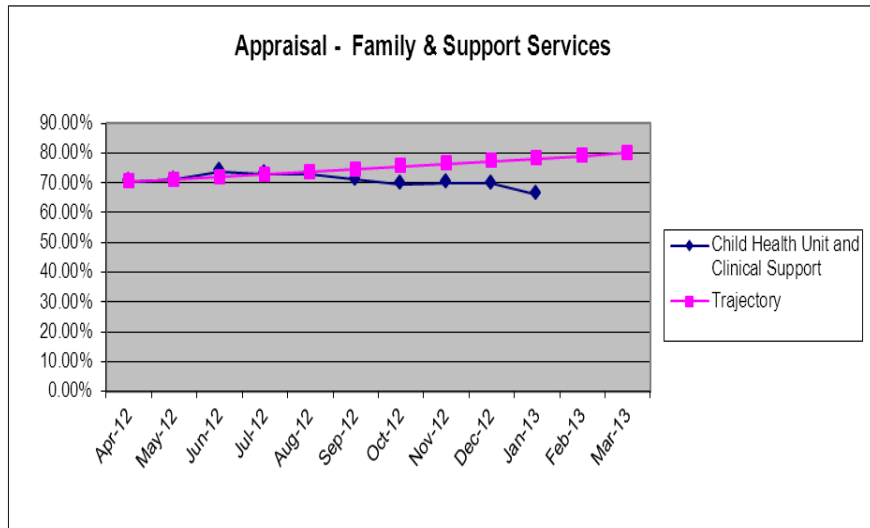
8. Appraisal

	May 11 to Apr12 %	Jun 11 to May 12 %	Jul 11 to Jun 12 %	Aug 11 to Jul 12 %	Sep 11 to Aug 12 %	Oct 11 to Sep 12 %	Nov 11 to Oct 12 %	Dec 11 to Nov 12 %	Jan 12 to Dec12 %	Feb 12 to Jan13 %	RAG
Corporate Services	68.60	67.80	59.84	56.85	53.84	52.60	55.42	60.61	65.10	67.77	Yellow
Estates & Facilities	88.99	88.99	75.23	75.34	71.16	76.24	76.92	85.92	96.80	96.74	Green
Family & Support Services (figures from Jan 13 are for Child Health Unit & Clinical Support)	70.96	70.96	73.84	73.00	72.89	71.07	69.62	69.93	69.70	67.50	Yellow
Medical	48.67	50.25	48.24	49.32	54.13	56.18	65.33	76.19	78.51	77.86	Yellow
Surgical	50.25	48.77	51.00	51.92	46.55	45.99	54.25	56.49	61.20	62.74	Yellow
Trust	60.57	60.49	59.21	58.98	58.36	57.67	62.19	67.18	70.11	70.63	Yellow

RAG Coding		Red	< 50%	Yellow	<80%	Green	> 80%
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Workforce Report for Trust Board as at end of January 2013



9. Mandatory Training

Course	Trust %			Corporate Services %			Estates & Facilities %		
	Nov 12	Dec 12	Jan 13	Nov 12	Dec 12	Jan 13	Nov 12	Dec 12	Jan 13
Core Mandatory Skills Programme*	49	56	60	48	59	64	58	81	88
Equality & Diversity	49	52	51	46	52	53	75	92	93
Fire Safety	63	71	74	60	74	77	71	88	94
Information Governance	57	68	78	55	68	79	70	97	97
Manual Handling e learning	39	45	49	38	47	52	33	81	83
	Resuscitation training								
Immediate Life Support (ILS)		25	27		22	25			
Paediatric Immediate Life Support (PILS)		10	22		20	33			
Advanced Life Support (ALS)		15	18		0	0			
Newborn Life Support (NLS)		6	14						
Practical Obstetric Multi Profession Training (PROMPT)		40	48						
	Manual Handling Face to face training								
Patient manual handling		6	86						
Non patient manual handling	0	0	0						

Course not required

Workforce Report for Trust Board as at end of January 2013

Course	Child Health Unit %			Clinical Support %			Medical %			Surgical %		
	Nov 12	Dec 12	Jan 13	Nov 12	Dec 12	Jan 13	Nov 12	Dec 12	Jan 13	Nov 12	Dec 12	Jan 13
Core Mandatory Skills Programme*		57	60		51	57		62	63		47	51
Equality & Diversity		34	34		60	60		51	51		42	40
Fire Safety		66	66		74	78		69	72		66	70
Information Governance		59	70		72	82		67	74		61	76
Manual Handling e learning		37	37		47	50		45	49		37	39
	Resuscitation Training											
Immediate Life Support (ILS)		0	0		50	50		25	29		25	28
Paediatric Immediate Life Support (PILS)		15	20					16	26		6	22
Advanced Life Support (ALS)		0	0					15	23		28	29
Newborn Life Support (NLS)		16	33								4	10
Practical Obstetric Multi Profession Training (PROMPT)		0	50								44	51

RAG Coding			< 50%		<80%		> 80%
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*Contents of Core Mandatory Skills Programme				
Health and Safety:	Occupational Health:	Conflict resolution Level 1	Countering Fraud in the NHS	Medical devices awareness
Food safety awareness	Infection prevention/ control	Safeguarding Children Level 1	Safeguarding Adults	

10. Staff Experience

This action plan has been developed following the results of the 2011-2012 Staff Survey. The issues below in the key findings section have been raised as a concern by staff who completed the survey and actions have been identified to rectify these concerns to engage staff and improve their working lives with the Trust.

Numbers 1 – 4 are the bottom ranking scores for this Trust (Support from immediate managers, Percentage of staff reporting good communications between senior management and staff, Staff recommendation of the Trust as place to work or receive treatment, Fairness and effectiveness of incident reporting procedures).

	Key Findings from Staff Survey	Improved Outcome	Lead	Action	Progress	By When
1.	KF 15: Support from immediate managers	Management and supervision. Team based working. Being respected and valued at work. Staff motivation. Senior Manager improving the way we work.	DG M's and Executive Directors	Review of Ward Manager and Head of Service needs and develop an action plan. Hold a development day for Business Managers, Heads of nursing and quality matrons to develop their needs and develop an action plan.	Staff Focus groups held to address Development Day arranged for 6 th December. More detailed and specific clinical business unit plans to be approved by divisional boards. Divisional boards to update SMT by end January Update to February Board Meeting	Nov 2012 Achieved Nov 2012 Achieved January 2013 Achieved January 2013 Achieved February 2013

Workforce Report for Trust Board as at end of January 2013

	Key Findings from Staff Survey	Improved Outcome	Lead	Action	Progress	By When
2.	KF 30: Staff reporting good communication between senior management and staff	Interim CEO programme of visits to wards/departments to be arranged.	Director of HR	Informal walkabouts have commenced. Structured programme of event to be coordinated.	Schedule produced to ensure wide coverage.	Nov 2012 Achieved
		General Managers/Executive Directors to spend one day per week at WCH. Priority to be given to face to face meetings.	Directors/DGMs	GM and ED to confirm commitment and action at SMT	Agreed at SMT and greater visibility at WCH	Oct 2012 Achieved
		Directors/Senior Managers patient safety walkabouts on a monthly basis and feedback to SMT and respond to clinical areas.	Directors/DGMs	Kath Livingstone, HRBP will contact Head of Corporate Affairs and PAs to agree dates	Formal director walkabouts commenced 7 th November.	Nov 2012 Achieved
3.	KF 34: Staff recommendation of the trust as a place to work or receive treatment	Promote safety and quality priorities as core business.	DGMs/Directors	Consult on priorities. Agree and launch	Consultation in all areas took place.	Oct 2012 Achieved
		Launch a corporate system to better understand our mortality and reduce harm	Medical Director	Review started. Over 900 case notes reviewed. Board development session held in October. Clinical Policy Group to agree action Plan	Review of nearly 1200 case notes completed and CPG approved action plan on 16 th November.	July 2012 Achieved
		Launch Patient safety and quality days – CIC in March 2013, WCH in June 2013	DON, DGM and Head of Governance	Decide on teams and book in December	Agreed	March 2013
4.	KF22: Fairness and effectiveness of incident reporting procedures	Weekly review meeting with ward sisters, governance facilitators and heads of nursing.	DON, DGM and Head Of Governance	Systems to be established.	The Medical division have a weekly meeting with ward sisters and head of nursing. Surgical and family services division have similar	Oct 2012 Achieved

Workforce Report for Trust Board as at end of January 2013

	Key Findings from Staff Survey	Improved Outcome	Lead	Action	Progress	By When
					meetings but in a different format linking in with existing governance risk meetings.	
		Ward sisters to confirm how they provide feedback to ward staff. Major themes to be reported to SMT	Heads of nursing/ward sisters.	Systems to be established.	As above, further assurance will be provided through weekly SMT patient safety walk rounds reports.	31.10.12

11. CONSULTANT JOB PLANNING

In 2003 the Department of Health introduced a new contract and terms and conditions for Consultants and subsequently for Associate Specialists and Specialty Doctors in 2008. A key component of that new contract was the formalisation of the process around consultant job plans. Last month the Board discussed the key principles of our approach to job planning and approved our intention to produce a meaningful job plan for every consultant by 30th June 2013.

Since last month the Senior Management Team has discussed the process in more detail. Each Clinical Business Unit now has a draft timetable for completion of the job planning exercise for each of their consultants by each specialty. Preliminary meetings have also taken place with the Director of Clinical Transformation and each Clinical Business Unit senior team to plan how the job planning process will be completed and what key priorities need to be reflected in the new job plans. Job plans are prospective and therefore create an opportunity to improve service provision moving forward. Clinical Business Units are examining activity and plans for where they want to be in the coming years. Effective job planning will allow changes to be made to how our clinical services are provided and to align organisational objectives with departmental goals. This is an opportunity to make improvements to key operational issues including on call provision, cross site cover and medical education and training. The Joint Local Negotiating Committee (the group that represents doctors) has approved our approach to job planning and has agreed a set of guidelines that will govern the process.

This year's job planning cycle will be formally launched in March and each Clinical Business Unit will be holding meetings to which all consultants are invited to outline the agreed approach that will be taken. The finer detail of each Clinical Business Unit's approach is scheduled to come back to the Senior Management Team meeting before the end of February 2013.