

Report to the Meeting of the Trust Board of Directors Held in Public

Date of Meeting: 23 July 2013

Enclosure: 11

Title of Report	Workforce Report
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Executive Lead	Damian Gallagher, Director of Human Resources and Organisational Development
Responsible sub-committee	Workforce Committee
Date of paper	15 July 2013
Executive Summary	<p>All key HR controls are RAG rated as green with the exception of recruitment (amber) of sickness absence (amber), appraisal rates (amber) and attendance at mandatory training. Detailed work has reduced sickness absence to 4.40% for June 2013 which is a significant improvement on previous months. Appraisal rates as at June remain at 72.74% and mandatory training workbook completion is improving slightly, with the majority of in-house training now being available following alignment with the north east training framework.</p> <p>The Workforce Report gives an overview of the key strategic areas of assurance, workstreams/associated action plans and progress to date within key areas.</p>
Risk and Assurance	Trust Board are to be assured that the majority of HR key performance indicators outlined in this report are compliant, and for areas outlined above which are amber or red, that there are plans in place to address this, all of which are monitored through the Workforce Committee. Trust Board is asked to note that this is ongoing work in progress for reporting assurance purposes.
Assurance Framework reference	Workforce Committee
Level of assurance	Amber
Recommended changes to risk rating (if applicable)	N/A
Legal implications/regulatory requirements	Most regulatory and legal requirements met. Where there are gaps in assurance (sickness, appraisal and mandatory training), there are action plans in place to address this and mitigate the risk.
Actions required by the Board	To note contents

Workforce Strategy

Report to the Trust Board – 23 July 2013

Date of Sub-committee Meetings: Workforce Committee – 23 April 2013, 30 May 2013, 24 June 2013.

1. Minutes are located on the Trust intranet.

2. Our key strategic performance questions cover the following areas:

- 2a Creating a learning environment for quality and continuous improvement
- 2b Providing excellent patient centric customer service
- 2c Management and maintenance of robust HR policies and systems for safety and compliance

2a. Creating a learning environment for quality and continuous improvement: Key Strategic Questions

- (i). *What development opportunities are we providing for our staff to improve their performance and drive a culture of continuous improvement?*

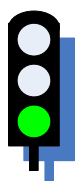
We have run a variety of organisation development programmes over recent months, and an update is shown below:

Programme	No of Sessions	Total Number of Participants
Consultant Revalidation & Appraisal Skills	3	23
Edgecombe 360 Feedback reports	n/a	50
Clarity online appraisal toolkit for Strengthened Appraisals	n/a	73
Consultant Recruitment Skills (Panel Members) -Edgecombe	3	30
Infection Control Senior Away Day	1	10
Staff Attitudes and Compassion (Patient Experience)	6	80
Patient Safety Day (human factors, global trigger tool, NEWS, falls and dementia)	2	Awaiting numbers
SAS Doctors Leadership Development	4	8

Human Factors for SAS Doctors	2	4
Building Relationships Setting Direction 4 day Engagement Programme Senior Leaders	1	25
Integrated Senior Leaders Programme Trust 14 Development	3	27
Trust 14 Coaching	5	7
Improving Staff Survey results through Workplace Drive and Motivation (Ward Managers)	4	46
Ward rosters/roster management (Debbie Reape and Lesley Carruthers)	1	8
Management of your ward budget/establishments (Steve Shanahan and Chris Hand)	2	22
Risk Management, Serious incidents and investigations (Beechcroft/Ramona Duguid) - this is also supported with a new SI policy.	3	60

The OD programme focuses heavily on improving patient experience, and very positive feedback has been received from participants so far.

In addition to the above, a ward managers' development programme has recently commenced, which is an intensive 8 day programme focusing on the key behaviours and skills required of ward managers in today's fast moving environment. This course will ensure that ward managers are fully equipped with the essential leadership skills and confidence to lead their teams. The first two modules focus on: personal effectiveness – understanding and supporting staff, leading by example; and engaging everyone with the core values and behaviours of the organisation.



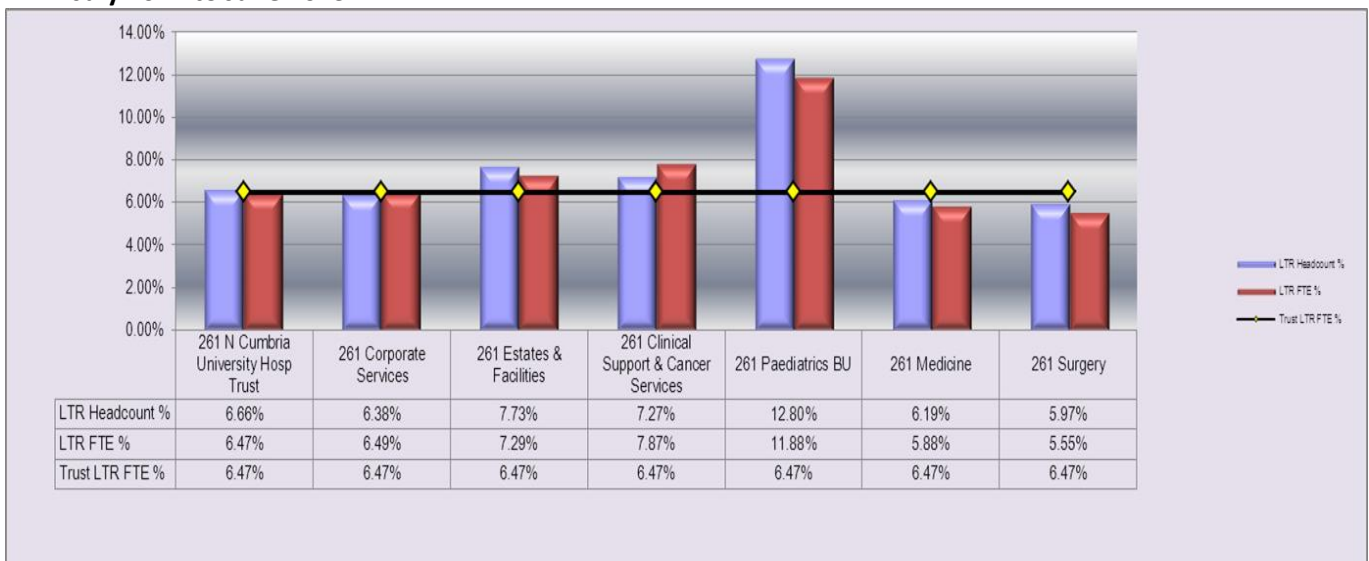
(ii) What benchmarking or other information do we have in terms of the development of our culture?

Patient Safety Days

Two patient safety days were held and over 250 staff were asked questions using the Manchester Patient Safety Assessment Framework. A report on the outcome of the patient safety days will be reported to the Board in September.

Turnover rates are as follows:

**Turnover by Business Unit
July 2012 to June 2013**



Figures in the chart above show that the annual workforce turnover rate is 6.47 % (for permanent staff from 1 July 2012 to 30 June 2013).

The turnover from April to June 2013 is 1.59%, a reduction from 1.92% in the previous quarter (January to March). The Trust turnover figure fluctuates depending upon the time of year (i.e. generally it is higher in the month of August, due to the changeover in doctors in training).



2b. Providing excellent patient centric customer service: key strategic questions:

(i). *How does our HR & OD service support provision of excellent patient centric customer service in relation to training?*

- Statutory and Mandatory Training achievements:

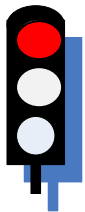
North Cumbria's training needs analysis (TNA) was previously aligned to the North West Core Skills Framework; from April 2013, the Trust aligned to Northumbria Healthcare's TNA which required a significant change in format, frequency alteration on some subjects, introduction of new subjects, method of delivery on others (i.e. more face to face training) and alteration of which staff groups are now to undertake some types of learning.

The newly aligned mandatory training framework became operational from 5th April 2013 and the vast proportion of training materials and new methods of delivery are now available to staff.

The Trust supported significant investment in training resource in order to fully establish the new style of training, and all these resources are either now in place or in the final stages of being recruited. In the meantime, in order that training is available for staff, external resource and also support from Northumbria Healthcare has been secured. There has been good attendance on the newly designed face to face training sessions so far.

Current levels of attendance for mandatory training are detailed in section 2c(i) below.

In addition to the revised mandatory training schedule, Trust induction has also been reviewed and we have worked in partnership with colleagues in Northumbria Healthcare to develop an enhanced programme for new employees, which in North Cumbria now extends from one to two days. Attendance levels are closely monitored, and feedback obtained from participants in our continued strive to ensure induction is a valuable mechanism to introduce new employees to the organisation.



(ii) How does our HR/OD service support the provision of excellent patient centric customer service in relation to recruiting the right staff?

North Cumbria University Hospitals has aligned its recruitment processes for Consultant Medical Staff recruitment with Northumbria Healthcare, with joint recruitment taking place wherever possible. Training from Edgecombe continues to be rolled out for Consultant Medical Staff who are participating in the new recruitment process with very positive feedback.

North Cumbria University Hospitals has recently commenced undertaking electronic DBS (disclosure and barring service; formerly known as criminal record bureau) checks and has also streamlined the pre-employment health clearance process, in order that recruitment timescales are reduced and therefore facilitating new employees into post in a more timely manner. Audits regarding recruitment activity are now established in both the general recruitment team and medical staffing department and reported to the Workforce Committee on a quarterly basis.



(iii) Recognising the link between the health and wellbeing of our staff and the care delivered to patients.

The Flu plan for 2013/14 is now underway and a draft plan is being distributed for comment and consultation with planned vaccinations to commence September / October 2013.

NICE is developing public health guidance, “Workplace policy and management practices to improve the health of employees” and the Occupational Health service have been invited to contribute and feedback on work being undertaken on the following areas: Tobacco Harm Reduction; Walking and Cycling; Workplace interventions to prevent smoking; Promoting mental health and wellbeing at work; Management of long term sickness and incapacity for work; Promoting physical activity in the workplace.

Occupational Health were recently involved in a “Work Out at Work day”, collaboratively working with Physiotherapy staff.

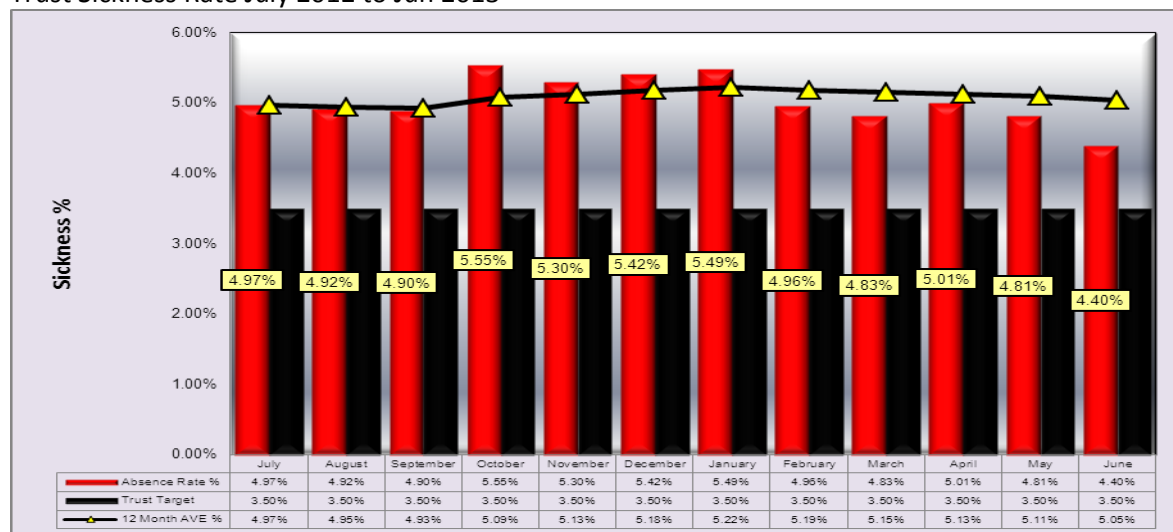
The Trust is currently focussing on reducing sickness / absence and Occupational Health from both sites are working in conjunction with HR and managers to review all long term sickness cases and put a plan in place so that we can actively assist staff who have the potential to return to work. These plans will be reviewed at Workforce Committee when each Business Unit will give feedback on their current sickness absence issues.

Focussed work continues to assist staff who are absent from work on long term sickness, with appropriate interventions being put into place to facilitate an early return to work where ever possible. We recognise that it is in the best interests of both staff and patients to provide as much support as possible to allow the regular workforce to attend work.

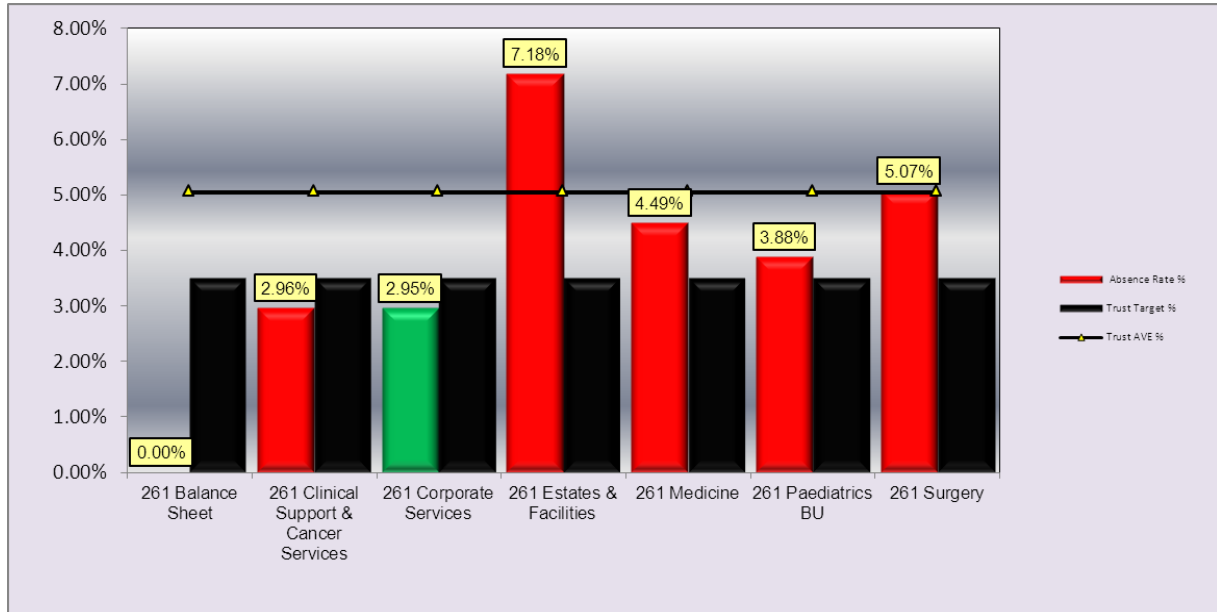
Sickness absence results

The rolling sickness absence results are as shown in the tables below.

Trust Sickness Rate July 2012 to Jun 2013



Business Unit Rates June 2013



The NHS operating framework has stipulated an absence target of 3.5% for this financial year which at present we are not achieving; however for June 2013 there was a reduction on previous months to 4.40% which is the lowest it has been in the last 12 months. Targetted action plans are being developed in each business unit to continue managing this closely during 2013/14. The rolling year average for the Trust is at 5.05%; the NHS as a whole has a rolling absence rate of approximately 3.8%.

Having had detailed discussions with Business Unit representatives at Workforce Committee, there is a feeling that sickness absence may be under reported within the organisation. This will be borne out during the process of rolling out manager self service for ESR, as line managers will become personally accountable for inputting absence data for their own staff



2c. Management and maintenance of robust HR policies and systems for safety and compliance. Key strategic questions:

- (i) *What is our local compliance with regulatory standards such as CQC and NHSLA Frameworks?*

CQC/NHSLA

Compliance with CQC Outcomes 12 and 14 and associated NHSLA standards are reported quarterly to the Workforce Committee. Quarter 1 for 2013 will be reported on 29 July 2013.

It is anticipated that Outcome 12 (pre-employment clearances) will be almost compliant and fully compliant by end of Quarter 2.

Outcome 14 will not be fully compliant however has an action plan to achieve this in place – this is relating to appraisal rates and levels of attendance at statutory and mandatory training. Specific developments relating to mandatory training are outlined earlier in this report.

Appraisal completion is currently at 72.74% for the month of June 2013, which is not yet fully compliant on a 12 month rolling basis (target 80%). An overview of appraisal rates are as follows:

February 2012 – June 2013

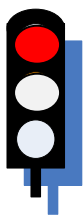
	Feb 12 to Jan 13	Mar12 to Feb 13	Apr 12 to Mar 13	May 12 to Apr 13	Jun 12 to May 13	Jul 12 to Jun 13
Corporate Services	67.77	72.24	71.44	71.27	70.83	77.08
Estates & Facilities	96.74	96.02	91.15	96.38	93.36	93.78
Clinical Support & Cancer Services	67.95	73.44	72.15	72.96	74.30	76.27
Medicine	77.79	74.50	77.27	71.75	69.20	67.11
Paediatrics	64.36	75.23	72.17	67.92	71.70	73.39
Surgery	62.11	65.05	70.39	71.92	71.59	72.60
Trust	70.40	71.97	73.89	73.46	72.74	72.74



The current Trust completion of statutory and mandatory training is outlined below:

Blood Safety Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
Blood Safety 01	34%	14%	25%	50%	96%	34%	28%	35%	2 Yearly	
Blood Safety 02	27%	9%	13%	N/A	N/A	28%	28%	29%	2 Yearly	
Blood Safety 03	29%	N/A	30%	N/A	N/A	N/A	N/A	0%	2 Yearly	
Blood Safety 04	27%	0%	N/A	N/A	N/A	N/A	28%	N/A	2 Yearly	
Health and Safety Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
Health and Safety	90%	48%	97%	94%	97%	89%	90%	92%	One off	
Infection Prevention and Control (Clinical)	40%	19%	46%	43%	90%	48%	30%	33%	2 Yearly	
Infection Prevention and Control (Non Clinical)	86%	53%	92%	90%	92%	75%	94%	69%		
Fire Safety	61%	48%	67%	75%	45%	60%	61%	59%	Annual	
Breakaway Techniques	37%	0%	N/A	N/A	N/A	37%	12%	40%	3 Yearly	
Control and Restraint	68%	0%	0%	N/A	96%	N/A	N/A	0%	One off	
Knowledge and Skills Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
Equality and Diversity	69%	21%	84%	87%	98%	65%	65%	62%	One off	
Consent	44%	21%	46%	49%	N/A	47%	43%	43%	One off	
VTE	18%	0%	8%	N/A	N/A	10%	3%	25%	One off	
Information Governance Breakdown for Financial Year 01/04/2013 to 31/03/2014 at 30/04/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
Information Governance	36%	21%	48%	59%	80%	29%	23%	26%	Annual (Financial Year)	
Maternity Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
PROMPT	55%	13%	N/A	N/A	N/A	0%	14%	60%	Annual	
NLS	6%	0%	N/A	N/A	N/A	N/A	11%	5%	Annual	
Professional Day	57%	13%	N/A	N/A	N/A	N/A	100%	58%	2 Yearly	
Moving and Handling Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
Moving and Handling Patients 2 Yearly	18%	17%	26%	5%	14%	16%	6%	19%	2 Yearly	
Moving and Handling Patients 3 Yearly	1%	N/A	0%	0%	N/A	0%	0%	2%	3 Yearly	
Moving and Handling Objects 2 Yearly	87%	N/A	50%	N/A	89%	16%	0%	97%	2 Yearly	
Moving and Handling Objects 3 Yearly	59%	25%	59%	75%	100%	46%	50%	40%	3 Yearly	
Resuscitation Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
BLS	20%	2%	9%	13%	0%	26%	1%	23%	Annual	
ILS	43%	N/A	33%	N/A	N/A	41%	N/A	45%	Annual	
ALS	27%	N/A	N/A	50%	N/A	13%	100%	35%	4 Yearly	
PLS	27%	0%	N/A	N/A	N/A	15%	27%	30%	Annual	
APLS	33%	N/A	N/A	N/A	N/A	14%	71%	24%	4 Yearly	
Safeguarding Breakdown to 30/06/2013										
Course	Trust	Bank	Clinical Support	Corporate Services	Estates	Medicine	Paediatrics	Surgery	Frequency	
DoLS Level 1	43%	18%	51%	51%	N/A	46%	31%	41%	One off	
Mental Capacity Act Level 1	45%	15%	53%	58%	N/A	50%	32%	44%	One off	
Safeguarding Children and Young People Level 1 Non Clinical	85%	48%	97%	92%	94%	83%	83%	84%	3 Yearly	
Safeguarding Children and Young People Level 2 Clinical	78%	40%	89%	100%	N/A	76%	75%	76%	3 Yearly	
Safeguarding Children and Young People Level 3	88%	50%	N/A	N/A	N/A	N/A	86%	91%	3 Yearly	
Safeguarding Adults Level 1	87%	65%	94%	91%	95%	87%	84%	84%	3 Yearly	

Action plans are being developed in Business Units for presentation to Workforce Committee on 29 July 2013 to outline how attendance at mandatory training will be achieved in each ward area and clinical departments by 31 March 2014.



Internal Audits

There are no audit outcomes to report in this quarter. There is one outstanding audit action relating to the bank system/processing of timesheets (over and underpayments), which is currently being addressed.

In summary:

Regulatory Standard:	Relates to:	Compliance:
Statutory/Mandatory Training	NHSLA/CQC	
Appraisal	CQC	
Internal audit outcomes	N/A	One outstanding action relating to bank systems audit
Notable practice areas	Not applicable	N/A
Exception reports	None this quarter	N/A

HR Risk Register

The HR risk register has been reviewed within the last reporting period. This report provides positive assurance that key controls are in place and that there are no gaps in controls or assurances (other than as shown in the risk register) to the best of the knowledge of the Workforce Committee. Outstanding actions and persons responsible are as shown in the Workforce Committee minutes. The HR risk register has also recently been reviewed in line with the Board Assurance Framework.

Management re-organisation

The Trust is currently re-structuring the senior operational management and nursing structures, to strengthen management capacity and focus senior nursing staff on enhanced patient experience.

Revalidation

Preparation for the revalidation of medical staff is progressing satisfactorily.

Equality & Diversity Update

In partnership with Northumbria Healthcare the Trust has been successful in securing twelve months support from Stonewall on a project basis to help improve services for patients on the basis of equality, specifically in relation to LGB. A working group has had its initial meeting with support from Stonewall and they are currently developing areas of key focus that will help facilitate improvements for patients within health and social care. A further update will be made available in future Workforce Reports.

The Trust is working with Northumbria Healthcare to further develop a joint approach to equality impact assessments and equality reporting and objectives.



3. Consultant Job Planning

The last workforce report included detail of the medical consultant job planning round for this financial year.

An update on the plan is as shown below.

Business Unit	Completed	Outstanding	Booked	Completion Date
Clinical Support/ Paediatrics	29	1	1	End July
Emergency Care /Medicine	20	14	8	End August
Emergency Surgery / Elective Surgery	43	39	39	10 th September

The remaining meetings for medicine are currently been arranged.

The Trust have not been notified of any requests to move to job plan appeals at the present time.

4. Recommendation to the Trust Board

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

DAMIAN GALLAGHER
Director of HR/OD

SHIRLEY REVELEY
Non-Executive Director